

A CONSOLIDATION OF SRA AND FALSE MEMORY DATA

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The purpose of this paper is to consolidate and present some of the major data for those skeptical of the existence of Satanic Ritual Abuse (SRA) and to suggest more mutual affirmation in pursuit of the truth in this area. This paper, nonetheless, attempts to critically examine both sides of the debate, namely: critical thinking and belief, “no official” evidence, the context of evidence, actual corroborative evidence (including a map of the McMartin Preschool tunnels), false memory, the sharp rise in MPD/DID diagnoses, and alternate explanations for the profound similarities in child and adult accounts. In light of the semantic difficulties inherent in “memories” it is important to avoid overgeneralizing on either side, and yet to fully accept that for which both memory and corroboration exists.

1. NATURE OF BELIEF

No doubt, new experiences can broaden our perspectives. It is therefore not surprising that in a 1991 informal survey, 93% of APA therapists who have personal experience with adult SRA survivors stated they believe the memories of SRA are accurate. Contrary to accusations, many have been skeptical at first (Young, et al, 1990; Friesen, 1990; Calof, 1994), but: 1) The quality of therapists’ experiences with their clients was sufficient to broaden their criteria for the existence of this crime; 2) There are extensive similarities in the accounts from both young children and adults throughout the country, many with minimal therapist suggestion and minimal cultural exposure; and 3) There is corroboration in some cases, yet for therapists to file reports with law enforcement would endanger the vital trust-based relationship and would not be in the client’s best interest for safety or privacy.

It is for these and other reasons described herein that I suggest considering a broader scope of acceptable “evidence” to also include qualitative and statistically quantitative aspects of the available clinical information. These definitive contexts (thoroughly available to those within the clinical realm or personally associated with survivors) are foundational to a proper understanding of such reports.

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Critical thought demands that our conclusions not be limited to the believable or the intuitive, but to the data, itself. Neither does critical thinking require that ambiguity be maintained in the face of indicative data, but rather a commitment to the indicated reality.

For this reason, the position of this paper is boldly apparent in a critical examination of all the data, including the qualitative and statistically quantitative data along with corroboration and “false memory” considerations.

At the same time, we must acknowledge that survivor accounts may comprise a continuum from entirely false to entirely true. There may be some who have falsely concluded an SRA survivorship with, or perhaps without significant memories, and

some overzealous non-victims may promote a satanic panic which skeptics use to discredit all survivorship (Wright, 1993). Yet others with *little or no exposure* to the obscure consistencies they share with many others,

recall incredibly similar details and with similar symptoms (For instance, compare the surveys of [Young, et al, 1990](#) with [Hudson, 1990](#); see table included on pages 11-13).

It is vital to understand that either side can present a convincing argument, with some documentation in support of that side. For instance in the Spring 1994 issue of the Journal of Psychohistory, David Lotto's (1994) article apart from the article that follows by Roland Summit (1994), would thoroughly convince an uninvolved party that SRA is a rumor-based social phenomenon. The mass media is notorious for airing such single-sided perspectives, omitting an accurate portrayal of the victims' actual life context (demonstrating the importance of professional journals).

Confirmation Bias.

Central to the nature of belief is the *confirmation bias*, a natural emphasis on the information which confirms one's own position along with a de-emphasis on that which doesn't. We are naturally biased as a psychological defense mechanism for minimizing *cognitive dissonance* -- an incompatibility between one's world view and certain concepts (Tavris & Wade, 1993), such as SRA. Because of our drive to reduce dissonance, we struggle with the resulting affinity for all-or-nothing thinking, such that we either tend to dismiss all SRA or we might be overly suspicious on the other hand. Without personal acquaintance with alleged victims or alternately the accused, one will likely remain consistent with his or her existing world view. Acknowledging this bias will help us assure the necessary case-by-case mentality on this subject.

So, we maintain our beliefs on a platform of certain information, selectively assembled through our own confirmation bias. We thereby require time to assimilate new especially challenging information.

Denial.

Another component of the nature of belief is *denial*, which can be conscious or unconscious. We can best approach denial by understanding the implication-sensitive nature of denial. As Sandra Bloom (1994) has noted in her article, the willingness to believe in SRA is a *process* of incremental acceptance of human cruelty and sadism, more than a sudden conversion to a belief in the unbelievable. She describes how denial (including her own) is a "potent and universal defense, protecting us from being overwhelmed by an unacceptable internal or external reality" and that everyone--from survivors to supporters--lapses into denial regularly, based not on evidence, but on the personal implications.

Thus, the nature of belief is anti-objective, since first, no one can believe more than the sum of their information, which is filtered selectively via one's confirmation bias and then maintained through denial. Beliefs can and do gradually change, but are subject to these forces.

A recent poll showed that 9% of Americans, a sizable minority, aren't even sure the Holocaust ever happened and that 2% feel *certain* it did not occur (Kagay, 1994). In this light, we can accept that a much larger percentage of people won't believe SRA occurs, *regardless* of evidence.

2. EVIDENCE EXAMINED

The following professionals have made powerful statements regarding the lack of official evidence for the reality of SRA:

A. NO OFFICIAL EVIDENCE

George K. Ganaway

"...in nearly 12 years of extensive investigations by law enforcement agencies at local, state, and federal levels, virtually no independent corroborative evidence has surfaced to support claims that such a multigenerational conspiratorial 'megacult' exists..." (Ganaway, 1992, p. 202)

David J. Lotto

"We have seen that in the cases in Manchester, the Orkneys, the Country Walk and McMartin preschools . . . that there are some very real victims, innocent of any wrongdoing, who have suffered

traumatic consequences from being caught up in a net of hysterical accusations. . . Unfortunately, the therapists who are too eager to believe the outlandish tales told by their patients bear some degree of responsibility . . . One is stretching the meaning of neutrality to maintain [an] agnostic stance in the face of mounting evidence that there is no corroboration for the reality of these events.”(Lotto, 1994, p.391-392)

Bob & Gretchen Passantino

“Let’s suppose there are 100,000 adult survivors [of SRA] who represent only a small subgroup of the conspiracy.They are the ones who were not killed; eventually escaped the cult’s control; got into therapy; ‘remembered’ their abuse; and were then willing to tell others about it. . . . If we conservatively peg the average number of abusive events per survivor at fifty, that would give us 5,000,000 criminal events over the last fifty years in America alone.And not a shred of corroborative evidence?”(Parrott and Perrin, 1993).

