



Dear Friends,

“Memories fade, and witnesses can die or disappear. Such problems can plague child abuse cases, where recollection after so many years may be uncertain, and ‘recovered’ memories faulty, but may nonetheless lead to prosecutions that destroy families. Regardless, a constitutional principal must apply not only in child-abuse cases, but in every criminal case.”

Justice Breyer in opinion for Stogner v. California, U.S. Supreme Court, June 26, 2003

The specific mention of “recovered memories” by the U.S. Supreme Court in Stogner v California is ample evidence of the shift of opinion about the reliability of such memories that has occurred in the past decade. (See p. 7)

In overly simple terms, the State of California sought to remove the criminal statute of limitations retroactively in child sex abuse cases because of the heinous nature of such crimes. The U.S. Supreme Court said that they may not do that. In response to the decision, some people who believed that they had been abused in the past, but who had not filed actions in a timely way, were very angry. Indeed, some individuals whose guilt seemed highly likely will not be prosecuted. Tensions such as this, however, are to be expected in a democracy based on a system of laws and the balance of power. Life may not always be fair, and the past may be ambiguous.

More evidence of the welcome shift in thinking about recovered memory and the diagnosis and treatment of adults who may have been sexually abused appeared in the summer issue of the *Psychotherapy Networker*⁽¹⁾ whose cover featured: “Beyond victimhood: Psychotherapy enters a new era.” In his editorial, Richard Simon, Ph.D., noted:

“[The] polarization reached its zenith (or nadir) during the vitriolic debate over recovered memories of sexual abuse during the early ‘90s. Survivors regarded therapists as their best friends and saviors. The only ones who believed their stories and would help them recover. But an indignant chorus of critical voices—notably the False Memory Syndrome Foundation—accused therapists of manipulating clients into manufacturing their own abuse histories and creating a cul-

ture of victimhood.”

“[T]oday, a dozen years down the line, therapists and the recovery movement itself have grown wiser about the perils of perpetually reexperiencing old injuries. We now know that the self-defined identity of survivor—necessary early in the recovery process—can become a straitjacket if maintained too long. Nobody knows this better than Laura Davis, coauthor of *The Courage to Heal*—the bible of the recovery-movement—who’s profiled in this issue. As Davis puts it, “Eventually identifying only as a survivor is like wearing a sweater that is too small, and you need to take it off, to stand up and say, ‘I’m responsible for my own life, for what I do and who I am.’”

Senior *Networker* editor Mary Sykes Wylie wrote about Laura Davis:

“Davis was curious. ‘I ask my mother what finally enabled her to accept ‘the elephant in the room’—the fact that I am sure her father abused me and she is sure he did not.’ Hesitantly, her mother replied that FMSF literature enabled her to see her daughter not as her willful tormenter; but as a person ‘under the influence of people who had convinced you that these memories were true. That helped me stop feeling that I had to protect myself and my family against you.’ Davis receives this somewhat startling confession with good grace, saying ‘That’s amazing: The False Memory Syndrome Foundation helped you make peace with me!’”

Dusty Miller, Ed.D., a therapist and another *Networker* author openly questioned past recovered memory practices in her article.

“[W]hen the False Memory Syndrome Foundation burst on the scene in 1992....I felt ambivalent. On the one hand, they represented such a backlash. On the other hand, as I quietly said behind closed doors, they had a point. We were walking

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The next issue will be November/December 2003

into dense fog where it was hard to tell what was real and what wasn't. Given the way I hadn't been believed myself for so many decades, I wanted the story told by victims about their victimizer to be always simple and always true. It wasn't turning out that way. Yet it was almost taboo among us to admit that much of what we were doing wasn't working. Anyone who criticized therapeutic practice risked being identified with the FMSF, whose members were presumed to all be Abusers and Non-Protecting Bystanders. A new elephant had entered the consulting room and we were in denial all over again."

The *Networker* change in perspective is remarkable and encouraging. Cultural change tends to be slow, a person at a time. We shouldn't be surprised, therefore, that we can still find people who believe in things for which there is no evidence such as satanic ritual abuse (SRA). What is changing is that those who cling to such beliefs are found increasingly away from the mainstream. *The Healing of Satanically Ritually Abused Multiple Personality Disorder*,^[2] a recently published book is an example. It was published by 1st Books Library, a "vanity press," that is, a publishing house that publishes books at the author's expense. We are not aware of any new books promoting belief in satanic ritual abuse published by a mainstream publisher in many years. The topic has been thoroughly debunked and marginalized by informed, serious writers and scientists such as Goodman, et. al. who examined over 1,300 claims of SRA only to find there was no evidence to support any of them.^[3]

Conferences about or including sessions on SRA can still be found, but they seem more self-validating gatherings than scholarly meetings. In August, for example, the "Sixth Annual Ritual Abuse, Secretive Organizations and Mind Control Conference" sponsored by S.M.A.R.T. (Survivors of Masonic and Ritual Torture) was held near Hartford, Connecticut. Most of the speakers were described as survivors of this kind of abuse. In September, the group

"There can be few allegations that have caused greater controversy, and greater suffering, in America and Britain in recent years than the assertions that secret devil-worshipping cults are widespread, that children are being sexually abused and/or murdered as part of their rituals, and that the 'recovered memories' of such events elicited by self-appointed therapists are valid. The disruption to families, and the pain and injustice to individuals, has been horrendous; the cliché of the "witch-hunt" has often been all too accurate. . . This is one of the situations (racism is another) where a scholar has the moral obligation not to adopt a stance of detached impartiality; the beliefs he/she is observing are not only factually erroneous, but socially destructive, and this needs to be said."

Simpson, J. (2003, April) Book review. *Folklore*, pp. 123-124. (Review of Ellis, B. (2000). *Raising the devil: Satanism, new religion, and the media*. Lexington: University Press of Kentucky.)

"Survivorship" will hold a "West Coast Conference on Ritualistic Abuse" in Oakland, California. Again, most presenters are described as survivors of SRA.

Some of the same SRA-conspiracy theory groups that list the above conferences in their calendars also list the "8th International Conference on Family Violence" in San Diego, California in September.^[4] We wrote extensively about last year's conference because the inclusion of two sessions on SRA in a meeting generally concerned with real issues of family violence gave credence to nonsense. (See *FMSF Newsletter*, 11(5)) Unfortunately, almost identical SRA presentations are offered again this year. But there is a difference. The names found on the conference "Platinum" co-sponsors list last year included the California Department of Social Services and the California Department of Health Services. This year, most of the government co-sponsors are gone from the program brochure. The single Platinum co-sponsor is a private business. We interpret that change as mainstream institutions distancing themselves from discredited beliefs.

There is still plenty of work to be done, but the climate in which we now work is changing for the better. Your letters and other efforts have helped bring about that change, but your letters and support are still vitally needed to keep that change on track. Thank you for all that you do.

