

BOOK REVIEW

Psychology's Ghosts: The Crisis in the Profession and the Way Back by Jerome Kagan. New Haven, CT: Yale University Press, 2012. 416 pp. \$35.00. ISBN 978-0300178685.

Psychology's Ghosts—an intriguing title; Jerome Kagan—an esteemed psychologist. This combination promised a book well worth reading; my expectations were high.

But my first impression was not good and I came close to giving up on it. The author bounces around from topic to topic, causing the book to read like a transcript of free associations, seemingly a product of whatever came into Kagan's mind no matter how tangential to the topic at hand. For example, one paragraph in the first chapter reads:

The distinctive emotional profiles of disadvantaged and advantaged adults affect how they socialize their children. This may be the most robust fact discovered by social scientists. Readers who broke a leg or suffered from the pain of shingles for several months will remember their helplessness and compromised sense of agency. Many adults trapped in poverty and possessing no special skills feel impotent to alter their unhappy condition.

My head was left spinning.

But I read on and came to appreciate that, however poorly written (or poorly edited) it was, this book does address important issues. If you can tolerate an author who jumps around from historical opinion (“the Japanese attacked the United States in 1941 because they regarded themselves as a superior race . . .”) to cultural comment (“after 1950 many American parents became excessively concerned with perfecting their child's sense of self”); from neurobiology (“depressives who inherit the long allele of the serotonin transporter also improve more on drug therapy than depressed patients with the short allele”) to broad generalizations (“humans cannot resist inventing goals they believe they should attain”), then reading this book may be worth the effort.

Kagan challenges four broad, underlying, and unfounded assumptions on which psychologists are inclined to conduct their research and build their theories. He calls these assumptions “Psychology's Ghosts.” They've all been talked about, written about, and complained about for years, even

decades, but Kagan takes his own, at times well-aimed, personal swing at them.

First, he attacks the myopic style of investigators who generalize their theories from lab studies and observation without considering the context, brushing away considerations of gender, age, ethnicity, social class, etc.

Too many papers assume that a result found with 40 white undergraduates at a Midwestern university responding to instructions appearing on a computer screen in a small, windowless room would be affirmed if participants were 50-year-old South Africans administered the same procedure by a neighbor in a larger room in a familiar church in Capetown.

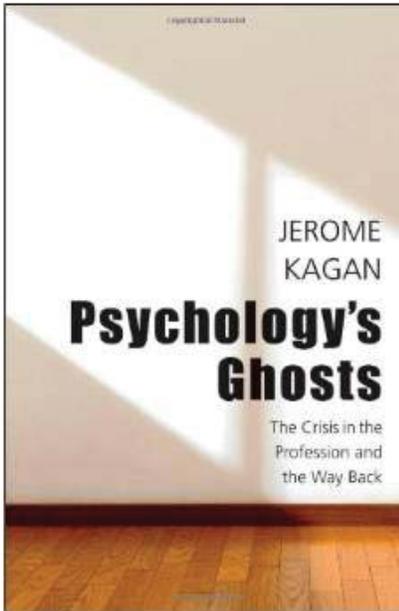
Then he focuses on “happiness,” an “in vogue” topic in this era of Positive Psychology, in which concepts such as *resilience* and *survivor* have replaced the previous trauma/victim mentality. Kagan examines happiness carefully, raising some serious cautions. He examines how, from individual reports of contentment to national surveys of social well-being, the meaning of the term *happiness* varies individually and culturally as well as historically. After demonstrating the pitfalls and concluding that these overall measures are “elusive” (read “useless”), he looks at alternative strategies involving the assessment of a person’s feelings in context and at a particular point in time. Finding these also wanting, Kagan concludes that

if equivalent judgments of well-being have different origins and meanings, are minimally related to sensory pleasures or daily moods, and are influenced by the informant’s age and culture, it is reasonable to be skeptical of the popular beliefs that the average well-being level in a society has any important implications . . .”

If happiness is “a psychological state whose definition remains fuzzy,” then even more fuzzy are the myriad mental illnesses that continue to be invented, diagnosed, and treated.

American psychiatrists and psychologists are exporting to the world a conception of mental illness that exaggerates the power of genes and drug cures and regards every bout of intense sadness or worry, no matter what their origin, as a possible sign of mental disorder.

This is not a new view; for more than 50 years, writers have identified the medicalizing, pathologizing activities of the psychiatric and psychological professions.¹ What Kagan contributes to the discussion is an abundance of examples drawing on cross-cultural data and the questioning of the scientific method and ethical premises. After pointing out the



now-common knowledge that the illnesses listed in the *Diagnostic and Statistical Manual of Mental Disorders* are arrived at by a process closer to politics than to science, he challenges inherent western values by noting, for example, that “male suicide is considered a heroic act in Japan” and “gambling is an adaptive trait in Brazil.”

Once diagnosed/labeled, most individuals are treated with one or more of a plethora of non-specific drugs that can be, as Kagan puts it, “likened to a blow on the head,” altering “neuronal activity in many sites to create abnormal brain states that often reduce the severity of a primary symptom.” While many recent books have countered the

current widely held reliance on the biological understanding of human feelings and behavior and the popularity of psychopharmacological treatments, few contemporary authors go on to challenge the almost universal belief in the effectiveness of psychotherapy.

Kagan does. He challenges not only the obviously “flakey” and questionable varieties but also raises questions about the “evidence-based” therapy du jour: Cognitive Behavior Therapy (CBT). Countering the popular claims that CBT is scientifically proven to be effective, he refers to some of the current research that tends to get brushed aside, citing in detail a study involving depressed patients that found “an initial improvement followed by frequent relapses” similar to those found with drug treatments.

Had the book ended on these challenges it would have been a stronger book. But instead, perhaps because Kagan wants so much for the profession to finally start paying attention to these pervasive, fundamental flaws and somehow miraculously transform, he goes on for another ninety pages. This final segment of the book, titled “Promising Reforms,” is supposed to “provide the constructive suggestions that might catalyze change.” But, in my reading (and rereading) of these pages, I was filled more with despair than hope.

Echoing his earlier thoughts about “context,” he urges researchers (and clinicians) to keep their eyes open for “patterns” of diverse evidence rather

than to settle for single factors that confirm existing theories. He calls for “patience” (his term), claiming that factors such as the “publish-or-perish” imperative put too much pressure on researchers to produce popular, mainstream results rather than to allow the time for “discoveries that require the persistent pursuit of less popular but potentially fruitful ideas.” Pointing out the confusion around the meaning of words and terms, he encourages less reliance on verbal, self-report measures. And finally, he admonishes “psychologists to remain sensitive to the ethical premises that penetrate their research and affect the advice they give to clients.”

Such sagacity from a man who rose to prominence through his own solid research in the 1960s may well reflect his concern about the “crisis in the profession.” But, as the book’s subtitle expresses, Kagan’s solution is to find “the way back.” The problem is that it is the way forward that those who are rising to influential positions within the profession today have their sights set on. Therefore it is likely that instead of reflecting on his message, they’ll go with the flow.

Note

¹ See, for example, Thomas Szasz, *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct*, Delta, 1961.

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