Martha L. Rogers

“What I have experienced as most disturbing in this pressure to accept SRA premises and conspiracies is the defensive explaining away as to why hard evidence should not be expected...there is absolutely no criminal evidence to be found, not a body, not a hair, not a drop of blood, not a trace of bodily fluid--nothing.They never leave a trail.The conspiracy is so tight that no one ever tells.They never make mistakes.The police and FBI are simply stupid or else part of the cover-up...” (Rogers, 1992, p. 180).

When information like this is one’s primary *source*, it’s clear that one won’t believe SRA exists.Either way, these statements demand adequate responses.By referring to a composite of corroborative and contextual information on the existence of SRA, I hope not only to address these concerns but to counter these statements with equally demanding questions and observations from the other perspective.For the sake of objectivity, I hope professionals in the future will temper their statements both with the corroboration and the contextual considerations in this paper.

Ganaway necessitates some form of a “megacult” to accept the widespread similar reports of SRA. While many believers do suggest that cult networks exist, they probably do not intend this as Ganaway portrays.To what degree a centrally organized “megacult” exists in the bizarre ways we might envision is not as important as would be the existence of numerous such groups who abuse in similar religious rituals.Obviously, one network does exist to maintain the estimated \$3 billion dollar per year child porn market in the U.S. alone (Raschke, 1990).It is therefore of considerable importance to examine the correlation between the consistent claims of photography and consistent claims of ritual abuse and the significant overlap in accounts.The fact that photography is one of the most common elements cited in SRA accounts, aside from corroboration is sufficient cause to delay a broad dismissal of cult networking.

A larger system of cults also seems likely from evidence described in the survey by Young, et al (1990).Patient photographs of alleged cult members were shown to other patients from a similar geographic region.Four patients independently identified, by name and cult roles, the individuals in the photographs.Neither group of patients were in contact with the other during their treatment when these independent identifications were made.[\[2\]](#) Although not the central theme of his paper, Summit (1994) describes similar independent corroboration from children for a larger cult network in the Los Angeles area (described later).

Passantinos.However, as the Passantino’s note, millions of bodies of cult murder victims have not been located and identified as such over the past half-century.**Martha Rogers** suggests that by “a defensive explaining away as to why hard evidence should not be expected,” it is inappropriate to *consider* any explanations for this anomaly.On the contrary, we must consider these claims in their time, space, and social contexts to even understand how, or if, these statements on “no official evidence” have significance.

B. EVIDENCE IN CONTEXT

Relative Context

Let’s consider these numbers in the larger picture of time and space.For estimating purposes, since most reports involve more than one victim per ritual, we could probably reduce the Passantino’s estimate to 2,000,000 criminal scenarios over the past 50 years, or about 40,000 per year.For comparison sake, from the Source Book for Criminal Justice Statistics for 1991, there were around 3,000,000 violent crimes of all types in

the U.S. in the year 1991 alone, *excluding all violence against children* and excluding all robberies. Thus, 40,000 ritual child abuse crimes per year is only about 1.2 percent of only the violent crimes committed against adults and would be a lesser percentage of criminal violence toward all ages.

It's important to keep these numbers in perspective. Since 100,000 victims is still less than 1 in 25,000 Americans, we can enjoy each others' company, with little worry that any one of our acquaintances could be a satanic cultist. There is no need for a "satanic panic" to still accept that SRA exists on a limited but very real scale.

To further place these numbers in context, if the estimated 100,000 survivors seems an outrageous number, consider the fact that 700,000 copies of the Satanic Bible have been sold (Rittenhouse, 1992). Although the Satanic Bible does not promote ritual abuse, it wouldn't take a very big subset of the people who purchase the book to legitimize the large estimate of SRA survivors.

Although aggressive efforts have been made to walk in on rituals as well as turn up other undeniable evidence, we must consider how evidence can ever be discovered for crimes authorities don't even know happened. There are few possible indicators that this type of crime has occurred. By definition, there would be no calls made to police, no burglar alarms set off, and no balance sheet discrepancies. No search for evidence will be initiated for crimes authorities are not aware of, and evidence will not be found if it is carefully hidden, at the same time that there is no awareness of its existence. To expect to find such evidence might be like going home from work early on an arbitrary day, *expecting* to catch someone breaking into your house; or perhaps to discover faulty wiring *just as* it starts a fire, simply because your wiring is old. It is very difficult to track this type of crime, because it is impossible (and unethical) to monitor everyone at all times.

Numerical Context: The product of several small fractions is a much smaller fraction.

Further, we must acknowledge the multiple hindering factors influencing the discovery and identification of evidence. The effective multiplication of these three major evidence-reducing factors produces minimal evidence.

$$\begin{aligned} & (\% \text{Overcoming Motivated Secrecy}) \\ & \times (\% \text{Corroboration}) \times (\% \text{Official Recognition}) \\ & = \text{Minimal Evidence.} \end{aligned}$$

% Overcoming Motivated Secrecy. Child SRA victims would not initiate contact with the law because they virtually always report that their lives or the lives of loved ones were threatened, *confirmed* to them by the murders and tortures they recount. It is in this context that Hudson (1991) describes how the incremental and progressive disclosure of a ritually abused child may take a year or more, beginning with the less severe molestation and progressing gradually to increasing degrees of horror. *Before and after* every major disclosure, the child experiences a severe anxiety period lasting from one to several days.

In their college (General) Psychology textbook, Carol Wade and Carole Tavis (1993), describe the *entrapment process* (social psychology chapter) by which all cult-type groups successfully achieve mind control and motivate secrecy in their members. This same entrapment process is often described by child and adult SRA survivors. [\[3\]](#) Adults and children alike share a strong reluctance to disclose the more horrific details, due to both a fear of threatened harm from the cult and the fear of disbelief and rejection. An important observation is that patients happen to mention both the threats and deceptions consistently as a peripheral to the main content of their memories.

% Corroboration. Of these children who overcome confirmed threats to maintain secrecy, we must consider what percentage could produce irrefutable corroboration, without slipping in an element of the impossible, included by abusers to discredit their story, should the victim break silence.