Pamela

1. Simon, R. (2003, July/August). Editorial. *Psychotherapy Networker*, Vol. 27 (4). p. 2. (Formerly *Family Therapy Networker*)
In the same issue:
Wylie, M.S. You can go home again. p. 36-43.
Miller, D. The end of innocence. p. 24-33.
2. Meehan, C. (2003, July 13). Book details satanic ritual abuse. *Star-Ledger*. (Review of Clark, J. (2003). *The healing of satanically ritually abused multiple personality disorder*. 1st Books Library.
3. Goodman, G., Qin, J., Bottoms, B.L. & Shaver, P.R. (1994). *Characteristics and sources of allegations of ritualistic child abuse*. Washington, DC: National Center on Child Abuse and Neglect.
4. "The Masks of Ritual Abuse Trauma. Jeanne Adams, B.S., Deborah Smith Parker, B.S., Karen Hawthorn, Ph.D., MFT, Cannon Lee B. Teed, M.A. M.Div., MFT, James Ewing Ph.D. and Anne Hart, M.S. . . . Ritualistic abuse is so beyond expected human behavior that people struggle to understand it....[E]xpand participants' current knowledge to better identify and assist survivors of ritualistic abuse in advocacy or counseling."
"Psychotherapy with Ritual Abuse Survivors: Obstacles and Solutions. Ellen P. Lacter, Ph.D., and Mary Battles, M.S. This workshop provides an understanding of ritual abuse practices, dissociative responses in victims, assessment and recognition of ritual abuse trauma, typical obstacles and special considerations in therapy....."

special thanks

We extend a very special "Thank you" to all of the people who help prepare the FMSF Newsletter. *Editorial Support:* Janet Fetkewicz, Howard Fishman, Peter Freyd, Members of the FMSF Scientific Advisory Board and Members who wish to remain anonymous. *Letters and information:* Our Readers.

Young Researcher Creates Storm of Controversy

Grierson, B. (2003, July 27). A bad trip down memory lane. *New York Times Magazine*, pp. 36-39.

"It is not considered good judgment to wade into the issue of recovered memories without skin as thick as permafrost and Caller ID on the phone."

Thus begins "A Bad Trip Down Memory Lane." It seems a particularly relevant comment when considering that this is the first time that the *New York Times Magazine* has tackled the topic of "recovered memories." Perhaps the uproar caused by Carol Tavris's January 7, 1993, excellent breakthrough article "Beware the Incest Recovery Machine" in the *New York Times Book Review*, scared the *New York Times Magazine* away from an in-depth analysis of the recovered memory controversy until now when the scientific research results so clearly support the unreliability of recovered memories.

Ostensibly, Bruce Grierson's article focuses on the travails of Harvard graduate student Susan Clancy after she stepped into the churning waters of the memory wars. Harvard has been home to leading figures in both sides of the recovered-memory controversy. Harvard professors Richard McNally, Harrison Pope, Jr., and Daniel Schacter, for example, have presented research to support skepticism about the reliability of recovered memories. Harvard-affiliated clinicians Daniel Brown, Judith Herman, and Bessel van der Kolk, (no longer at Harvard), on the other hand, have been influential in supporting the belief that trauma causes people to repress or dissociate memories that can then be reliably recovered.

In fact, Grierson's article provides an insightful snapshot of the personal attacks made by believers in recovered memories in lieu of presenting scientific evidence. Susan Clancy became a

graduate student in the Harvard psychology department eight years ago. Aware of the recovered-memory controversy, she observed "You had two groups in opposite camps that were battling each other out, but nobody was doing research on the group that was at the center of the controversy—the people who were reporting recovered memories. Memory function in that group had never been examined in the laboratory." Susan, with professors Richard McNally, a clinical psychologist, and Daniel Schacter, a cognitive psychologist, set out to remedy that situation.

In a series of experiments extending over seven years, Clancy et al. delved into the memory functions and cognitive psychology of people who believed that they had recovered memories of long-past abuse. The researchers hypothesized that there was a category of people who were prone to creating false memories. When they discovered that this seemed to be the case, critics noted that even if people who believed that they had recovered memories were prone to fictionalizing memories of abuse, that did not prove that their specific memories of abuse were false.^[1]

In the next experiment, the researchers added a group of people who had always remembered their abuse experience. The original findings held up, but critics now said that the traumas that the recovered-memory group had experienced could have been so horrific that they not only repressed the memories but they also suffered cognitive impairment. That could account for the discrepant results.

Clancy et al. then studied people who believed that they remembered being abducted by space aliens, feeling confident that abductee experiences were highly unlikely and that such memories were almost certainly false. Again, the original findings were upheld.

The people who believed that they had been abducted by space aliens generally did not claim that their memories had been repressed out of self-protection. The reason these people gave for having no memories of such terrifying events for many years or decades was that the aliens had erased the memories or held some sort of mental control over them.

The research with people who believed they had been abducted led Dr. Clancy to conclude: "Memory's tendency to be reconstructive, combined with the desire to believe, combined with a culturally available script, leads to a false memory. The content of that memory is dictated by the society you live in."

When Clancy started her research, she thought that she might mend some fences in the memory wars by partly vindicating the positions of both sides in the memory debate. That did not happen. Scientific research does not necessarily produce results that please everyone. Instead Clancy has upset lots of people: sexual-abuse survivors, therapists, experiencers, even a creationist or two.

John Mack, M.D., the Harvard academic who uses hypnosis to help people access their memories of alien abductions, met Clancy's abduction study with derision. According to Grierson, "The campaign to discredit Clancy began in earnest" after that study. She has been threatened that ethics charges would be brought against her. Hate mail has arrived by "the ton." One anonymous writer complained that her research was "designed to cheer on child molesters and ridicules the suffering sustained by children who are abused as well as therapists who are knowledgeable about the effects of trauma on children's minds and bodies." Another letter said that she was a "bad person." Yet another even suggested that she was probably an abuser herself.

Clancy's controversial research

also has affected her prospects for future employment. It is unlikely that she would be welcomed into most clinical departments, (the same is not true of cognitive departments). For the immediate future, Clancy will be a visiting professor at the Harvard-affiliated Central American Business Administration Institute in Managua, Nicaragua. She will continue to study how trauma affects people, but it will be trauma resulting from diseases, hurricanes, and land mines. Clancy said that she expects to do a bit of research on abductees while there because “supposedly it’s extremely common throughout Central America.”

1. For more information about the research of Susan Clancy see *FMSF Newsletters Vol 9(6)* Cognitive processing of trauma cues in adults reporting repressed, recovered, or continuous memories of childhood sexual abuse; Vol. 10(3) Directed forgetting of trauma cues in adults reporting repressed or recovered memories of childhood sexual abuse and Personality profiles, dissociation, and absorption in women reporting repressed, recovered, or continuous memories of childhood sexual abuse; Vol 11(5) Memory distortion in people reporting abduction by aliens.

□

Highly Recommended Book Distinguishes Scientifically Supported Practices from ‘Junk Science’ in Clinical Psychology

Science and pseudoscience in clinical psychology. Lilienfeld, S.O, Lynn, S.J. & Lohr, J.M. (Eds.) (2003).
New York: Guilford.

Reviewed by Howard Fishman

This text is an invaluable and welcome addition to the growing professional literature that aims to expose the irrational and misguided underpinnings of much of the psychotherapy enterprise. It richly deserves to be placed alongside Robyn Dawes’ *House of Cards: Psychology and Psychotherapy Built on Myth* (Free Press, 1994) and Richard McNally’s authoritative debunking of recovered memory therapy, *Remembering Trauma* (Belknap, 2003). [See insert

below for other recommended readings.]

Scott O. Lilienfeld and coeditors Steven Lynn and Jeffrey Lohr* state that the central purpose of this important book is “to subject a variety of therapeutic, assessment, and diagnostic techniques in clinical psychology to incisive but impartial scientific scrutiny.” They point to the growth of information resources including the Internet, the increasing number of mental health training programs that do not emphasize scientific training, and the “burgeoning industry of fringe psychotherapies” as factors that have expanded the gap between scientists and clinicians. That gap, they assert, has reached such proportions that there is a critical need to apply careful scientific evaluation to new and controversial therapies.

