

Therapy, Thought Reform, and Cults

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Abstract

This article describes how a theory of personality or a theory of therapy can be turned into an ideology that a cult-forming therapist can use to justify autocratic domination of clients/patients.

The question is: Why do people join cults? There is no brief answer or easy explanation. Some persons become involved with an already formed cult, while others are in a group that only later evolves into one. To convey what happens, it is necessary to explain a certain amount about influence techniques, thought reform, and group and personal identification processes. A special focus in this article is on how psychotherapy auster can develop when the therapy process goes astray and becomes a thought-reform program.

Those who join an already-formed cult rely on whatever information is given them by the person who recruits them. Because of this propaganda at the point of entering, new recruits think they are doing something good for themselves and humankind. They are attracted by both personal betterment and altruistic promises. Generally it is only after enmeshment with the cult that new members really learn what they have joined and all that is expected of them. At this point, they are usually so dependent on the group—emotionally, financially, socially, spiritually, and in other ways—that leaving is difficult (Singer with Lalich, 1995).

Most who join already existing groups come to realize only later, and often too late, that they have been deceived to varying extents about what commitment to the group entails. I have interviewed people who thought they were joining a martial arts training program but ended up in a cult in which they served as house help, procurers, and sex partners for the leader, often working long hours for the group while also holding outside jobs and giving their money to the leader. Additionally, they were led to forsake their family, friends, past contacts, and often

their educational plans and career. Others thought they were joining a group to learn to meditate and ended up finding out they were to be celibate monks or renunciate women.

Those who entered groups that eventually evolved into cults report the gradual, step-at-a-time changes that moved them along a path while also leading the group to become a totalist cult (Singer, 1983; Singer, Temerlin, & Langone, 1990).

Clarifying Two Terms: Cults and Thought Reform

Cults: The word *cult* refers to the political structure of a group and to its power relationships, which are usually totalist, totalitarian, and elitist. Cults can be formed around any topic. Some people mistakenly think that cults are all religious in nature with only young persons as members. This belief is influenced by the fact that the well-publicized cults that sprang up in the United States in the late 1950s and early 1960s were primarily youth cults. In those, self-appointed gurus and messiahs recruited primarily young adults into primarily religious-based cults. Shortly, however, both the age range of those recruited and the basic themes around which cults formed began to broaden. There are political, religious, prosperity, psychological, UFO, self-improvement, health fad, and various other types of cults. Not only are the young recruited, but middle-aged professionals, the elderly, and even whole families are enlisted.

Cults are begun by self-proclaimed gurus, messiahs, and "teachers" who claim to have special missions and special knowledge. They ask that followers turn over all major decision making to them, and in return, they will share their offerings (Singer, 1986). Lifton (1961/1989) noted three characteristics of cults: a charismatic leader who tends increasingly to become the object of worship; the use of thought-reform techniques to change and control followers; and "a tendency toward manipulation from above with considerable exploitation

(economic, sexual, or other) of ordinary supplicants or recruits who bring their idealism from below" (p. vii).

Thought reform: The term *thought reform* refers to a particular process of planned and systematic psychosocial manipulation (Lifton, 1961/1989, 1987, 1991; Ofshe, 1992; Ofshe & Singer, 1986; Schein, 1961; Singer, 1995; Singer & Addis, 1992; Singer with Lalich, 1995). Most cults use thought-reform programs to produce the behavioral and attitudinal changes they want in followers. Thought-reform programs are essentially coordinated programs of coercive influence and behavior control (Ofshe, 1992; Ofshe & Singer, 1986).

Thought reform is not mysterious. It is the systematic application of psychological and social influence techniques in an organized, programmatic way within a constructed and managed environment (Ofshe, 1992; Ofshe & Singer, 1986; Singer, 1987; Singer with Lalich, 1995; Singer & Ofshe, 1990; West & Singer, 1980). The goal is to produce specific attitudinal and behavioral changes that will mold members into the "preferred personalities" the leader desires and who will fit into the leader's plans for his or her "new order." The changes occur incrementally and without being patently visible to those undergoing the step-at-a-time process.

In society there are numerous elaborate attempts to influence attitudes and modify behavior. However, thought-reform programs can be distinguished from other social influence efforts because of their totalistic scope and their sequenced phases aimed at destabilizing participants' sense of self, sense of reality, and values. Thought-reform programs rely on organized peer pressure, the development of bonds between the leader (or trainer) and followers, the control of communication, and the use of a variety of influence techniques. The aim of all this is to promote conformity, compliance, and the adoption of specific attitudes and behaviors desired by the group. Such a program is further characterized by the *manipulation* of the person's total social environment to stabilize and reinforce the modified behavior and attitude changes (Ofshe, 1992; Ofshe & Singer, 1986; Singer with Lalich, 1995; Singer & Ofshe, 1990).