Not only is deception commonly reported, but it would increase uncertainty, augmenting the fear of rejection and subsequent punishment by the offenders in any child considering disclosure, thereby further motivating secrecy. Further, it would be sloppy and thereby out of character for successfully secretive cults to bury actual bodies in the presence of children (who have reported witnessing burials, where bodies were later not found). Rather, if those who periodically initiate sacrificial murders do exist, they would *necessarily* incorporate fail-safes such as deception to discredit any potential reports, and would dispose of the bodies in a traditionally proven manner.

I know it may resemble circular logic to attribute all impossibilities to purposeful deception, such as a child's report of sexual abuse by a lion as an adult in a lion costume, but if we are going to openly examine this issue, we must at least remain consistent with victim's descriptions of perpetrators, of which secrecy motivated by

confirmed threat *and deception* are nearly universal. McMartin whistle blower, parent Judy Johnson^[4] reported to Summit that her son, contrary to accusations, *didn't* like to talk about the abuse, and mentioned such things as being sodomized by a lion. In 1984, such reports were unheard of and/or ignored, and it wasn't until older less credulous children began reporting around the world (Netherlands in 1987, England in 1988, and North Carolina in 1989) that these wild animals had zippers on their costumes.

% Official Recognition. Regardless, some claim that plenty of hard evidence has been submitted, but it is officially unrecognized, both because it is prosecutorially unwise for law enforcement to link molestations with SRA and because of the enormous ramifications in the existence of "official documented SRA evidence." Besides, to say there is absolutely no evidence is very different than to say there is no *officially documented* evidence. Along these lines, it is interesting to note that a law enforcement friend of Friesen's, witnessed SRA evidence being intentionally misplaced in the law enforcement office where he worked, implying some degree of cover up (Friesen, 1991, p.96-97).

The Result. As a hypothetical calculation of this effect, let's assume that out of all children ritually abused who thereby are *motivated to secrecy*, say 5% would initiate disclosure of their involvement and trust their legal acquaintances to keep them safe (see Friesen, 1991, p.95-98). Out of these cases, if we assume 20% could produce sufficient *corroboration*, to warrant an investigation, and then out of these pieces of SRA evidence, 10% would be *officially recognized* in (or out of) court, we would have $0.05 \times 0.2 \times 0.1 = .001 = 0.1\%$, or one out of a thousand ritual crimes is even acknowledged as evidence. I know this is very hypothetical and perhaps simplistic, but since any adults would be long-time perpetrators and/or extremely motivated to secrecy, how else could evidence be discovered than specifically through a child's account at that time?

The definition of "equation" is that both sides are equivalent. The multiplication of the obstacle fractions on the left side of the above equation implies a very small value on the right side ("Minimal Evidence"). If one insists on substantial evidence--a larger right hand value--then we better see to it that the factors on the left side of the equation are dramatically increased. It would be an appropriate area of study to better approximate the values of these (or other) factors. The result in a more realistic equation could be larger or smaller, but the effect is the same: Evidence is minimized severely.

C. CORROBORATIVE EVIDENCE

The definition of "evidence" used herein to support the existence of ritual abuse is . . . The presence of the following multiple independent indicators: a) Disclosures with post-traumatic presentation, b) Profound similarities between such disclosures in which the similarities outweigh the normal occurrence of conflicting details, c) Occult objects found at the scene consistent with such disclosures, d) Structural or decorative details consistent with disclosures, but unknowable outside the reported abuse scenarios, and/or e) Victim descriptions of the video and/or still photography of abuse scenarios alongside the accused's significant preoccupation with video production and photography, sometimes including a discovery of child pornography.

The reader must be the judge in each of the following cases as to how persuasive such evidence is. Although this level of evidence rarely provides a criminal conviction, it is more than sufficient for 93% of the professionals who have personal experience with those making such disclosures to conclude ritual abuse exists.

In any case, more than "a shred of corroborative evidence" has surfaced:

McMartin Preschool. This case is often quoted as proof of the suggestibility of children to confabulate SRA allegations. The case began with Police telephoning 5 parents to notify them of the potential molestations and asking for their assistance in gathering information for this case. At least one of them called the preschool, alerting the suspects (Gorney, 1988).

One of the most unbelievable claims children had made was that they were led through tunnels beneath the preschool. Parents eventually became indignant about the official ambivalence and commissioned a back hoe in 1985, at which time the district attorney responded by commissioning a limited and fruitless survey of the building--the tunnel claims were "officially disproven". Even though all of this digging was *outside* of the building, with *no attempt* to cut through the slab floor of the preschool itself, the officials declared there were no tunnels on the site, hence the tunnels were and still are commonly cited by skeptics as non-existent.

1) *Tunnels.* Nevertheless, five years later (in 1990) McMartin parents hired an archaeologist, Gary Stickel, Ph.D., to bring some closure to the persistent, consistent reports of tunnels. In contrast to the D.A.'s limited survey, Dr. Stickel and his crew did cut through the concrete slab in several places and found spaces beneath

the building that had been filled in with dirt after the investigation opened, verified by an unearthed plastic Walt Disney bag with a copyright mark of 1982. The tunnel floorplan matched that of the children's *pre-dig descriptions* including the location of tree roots "that brushed your face", a pipe across the tunnel ceiling ("I liked to stop and swing on the pipe"), a slight arch underneath the foundation wall between two classrooms--worn smooth only where the tunnel passed underneath it, the "secret room" approximately the same dimensions described by the children, and four large containers (two enameled iron pots, a crockery jar, and a cast iron cauldron) placed vertically and side by side directly underneath the foundation arch *and halfway up* the loose fill dirt, and much more. This not only confirms the children's claims of the tunnels, but also lends strong credence to mischief, for if there had been no wrong-doing in these spaces, there would have been no need to fill them in near the time of the investigation.