In a compelling foreword, social psychologist Carol Tavris documents the widening scientist-practitioner gap. She notes that the divergence in goals and training was present at the conception of psychology. Empirically minded psychologists chafed at the idea that psychoanalysts did science since they did not adhere to scientific methods. As the popularity of psychoanalysis began to wane in the 1960s and 1970s, an avalanche of new therapies emerged (e.g., primal-scream therapy, nude therapy, encounter therapy, electric sleep therapy, body-image therapy, “art of living” therapy, marathon therapy, and other New Age concoctions) that

were equally devoid of scientific support.

Many of us would likely find it difficult to discuss these “innovative” therapies with the admirable dispassion and objectivity displayed by the 37 contributors to this volume. The 16 chapters address a variety of topics including bogus assessment and diagnostic protocols, pseudoscientific courtroom testimony, controversial techniques for uncovering “repressed” memories and treating trauma-related stress disorders, alcoholism, attention-deficit/hyperactivity disorder, and autism. A concluding section focuses on self-help therapy, the commercialization of mental health issues, media sensationalism, and a thoughtful essay on constructive remedies for the many ills that have infected the mental health industry.

Although not explicitly mentioned by the editors, it is noteworthy that virtually all of these issues have been prominent in the wave of child-abuse hysteria that has fueled the most virulent anti-family policies in our nation’s history. A deluge of false accusations has resulted in the arrest—and, too often, incarceration—of countless innocent people. Millions of respectable and law-abiding families are subjected to abusive investigations annually, and more than 600,000 children are currently in state care as a result of the pseudoscientific ideology exposed so effectively by these authors.

The publication of this book is destined to become a notable milestone on the path to achieving the kinds of reforms long advocated by the False Memory Syndrome Foundation. It uncovers the misleading and self-serving rhetoric of an industry that has run amok and caused incalculable harm to both clients and their loved ones. I recommend it highly to families and urge its inclusion as required reading in every clinical training program for aspiring physicians, psychologists, and

In A Trade Magazine for Nurses

“Mounting anecdotal evidence suggests that transplant recipients may be able to inherit memories, preferences and emotional traits from their donors. Transplanted organs may carry memories some researchers say.”

Dison, M.E. (2003, July 9).

Transplanted memories.

Advance for Nurses.

(A biweekly trade publication.)

social workers.

*Scott Lilienfeld is founder and editor of a new journal, *The Scientific Review of Mental Health Practice*, and serves as Associate Professor of Psychology at Emory University. Steven Jay Lynn and Jeffrey M. Lohr are licensed clinical psychologists in addition to being professors of psychology, Lynn at SUNY-Binghamton and Lohr at the University of Arkansas.

Other Suggested Reading:

Dawes, R. (2001). *Everyday irrationality: How pseudo-scientists, lunatics, and the rest of us systematically fail to think rationally*. Boulder, CO: Westview Press.

Dineen, T. (1998). *Manufacturing victims*. 2nd. ed. Montreal, ON: Robert Davies.

Pendergrast, M. (1995). *Victims of memory: Incest accusations and shattered lives*. Hinesburg, VT: Upper Access Books.

Pope, H. (1997). *Psychology astray: Fallacies in studies of "repressed memory" and childhood trauma*. Boca Raton, FL: Upton.

Sagan, C. (1996). *The demon-haunted world: Science as a candle in the dark*. New York: Random House.



Risks of Memory Recovery Techniques

Lynn, S.J., Loftus, E.F, Lilienfeld, S.O. & Lock, T. (2003, July/August). Memory recovery techniques in psychotherapy: Problems and pitfalls.

Skeptical Inquirer 27(4), 40-46.

Adapted from chapter in Lilienfeld, S.O, Lynn, S.J. & Lohr, J.M., (Eds.) (2003). *Science and pseudoscience in clinical psychology*. New: York Guilford.

"Risks of Memory Recovery Techniques" was adapted from a chapter with the same name in *Science and Pseudoscience in Clinical Psychology*, edited by S.O. Lilienfeld et al.(2003). The chapter summarizes the risks involved in using certain techniques in an effort to recover memories. The authors are careful to note that the techniques themselves are not inherently problematic; it is their misuse based on the belief that they will excavate historically accurate memories that is questionable.

Lynn et al. comment: "There is no empirically supported psychotherapy

that relies on the recovery of traumatic memories to achieve a positive therapeutic outcome." The authors quote Adshead (1997)^[1] who "argued that if memory work with trauma patients is not effective, then 'it would therefore be just as unethical to use memory work for patients who could not use it or benefit by it, as it would be to prescribe the wrong medication, or employ a useless surgical technique.'"

In spite of the lack of evidence for the effectiveness or benefits of memory recovery techniques, and in spite of the evidence that the use of these techniques has caused great harm in some situations, the authors remind readers of the frequency with which they are used by therapists. A 1995 survey by Poole, Lindsay, Memon and Bull^[2], for example, "reported that 25 percent of licensed doctoral level psychologists surveyed in the United States and Great Britain indicated that they (a) use two or more techniques such as hypnosis and guided imagery to help patients recall repressed memories; (b) considered memory recovery an important part of treatment; and (c) can identify patients with repressed or unavailable memories as early as the first session."

The authors list the most commonly used memory recovery techniques and cite the research evidence that points to problems with using those techniques.

Guided Imagery: People may confuse real and imagined memories, especially with memories that are "hazy or unavailable." However, 32 percent of U.S. therapists report using "imagery related to the abuse."

Suggesting False Memories: Studies have shown that 20-25 percent of subjects report experiencing fictitious events that are suggested.

Hypnosis: The authors summarize the find-

"[W]e compose the past in the present as much as we compose ourselves." Lobe, C., (2002, December). *Manitoba Mosaic* p.17.

ings on hypnosis:

- Hypnosis increases volume of recall, resulting in both more incorrect and correct information. When the number of responses is statistically controlled, hypnotic recall is no more accurate than non-hypnotic recall.

- Hypnosis results in more recall errors and higher levels of memories for false information.

- False memories are associated with subjects' levels of hypnotic suggestibility, but even non-suggestible participants report false memories.

- Hypnotized persons sometimes exhibit less accurate recall in response to misleading questions compared with nonhypnotized participants.

- Hypnotized people are more confident about their recall accuracy than nonhypnotized people.

- Even when they are warned about the possibility of memory problems associated with hypnosis, people still report false memories during and after hypnosis.

- Hypnosis does not improve recall of emotionally arousing events.

- Hypnosis does not necessarily produce more false memories or unwarranted confidence than highly suggestive nonhypnotic procedures: "Simply asking participants to focus on the task at hand and to do their best to recall specific events yields accurate recall comparable to hypnosis, but with fewer or comparable recall errors."

These principles are well established. Even so, Yapko found in 1994^[3] that 47 percent of a professional sample had greater faith in the accuracy of hypnotic memories than nonhypnotic ones.

Searching for Early Memories: The authors note that "virtually all contemporary memory researchers agree that accurate memory reports of events that occur before 24 months of age are extremely rare."

Age-regression: Age-regressed subjects behave according to situational cues and their knowledge and beliefs about age-relevant behavior.

Hypnotic Age-regression: Subjects who have undergone hypnotic age-regression are particularly susceptible to suggestion.

Past-Life Regression: Hypnotically induced past-life experiences are fantasies constructed from available cultural narra-

tives about past lives and known or surmised facts regarding specific historical periods, as well as cues present in the hypnotic situation.

Symptom Interpretation: Although there may be numerous psychological correlates of sexual abuse, no known constellation of specific symptoms, let alone diagnosis, is indicative of a history of abuse.

Bogus Personality Interpretation: Personality interpretation can create highly implausible or false memories.

Dream Interpretation: No data exist to support the idea that dreams can be interpreted as indicative of a history of child abuse. Dreams reflect the residues of the day's events or the day's concerns.

