

Will We Ever Agree ?

I don't remember much about my childhood. Sometimes I am energetic and excited about my life—other times I feel overwhelmed and depressed. My husband and I sometimes have relationship problems. I once had an eating disorder.

Perhaps I was sexually abused as a child. According to several books, I have many of the symptoms (e.g., see Bass and Davis, 1994; Blume, 1990; Frederickson, 1992; Herman, 1992; Lew, 1988; Maltz, 1991; Oksana, 1994; Smith and Pazder, 1980; Terr, 1994). Such a thing could never have happened to me! I don't have any such memories.

But, according to some books, denial is also a symptom of childhood sexual abuse (e.g., see Bass and Davis, 1994). I must be a survivor! I will eventually remember—if I want to get well that is.

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A review of: Pendergrast, M., (1995).

Victims of Memory:

Incest Accusations and Shattered Lives.

Vermont: Upper Access, Inc.

Research supports the notion that people who have been sexually abused as children often have problems later in life similar to the ones I described (Browne and Finkelhor, 1986). Popular thinking is that if “A” often leads to “B” then “B” is the result of “A.” That is, if childhood sexual trauma often leads to problems later in life, then problems later in life must be the result of childhood sexual trauma. While many strongly believe this to be true, those trained in the scientific method understand that “B,” or problems later in life, can be the result of “C,” (e.g., stress). Even when people believe that certain symptoms are suggestive of sexual abuse, most people have problems similar to those described. Does that really mean that those of us who have no memories of such abuse have indeed been sexually abused, but have repressed those memories?

Sexual abuse is a fact and true cases are probably significantly under reported. In today's society, anyone who dares question the authenticity of sexual abuse claims is seen as questioning the prevalence of sexual abuse in our society and as being against women. Most questioners are not minimizing the occurrence of sexual abuse. Most are concerned with the authenticity of certain cases that, if allowed to proliferate, could deflect effort away from identifying and reducing true cases of sexual abuse. Inappropriate reporting could jeopardize the reputation and the invaluable services offered by psychotherapists.

Granted, many claims of sexual abuse are valid, but as shown in Table 1 there are several possible scenarios for the reporting of sexual abuse (adapted from McHugh, 1995; 1996).

First, for any individual, sexual abuse may be historically true or false. Second, there may or may not be memories of sexual abuse. If there are memories of the abuse and historically the abuse is true, these people can be referred to as “hits.” If there are no memories of the abuse, and historically the sexual abuse is false, these people can be referred to as “unaffected.” If there are no memories, but historically the abuse is true, then these people can be said to have “forgotten” the abuse. If there are memories, but historically the abuse is not true, these people can be referred to as “false alarms” (McHugh, 1995; McHugh, 1996).

Table 1. Different scenarios leading to recall or the failure to recall having been a victim of sexual abuse.

Memories of Abuse	Historical Truth Based on Corroborating Evidence	
	Yes	No
Yes	Hit	False Alarm
No	Forgotten	Unaffected

It is the “false alarms” that researchers and some therapists are taking a hard look at these days in terms of authenticity. Their authenticity is doubted because originally there was no memory of abuse and after going to see a therapist for some other problem, and after regression therapy, group counseling, or the reading of popular psychology books, “repressed memories” are suddenly recalled.

Many journal articles have been written about this topic. Approximately 11 special editions of journals have devoted themselves to this issue. Various books have also been written. See Table 2 for a list of the most often cited books on this

very controversial topic.

Some books guide women (and some guide men) to diagnose their current problems by looking back at childhood memories—sexual abuse memories (e.g., see Bass and Davis, 1994; Blume, 1990; Frederickson, 1992; Herman, 1992; Lew, 1988; Maltz, 1991; Oksana, 1994; Smith and Pazder, 1980; Terr, 1994). Other books liken the repressed memories issue to the Salem Witch Trials noting that there is no scientific evidence supporting repression and that false memories of abuse are being implanted and integrated into people's true memories (e.g., Goldstein and Farmer, 1993; Gold-

stein, 1993; Ofshe and Watters, 1994; Loftus and Ketcham, 1994). Several of these authors are very concerned that there is no effort on the behalf of certain therapists (which is estimated at approximately 25% of all licensed therapists) to discern whether a person, who comes to remember being sexually abused, is truly a "hit" or a "false alarm." That is, the circumstances leading to the recall of the memory are completely irrelevant from some therapists' point of view.

A relatively recent book, *Victims of Memory: Incest Accusations and Shattered Lives*, will soon be added to this most often cited

list. This book contains:

- an overview of the repressed memory issue; reviews of the "believer" books and the "disbeliever" books; a review of and evaluation of the literature on memory, repression, infantile amnesia, and the biology of the brain.
- a description of the techniques often associated with regression therapy including hypnosis, dreams, body memories, and flashbacks.
- additional information about the explosion of MPD diagnoses and the evidence for satanic cults.
- cases of and information about a closely related phenomena whereby through suggestive questioning and the like, children are led to believe they have been sexually abused.
- a brief history of the witch craze, reflex arcs, and Freud's legacy. Historical information that, according to the author, show how women have always been the prey of the medical profession.
- an explanation of why this explosion of repressed memory claims is happening.
- an explanation of how and why the author believes this phenomena has become a "religion".
- a discussion about the scope of the problem and how the psychology field has reacted along with suggestions for how we should deal with this "crisis" by making legal changes and by working to reconcile issues between the accused and the accusers.