The best representation of findings would come from a first hand account. Dr. Roland Summit personally examined the tunnels and later wrote the article, "*The Dark Tunnels of McMartin*" (Summit, 1994). The following is an excerpt:

At least one child had a voice in the archeological project. Time was running out before the bulldozers would obliterate the site and there seemed to be no trace of the children's secret room. Joanie, 12 years old, was visiting her old preschool with her mother. Dr. Stickel asked her, "Can you tell us where it was that you entered the tunnels and which way you turned?" Joanie gave a meticulous description of every step along the way. Starting in the northeast corner of classroom #3, she described being lifted down a hole, turning right, going "straight past the roots that brushed your face", turning right again "where you were hurried through the long tunnel. I liked to stop where the pipe was and swing on it. There was a little boy who couldn't reach the pipe, and sometimes I'd lift him so he could touch it. But right after that you had to duck down so you wouldn't hit your head on the cement, then you had to run again to get to the secret room."

Part of the course Joanie described corresponded to twin anomalies which had been detected earlier by ground penetrating radar (the tunnel walls). Corresponding openings had previously been cut in the concrete (see below: Unit 1 in classroom 3 and Unit 2 in classroom 4), but nothing unusual had been found. Encouraged now by Joanie's explicit directions, the archaeologists extended the dimensions of the Unit 1 dig and discovered contrasting soil. The concrete cutout from the earlier dig had passed just inside the fill dirt between the tunnel walls.

Besides being different in color, texture, and density of pack, the dirt which filled the tunnel spaces was distinct in composition from the adjacent soil of the tunnel walls. Now that the soil contrast was identified, the tunnel could be reopened with precision. It proceeded westward beneath a cast iron waste pipe, just as Joanie had described, and then passed under the deep concrete foundation of the wall separating classrooms #3 and #4. At the point where the tunnel passed under the foundation, and only at that point, the concrete had been arched upward and worn smooth, in contrast to the adjacent ragged contours and texture assumed by the concrete poured into an earth-bottomed trench.

Under the classroom to the west the tunnel proceeded into a wide, room-like potential space of earth fill bearing remnants of timber, plywood, and tar paper which appeared to have shored up the ceiling of a "secret" room. All this had been implied for years by numerous children and anticipated on the spot by Joanie. There was not time to determine the entire parameters of the room-like space, but there was enough excavation to show that it was 6 feet 8 inches *high* and at least 9 feet in diameter, and that it connected to the north, exiting under the foundation of the west wall of the building where the rabbit hutch used to be -- again, as children had previously described.

The pattern of tunnels had absolutely no architectural or structural purpose. The tunnels *did not* conform to expected trenching for foundations or utilities. In fact, the profile of the shallow trench dug to accommodate the waste pipe leading across the main tunnel (Joanie's reach-up-and-touch pipe) was clearly distinguishable as mechanically dug, showing the sharp angulation characteristic of a backhoe, whereas the tunnels had a rounded floor contour and shovel marks, showing that they had been dug by hand, presumably under the pre-existing concrete.

Two of the tunnel's most definitive items were found just inside the foundation. One, a tree root described by Joanie which had originally grown across the tunnel before being sawed away. The proximal section of that root, still feeding the distant avocado tree, had partially healed and sent out new sprouts where it had been cut some years before. The distal section, isolated at the other side of the tunnel was withered and dead. Secondly, stainless steel pipe clamps joining an angle of the pipe where it crossed through the tunnel space had a different quality from the clamps elsewhere which had remained buried since installation. The other clamps

were corroded from years of soil contact, while those crossing the tunnel looked shiny and new.

2) *Artifacts*. Equally indicative, the excavation turned up many artifacts and occult-related objects, including a plate from a toy tea set painted with three pentagrams and the iron cauldron. Some of the artifacts were mentioned in the children's testimonies (Vanderbilt, 1992; Summit, 1994; Coulborn-Faller, 1994). Skeptical reports are discussed in Alternate Explanations.

3) Several children reported being led through this tunnel up into the garage of the building next door and being loaded into a van (comprising a perfectly secret form of child transport). They then described to their parents the interior of another place they were taken where they claimed to have pummeled dead bodies and watched people burn. Additionally, they referred to another place as "the doctor's house", all of which was beyond belief:

- Children eventually led their parents to a mortuary and crematory where the parents were convinced that interior decorating confirmed the identity with details anticipated by children's descriptions.

- In addition to the mortuary discovery, parents followed a child-guided route in search of "the doctor's house" where blood rituals had been described. They found a residence in an affluent community some 20 miles away matching the description offered independently by several children. Further, authorities confirmed that the house was owned by a physician. Prosecutors received all of this information with resentment and distrust; first it was outside an acceptable chain of evidence, and second, this evidence was alien to what they could reasonably charge. Logically conclusive but legally intangible, it was left alone.

- At the beginning of the case, in 1984, Dr. Summit was consulted by a therapist who suspected a conspiracy. The mother of her two preschool aged clients believed her estranged husband was involved in drug dealing and large scale child prostitution. The children had led their mother to the place they had previously described where their father took them for encounters with naked adults and other children. The children spoke of group encounters involving both a defendant in the McMartin case and a suspect from yet another preschool then under investigation. The building shown to the mother, the Coco Palms Motel, had been the site of a babysitting service sex abuse investigation, unrelated to either of the two preschool cases. Even further along these lines, two McMartin children independently identified a newspaper picture of the Coco Palms suspect as the "Wolf Man" who delivered drugs to the rituals they experienced. Eventually, seven area preschools were presumed to be linked in such corroboration. Unfortunately, the law enforcement team assembling this information took Dr. Summit's report and promised to follow up immediately, but nothing ever came of it. The alleged wolf man later died of a drug overdose and the children recanted their complaints about the man and woman named by the children as his accomplices. We must think critically about recantations from preschool-aged children, unknown to each other, who had previously, independently identified the same places and people. Yet who introduced this man as the "Wolf Man" to the children? It seems probable that the children were encouraged somehow by an authority figure to recant. It's not so difficult to ponder conspiracy theories in the face of multiple corroborations such as these.

- n In Richmond, VA, a child's mutilated body was discovered by police. One year later, two frightened children disclosed that they had been abused in their home and forced to witness the murder of this very child. Skeptics must assume the children overheard details of the discovered body and over the course of a year mistakenly confabulated this story. However, *candles and ritualistic paraphernalia consistent with the children's disclosures* were found at the scene (Ross, 1986).