Bibliotherapy: Reading material and psychological symptom interpretation can dramatically increase the plausibility of an initially implausible memory.

The authors hypothesize that the following factors contribute to the plausibility imagined abuse stories may achieve:

- the prevalent belief that abuse and psychopathology are associated;
- the therapist's support for or suggestion of this interpretation;
- the failure to consider alternative explanations for everyday problems;
- the search for confirmatory data;
- the use of suggestive memory recovery techniques that increase the plausibility of abuse and yield remembrances consistent with the assumption that abuse occurred;
- increasing commitment to the narrative on the part of the client and therapist, escalating dependence on the therapist, and anxiety reduction associated with ambiguity reduction;
- the encouragement of a "conversion" or "coming out" experience by the therapist or supportive community (e.g., therapy group), which solidifies the role of "abuse victim" and which is accompanied by reinforcing feelings of empowerment; and
- the narrative's provision of continuity to the past and the future, as well as a sense of comfort and identity.

Lynn et al. conclude that it is indisputable that "certain suggestive therapeutic practices can foster false memories in some clients."

1. Adshhead, G. (1997). Seekers after truth: Ethical issues raised by the discussion of "false" and "recovered" memories. In J.D. Read & D.S. Lindsay (Eds.), *Recollections of trauma: Scientific evidence and clinical practice*. New York: Plenum Press, pp. 435-439.

2. Poole, D.A., Lindsay, D.S., Memon, A. & Bull, R. (1995). Psychotherapists' opinions, practices, and experiences with recovery of memories of incestuous abuse. *Journal of Consulting and Clinical Psychology*, 68, pp. 426-437.

3. Yapko, M. (1994). *Suggestions of abuse*. New York: Simon & Schuster.



Intense Emotion Preserves Memories

McGaugh, J.L. (2003). *Memory and emotion: The making of lasting memories*. New York: Columbia University Press.

James McGaugh, one of the world's leading researchers on the brain mechanisms of emotion and memory, tells the following story in the preface to this entertaining and highly informative book.

"In medieval times, before writing was used to keep historical records, other means had to be found to maintain records of important events, such as the granting of land to a township, an important wedding or negotiations between powerful families. To accomplish this, a young child about seven years old was selected, instructed to observe the proceedings carefully, and then thrown into a river. In this way, it was said, the memory of the event would be impressed on the child and the record of the event maintained for the child's lifetime."

The story highlights the fact that people have known for a long time that memories of highly emotional events are likely to be remembered longer than other memories. In *Memory and Emotion*, McGaugh, who has been in the forefront of research into the neurobiology of learning, explains why this is the case.

Moving from accounts of the first research into how memory works to contemporary studies of the effects of drugs on memory consolidation, McGaugh peppers the book with

delightful stories that serve to prepare the general reader for theoretical explanations. It works. Anyone who is curious about what memory is, how it works, and what is known about memory, emotion, and amnesia will find this book of interest.

This book adds to the extensive body of scientific literature that speaks to claims of recovered repressed memories. McGaugh writes:

"As there is no scientifically accepted evidence that strong emotional memories (or any memories, for that matter) can be 'repressed' and subsequently 'recovered', such claims are, at best, of very dubious validity. Moreover, the extensive evidence that false memories can be created by suggestions provides a compelling explanation of the origin of the claims."

"One of the most important findings of researchers is that memory, this thing we consider so firm, is really highly malleable. It is perpetually shifting. So memory to begin with is an imperfect reflection of what is, or was.

"And people can actually invent memories of events that never happened, because the exact same centers of the brain that get activated by perception, that is, by actually witnessing something, also get activated by imagination. So if we generate images, or are fed images, of an event we never personally experienced firsthand, they get recorded in our brain cells as if they were real.

Helping this process along is the fact that we remember the content of memories — but not what the source of that memory is. As time passes, we tend to forget how we know something; we just know that we know it."

Marano, H. (2003, May 27). When memory fails. *Psychology Today*.

Retrieved from www.psychologytoday.com/htdocs/prod/PTOArticle/PTO-20030527-000013.asp on 8/17/2003.

U.S. Supreme Court Bans Retroactive Erasure of Statute of Limitations

Stogner v. California, No. 01-1757. U.S. Sup. Ct. (Certiorari Cal. Ct. App. 1st Ap. Div.) Decided June 26, 2003.

On June 26, 2003, the U. S. Supreme Court ruled in a 5-4 decision that states cannot retroactively erase statutes of limitations. The decision struck down a 1993 California law that authorized prosecutions of sex-related child abuse at any time—even if the statute of limitation had previously barred prosecution. California was the only state with such a law. The ruling does not affect sex-abuse prosecutions for more recent crimes. It also does not affect civil damage lawsuits, although lawyers in those cases could make similar arguments.

Statute of limitations laws help ensure that laws are enforced fairly and consistently. They are a check against government persecution because without them government officials could target enemies for past acts and add stiffer penalties. The Supreme Court has held that the Constitution bars ex post facto prosecution since 1798. Donald Steier, a California defense attorney quoted in *Los Angeles Times* about the California law, stated “Never before has a state attempted to go back in time to resurrect criminal charges that were never reported, never investigated, and never brought to court in a timely manner.”^[1]

Justice Breyer delivered the opinion of the court, joined by Justices Stevens, O’Connor, Souter, and Ginsburg. They argued that the ex post facto clause in the Constitution prevents retroactive prosecution. They wrote “long ago the Court pointed out that the clause protects liberty by preventing governments from enacting statutes with ‘manifestly unjust and oppressive’ retroactive effects.”

The decision also addressed the problem of evidence by noting “Memories fade, and witnesses can die or disappear. Such problems can plague child abuse cases, where recollection after so many years may be uncertain, and ‘recovered’ memories faulty, but may nonetheless lead to prosecutions that destroy families.^[2] Regardless, a constitutional principal must apply not only in child-abuse cases, but in every criminal case.”

In the case before the Court, Marion Stogner had been accused in 1998 of molesting his two daughters more than 30 years earlier when the statute of limitation for sexual assault was three years. Stogner, a veteran of the Korean War, was retired. The case came to light when the police were investigating claims that his sons had molested their children and others. The sons were convicted. During the

investigation, Stogner’s two daughters told police that their father had molested them when they were younger than 5 years old and that it had continued for a long time.

The Stogner case had not gone to trial. Mr. Stogner’s lawyers contested the prosecution on Constitutional grounds and the California Supreme Court upheld the law. Stogner’s lawyers then appealed to the U.S. Supreme Court.

Dissenting were Chief Justice Rehnquist and Justices Kennedy, Scalia, and Thomas.

1. Winton, R., Guccione, J., & Weinstein, H. (2003, June 27). “Bans on gay sex ruled unconstitutional; California molestation law struck down. *Los Angeles Times*. p. 1.

2. Holdsworth, L. (1998). Is it repressed memory with delayed recall or is it false memory syndrome? The controversy and its potential legal implications. *22 Law & Psychol. Rev.* 103, pp. 103-104.

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Wisconsin Supreme Court Decides Mental Illness Tolls Statute of Limitations

Storm v. Legion Insurance Company^[1] No. 01-1139. Wisc. Sup. Ct. 2003 WI 120; 2003 Wis. LEXIS 620

In a unanimous decision issued on July 18, 2003, the Supreme Court of Wisconsin held that the statute of limitations did not bar Sheri Storm from suing her former psychiatrist Kenneth Olson, M.D.^[2] The court held that a person who is mentally ill at the time his or her cause of action for medical malpractice accrues may toll the limitations period. The court also stated that a factual finding is required to determine that a plaintiff’s mental illness caused him or her to fail to file a timely claim.

