

Try to Remember

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In 1986 Nadean Cool, a nurse's aide in Wisconsin, sought therapy from a psychiatrist to help her cope with her reaction to a traumatic event experienced by her daughter. During therapy, the psychiatrist used hypnosis and other suggestive techniques to dig out buried memories of abuse that Cool herself had allegedly experienced. In the process, Cool became convinced that she repressed memories of having been in a satanic cult, of eating babies, of being raped, of having sex with animals and of being forced to watch the murder of her eight-year-old friend. She came to believe that she had more than 120 personalities – children, adults, angels and even a duck – all because, Cool was told, she had experienced severe childhood sexual and physical abuse. The psychiatrist also performed exorcisms on her, one of which lasted for five hours and included the sprinkling of holy water and screams for Satan to leave Cool's body.

When Cool finally realized that false memories had been planted, she sued the psychiatrist for malpractice. In March of 1997, after five weeks of trial, her case was settled out of court for \$2.4 millions.

Nadean Cool is not the only patient to develop false memories as a result of questionable therapy. In Missouri in 1992 a church counselor helped Beth Rutherford to remember during therapy that her father, a clergyman, had regularly raped her between the ages of seven and 14 and that her mother sometimes helped him by holding her down. Under her therapist's guidance, Rutherford developed memories of her father twice impregnating her and forcing her to abort the fetus herself with a coat hanger. The father had to resign from his post as a clergyman when the allegations were made public. Later medical examination of the daughter revealed, however, that she was still a virgin at age 22 and had never been pregnant. The daughter sued the therapist and received a \$1 million settlement in 1996.

About a year earlier two juries returned verdicts against a Minnesota psychiatrist accused of planting false memories by former patients Vynnette Hamanne and Elizabeth Carlson, who under hypnosis and sodium amytal, and after being fed misinformation about the working of memory, had come to remember horrific abuse by family members. The juries awarded Hamanne \$2.67 million and Carlson \$2.5 million for their ordeals.

In all four cases, the women developed memories about childhood abuse in therapy and then later denied the authenticity. How can we determine if memories of childhood abuse are true or false? Without corroboration, it is very difficult to differentiate between false memories and true ones.

Can a traumatic event be buried so deeply in the sub-conscious that an individual loses all memory that it happened for months or even years? And then can a sound or a smell or a situation trigger that memory again and have it replay with accuracy?

Your answer to these questions will depend on a number of things, including your view of what constitutes a memory, your view on whether traumatic memories function in the same way as memories of non-traumatic events, and perhaps on your willingness to believe or your inclination to disbelieve the statistics that claim that upwards of 50% of women have been sexually abused at some point in their childhood and that many of them have unconsciously repressed the memory of that trauma.

Before you decide your perspective on whether the growing number of reported cases of repressed memory are actually that, let's look at some history of a relatively recently described phenomena.

It was nearly 100 years ago that Freud first proposed the theory of a defense mechanism that protects the conscious mind from painful feelings and experiences. In a paper published in 1915, Freud described the phenomenon of repression clearly and concisely: "The essence of repression lies simply in the function of rejecting and keeping something out of consciousness." Freud discussed a number of his cases in this context, including Miss Lucy R., whose repressed sexual feelings for her employer apparently contributed to her hysterical symptoms. He described a conversation with her in a paper published in 1892,

"But if you knew you loved your employer why didn't you tell me?" She answers "I didn't know—or rather I didn't want to know. I wanted to drive it out of my head and not think of it again, and I believe latterly I have succeeded." Freud used this case to demonstrate his hypothesis that "an idea must be intentionally repressed from consciousness" for symptoms to develop. Thus, repression would be an intentional deliberate process of pushing emotions, ideas or thoughts out of the conscious mind.

Today, however, those who accept the idea that memories can be repressed ~~like~~ believe the repression which occurs is not conscious, but operates unconsciously. While Freud was fascinated with the complex interactions of sexual and aggressive feelings, wishes, fantasies, and impulses of childhood and their ability to exert a pathogenic effect in adulthood (he emphasized the repressed emotional content of the earlier experiences), in the 1990s we search in repressed memories for literal, historical truth. Can we rely on our memories to provide that truth?