Thought reform is accomplished through the use of psychological and environmental control processes that do *not* have to depend on physical coercion or confinement. Today's thought-reform programs are sophisticated, subtle, and insidious, creating a psychological bond that in many ways is far more powerful and longer lasting than gun-at-the-head attempts to influence because the subject is led to believe all the choices are his or hers. The effects of a thought-reform program generally lose their potency when the control processes are lifted or neutralized in some way. That is why most Korean War prisoners of war (POWs) gave up the content of their prison camp indoctrination programs when they came home and why many cult members decide to leave their groups if they spend a substantial amount of time away from the group or have an opportunity to discuss their doubts with an intimate (Ofshe, 1992; Singer, 1995; Wright, 1987).

Contrary to popular misconceptions (some intentional on the part of cult apologists, usually sociologists of religion), thought-reform programs do not require physical confinement or produce robots. Nor do they permanently capture the allegiance of all those exposed to them. In fact, some persons do not respond at all to the programs, while others may retain the content for varied periods of time. In sum, thought reform should be regarded as "situationally adaptive belief change that is *not* stable and is environment dependent" (Ofshe, 1992, p. 213).

Cult apologists attempt to deny that thought reform exists. This is linked to protective stances toward cults in which the apologists attempt to deny cults' active and deceptive recruitment practices and to deny the massive social, psychological, financial, spiritual, and other controls wielded by cult leaders, thus dismissing their often destructive consequences. These efforts to shield cults from criticism rest on a "seeker" theory of how people get into cults, which overlooks the active and deceptive tactics that most cults use to recruit and retain members. When bad things happened to followers of Jim Jones, David Koresh, or Luc Jouret, the twisted logic of some apologists implied these "seekers" found what they wanted, thus absolving the cult leader and his or her conduct.

The same cult apologists, primarily social science teachers and not behavioral science scholars, doggedly stick to a faulty understanding of the process. Contrary to findings in the literature, they aver that physical coercion and debilitation are necessary for thought reform to occur, and that the effects of thought reform *must* be instant, massive, uniform, universally responded to, and enduring,— none of which is true.

Thought reform is cited in DSM-III, III-R, and IV (American Psychiatric Association, 1980, 1987, 1994). The phenomenon has been studied and discussed since 1951 (Hunter), and continuing studies by social psychologists and other behavioral scientists have solidified our understanding of its components and overall impact.

Psychotherapy Cults

Because of the roles and interactions involved in psychotherapy, therapists can veer from, and sometimes even abandon, the ethical standards and legal obligations of mental health professionals (psychiatrists, psychologists, counselors, social workers, and marriage, family, and child counselors).

Psychotherapy cults may arise from the distortion and corruption of long-term individual therapy (Conason & McGarahan, 1986; Temerlin & Temerlin, 1982) or group psychotherapy (Hochman, 1984), or they may be started by a variety of nonprofessionals (Singer, 1983, 1986; Singer with Lalich, 1995; West & Singer, 1980). A cult can develop, for example, when therapists deviate from fee-for-service, ethically based, confidential relationships with clients and instead engage in multiple relationships with patients, such as becoming their bosses, lovers, financial advisers, and having clients move in with them for communal living. Also, colleagues and I have found that nonprofessionals can use psychological techniques and develop so-called therapies, trainings, and experiences. When success follows, it becomes a heady thing, especially as leaders see how much influence they are wielding. This can be the starting point of forming a cult around themselves.

A number of variables are involved in the evolution of a psychotherapy cult. Most attention

has centered on the individuals involved (the leader-follower relationships), the personality features of the leaders, and the alleged needs of followers. More study is needed, because cult formation by therapists may not be rare (Hochman, 1984; Singer, 1983; Singer, Temerlin, & Langone, 1990; Temerlin & Temerlin, 1986; West & Singer, 1980). Certain therapists appear to slip easily into controlling and abusing patients and disregarding ethical rules. Some have been, as in many professions and walks of life, flagrant sociopaths; most have been grandiose, narcissistic, rigid, energetic, and determined.

Beyond looking at the traits of individual leaders and followers, we see that their interactions occur within a context and are based on the corruption of some theory of therapy. Thus, constructs beyond individual personality traits and the meeting of personal needs must be invoked to explain how thought reform works, and how cults, especially psychotherapy cults, can be formed.