In January 1990, Kenneth Olson, M.D., began to provide psychiatric treatment to Storm. He diagnosed her as suffering from multiple personality disorder. The last date on which Olson treated her was August 3, 1992, after which he moved his practice out of Wisconsin.

Four days after the last session, Storm applied for Supplemental Security Income related to her mental disability. She also began to receive treatment from Valerie Hamilton, a social worker who had assisted Dr. Olson. The last session between Storm and Hamilton was September 9, 1992.

Storm then was treated by Drs. Joann Cooper and Marcelo Castillo between January 1993 and September 1993. These doctors also diagnosed Storm as suffering from multiple personality disorder.

On September 9, 1997, Storm filed a medical malpractice suit alleging that Drs. Olson and Cooper “negligently treated her by using hypnosis to recover memories of childhood sexual abuse that were later found to be untrue.” Dr. Castillo was added as a defendant in June 2000.

The defendants filed a motion for summary judgment in the fall of 2000 claiming that Storm’s action was time-barred. The Wisconsin statute prohibits the start of a medical malpractice action more than three years from the date

of injury or one year from the date of discovery of an injury. The date of discovery of an injury, however, may not be more than five years from the date of the act that caused the injury.

The circuit court granted the defendants' summary judgment motions in February 2001. Storm then appealed the decision.

The Wisconsin Supreme Court reversed the decision, concluding that a "person who is mentally ill at the time of his or her cause of action may toll the limitations period." The case was remanded to the trial court so that Storm could present evidence regarding whether she suffered from a functionally debilitating mental illness and, if so, when it began and when it ceased.

The court rejected Storm's argument that mental illness could be determined by either a professional diagnosis or receiving SSI benefits for mental disability. The court defined mental illness as "a mental condition that renders a person functionally unable to understand or appreciate the situation giving rise to the legal claim so that the person can assert legal rights or functionally unable to understand legal rights and appreciate the need to assert them." The court also noted:

"A person is functionally unable to appreciate the situation giving rise to the legal claim when the person is unable to make a rational assessment of his or her own circumstances. If a person does not realize that he or she is delusional or mentally unstable or does not understand and appreciate that he or she has been wronged, the person cannot be expected to protect his or her interests."

William Smoler and Pamela J. Smoler of Madison, Wisconsin, represented Sheri Storm. Patricia C. White of Bloomfield Hills, Michigan, and Virginia L. Newcomb of Madison represented Legion Insurance Company and Kenneth C. Olson, M.D. Michael J. Hogan and Ellen L. Wiesner of

Milwaukee, Wisconsin, represented Dr. Marcelo Castillo.

1. Legion Insurance Company — During the 1980s the American Psychiatric Association created the American Psychiatric Association Insurance Trust through which psychiatrists could obtain malpractice insurance. In 1988, Pennsylvania-based Legion Insurance Company became the insurer for the program, and in 2000 the APA sold the program to Legion. Legion Insurance provided coverage for over 7,600 members of the American Psychiatric Association.

Two years later Legion was downgraded in its rating, and the Pennsylvania Commonwealth Court placed Legion in rehabilitation. In short, the Pennsylvania Insurance Commission took control and managed Legion Insurance.

In July 2003, a Commonwealth of Pennsylvania court judge criticized the management of the company by the Pennsylvania Insurance Department and ordered them to liquidate the company. The liquidation order will free up money to pay thousands of delayed claims against Legion Insurance Company. It is not clear how this development will affect claims such as that in Strong v Legion Insurance.

DiStefano, J.N. (2003, June 30). Penna. liquidates insurer Legion. *Philadelphia Inquirer*. D-1.

2. Kenneth Olson, M.D. was a defendant in Cool v. Legion Insurance Co., Kenneth C. Olson, et al. Ms. Cool, whom Dr. Olson had diagnosed as suffering from multiple personalities, including one that was a duck, received \$2.4 million in an out-of-court settlement. See FMSF Newsletter, 6 (4), April 1997.

Ziemer, D. (2003, July 23). Mental illness can toll time to sue for med mal. *Wisconsin Law Journal*.

□

Kansas Appeals Court Tolls Time Limits in Retractor Case

Hall v. Miller, No. 86,049, 29 Kan. App. 2d 1066; 36P.3d 328; 2001 Kan. App. LEXIS 1161

Martha B. Hall was treated by Darrell Miller, a licensed clinical social worker from May 1984 through July 1994. Hall entered therapy with Miller at the recommendation of Sheridan Tucker, M.D. because of depression, ostensibly brought on by a bitter child custody dispute. Hall contends that Miller implanted false mem-

ories of satanic ritual abuse that are the cause of her present mental illness. She contends that in 1995 when she told Dr. Tucker she did not believe Miller was correct about the SRA, Dr. Tucker told her that "she had re-repressed her memories because she had stopped therapy."

Sometime in the first part of 1995, Hall read a magazine article about the False Memory Syndrome Foundation. When she called, she was referred to a local group and attended a meeting. At the meeting, Hall learned that other families were aware of Miller's reputation for advocating SRA.

Hall filed a lawsuit in July of 1996. The trial court decided that Hall had exceeded the statute of limitations and granted summary judgment to Miller and Tucker writing that by January of 1994, the plaintiff knew that she had not been in a satanic cult, was not a satanic abuse victim, was not a multiple personality and that her house was not inhabited by demons.

The Kansas Appeals Court reversed that decision. The Court determined that "when the fact of injury became reasonably ascertainable cannot be determined as a matter of law but rather should be submitted to the trier of fact for determination." Quoting Lujan V Mansmann (956 F. Supp. 1218 (E.D. Pa. 1997)) they added:

"The dynamics of the psychiatrist-patient relationship contribute to this finding. Patients do not immediately assume their treating psychiatrists are perpetrating tortious acts through harmful and psychologically damaging treatment. Instead, patients are reluctant to either impute ulterior motives to the advice of the psychiatrist or automatically question the propriety of the psychiatrist's treatment"

□

New Jersey Permanently Revokes License of Social Worker

On June 19, 2003, New Jersey Judge Kenneth Levy ordered that

social worker Dorothy Neddermeyer must permanently refrain from practicing in New Jersey. In addition to a fine, Neddermeyer must send letters to clients stating that she is not licensed or certified to engage in social work, counseling, or therapy. She must also pay restitution to all clients she saw after April 1, 2002, and change her Web site.

The specific charge against Neddermeyer was that she had been practicing social work without a license. In April 2002, Neddermeyer had voluntarily surrendered her license in an agreement with the State Board of Social Work Examiners because she was found guilty of engaging in inappropriate displays of affection with a client. The Board had also found that she had engaged in professional misconduct when she diagnosed and treated the client for multiple personality disorder (MPD) although her training in MPD was limited to some workshops at a three-day conference and doing independent reading on the subject.

In January and February 2002, Neddermeyer counseled two women during two therapy sessions. The women, who claimed to be suffering from low self-esteem, were actually investigators from the New Jersey Consumer Affairs Enforcement Division. Neddermeyer represented herself to the investigators as a specialist in depression, panic attacks, sexual and physical abuse recovery, co-dependency, self-esteem issues, and eating disorders. The business card that she gave to investigators listed her credentials as Ph.D., MSW, CSW, CCH, CRT, psychotherapist, and hypnotherapist.

Neddermeyer is the author of a 1995 book entitled *If I'd Only Known...Sexual Abuse In or Out of the Family: A Guide to Prevention*. She has spoken at the International Association for Regression Research and Therapies (formerly the

Association for Past Life Research and Therapies, Inc.).