There are those who view memory as a kind of video recorder, in which every experience one has is recorded with picture perfect accuracy; those who believe this view of memory assume that every experience a person has had is recorded in memory and that some of the memories of traumatic events too terrible to want to remember are locked away in the sub-conscious mind or repressed, only to be "remembered" in adulthood when some triggering event opens the door to the unconscious. Those who believe in this model of memory hold to the view that most discovered memories are historically accurate recollections of events and experiences. Many of the alleged incidents of sexual abuse recalled from repressed memories include experiences that happened to children as young as 12-18 months old. Through various recall techniques, adults have come to "remember" being fondled or abused on the changing table as an infant or other incidents from a period

before 4 years old, which is generally understood to be the youngest age of accurate memory.

Still others compare human memory to the way in which a computer stores memory; events, experiences and observations are stored in disassociated fashion wherever there is space available in the human memory bank at a particular moment. For those who view memory in this fashion, the ability to recall things with historical accuracy after any time at all has passed since the event is diminished severely, because bits of memory of one thing become associated with other bits of memory, and it is impossible to separate these past events which have become associated in the brain. Scientists believe "that the formation of a memory begins with the visual system's identification of objects and characteristics in space. At each of the original sites of perception, brain cells are directed to store certain impressions for later retrieval; after receiving their instructions, the cells actually undergo specific physical changes." The hippocampus (there is one on either side of the brain) links these separate localities, integrating diverse sensations into a single experience that is then imprinted as a memory.

Elizabeth Loftus proposes the visual picture of memory like this: "imagine the brain as filled with hundreds of thousands of tiny overlapping 'nets' of information connecting separate and distinct neural locations. Tug on one thread of a particular memory and the whole net will shift position; surrounding and overlapping sheets of memory will also be disturbed. To further complicate matters, the fabric of memory is composed of blood, chemicals, and electricity, a rather slippery and volatile combination. Nets get tangled, knots develop, frays and holes begin to rip apart the intricately knotted fabric." There have been numerous experiments which demonstrate that memory is not an accurate recall of specific situations when it is tested later. In one experiment, subjects were asked to answer the question "How did you first hear the news of the Challenger disaster?" the day after it happened. When the same subjects were asked this question 2 1/2 years later, not one of the memories was entirely accurate and over a third were, in the experimenter's words "wildly inaccurate." Even more surprising were the subject's astonished reactions when confronted with their written original accounts. They simply could not believe that their revised memories were mistaken; even after "reading and reviewing the questionnaires they had filled out the morning after the explosion, they insisted that their altered memories were more accurate and "real." "This is my handwriting, so it must be right," one student explained, "but I still remember everything happening the way I told you [2 1/2 years later]. I can't help it. This study, by Neisser, challenges popular thinking about "flashbulb memories," which holds that strong emotions create vivid and accurate memories."

Elizabeth Loftus is a psychologist who has studied memory for years and co-authored the book The Myth of Repressed Memory, (the title obviously reflects her position on the issue). She and her graduate students at the University of Washington devised an experiment that attempted to determine whether a memory could be planted in an individual that was entirely fictitious. One student created a false memory in the mind of his 14 year old brother. "In the first phase of his case study, Jim presented Chris with a one paragraph written description of four childhood events, only three of which actually happened. Chris was instructed to write about all four events every day for five days, offering any facts or descriptions he could remember about each event. If he could not

recall any additional details, he was instructed to write "I don't remember." The false memory was introduced in this paragraph:

"It was 1981 or 1982. I remember that Chris was five. We had gone shopping at the University City shopping mall in Spokane. After some panic, we found Chris being led down the mall by a tall oldish man (I think he was wearing a flannel shirt). Chris was crying and holding the man's hand. The man explained that he had found Chris walking around crying his eyes out just a few minutes before and was trying to help him find his parents.