Only a limited number of therapists appear to be familiar with the literature of social psychology regarding thought reform and influence techniques. Few have a grasp of the multiple parameters needed to conduct a thought-reform program. Thus, many therapists incorrectly conceptualize the thought-reform process by using simplistic notions of dominance-submission or by seeing the needy-dependent follower meeting the charismatic-dominating leader. They may look only at a pair and only at intrapsychic features of the two. This is where Berne's contribution is useful—in the area of social psychiatry and in the focus on the analysis of transactions.

While not discarding the individual features of leader and follower, other essential parameters must be understood. There is the context in which the two meet and interact, including the mechanisms of coordinated programs of coercive influence and behavior control and the ideology that must come into play to bind a group together. These interconnecting constructs must be held in mind to understand how thought reform and cultic relationships evolve and function once they get going.

Lifton (1961/1989) sensed the need for the interconnecting construct when he coined the

term "ideological totalitarianism," which he saw as "the coming together of immoderate ideology with equally immoderate individual character traits—an extremist meeting ground between people and ideas" (1961/1989, p. 419). He studied the thought-reform programs used to promote communist ideology in China. There the political ideology was already in place, and Lifton called attention to the multiple immoderate ideologies around which thought-reform programs could be built.

Jacobs (1987, 1994), long interested in social movements and the abuse of power in various fields, noted "although there is much greater recognition and awareness of the role of the autocratic leader in these destructive situations, little attention has been paid to the role of theory in supporting the development and growth of autocratic structures" (1994, p. 39). In studying a psychotherapy process, Jacobs (1994) saw how the process can move from treatment to thought reform. He demonstrated how theory can become ideology in the hands of an authoritarian therapist. Such a therapist can turn a theory of personality or a theory of therapy into an ideology which then binds leader and followers in a totalistic group. The ideology is used to justify and promote the leader's control. Once that ideology is promoted as "the way," the therapist can use the content of what was once mere theory to now dogmatically control: "Theory can become ideology and thus be used to support and promote totalitarianism, thought reform, and the misuse and abuse of power" (p. 39).

Earlier, several of us pursued the analysis of how therapy can be turned into an abusive, autocratic thought-reform program. We studied 22 psychotherapy cults (Singer, Temerlin, & Langone, 1990). Following traditional methods of field research in the behavioral sciences, we interviewed 120 persons who had been in one or another of these groups, which operated in various parts of the United States. We studied documents (legal, media, in-house papers, and published writings) as well as the extensive interviews gathered from the former followers. We found that whether the cults were started by trained therapists or nonprofessionals, the leaders assumed multiple and controlling roles over the lives of the patient-followers. Relying

on trendy notions in psychology and pop psychology, the leaders proclaimed that they had unlimited personal power and skills.

They constantly denigrated parents, marriage, and the family unit and extolled the raw expression of "feelings" while putting down intellect and reason as hindrances to personal growth. . . . Some leaders promulgated the "getting out of your head" notion, and consequently had followers drop technical or professional careers. In many cases, the resulting drop in income rendered followers even more dependent on the leader. . . . The personality, character traits, and fantasy lives of the leaders of such groups appear to color and direct the paths a particular group takes. Several high-energy, glib, psychopath-like leaders, for example, created groups that they stirred into continual activity. In one case, a leader told a follower to move his residence 25 times in two months. (Singer, Temerlin, & Langone, 1990, pp.120-121)

Temerlin and Temerlin (1986) studied trained therapists who consistently violated ethical prohibitions against multiple relationships with clients—becoming the friends, lovers, landlords, employers, and so forth of clients. These therapists then bonded followers together as "siblings" in the "new family." Eventually the clients' thinking resembled what Hoffer (1951) saw in the "true believers" and what Lifton (1961/1989) called "totalistic."

More recently, Jacobs (1994) wrote about the phenomenon that can result when a therapist turns theory into ideology that is then used "to support and promote totalitarianism, thought reform, and the misuse and abuse of power" (p. 39). Jacobs's work reminds those new to the study of coordinated programs of coercive influence and behavior control (Ofshe & Singer, 1986) or thought-reform programs (Lifton, 1961/1989) that ideology is the rationale that justifies intense controls, subjugation, and binding properties.