New Jersey Attorney General Peter C. Harvey observed in a prepared statement: "We take a dim view of individuals who enter into agreements with us and flout them without any regard for state laws and the general public."

Berkin, G. S. (2003, June 20). South Orange social worker practiced with no license.

Star-Ledger.

Harvey, P.C. (2003, June 19). Judge permanently restrains revoked Essex County social worker from practicing without a license.

Press Release from New Jersey Department of Law and Public Safety, Division of Consumer Affairs.

□

New Jersey Appeals Court Holds Professionals Accountable Under Consumer Fraud Act

Macedo v. Dello Russo, No. A-4818-01T3, 359 N.S. Super. 78; 819 A.2d 5 (N.J. Super. 2003) March 27, 2003. LEXIS 112.

The New Jersey Court of Appeals has stated: "When professionals engage in common commercial activity designed to attract the patronage of the public, they should be held to the same standards of truth and completeness that govern the sales activities of all other persons or entities."

Plaintiff Joseph Macedo and others filed a class action complaint against licensed ophthalmologist Joseph Dello Russo, M.D., the New Jersey Eye Center, and William T. Kellogg, M.D., an employee of Dello Russo who was not a fully licensed physician at the time he treated the plaintiffs.

The plaintiffs invoked the Consumer Fraud Act. They allege that Russo et al. had represented that they would "be treated by properly licensed doctors, with no limitations on their licenses."

The complaint contains no allegations of physical injury but seeks "compensatory damages, punitive damages, attorneys fees, interest, [and]

costs" for "mental anguish, loss of enjoyment of life, medical bills, and economic damages." A trial judge held that the Consumer Fraud Act was inapplicable to "the practice of medicine as presented under the facts of this case."

The New Jersey Court of Appeals, however, noted: "There is no logical underpinning for a rule that permits professionals and their practice entities to evade the strictures of the Act simply because of their professional status." The decision is expected to be appealed.

In a press release about the Macedo decision¹, R. Christopher Barden, the founder of The National Association for Consumer Protection in Mental Health Practices, stated that this decision is a major victory for consumers of health care. "Deceptive practices by psychotherapists and other health care professionals (and lawyers) should be subject to consumer fraud laws," Barden said. He further noted that many deceptive trade practice/consumer fraud laws allow recovery for treble damages and attorney fees and that the New Jersey decision could "dramatically increase litigation oversight—and thus effective regulation—of the mental health industry."

1. Barden, R.C. Major victory for consumers of health care. Electronic mail press release. Received July 3, 2003.

□

"No prosecution under this subsection shall be based upon the memory of the victim that has been recovered through psychotherapy unless there is some evidence of the corpus delicti independent of such repressed memory."

Amendment to the Delaware Code relating to time limitations.

Enacted by the General Assembly of the State of Delaware, June 26, 2003.

After 15 Years!

(Reported in a phone call to the FMSF)

Last Friday I spoke with my daughter for the first time in 15 years. She actually called me on the telephone at 8 in the morning. The talk was strained and for most of it she sounded robot-like, but on a few occasions, she opened up and seemed like the person I once knew.

The call did not come out of the blue. The Sunday before this happened our pastor asked church members to tell what they wanted to see happen most in the world. I thought and thought and went back and forth. Did I dare to want contact with my daughter? Yes.

A few days later I called a relative who had reconnected with my daughter and asked her if she thought that I should phone. My relative said, "I'll see how she feels." She called me back the next day and said that my daughter was open to the call. I phoned on a Thursday evening but only got the answering machine on which I left a message. My daughter returned my call the next morning.

My daughter lives far away from any family and has recently been divorced. Perhaps she is a bit lonely for family contact. It's difficult to know what to do or how much to hope. As others have described, it's like walking on eggshells. I asked my relative how long it had taken her to become comfortable with my daughter and not feel strained during conversations. She said that it took about six months before she felt there could be normal back and forth of ideas. Obviously trust needs to be rebuilt after no contact for such a long time.

I don't think I will follow up with a phone call but I have written. During our talk, my daughter had mentioned a trip that she was taking, and I was able

to tell her that her father had grown up in that location. I found some pictures and sent them to her with a note saying that I felt a dream had come true.

At this time I don't know if the contact is going to go anywhere. But I thought that FMSF newsletter readers would be interested in learning about a contact that happened after so many years.

A Mom

□

Different Expectations

It has been over 10 years since we have had any contact with our daughter. I have come to believe that she is permanently lost. My husband, on the other hand, still has hopes. I often wonder if other families have such different expectations.

A Mom

□

Never Give Up

Sixteen people from our Colorado group gathered recently. We welcomed a newly accused, heartbroken couple from Denver to whom we gave understanding, friendship, and encouragement (such as it is). We also worked jointly on efforts that many of us have been making as individuals.

The on-going wish of our group has been to try to encourage a large church body or media organization to bring to the fore the evil of false, shameful, and criminal accusations that allow for no investigation and cause destruction of families.

Although our government's laws presume "innocence until proven guilty" and place the burden of proof on the accuser, the laws seem to be overlooked when it comes to false memory syndrome accusations.

So many of us were accused by church counselors. To those of us who base our belief on what the Bible teaches, it seems that church bodies are overlooking what scripture directs. The Bible clearly states in several places that the church body is to bring

the accuser and accused together to investigate the truth. Witnesses and circumstantial evidence should be presented with the ultimate goal to bring about confession of deed or confession of slander so that forgiveness can be extended, reconciliation can take place, and people can move on.

We have previously written hundreds of letters to our church and have felt that we have gotten nowhere. Recently, a new head of our church has been appointed and promised to explore avenues of how to address the problem. Well, we'll see, but it is far more than the few "I'm sorry, we'll pray for you" responses we have had in the past.

At our recent meeting we asked everyone in the group to write a brief summary of when they were accused, by whom, how the family disintegrated, and the resulting heartbreak. We have received ten so far. We also asked the members to sign a cover letter thanking our new church leader for his endeavor in examining the FMS problem. We feel that it is important to present stories from real people— not just statistics.

Just imagine if each church official, be it college-university seminary president, editor of a church paper, host of a radio program, or district representative would state the need to investigate the problem.

We believe that Christians within the varied denominations MUST agitate and alert the officials in their churches that accusations and cut-off behaviors are the opposite of belief in religious teachings.

A Mom

□

Some Cling to Old Ways

In July, I wrote to the Director of Jewish Family Services Counseling in a California city because she had recommended *The Courage to Heal* in a local newspaper. I suggested that there were serious scientific problems with that book and mentioned some exam-

ples such as symptom lists, hypnosis and the advice to cut off from family. I also included a scholarly review of the book. This is part of her reply:

“I am also well aware that there are plenty of clients who use books unwisely and see therapists who make foolish suggestions and do more harm than good. I will continue to recommend *Courage to Heal* because thousands of people have found immense relief and encouragement through using it.”

LCSW

The Bible describes “those who have eyes but will not see and ears but will not hear.” The conflation of the religious paradigm and the scientific paradigm has given rise to many harmful notions: Satanic ritual abuse, theophostic counseling, the use of exorcism as an element of psychiatric treatment, and other bizarre beliefs. It is tragic that so many in the religious community — be they Christian, Jewish, or Muslim — remain ignorant of the research but presume to know how to help individuals who are suffering from implanted delusions. While their intentions are undoubtedly benevolent, they unwittingly perpetuate and reinforce the very pain and confusion they intend to assuage.