The author, Mark Pendergrast, an investigative reporter, and him-

Table 2. The Most Often Cited Books by "Believers" and "Disbelievers"

Book title	Author	Year of Publication
Michelle Remembers*	M. Smith and L. Pazder	1980
Victims No Longer*	M. Lew	1988
Survivors*	S. Blume	1990
The Sexual healing Journey: A Guide for Survivors of Sexual Abuse*	W. Maltz	1991
Trauma and Recovery*	J. Herman	1992
Repressed Memories: A Journey to Recovery from Sexual Abuse	R. . Fredrickson	1992
True Stories of False Memories	E. Goldstein and K. Farmer	1993
Confabulations	E. Goldstein	1993
The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse (3rd ed.)*	E. Bass and L. Davis	1994
Unchained Memories: True Stories of Traumatic Memories, Lost and Found*	L. Terr	1994
Safe Passage to Healing: A Guide for Survivors of Ritual Abuse	C. Oksana	1984
Making Monsters: False Memories, Psychotherapy, and Sexual Hysteria	R. Ofshe and E. Watters	1994
The Myth of Repressed Memory: False Memories and Allegations of Sexual Abuse	E. Loftus and K. Ketcham	1994

* Books by "believers"

self an accused parent has clearly and comprehensively reviewed the relevant scientific and anecdotal literature surrounding both sides of this very polemic and emotional topic. The author does not, at any time, undermine the tragic plight of real victims of sexual abuse.

Besides being very well researched and scholarly, *Victims of Memory* is personal and intimate. It details the devastation that this issue has on families. Pendergrast describes his own story in Chapter 2 and includes a letter to his two children in the epilogue. He also describes various interviews with accused individuals and retractors about their cases and how these claims have affected their lives. He describes his interviews with practicing repressed memory therapists about their practices and beliefs, and he also details discussions with “survivors” about their cases and their memories.

For some readers, in addition to the scientific literature, such personal accounts are necessary for understanding. For example, one of my students commented after hearing, in person, about the experiences of a panel of allegedly falsely accused parents:

The greatest and simplest revelation came to me gradually as the panel spoke of their experiences. What I realized was that this falsely accused panel was made up of living, breathing people and that these people had lives and feelings and were more than just a statistic in a case study. This made me realize that there are two sides to every issue, even in cases as horrible as child abuse. Not that I wasn't aware of this fact before, but I can honestly say that I believed all cases of reported child abuse to be true.

This probably seems to be a rather simplistic revelation but it is one that I feel many people must experience in order to see through the blinders that accompany accusations of acts as heinous as child abuse.

Victims of Memory appeals to a wide audience. It is excellent for anyone (e.g., accusers, the accused, therapists, the general population, attorneys and other professionals) who would like to learn more about the phenomena of repressed memories, its history and its impact. It is especially appealing material for academicians who would like to include this very applied psychological issue in their courses.

If you are concerned about the scholarship of the book or about it being a plea for innocence because it is written by an accused father, look for the next edition due out this summer. While the second edition is longer (640 pages), Mr. Pendergrast's personal account in chapter 2 and the epilogue containing the letter to his daughters has been removed. In its place, the author has added his perceptions from speeches around the country. He has added information about Christian counselors. An advice section has been added for returnees (those who do not take back their allegations, yet return to their families). A section has been added on how to tell real from illusory incest memories. An appendix has been added that includes 30 points posited as “myths” and “realities.”

Similar to other books on this issue, *Victims of Memory*, leaves you feeling like you are either a “believer” or a “disbeliever.” Recalling the reiterations and cries of an accused father at a recent conference, “the two sides don't seem to be coming to any agreement.” Even the APA Working Group on the

Investigation of Memories of Childhood Sexual Abuse have not come to any agreement on this issue. While there is general agreement that sexual abuse is a large problem and that memory is indeed fallible, the APA Working Group seems to attribute this disagreement to epistemological differences of what constitutes evidence of repression (FMS Newsletter). In other words, we are epistemologically separated and until we agree epistemologically what science is—we can not hope to combat this problem.

While agreeing on what science is may be long in coming, we should work to find out more about these potential “false alarms.” For example, why don't we focus our energy on collecting data (not anecdotal data) showing whether or not patients are being helped by uncovering these “repressed” memories? Of course such a study would involve collecting detailed histories of patients prior to entering therapy and at several points during therapy. The study might include pre and post test measures variables such as mental and physical condition and family relations.

This book is a passionate cry for the two sides of this polemic issue to come to some understanding and agreement. The material is presented in a way that does not demonize therapists or undermine sexual abuse problems, rather the discussion begs for a meeting of the minds, a more scientific approach to exploring this problem and to the therapeutic process of uncovering repression. After reading this book you will realize ever more fully that there are many victims of memory as a result of this relatively recent phenomena—the accuser, the accused, extended family and friends, and the psychological profession—and the effects are devastating to them all.

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