The persons studied by Singer, Temerlin, and Langone (1990) had entered therapy only to end up members of a cult. This evolved when their therapists violated ethical principles, entered into multiple roles, abused their power, and instigated practices that turned "therapy" into a

thought-reform (brainwashing) program. The therapists' theories became ideology; their authority was corrupted into justifying their abuse of power, and in the end, instead of therapy, clients found themselves in abusive cults. The following section presents a recent example of a young man who went for therapy and ended up in a psychotherapy cult much like the ones we had studied earlier.

Joel: A Case Example

Joel, an 18-year-old college freshman, became depressed and called his sister, a psychology graduate student. She urged him to get their parents to send him to get therapy from her supervisor. Joel later reported dismay at seeing his sister and 20 other "patient-trainees" drop out of graduate school. They "decided" to live on a farm with the supervisor/psychologist and her husband, where they worked as house and yard help, securing parental money for "therapy." The leader, a licensed therapist and part-time instructor in a graduate-school program, had met them in placements and in classes.

The patients/trainees began the day with a "confessional attack group" in which each person confessed any negative thoughts or feelings they had had about the therapist the prior day. Then they were attacked verbally by the group for their "negativity"—a double-bind condition. Joel described totally controlled days and nights and endless confession-confrontation groups. He reported scorn was heaped on him when he asked after a month when was he going to see his therapist. He said he was told this was the best therapy in the world, that the leader was the world's leading authority on psychology, and that she was being paid to cure him and others of their negativity, egotism, and inability to be selfless and open. Joel soon ran away and phoned his parents, telling them about the oddness of what was going on. The therapist had literally developed a thought-reforming cult.

Interviews with Joel after he left the group were revealing. He said he was depressed when he arrived and had expected counseling or therapy to "help build him up." He said what he found instead did not resemble anything he had experienced before. But he went along with the program since it was run by a credentialed

person who had gathered many graduate psychology students around her. He reported that every minute of every day was organized around the therapist's plans. There was no time to rest, to think, to talk freely with the others. No time was allowed for critical thinking. He said he soon felt totally confused, and without emotions, because nothing he said or did seemed to be acceptable to the therapist and group. He said he began to emulate others to avoid being put on the "hot seat" himself.

Living consisted of merely getting through each day, listening to endless lectures by the therapist-leader and feeling that there were "no tomorrows." Joel described the lectures given by the woman therapist much as Ofshe and Singer (1986) portrayed the attacks on the sense of self and sense of reality seen in thought-reform programs. As he recounted the history of the group, it became evident that the therapist had dropped her original fee-for-service professional role and had taken over the lives of the young trainees.

The therapist claimed her theory was the path to "complete emotional expression and sane living," not only for the trainees, but for the world. She harangued the trainees that as soon as the group was able to "replicate her" and go out and teach the world how to live through her "treatment," the change would be beyond anything yet contributed by therapy and education. She referred to what they did as "the work."

She told them that until they replicated her ways, her language, and the exact emotions she showed, they would not be perfect therapists or able to share her knowledge and work with the world. Besides the lectures and regimented activities, she directed exercises for followers that were an amalgam of primal scream and confrontational attack therapy. Additionally, there were periods of directing a few members to act out massive personal regression by wearing diapers, drinking from a bottle, and having the group tend to these persons as they would to an infant. Her theory of how to behave became a theory of psychology turned into ideology and thus was justified by her as the basis for assuming overall control.

The Potential for Abuse of Power in Therapy
Since Hippocrates' (460-370 B.C.) early

credo to "do no harm," there have been countless warnings made to physicians and those in helping roles to avoid harming those who seek their aid. Across time, observers have noted that power can corrupt, even the power to heal, and when a needy person seeks the help of a person with greater skill or knowledge, the potential for abuse of power exists.

Psychotherapy is fraught with the potential for abusing power, for example, by violating ethical rules about fee-for-service relationships. In this way the therapist can allow boundaries to melt and to have multiple, overlapping, and totally controlling roles. The therapist can become a cult leader by indoctrinating followers to accept his or her personal beliefs and values. A therapist can corrupt the transference tendencies that bind people to him or her by teaching followers to react aversively toward the world.

To put into place the authoritarian therapist's picture of the perfect world, with the ideal followers obeying, thought-reform techniques are employed to create behavior changes. To make the thought-reform process more concrete, Ofshe and Singer (1986) termed it "coordinated programs of coercive influence and behavior control" (p. 3). Singer and Addis (1992) added the term "exploitative persuasion" (p. 133).