- n In the Jordan, Minnesota case of 1983, children reported ritual abuse. Following James John Rud's arrest, 1) a police officer reported seeing a stack of approximately 12 VCR cassette tapes, a large box containing pornographic magazines, ...two green garbage bags of pornographic material, ...and numerous items of children's clothing." But Rud's *parents* interrupted the search and became "so abusive and threatening" that the officer "vacated the premises to avoid an altercation." When he returned the next day, all the above items had disappeared. This also implicates his parents; hence, multiple perpetrators. 2) In a subsequent search of another suspect's home, police did retrieve candles and miniature bowling pins children alleged were used to violate them (Crewdson, 1984). Lab tests confirmed the objects were contaminated with human feces (Moss, 1987).

- n The Little Rascals Case. In Edenton, North Carolina, one of the seven defendants, Willard Scott Privott plead no contest in exchange for probation, although he fully denied all content of children's reports. Note his believable sounding statement, eliciting sympathy from all skeptics, and yet a virtual hallmark of sociopathy--but don't miss the evidence that follows:

"I accept this agreement because of fear--a fear that was instilled over the last five years . . . I was

convinced earlier that the state would realize it's mistake and drop the charges . . . I am not a child molester.I have done nothing to these children.I've never touched these children.I am innocent of each and every charge."

One of the most unbelievable reports by children was that a pirate had taken them away on a boat where they were abused *while photographed and filmed*.Some time later, videotapes were seized in Montana which showed a man dressed as a pirate, identified as Scott Privott, thus confirming children's earlier reports.Although Privott did own a *video* business, he denied any involvement with the preschool.However, witnesses confirmed that Privott and Robert Kelly (owner of the preschool) were friends and were often seen together around Edenton during the hours the preschool was in operation.Further still, the state was prepared to offer evidence that Privott was a sexual deviant whose telephone records showed he spent \$300-400 per month on sex line charges, and he was positively identified by children who had *earlier* described assaults by "a fat man named Scott" (Quillin, 1994).

- n In February 1994, three German teens, 17, 17, & 18, members of a secret satanic cult were sentenced to 22 years in jail for the murder of a 15 year old schoolmate who participated in rituals, was subsequently rejected for membership, and then threatened to expose the cult.Again, video taping was involved as one cult member's girlfriend came forward to say that she was asked to video tape the killing of the boy *a week before* the murder (Bajak, 1994 & Wicher, 1994).
- n In Spensor Township, Ohio after hearing many reports of ritual murders, authorities dug for bodies.They uncovered a blood stained dagger, an upside-down crucifix, several large crosses, and a headless doll with a pentagram emblem (Maharidge, 1985 and Norris, 1986).Again, what are the chances that ritual paraphernalia would surface following SRA allegations if rituals did not occur?

CORROBORATION LISTED IN JPH

A thorough survey of several articles in the Journal of Psychohistory, Spring 1994, Cult Abuse issue turns up more corroboration with which each of the respective authors had direct contact.

A) Miami Country Walk (Summit, 1994).

In this daycare case, authorities found physical evidence supporting the children's claims:1) photographs of Frank Fuster's fecal fetishism, showing Fuster's own wife and child soiled with feces, thereby corroborating children's claims. 2) The crucifix, the weapon of abuse described by the children of the daycare *was found* under the mattress of their bed.His own son described the tortures he and his mother, Ileana endured apart from that claimed by the rest of the children in the daycare.[\[S\]](#)

B)Sharon J. and Murray J. Ireland (1994)--Photographic Evidence

- n In this article, the Irelands describe an unbelievable account quite typical of those boldly rejected by skeptics, such as the Passantinos' dismissal of *Satan's Underground* (Stratford, 1988).The same argument the Passantino's used to discredit Lauren Stratford's story, was again present:the very close high school friend was totally unaware of any abuse and claimed this particular family had the best reputation in the neighborhood.However, in this private case there again is corroboration and other independent elements that confirm the validity of the story with few alternate explanations possible.

Their patient, referred to as Rene, began recovering memories of abuse only by her mother for the first 5 years of therapy.*Starting at the 5 year point*, she began remembering her father's extensive role in the abuse.Several years later, she began recalling sadistic and ritual cult abuse.To gain some closure to her horrific memories, she asked a close friend to accompany her to verify the existence of the isolated mountain site in her recovered memories.In a state of terror, she not only located the site, but extensively photographed many details from her memories, including the alter on which children were sacrificed and tortured, sinks and troughs, and various buildings, thus corroborating her memory of cult rituals.

Further, she also recovered memories of a secret hole under the bedroom closet of her childhood home where her father had often placed her sister.Upon returning to this house, she not only found a thin sheet of plywood covering this very hole, but again photographed the hole.

Moreover, her father did not deny the abuse when confronted, but presented a typical unremorseful reply that God had forgiven him.There are too many unrelated pieces of corroboration and other indicators to adequately explain contrary to Rene's account, yet if we accept this horrific and private case, we must grapple with the existence of other SRA in which patients also present several categories of dissociative and PTSD symptoms--with corresponding memories--but do not initiate such extensive corroboration.

C)R. McFarland and G. Lockerbie (1994)

McFarland and Lockerbie describe four case histories of child ritual abuse. It is quite apparent from their descriptions that the reports came spontaneously from the children--there was no mention of anything vaguely resembling cult abuse to the children prior to their disclosures. One of the children had an inordinate fear of knives (before starting therapy). Late one night, her mother called in desperation. The counselor met them in the office and the girl recalled, in a distant state of mind, adults in dark clothing, chanting, sadistic acts, group sex, and the murder of an infant. There was no suggestion prior to this recollection. Another child was brought in by his mother who discovered drawings by her son of events as horrible as those above. In all four cases, the counselors describe that the children did not look to them for approval or corroboration, but seemed focused on a view within.

D) Matt Johnson (1994).

This article is written by a clinician who describes his very tangible and costly experience with a cult, even though he had no prior concept of SRA.