"In his five-day journal, Chris gave the following details:

Day 1: I remember a little bit about that man. I remember thinking, "Wow! He's really cool!"

Day 2: That day I was so scared that I would never see my family again. I knew that I was in trouble.

Day 3: I remember Mom telling me never to do that again.

Day 4: I also remember that old man's flannel shirt.

Day 5: I sort of remember the stores.

In summarizing this memory, Chris produced a new fact, recalling a conversation with the man who found him: "I remember the man asking me if I was lost."

"Was Chris simply trying to help his older brother by elaborating on this memory? Chris' response to one of the true memories seemed to argue against this possibility. On the first day Chris wrote, "I can't remember." And for the next four days he wrote, "I still can't remember." To test whether, unknowingly, Chris' brother had tapped into a real incident, Chris' mother was offered the same scenarios: she tried for four days to recall her son being lost in a shopping mall, and finally concluded "For some reason I feel guilty about this, that I can't remember." Several weeks later Chris was interviewed again and asked to describe each incident and rate the accuracy of how clearly he recalled it. Chris assigned the shopping mall incident a rating of 8 out of 10. At this point, Chris had elaborated his story to this

"I was with the guys for a second, and I think I went over to look at the toy store, the Kay-Bee toys and uh, we got lost, and I was looking around and I thought, 'Uh-oh. I'm in trouble now.' You know. And then I... I thought I was never going to see my family again. I was really scared, you know. And then this old man, I think he was wearing a blue flannel, came up to me... he was kind of old. He was kind of bald on top... he had like a ring of gray hair... and he had glasses."

When Chris was finally confronted with the fact that this memory was of an incident which never happened, his response was

"Really? Well, no... 'cause I thought I was... I remember being lost and looking around for you guys... I do remember that... And then crying and Mom coming up and saying, 'Where were you? Don't you ever do that again!'"

At the heart of the debate on repressed memory are at least two issues: first, whether memory can be repressed and then replayed with historical accuracy years later, and secondly, whether "memories" can be induced or changed by power of suggestion by the therapist or by other "survivors." The rhetoric on both sides of the debate has become increasingly heated, with the two poles being occupied by those who think that "if you think that you have been abused, you can assume who have and should work to find out

by whom and when” on the one extreme, and those who believe that almost none of the reported repressed memories of sexual abuse has any basis in fact, and that manipulative therapists, in concert with greedy lawyers, have destroyed thousands of families by suggesting that one or both parents have abused their child and the now-adult child deserves compensation.

For these cases do find their way into court. One of the most famous cases which was based on repressed memory was the murder trial of George Franklin, who was accused by his daughter Eileen of murdering her friend, Susan Nason, twenty years earlier. Eileen’s memory of the incident was triggered in one of several ways (her stories changed from the initial time she spoke to the police until the story was told at the trial). In August of 1989, she reported that it was under hypnosis that she first had a flashback of the incident; she confirmed that story with her mother a month later. However, several months later, when her father had been arrested and charged with the murder, she revised her story and eliminated the hypnosis part, apparently having been made aware that memories elicited under hypnosis are not admissible in court. Eileen Franklin had been in therapy trying to make sense of an unhappy childhood and troubled adolescence. In therapy she learned that she was a victim of post-traumatic stress, and that her confusion, anger, grief, and depression were further evidence that she had been traumatized and victimized sometime in her past. The culminating event in her recollection of her past came in her living room, when Eileen’s daughter Jessica was six years old. Jessica suddenly turned to her mother with a quizzical expression, and Eileen began to look into her daughter’s eyes and was reminded of her long-dead friend Susan. In that shocking incident of recognition, Eileen could see in her mind the silhouette of her father with one leg forward, his hands raised above his head, and the look of terror on her friend’s face. She could hear the scream, the rock cutting into bone and flesh, the dreadful silence.