Uniting Some Theories about Therapy and Thought Reform

When therapists violate ethical principles and begin to serve their own needs in preference to attending to the needs of their patients and clients, the potential for cult formation has arisen and an abusive relationship has begun. It is abusive because the needs, values, and goals of the patients are neglected or discarded and those of the therapist are given top priority. The assumption of power and control over "lesser persons" has beclouded the mission to help. The heady power generated by the assumption of unbridled control over supplicants becomes the seeming ablation process.

The wayward, cult-forming therapists studied in the work cited earlier put themselves above professional constraints. Like other cult leaders, they increasingly began to feel free to impose their own wishes, desires, and beliefs on their patients. Their preferences became doctrines for

living, which patients were to follow (English, 1979; Hochman, 1984; Jacobs, 1987, 1994; Singer, Temerlin, & Langone, 1990; Temerlin & Temerlin, 1986).

Jacobs (1994) noted that aspects of transactional analysis theory add to the understanding of cults, thought reform, and mass movements. It is interesting to consider the sequence of therapy, thought reform, and cult formation, the title of this essay, and then to add Jacobs's ideas. The sequence noted earlier in this article is that which we see occurring when the psychotherapist violates boundaries, forms a cultic following, and institutes a thought-reform program to produce the attitudinal and behavior changes for the New Order. The therapist who moves along this pathway has at some point decided to take the existential life position (Berne, 1962, p. 23) of "I'm OK, You're OK, They're not-OK." Together with followers, such therapists form a symbiotic contract that leads to an autocratic system in which the therapist is the Master and the clients are the Followers. In the cult that forms, the therapist/Master and the clients/Followers thrust out the not-OK elements from themselves and their cultic system, attributing a variety of negative features to nonmembers, the outside world, and other belief systems and ideologies (Jacobs, 1987). In other transactional analysis terms, leader and followers started out as therapist and clients, speculating and reasoning about reality. Then thought reform, role violations, and cultic abuses of power began, and as they fell into a Controlling Parent ideological formula for living life, they turned away from respect for and valuing of individual autonomy.

The Silent Witnesses

A most important issue remains: How as mental health professionals can we evaluate the many competing theories of therapy? What are our personal and professional roles for commenting about these multitudes of therapies and so-called therapies offered to the public? Our fields range from biological psychiatry to social work halfway house management. Many have witnessed therapists evolving into cult leaders, and so we are left with the question, why do professionals and professional organizations not

speak up more about transgressions? And why do we as professionals not speak more openly about the idea that theories can be turned into ideologies?

For 50 years I have been a psychologist, and in that time I have seen some peculiar therapies come and go (Singer, 1993). McHugh (1992) referred to some of these as "therapeutic misadventures." Many years ago I recall seeing John Rosen do his "direct analysis" on some pathetic patients. The senior staff at the university medical school where I worked all seemed to endorse what he was doing. Most of us underlings were appalled, but dared not speak out. It was not until I read Masson's book (1988, pp. 124-152) that I realized a new generation of viewers were looking at the brutal, heavy-handed treatment that Rosen's program promulgated. Few, if any, spoke out about it at the time.

Often in the treatment of schizophrenics, addicts, criminals, and incarcerated juveniles, theories of therapy have been turned into ideologies justifying extremely abusive programs. These groups have no constituency to protest the qualities and values of therapies forced on them. Likewise, some workplaces have used, and continue to use, certain forms of so-called New Age awareness programs that are heavily psychologically based thought-reform programs disguised as training and motivation. Citizen complaints about such programs led the Equal Employment Opportunity Commission (EOC, 1988) to issue guidelines to employers outlining employees' rights in such programs. Recently a Congressional panel was told by witnesses that the Federal Aviation Administration forced its employees for nine years "to undergo abusive training aimed at breaking down their core beliefs" and subjected them to "relentless verbal abuse. . . . A climate of 'group-think' in which employees are afraid to dissent or bring problems to managers' attention" (Larson, 1995). In these programs, a psychologist allegedly "used training techniques that smacked of 'brainwashing' or 'mind control'" (Phillips, 1995).

Professionals, so far, have rarely spoken out about the lack of scientific bases for either seemingly abusive "therapy" programs applied to custodial patients, or for certain so-called "motivational and training" programs foisted on

employees who are fearful of repercussions if they complain about the programs or even challenge the supposed merits of such training. Both types of program appear to be based on theories being made into ideologies to justify the treatment.

Summary

A theory is, at best, an intelligent guess for explaining why, how, and what is actually occurring (Kessler & Singer, in press). Here, an effort has been made to show how a theory of personality or a theory of therapy, which is a hypothesis about how we humans respond, can be turned into an ideology that a cult-forming therapist can use to justify autocratic domination of clients-patients.

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