Corroboration from Young, et al. (1990)

- n As described earlier, four independent identifications were made by patients of both the names and cult roles of patient photographs of alleged cult members (from a similar geographic region). *Neither group of patients were in contact with the other during their treatment.*
- n One patient reported being forced to watch her mother strangle a newborn sibling while her father also observed. Later a cult ritual was held in which the infant was dismembered and consumed. The mother informed the rest of the family that the child had died from "crib" death shortly after birth. Independent verification was partially obtained from a brother who remembered the pregnancy and a "funeral" at home, *but never saw the infant.* Neither the hospital in which the infant was *statedly born*, nor the state's Bureau of Vital Statistics had any record of the infant's *birth or death.*

Evidence in "The New Satanists"

This 1994 paperback by Linda Blood came out two few years after I began this paper. It offers so much evidence for SRA that I probably would not have written this paper had I known this book was to come. Linda Blood includes the largest collection of evidence I have read to date, especially in chapters 5 through 7. Although the cover and title are in my opinion too sensationalistic, this \$5 book is a must read for anyone sincerely examining the veracity of SRA.

Taped Evidence

Yet another element which might provide a better angle on the SRA believers' perspective is a one-minute clip from a telephone call to the Bob Larson show. The caller wanted to escape from her *present involvement* in a transgenerational satanic cult. A close scrutiny not only of the caller's terrified tone of voice, but also of her means of disclosure and of the content, lend strong credence to the authenticity of the caller's situation. One can better understand how therapists who hear stories like this regularly, with consistent elements would eventually start believing their clients (Rittenhouse, 1992).

SIMILARITIES BETWEEN CHILD AND ADULT SURVIVORS

The internal consistency present in current reports of SRA is astounding. The following table compares these extensive similarities in two surveys performed by two separate entities--one of child ritual abuse survivors and the other of adult ritual abuse survivors--samples of each of the two surveys were separated geographically.

Warning: The following details may be triggering to survivors and deeply disturbing to those not familiar with SRA reports.

Children: Pamela Hudson, MSW, has over 35 years of experience working in mental health, both inpatient and out-patient. She began encountering child ritual abuse cases in the 1980's. In 1988, she conducted a telephone survey of one set of Parents from each of 10 daycare cases and the non-offending parent of two brothers from a coven case--for a total of 12 children representing 11 locations--on the East Coast, Texas, and up and down the West Coast. No parent knew beforehand that she would be calling, and therefore no one had an opportunity to compare responses before her call (Hudson, 1990). She spoke only to the parents, not the children. Please see her book for more detail o

the survey and on each case. (Hudson, 1991). The children surveyed attended the following day cares:

1. McMartin Preschool, Manhattan Beach, CA
2. West Point Child Development Center, NJ
3. Parent in a Coven, CA
4. Alabama child in day care, CA
5. Babysitter case, Manhattan Beach, CA
6. East Valley YMCA, El Paso, TX
7. Day care center in Campbell, CA
8. Gallup Christian Day Care, Roseburg, OR
9. St. Cross Episcopal Day Care, Hermosa Beach, CA
10. Presidio Child Development Center, San Francisco, CA
11. Day care center, Fort Bragg, CA

Adults: 37 Adults from 5 separate wards in 4 separate hospitals across the country were surveyed over the course of two years of treatment (Young, et al, 1990). See Table 1, next page.

Table 1. Similarities between child survivors from 11 locations and adult survivors from 4 hospitals across the country. Note the extensive correlations, both *within* each study -- *and between* the two studies.

Abuse Reported:

Children

Adults

Sexual abuse	All 12 children reported sexual abuse by adult strangers and/or daycare workers.	All 37 adults reported sexual abuse.
Torture	All 12 Children described torture and sexual assault. All were given medical exams; findings commensurate with sexual assault.	All 37 adults reported witnessing and receiving physical abuse and torture.
Animal Killings	11 children (92%) observed animals tortured and killed; 12th did not state.	All 37 adults witnessed animal mutilation/killings.
Confinement	11 children (92%) reported being locked inside a "jail" or cage. 5 of these 11 children also reported being put inside caskets, coffins, "boxes".	27 adults (72%) reported being buried alive in coffins or graves.
Human sacrifice	8 children (67%) described small children and/or babies being killed, carved up, and eaten by abusers, and some reported forced cannibalism.	31 adults (83%) witnessed and were forced to participate in human adult and infant sacrifice. 30 (81%) reported forced cannibalism.
Forced drug usage	11 children (92%) were injected, drugged, or "poked" with needles.	36 adults (97%) reported forced drug usage.
Marriage Ceremonies	6 children (50%) reported participating in mock marriages.	26 adults (78%) described marriage to Satan.
Death Threats	All 12 children reported threats to the lives of their parents, siblings, or pets if they told; 9 of the 12 children (75%) were threatened directly with guns or knives.	All 37 adults reported death threats to themselves and/or family members for breaking the silence.
Pornography	All 12 children were photographed or filmed during abuse.	Adults were not measured in this survey, but another survey of 7 SRA survivors found 4 describing sadistic pornography and/or "snuff" film production, the remaining 3 not specifying.
Robes	All 12 children described abusers wearing robes, masks, having candles.	Adult patients commonly reported robes, but of differing colors.
Defecation	11 children (92%) were defecated and urinated upon, and were forced to ingest both.	Although not quantified in this survey, six out of six in another survey described consumption of feces and urine (Brown, 1987).
Other common reports	11 children (92%) reported being given (fake) operations; 10 children reported being taken away from the care provider, traveling by car, airplane, helicopter, boats, or submarines (Purposeful deception --e.g., animal costumes--is often used as a hedge to discredit any would be children's reports); 11 children (92%) reported being taken to churches, other daycare centers, and graveyards for more terrorizing, torture, and sexual assault.	Adults also have reported fake operations during which bombs were supposedly implanted which would explode upon their telling of any cult secrets (Friesen, 1992).

Table 1 (continued). Similarities between child and adult survivors.

Children

Adults

Symptoms and Sequelae

Stress	All 12 children presented "extremely high anxiety"; 10 (83%) exhibited a sudden extreme fear of the bathroom, bathing, washing, rain; 11 (92%) experienced nightmares, night terrors, night sweats.	All 37 adults diagnosed "Severe post-traumatic stress disorder" (met requirements for DSM-III-R), and 34 (91%) exhibited "unusual fears".
Related Behaviors	At least 11 children (92%) exhibited new compulsive, erotic behavior, and acted out the sex acts.	32 adults (86%) exhibited "sexualization of sadistic impulses"
Eating disorders	10 children (83%) exhibited a sudden eating disorder: refusing meat, catsup, spaghetti, and tomatoes.	Not reported in this survey, but adult survivors I know alternately crave/refuse red meat and sauces.
Other common symptoms	9 children (75%) began vomiting for no apparent reason and experienced abdominal pain. 10 children (83%): "Hyperaggressive, temper tantrums, oppositional behavior, school disruptiveness"	36 adults (97%) presented survivor guilt, 35 (94%) described Indoctrinated beliefs, 31 adults (83%) performed "bizarre self-abuse", and 23 (62%) were involved in substance abuse.

