



WORDS

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FEATURE



Kim Bassiner-Traicos explores the psychology of conspiracy theories, and what to do when clients bring them into the therapy room

Encountering conspiracy theory beliefs in the therapy space is different to encountering them on social media, as I discovered recently. I have been counselling for over two decades and consider myself relatively unflappable, but when my client informed me he was going to use his time in court for a minor violation to make a stand against the use of face masks as a form of oppression in the current pandemic, I was at a loss for words. I couldn't scroll past this with an eye roll; this wasn't Facebook. This was my therapeutic space and this was a client with whom I had so carefully built a trusting and strong therapeutic alliance. I didn't want to break that but I also didn't want to be perceived as colluding with something that could potentially harm my client.

Defining conspiracy theories can be difficult, but essentially we are looking at events that are attributed by individuals to be the result of a plot between two or more powerful or elite people.^{1,2} These can range from one isolated event or the lens can widen to an entire worldview. Some can be fairly benign, such as the myths surrounding Princess Diana's death. Some can be life-endangering, such as, 'COVID-19 isn't real and therefore there is no need to wear a face mask'.

As I began to research conspiracy theories, I found they were far more

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mainstream than I realised. In 2013, for example, more than a third of US people polled believed that climate change and global warming are a hoax.³ In fact, statistics show that Americans believe in at least one conspiracy theory.⁴ British people are not immune either. Research at Cambridge University shows that the 'great replacement' conspiracy theory, which promotes that Muslim extremist groups wish to repopulate Europe with Muslim populations, may have contributed to Brexit, with a third of Leave voters admitting to holding these beliefs.⁵

The important thing to bear in mind is that conspiracy theories do not always prove to be wrong. One such example is smoking. For years, the tobacco industry was in a conspiracy to create the illusion that smoking was not dangerous. Thankfully, these types of conspiracies are rare. However, when I was reflecting on this and discussing this phenomenon with colleagues, it struck me how easily the cognitive distortion of generalisation can happen if one conspiracy in history is proved right; the reasoning could then stand that other conspiracy theories might prove to be true too. Especially when individuals are emotionally invested in particular ones.

Uncertainty

It is not surprising that conspiracy theories are surging, as they increase in times of uncertainty, such as during a pandemic, and in an age in which social media allows for the spread of misinformation at the click of a button. Never before has it been as possible for individuals to have their biases confirmed so quickly than in this internet age, falling into yet another thought trap: 'confirmation bias'.⁴

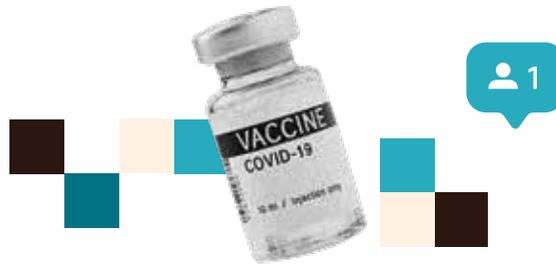
Digging into the more complex reasons why some individuals are more predisposed to believing conspiracy theories than others,

I came across the work of Karen Douglas at the University of Kent. According to her research with other experts, the reason people are attracted to conspiracy theories can be divided into a framework of three parts: epistemic, existential and social motives.⁶

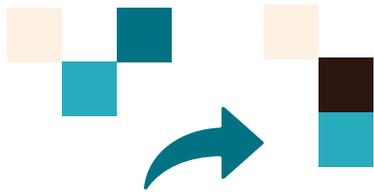
Epistemic motives refer to the human need to understand the world and build an inner representation of that world. The tendency to seek meaning is even higher in times of uncertainty. This need to find meaning is sometimes thwarted when explanations are seen as insufficient. Could it really be the case that COVID-19 simply transmitted at random from an animal into the human population? Isn't it more likely to be a plot, a laboratory product? That could be considered by some to be a more satisfactory answer.⁶

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It is not surprising that conspiracy theories are surging, as they increase in times of uncertainty, such as during a pandemic



Existential motives relate to an individual's need for safety and security. So it makes sense that there would be an increase in the belief in conspiracy theories when people feel their sense of control is threatened.⁷ The more an individual feels they understand their world (even if their understanding is fuelled by misinformation), the safer they feel.

Finally, social motives relate to the desire to maintain a positive image of the self or group: believing conspiracy theories allows people to attribute negative things to another person or group. In this way, the individual can feel good about themselves and the group they identify with. For example, research has found that people in disadvantaged groups are more likely to adhere to conspiracy theories.⁸

Delicate line

As therapists, we walk a delicate line. We have to remember our role, and the autonomy of the client, but how might we respond when we hit upon a situation such as the one I mentioned in the opening paragraph – where harm could result to the client or others?

I contacted Professor Douglas to ask if she could shed light on my dilemma. She suggested appealing to the client's critical thinking and endeavouring to highlight the importance of the sources from which the information (or misinformation) are taken. Gently asking questions and probing the

sources, as she suggests, could indeed be useful in cases such as mine. My client was happy to talk about his beliefs and their sources, and to help me understand his views. Thanks to our alliance, I was able to talk to him about my difficulties in understanding his view, and he was happy to give permission for me to write about this aspect of our work together. He was also able to see that sharing his ideas in court might not be a good idea, as they might irritate the judge, which would be counterproductive.

I was hooked now on researching the personality factors that predispose people to believe conspiracy theories, and how understanding these could help therapists with clients who fall prey to misinformation and sinister belief systems. Looking at the current research around attachment patterns, it seems therapists with a knowledge of attachment theory are helping without realising. Research shows that anxious and avoidant attachment styles can both contribute to a heightened tendency to believe in conspiracy theories.^{9,10} Working on these in therapy to support the development of healthier attachment patterns, are we already providing a buffer against conspiracy beliefs?

What else could we be doing? I reflected on this for weeks in a slightly obsessive way. I looked at working with the 'mistrust/abuse' maladaptive schema in schema therapy.¹¹

Could working at depth with the inherent mistrust of the world by people who believe in conspiracies, prove to be effective? I reflected on whether acceptance and commitment therapy may provide an answer by working with the inflexibility of the hard and rigid belief systems that may be apparent?¹² I have mentioned how gently highlighting cognitive distortions and thought traps¹³ could be helpful, so might cognitive behavioural paradigms be useful?

Then the penny dropped. Psychotherapy in its very nature mitigates against conspiracy beliefs by establishing a relationship that allows for growth and flexibility. As long as we bear in mind that if the conspiracy theory beliefs put the client or others at risk of harm, we may need to sensitively challenge the client, and by so doing, the very process of therapy should counter the processes that promote the development of conspiracy theories. Within the emotional safety and trust of a therapeutic relationship, the foundations of healing help prevent people developing the psychological vulnerabilities that can result in conspiracy beliefs. ●

YOUR THOUGHTS, PLEASE

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