A Mom

□

Wisdom from the Dump

I went to my local dump in July (they call it a sanitary land fill, but it's a very nice old-fashioned dump), and I overheard a conversation. The dump man was picking through the paper recycle container and held up a cereal box and said to a friend, “Too bad, no Incredible Hulk offer.” He explained that if you got three of these coupons that came on a cereal box, you could send in for some incredible Hulk item. “They're worth money,” he said. “Yeah, for a while,” his friend said. “Yeah,” the dump guy said, “It's because of this movie. It's just another fad. It'll come and it'll go.” In light of

the idiocy about the Hulk having MPD, I thought this was an astute comment that could be applied to the entire notion of MPD.

Mark Pendergrast

□

Happy To Be Writing

I am so happy to be writing to you with the good news that we have been visiting our daughter after a separation of 8 years. Our daughter has not recanted fully, but she wants to begin again with a new relationship. It is wonderful to have met with her and our grandsons.

Perhaps she will never recant. That doesn't matter to us as we know we are innocent. We can love her fully anyway and always.

A Mom

□

One Family's Tragic Story

As reported in the media

Most families prefer to keep the circumstances of FMS accusations relatively private, but sometimes a story spills into the media. This is one such story. It is, unfortunately, the story of many families.

In 1995, Julie Connachan sought help from her doctor for alcohol problems. The doctor referred her to an unlicensed psychotherapist who hypnotized her several times. She soon developed memories of sexual abuse and satanic rituals and came to believe that her parents, Barbara and Keith Mitchell, had killed her baby brother and buried him in the family's Riverside, California backyard more than 30 years ago. Connachan cut off contact with her parents and refused to let them visit their grandchildren.

The Mitchells, now living in Colorado, said that none of the bizarre events claimed by their daughter ever happened. That there was no baby, for example. None of the Mitchell's other three children have such memories.

The Mitchells continued to have contact with their 15-year-old grandson, however, when he was visiting

with his father, Connachan's ex-husband John. When Julie Connachan learned about the visits, she stopped sending her son to his father. John Connachan then filed a complaint because his ex-wife was disregarding a court visitation order. John Connachan said that he thought his son should have a relationship with his grandparents. He said “I've never had a problem with [the Mitchells]. I think they are good people.”

A magistrate ordered Julie Connachan to resume sending her son to visit his father or to face six months in jail. Julie Connachan, who clearly believes the bizarre memories, refused to comply with the order and spent six months in jail in contempt of court. The Mitchells never wanted their daughter to go to jail.

Early in January 2003, Keith Mitchell passed a polygraph test, hoping to bring an end to the ongoing investigation that followed his daughter's accusations. The Riverside District Attorney has not yet decided whether to excavate the Mitchell's former yard.

The Mitchell family story is not over. The end has still to be written.

Huntley, S. (2002, June 4). A family split by memories. *Rocky Mountain News*, 12A.

□

“ How does one measure the agony of being accused of sexually assaulting one's child, especially when that accusation is made by the child herself and conveyed to her parents? Such accusations go to their very being as parents. They cannot be certain what will come of the accusations. Will they be conveyed to other people? . . . they felt branded as sex offenders and lived in dread of further disclosures. It is very difficult to put a price upon such damages. The Wisconsin Supreme Court acknowledged that in its opinion.”

Thomas H. Barland, June 7, 2001 in *Sawyer v. Midelfort* Memorandum Decision Deciding Post Verdict Motions

MPD for Kids

Buoyed by our survival of "The Hulk" in June, we dared another children's movie that had been described as having a character with MPD. Setting forth on a steamy summer Saturday afternoon, we went to see "Spy Kids 3-C: Game Over." The other people in the ticket line over whom we towered, were, as far as we could tell, Spielberg-type extraterrestrials.

The film stars Sylvester Stallone as a toymaker who wants to enslave the children of the world and who talks with his three alter personalities: a warmonger, an evil scientist, and a hippie. The president of the United States summons the hero Juni, a preteen who has previously retired as a government superagent, to save the day. To accomplish this, Juni has to enter a virtual reality game called "Game Over" that the Toymaker had designed to trap all the children.

Stallone played the Toymaker and his three "alters" for broad laughs. With the oddball guises and the unrelenting and dizzying visual experiences of the virtual reality game, we're not worried that that anyone would be lured to the belief that this movie had anything to do with reality.

Editor

Sly Stallone's New Villainous Role "Spy Kids 3-D: Game Over"

ANCHOR: Jeff Hutcheson

GUEST: Sylvester Stallone, "Spy Kids 3-D: Game Over"

HUTCHESON: You know, there are times in [the Hulk] when you're on screen with yourself four or five different times. Did you enjoy being the multiple personalities?

STALLONE: **[I]t was like an overacting feast.** It was great. I finally got to chew the scenery. I thought, "God, am I that bad? Yes, you are that bad. Am I that loud? Yes, you are that loud." It was good. He was kind of like what a lot of people face every time they wake up the morning and say, "Who do I feel like today?" (Emphasis added.)

Copyright 2003 CTV Television, Inc.
SHOW: CANADA AM, August 1, 2003.

"Memories may be like snow, where digging deeper only gets one into dirt, dirt that can smear a young child's mind with false memories and falsely prosecute the innocent. In conclusion, the old hope for a Rosetta stone for memory access and beliefs in retrieval deficit hypotheses as the basis of memory development seem to be based on faulty assumptions about how memory operates."

Lindberg, M.A., Tantalo Chapman, M., Samscock, D., Thomas, S.W., Anders W Lindberg, A.W. (2003, March). Comparisons of three different investigative interview techniques with young children. *Journal of Genetic Psychology*, 164 (1) 5-28.

"Recent years have ... seen a shift in child victim client mix. Anecdotally, many victim service providers report that certain types of case scenarios are now much less common. The classic incest case involving a family where one or more daughters is abused over a period of time, that is otherwise functional, seems to have virtually disappeared. . . Caseloads are now more representative of all sexual abuse situations. Most sexual abuse consists of a single or a few incidents committed by known offenders; long-term incest is relatively uncommon."

Berliner, L. (2003). Victim and citizen perspectives on sexual offender policy. In R.A. Pretky, E.S.Janus & M.C. Seto (Eds.), *Sexually coercive behavior: Understanding and management*. New York: Annals of the New York Academy of Sciences, 989, pp. 464-473.

"Much of psychotherapy rests on suggestion. It moves beyond what could be considered historical truth to evoke a narrative of hope and confidence in the patient. Indeed, successful psychotherapists help patients re-order their beliefs about their world so as to see how they have more control than they imagine. They let the patient see the gist of their life experiences as positive (despite many negative details). . . . [W]e must 'believe,' but in ourselves and our capacity for responsibility and fulfillment.

"Psychotherapy goes awry—and went radically awry during the Memory Wars—if the message of the therapist is, 'Those others did you in.' Invalidism, anger and isolation result.

"Psychotherapy goes well when you, the patient, are helped to appreciate that ultimately you're in charge of your future (just as to a degree you were in charge of your past). The Memory Wars are over. Rehabilitation for many of its victims proceeds.

"We have learned something very deep—not just about how the human mind can be tricked and misled (useful as that is)—but how it has the powers to find confidence and energy in facing the future."

McHugh, P. (2003, March 2). Witch Trial Zealotry/Memory War Damage. *The Baltimore Sun*.

The Rutherford Family Speaks to FMS Families

The video made by the Rutherford family is *the* most popular video of FMSF families. It covers the complete story from accusation, to retraction and reconciliation. Family members describe the things they did to cope and to help reunite. Of particular interest are Beth Rutherford's comments about what her family did that helped her to retract and return.