Concluding Thoughts on Evidence.

There is certainly a broad range of evidential data for SRA; however, due to the very private nature of survivorship as well as concerns for the safety of survivors, little can be expected publicly in any form of proclamation. To dismiss SRA while promoting critical thinking skills (Wade & Tavris--see SRA quiz question, p. 256), one may not gloss over corroboration and correlations such as those listed, but must grapple with the probability that *every* corroboration listed above *and all others* -- without exception -- have alternate explanations. To responsibly take a position on this issue, one should know specifically what would be adequate evidence to modify his or her view.

There will always be residual populations of articulate deniers in many realms of human suffering (e.g., the Jewish Holocaust, the Armenian Genocide, etc.) and often with some connection to those accused of the atrocities. These activists typically dismiss each and every piece of corroboration to maintain their positions at all costs. Such an unbending stance plants seeds of doubt sufficient to neutralize the otherwise appropriate societal rage in all but those most personally involved with the victims.

It should be obvious that any possibility of such inconceivable cruelty must be confronted and understood before we as a people can progress to define the real dimensions of human experience. Considering the potential benefits of such a confrontation--new insight into alienation, despair, rage, violence, dissociation, and the vagaries of memory and of ultimate accountability--it is all the more remarkable and lamentable that scholars are willing to harp at the extremes rather than to delve into the common ground of human perversity and deliberate psychic trauma (Summit, 1994).

The non-SRA professional community continues saying there is "no evidence" (Rogers, p.180, Mulhern, p.231; Ganaway, p.202; Stevens, p.240)-- this is very inaccurate. Even a small percentage is infinitely more significant than zero.

3.LOGIC TO DENY SRA EXISTS

Although Ganaway states that a belief in the existence of SRA includes a certain set of suppositions (Ganaway, 1992, p. 202), a denial of SRA also requires a certain set of suppositions:

Specifically, we must believe in a very complex social organism, consisting of the following:

1.False Children's Reports:

a)Parents and/or therapists, expecting the worst, misinterpreted both the children's distressed behavior and reports, via an SRA-paranoia filter,

or

b) Parents and therapists inadvertently suggested the 15-20 commonly reported, yet bizarre elements of the "satanic mass" to the children, and the children created an average of 15 of these along with the corresponding panic responses (see survey of children's symptoms and reports:Hudson, 1990),

or

c) Those conducting all surveys like this blatantly reword the children's reports to support their own causes of proving that SRA exists,

and

2. Adult SRA patients create false memories matching preschooler's claims,

and

3.Every adult SRA patient is necessarily exposed to all 15-20 specific SRA details *before* their respective memories of such.

- OR -

1'.There is a culturally or biologically programmed fear to the 15-20 specific elements of the "satanic mass" (see the discussion on Phillip Stevens' explanation in *Alternate Explanations Considered* section) even though, as I contend, most people have not been exposed culturally to these items *in any manner typically resembling victim accounts.*

and

2'.All SRA clients, with and without MPD, create false memories with post-traumatic symptoms which parallel the memories.Additionally, many MPD clients create not only false memories, but must have also created evil alters as well which correspond with the memories.Note that these alters exhibit severely deviant characteristics (enjoying the feeling of stabbing a sacrificial victim, cannibalistic desires, etc.), while the patient's core personality is entirely inconsistent with -- even unaware of -- these characteristics.

In summary, we must believe the logical statement:[(1a or 1b or 1c) and 2 and 3],OR:(1' and 2')is True to deny the existence of SRA.

4. FALSE MEMORY ANALYSIS

We have seen that there *is* substantial corroboration for SRA, yet several authorities continue to state that there is “not a shred of evidence,” thereby allowing others to cite recovered memories of SRA *as indicative* of a False Memory Syndrome (FMS). Depending on how it’s framed, one might admit that the concept of recovering a series of bizarre abuse memories previously out of consciousness seems unlikely, even far-fetched, especially when soberly denied by the otherwise respectful accused. However, the framing is often oversimplified, describing something both simpler and more ominous than what is clinically encountered. Thus the case-by-case contextual framework is the very core from which this issue must be examined.

Although it is important to note that the FMS Foundation Advisory Board includes numerous professionals with respectable credentials in medicine and psychology, few have relevant clinical experience with abuse survivors, sociopathy, offender psychology, or dissociative disorders. Most FMSF Advisors do not understand nor discuss traumatic dissociation, nor much of the clinical phenomenology or the psychodynamics of trauma and abuse victims. They especially don’t understand the distinction between normal and traumatic memory processing. Most have neither studied the subject nor become conversant in the scientific and clinical findings regarding traumatic dissociation and traumatic amnesia that have been garnered since the days of Freud, Breuer, Charcot, Janet, and Prince. Although some false memory advocates claim to have read from these authors and remain unconvinced, they offer few arguments to overturn the conclusions arrived upon by these clinicians. Rather, they deny the existence of most if not all Dissociative Identity Disorder (MPD), apparently due to the clear trauma-indicative nature of dissociative symptoms.

Also imperative to note is that since the inception of the FMSF in 1992, a “syndrome” has yet to be established for false memory. Thus, the term “syndrome” reveals a distinct lack of objectivity and is misleading through the informal media. Some admittedly have a personal interest in establishing a False Memory Syndrome, having joined the board only after learning of a friend or family member accused of abuse. They attack a strawman, consisting of the terms, “recovered memory therapy (RMT)” and “robust” or “strong repression” of the normal-type integrated memory (Pope, 1994). They speak in broad generalities with outrage over concepts much simpler and different than what is actually experienced by and observed in patients with dissociative disorders.

An inclusive analysis of false memory is, however, complicated by the results of research and of experiments, which appear at first glance to diverge. While research from Williams, Hermann, and others on known adult survivors of childhood sexual abuse validates delayed traumatic memories, experiments from Loftus and from Ceci support the creation of false memory in children through repeated suggestion and questioning from an authority figure. A closer look, however, might reveal some intermediate truth with some key distinctions between the clinically encountered delayed traumatic memory on the one hand and the experimenters’ implanted memories on the other.