George Franklin was found guilty of murder on evidence based almost entirely upon his daughter’s repressed memory. Since that time, adults around the country in increasing numbers have begun to sue their parents based on recovered memories of childhood sexual abuse. As the phenomenon gained visibility, a common denominator became apparent: most, if not all, of the people who claimed to recover memories of childhood trauma had been in therapy at the time of recovery. For those who find themselves at the extreme of the pendulum which would all but deny the possibility of memories being repressed, the implication is strong: therapists, whether through good intentions or bad technique have either instilled memories of incidents that did not happen or have enabled their patients to distort and elaborate incidents that were trivial or innocent into something sinister in its recollection.

The frustrating thing about repressed memory syndrome is that it is a Catch-22 situation. If you are seeking help for some of the symptoms that are often associated with victims of sexual abuse, and you deny any memory of being abused as a child, the denial is taken as proof that the abuse must have taken place. The symptom lists for repressed memory put together by various groups include such a variety of symptoms, some in contradiction to others, that virtually all of us could probably answer yes to a number of them, regardless of whether or not we have repressed any traumatic memory. Among them are these taken from Courage to Heal, a major self-help book for victims of abuse: “Do you feel different from other people? Do you have trouble feeling motivated? Do you

feel you have to be perfect? Do you use work or achievements to compensate for inadequate feelings in other parts of your life.” Another list compiled by Renee Frederickson highlights sixty five questions in seven categories which offer “common warning signals of repressed memories.” These include: “I often have nightmares. I have difficulty falling or staying asleep. Basements terrify me. I do some things to excess, and I just don’t know when to quit. I identify with abuse victims in the media, and often stories of abuse make me want to cry. I startle easily. I space out or daydream.”

Therapists use a number of techniques to help their patients recall the abuse that they have determined must exist. These include dream work, imagistic work, body work (the body remembers what the mind unconsciously chooses to forget); journal writing; hypnosis, art therapy, feelings work and group therapy. Once the memories have been identified, therapists usually advocate confrontation, and sometimes suing the perpetrator, as means of completing the healing.

Some of the families who have been affected by these accusations have begun to respond, however. This response comes from the family members who react in shock, anger, and dismay, to accusations that many of them claim are totally untrue. The organized response has been the False Memory Syndrome Foundation, established by the parents of a psychologist whose daughter accused her father of sexual abuse. The Foundation promotes itself as an organization intended to help parents deal with false accusations; its detractors claim that it may function as a hiding place for child abusers.

In her book The Myth of Repressed Memory, Elizabeth Loftus tells numerous stories of families torn apart by the trauma of recalled memories. In many of these incidents, truth seems almost impossible to find by the time the therapeutic process has intervened. Like the child who elaborates the tale of being lost in a mall, a small, vague negative feeling can be elaborated into a series of incidents that are recreated in graphic detail through group therapy sessions, hypnosis, journal writing—all valid therapy techniques that seem to be misused in these settings, where the supposition is that an accurate historical memory exists and must be ferreted out for true healing to take place. In sympathy for the pain of those who were abused, many of the professionals who work in this area site so many incidents of repressed memory of abuse, that one is led to believe that there is a national epidemic which has gone out of control. They give advice such as “If you don’t remember your abuse, you are not alone. Many women don’t have memories, and some never get memories. This doesn’t mean they weren’t abused.” A 1985 study in the Los Angeles Times estimated that nearly 38 million adults were sexually abused as children; a 1986 San Francisco study determined that 38% of women revealed that they had been molested before the age of 18. Clearly if those numbers are accurate, there must be many of us walking around with repressed memories of sexual abuse.

Elizabeth Loftus’ book contains many case histories of families torn apart by accusations from child to parent of past sexual abuse. In many of the stories she sites, there is no apparent external evidence that this abuse took place. As a parent myself, I can’t help but feel some concern that at some point in the life of one of my children, despite putting my best efforts into parenting, an unhappy adult child could come to see the explanation for his or her problems in the rediscovery of repressed memories. And denying the accusations would be something like responding to the question “have you stopped beating your wife?”