To order video send request to

FMSF Video, Rt. 1 Box 510, Burkeville, TX 75932
\$10.00 per tape; Canada add \$4.00; other countries add \$10.00
Make checks payable to FMS Foundation

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8:15 AM Registration

8:45 — Welcome - *Larry
Koszewski, Ph.D.* President

9:00 — The Courage to Heal for
Real - *Carol S. North, M.D.*,
Washington University School of
Medicine

10:30 — Break

10:45 — Siblings Caught in the
Middle (sibling panel)

11:45 — FMS on the Internet: A
live demonstration - *Tom Rooney*,
Member of Steering Committee

12:35 — Lunch (included in regis-
tration dues)

1:45 — “Hungry for Monsters” (A
gripping new documentary on an
FMS case)

3:00 — Why and How I Made
“Hungry for Monsters” - *George
Csicsery*, Director and Producer of
the film

3:45 — Break

4:00 — Round tables led by *Dr.
North, George Csicsery* and others

5:00 — Social hour

6:00 — Dinner (optional, must be
prepaid)

Cost

Conference and lunch \$40. per person.
Optional Dinner \$25. per person.

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Science and Pseudoscience in Clinical Psychology

S. O. Lilienfeld, S.J. Lynn and
J.M. Lohr (eds.)
New York: Guilford Press (2003)
Highly recommended

Devilley, G.J. (2002). Eye Movement
Desensitization and Reprocessing: A
Chronology of Its Development and
Scientific Standing. *Scientific Review of
Mental Health Practice*, 1 (2) 113-138.
Highly recommended

Psychology Astray: Fallacies in Studies of “Repressed Memory” and Childhood Trauma

by Harrison G. Pope, Jr., M.D.
Upton Books

This is an indispensable guide for
any person who wants or needs to
understand the research claims about
recovered memories. A review by
Stuart Sutherland in the prestigious
Nature magazine (July 17, 1997)
says that the book is a “model of
clear thinking and clear exposition.”
The book is an outgrowth of the
“Focus on Science” columns that
have appeared in this newsletter.

To Order: 800-232-7477

“Ask an Expert,” *This American Life* June 14, 2002

About people who turned to experts and got
horrible advice. Features the Rutherfords
and a retracting therapist.

www.thislife.org.
tapes@thislife.org

Tapes: “Ask an Expert,” # 215,
6/14/02, \$12

Producer: Alix Spiegel

**“Recovered Memories:
Are They Reliable?”**
**FREE. Call or write FMSF for
pamphlets. Be sure to include your
address and the number of pam-
phlets you need.**

Web Sites of Interest

ccomp.uark.edu/~lampinen/read.html
The Lampinen Lab False Memory Reading
Group, University of Arkansas

www.exploratorium.edu/memory/
The Exploratorium Memory Exhibit

www.ctnow.com/memory
Hartford Courant memory series

www.tmdArchives.org
The Memory Debate Archives

www.francefms.com
French language website

www.StopBadTherapy.com
Contains phone numbers of professional
regulatory boards in all 50 states

www.IllinoisFMS.org
Illinois-Wisconsin FMS Society

www.ltech.net/OHIOarmhp
Ohio Group

www.afma.asn.au
Australian False Memory Association.

www.bfms.org.uk
British False Memory Society

www.geocities.com/retractor
This site is run by Laura Pasley (retractor)

www.geocities.com/therapyletters
This site is run by Deb David (retractor)

www.sirs.com/uptonbooks/index.htm
Upton Books

[www.angelfire.com/tx/recoveredmem-
ories/](http://www.angelfire.com/tx/recoveredmemories/)

Having trouble locating books about the recov-
ered memory phenomenon?
Recovered Memory Bookstore

www.religioustolerance.org/sra.htm
Information about Satanic Ritual Abuse

www.angryparents.net
Parents Against Cruel Therapy

www.geocities.com/newcosanz
New Zealand FMS Group

www.werkgroepwfh.nl
Netherlands FMS Group

www.falseallegation.org
National Child Abuse Defense & Resource
Center

Legal Websites of Interest

- www.caseassist.com
- www.findlaw.com
- www.legalengine.com
- www.accused.com

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415-435-9618 (pm)

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Wallie & Jill 770-971-8917

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Eileen 847-985-7693 or

Liz & Roger 847-827-1056

Peoria

Bryant & Lynn 309-674-2767

INDIANA

Indiana Assn. for Responsible Mental

Health Practices

Pat 260-489-9987

Helen 574-753-2779

KANSAS

Wichita - Meeting as called

Pat 785-738-4840

KENTUCKY

Louisville- Last Sun. (MO) @ 2pm

Bob 502-367-1838

MAINE

Rumford -

Carolyn 207-364-8891

Portland - 4th Sun. (MO)

Wally & Bobby 207-878-9812

MASSACHUSETTS/NEW ENGLAND

Andover - 2nd Sun. (MO) @ 1pm

Frank 978-263-9795

MICHIGAN

Grand Rapids Area - 1st Mon. (MO)

Bill & Marge 616-383-0382

Greater Detroit Area -

Nancy 248-642-8077

Ann Arbor

Martha 734-439-4055

MINNESOTA

Terry & Collette 507-642-3630

Dan & Joan 651-631-2247

MISSOURI

Kansas City - Meeting as called

Pat 785-738-4840

St. Louis Area - call for meeting time

Karen 314-432-8789

Springfield - Quarterly (Apr., Jul., Oct., Jan.

- last Sat. of month) @ 12:30pm

Tom 417-753-4878

Roxie 417-781-2058

MONTANA

Lee & Avone 406-443-3189

NEW HAMPSHIRE

Mark 802-872-0847

NEW JERSEY

Sally 609-927-5343 (Southern)

Nancy 973-729-1433 (Northern)

NEW MEXICO

Albuquerque - 2nd Sat. (BI-MO) @ 1 pm

Southwest Room -Presbyterian Hospital

Maggie 505-662-7521(after 6:30pm) or

Sy 505-758-0726

NEW YORK

Manhattan

Michael 212-481-6655

Westchester, Rockland, etc.

Barbara 914-761-3627

Upstate/Albany Area

Elaine 518-399-5749

NORTH CAROLINA

Susan 704-538-7202

OHIO

Cincinnati

Bob 513-541-0816 or 513-541-5272

Cleveland

Bob & Carole 440-356-4544

OKLAHOMA

Oklahoma City

Dee 405-942-0531 or

Tulsa

Jim 918-582-7363

OREGON

Portland area

Kathy 503-655-1587

PENNSYLVANIA

Harrisburg

Paul & Betty 717-691-7660

Pittsburgh

Rick & Renee 412-563-5509

Montrose

John 570-278-2040

Wayne (includes S. NJ)

Jim & Jo 610-783-0396

TENNESSEE

Nashville

Kate 615-665-1160

TEXAS

Houston

Jo or Beverly 713-464-8970

El Paso

Mary Lou 915-591-0271

UTAH

Keith 801-467-0669

VERMONT

Mark 802-872-0847

VIRGINIA

Sue 703-273-2343

WASHINGTON

See Oregon

WISCONSIN

Katie & Leo 414-476-0285 or

Susanne & John 608-427-3686

WYOMING

Alan & Lorinda 307-322-4170

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Victoria & Vancouver Island -

John 250-721-3219

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Roma 204-275-5723

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Ottawa

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Ethel 705-924-2546

Burlington

Ken & Marina 905-637-6030

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Colleen 09-416-7443

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Ake Moller FAX 48-431-217-90

UNITED KINGDOM

The British False Memory Society

Madeline 44-1225 868-682

Deadline for the November/December Newsletter is October 15. Meeting notices MUST be in writing and should be sent no later than two months before meeting.

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September 1, 2003

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