Also, in these cases, some memories were contrary to physical evidence, such as explicit and detailed recollections of rape & abortion when medical examination confirmed virginity. How is it possible for people to acquire elaborate and confident false memories. A growing number of investigations demonstrate that under the right circumstances false memories can be instilled rather easily in some people.

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The theory generating the belief that painful feelings and hidden traumatic memories lie at the heart of many, if not most, emotional problems has its roots in Freudian (repression) and Janetian (dissociation) concepts of defense. The ideas of dissociation and repression, although held to be widely divergent by their authors, have come to be used to all intents and purposes interchangeably. They represent the basis of traditional reflective approaches in psychotherapy which are now being challenged by the confrontational stance on the behalf of patients. The challenge now is

to understand the power and the frequency of this forgetting process, its nature, and the means of reversing it. The question is whether we can accept as valid, without corroboration, stories that emerge for the very first time in therapy, totally unsuspected until then by patients now in their 30s and 40s. The problem becomes even more challenging when one realizes that the therapeutic strategy is often perceived and even overtly described as aiming at such discovery. Fred Frankel a psychiatrist at the Harvard Medical School has reported that his department regularly receives requests from callers with no memories of abuse whatsoever; who request a consultation including hypnosis to determine whether such memories exist.

Hypnosis and hypnosis-like procedures such as closing the eyes and describing the images that come to mind are believed by many to facilitate access to hidden memories. Therapist Wendy Maltz, author of a popular book on childhood sexual abuse, advocates telling the patient: "Spend time imagining that you were sexually abused, without worrying about accuracy, proving anything, or having your ideas make sense" Although such memories might be accurate, the method is of concern to many in the scientific community because of its unreliability.

Although laboratory research has continued to demonstrate the malleability of memory, some clinicians with a strong interest in recovered memories have come to see the experimental literature as tangential. They believe that memories of trauma, which cannot be reproduced in the laboratory setting, are – contrary to intuitive logic – vigorously and actively forgotten, or dissociated. This mental process is presented in tandem with a neurobiologic formulation by van der Kolk, who argues that the sometimes overwhelming experience of trauma leads to an event's being "stored in somatic memory and expressed as changes in the biological stress response.....In (post traumatic stress disorder) failure of declarative memory may lead to organization of the trauma on a somatosensory level (as visual images or physical sensations) that are relatively impervious to change" The idea that a visual image or a bodily sensation in the genital area when a person is casting about for memories in hypnosis is presented as proof that he or she was sexually abused in childhood. Absent from such reasoning is the very real possibility that suggestion, imagination, or even anger and envy may have a major role.

The questions raised by claims of recovered memory will have to remain unanswered for the immediate future, because there is obviously no ethical way to reproduce and study the effects of childhood trauma. Prospective studies of children known to have been abused could shed light on the matter. However, the assertion that traumatic memories are processed

differently from other memories because of some biologic or mental function that we do not yet fully grasp is complicated by the fact that, at this point, this process can be neither tested or falsified. This fact effectively muffles scientific debate --- which, of itself, should encourage a greater degree of caution in the claims of practicing clinicians. Unfortunately such caution has not been consistently apparent.

The use of imagery and hypnosis must be viewed as a license to imagine and invitation to do so; neither the therapist nor the patient can necessarily distinguish the fantasy from the fact.

Whereas uncertainties are less important where the therapy is reflective and confined to the relationship between the therapist and patient, when the approach is confrontational there is a higher degree of accuracy required. Few can ignore the horrifying statistics on the current incidence or childhood abuse or the fact that countless victims hide the information about their abuse or suffer because they choose not to discuss it. But it seems dubious logic, at best, to conclude that because reports of current abuse are often confirmed all or most adults in therapy who are encouraged to describe childhood events that they never before remembered were necessarily abused in childhood.

In the absence of compelling evidence for a powerful and common process described as dissociation, clinicians bear a heavy responsibility to do no harm. In turn, the courts and society bear the responsibility to analyze information thoughtfully and fully before acting on accusations which may be false and which can seriously injure and disrupt the lives of innocent people.