Two Models: Repression vs. Dissociation

The two camps of this debate attack and study these respective terms with more than a difference in semantics, but based on two very different models of memory. So, to understand both sides of the debate, it is crucial to distinguish between the two models: Repression, which would operate on *normal memory* and Dissociation which automatically creates and accesses a separate *traumatic memory*. Both the mechanism and the memory type will be discussed under each of the two models.

1. Repressed Memory Model.

This model is referenced in attacks by false memory advocates as insufficient to explain the recovery of traumatic memory. True enough, Freud’s repression theory does not adequately explain such a complicated mechanism of memory. However, the actual observations and experiences of the FMSF criticized “RMT” clinicians do not resemble Freud’s repression theory either.

1A. Mechanism: Repression. Freud first applied this term to the central psychoanalytic theory that individuals actively inhibit unacceptable wishes, feelings, and sexual impulses to the point that they become unconscious. If such feelings become sufficiently strong, they would intrude into consciousness. If not, they would be relegated to the unconscious by the willful forces of repression. Secondly, he applied the concept of repression in the very different sense of a *motivated* forgetting of uncomfortable experiences. The same confusion is seen in the psychoanalytic literature at large, where the use of the term “repression” is overapplied (really redefined) to infer an *active* pushing away of the unwanted traumatic memory. In this faulty model, one’s *consciousness stays in its place*, unaltered; it is the traumatic memory, itself, which is removed.

Repression thus theorizes an on-off mechanism, and offers only a vague explanation for the recovery of childhood sexual abuse memories. There is little evidence for this type of an intentional pushing away of overwhelming experiences, a point on which we can agree with the FMSF. It seems reasonable, therefore, to reserve the concept of repression for the defense against unwanted wishes and Id-impulses only, and *not* for recovered memories, which is referred to by FMS proponents as *Redefined Freudianism*.

1B. Memory Type: Normal, also called *Narrative* or *Declarative Memory* results from the continual cataloging or categorizing of experiences. New experiences and images in short term memory are integrated by *association* with related material already in long term memory. Because of this ongoing integration and cataloging of experience with existing schemes, malleability is likely during the reconstruction of normal memories. FMSF advisors may thus be partially correct in their statements that there is no evidence for the complete forgetting or *repression* and subsequent full recovery of *normal-type memory*. **Thus, false normal-type memories may be possible in contrived cases with repeated authoritative suggestion**, yet the existence of false traumatic-type memories (defined by the accompanying dissociative and post-traumatic symptoms) remains unproven.

2. Dissociation Model.

A. Mechanism: Dissociation. Distinct from repression, this term refers not only to a mechanism of memory, but also to a related branch of psychological disorders, based on a *dis*-association of experiences and images with those previously integrated in normal long term memory. According to Freedman, Kaplan, & Sadock's comprehensive textbook of psychiatry, "dissociation and the dissociative disorders are a psycho-physiological process whereby information -- incoming, stored, and outgoing -- is actively deflected from integration with its usual or expected associations. The dissociative type of hysterical neurosis can be defined as a state of experience or behavior wherein dissociation produces a discernible alteration in a person's thoughts, feelings, or actions so that for a period of time, certain information is not associated or integrated with other information as it normally or logically would be. The classic symptoms are amnesia, somnambulism, fugue, and multiple personality" (p.341).

The dissociative uncoupling appears to have an *automatic* mechanism such that another parallel consciousness is created or split off at a sensory-motor or subconscious level of processing. Many survivors of all kinds of trauma report that they are automatically removed from the scene; they look at it from a distance or disappear altogether, leaving other parts of their personality to suffer and store the overwhelming experience. "I moved up to the ceiling from where I saw this little girl being molested and I felt very sorry for her" is a common description of dissociation by incest survivors. It is the psychological parallel to the automatic numbness experienced by some following a physical injury.

2B. Memory Type: Traumatic. According to van der Kolk's and van der Hart's research summarized in *The Intrusive Past: The Flexibility of Memory and the Engraving of Trauma* (1991), there is a telling distinction between the encoding of normal experience and that of trauma. An important observation is that much of their research occurred before the false memory debate began as we know it, so van der Kolk's bold re-statement of the century-old conclusion of Pierre Janet (that the integration of traumatically dissociated, or "recovered", memory is confirmed by its physiological and neurological affects^[6]) is uncritically dismissed, out of necessity, by false memory proponents. The other side of this coin, however, is the FMSF contention that any such unexplained affects are *not confirming*, but are *also* the result of suggestion. Of course, any pre-existing or life-long affects would have to be strictly coincidental with the recovered memories.

Two models, two memory systems. As the definitions reveal, these terms address two different models of trauma processing, two different memory systems, and describe even two different subjective experiences as well. The concept of repression does not account for the complex clinical phenomenology of trauma survivors. False memory advocates argue against the "depth of repression" and about "burying" memories, while traumatic dissociation actually speaks in terms of the "associational proximity" of the *components* of the trauma: knowledge, emotion affect, and sensation. Dissociation better resembles how trauma is actually reported, as is extensively documented.

Dissociation -- Documented.

Since the days of Charcot, etc. we have documented dissociation, amnesia, and other traumatic memory disturbances (dissociation of knowledge) as common responses to a great variety of contexts of traumatic stress, including: combat and war, disasters, violent crime, assault and sexual assault, torture and mind control, concentration camps, cults, child abuse, vehicular and industrial accidents, life threatening events, and multiple traumatic events. Traumatic amnesia and fugue states have long been recognized as common occurrences in war resembling closely those in child abuse victims. Mira documented "the inability to recall experiences either

immediately before or after the traumatic incident or the events directly related to the shock itself is a common event in war.” Mira documented fugue states in war trauma victims occurring “either immediately after the traumatic incident or somewhat later.”(Mira, 1943).

The symptoms of war trauma survivors resembles Charcot’s lists of symptoms of hysterics. The range of post traumatic sequelae that Mira observed during the second world war included “psychogenic repression, dissociation, traumatic amnesia, fugue states, anesthetics, psychogenic pain, repression, phobic states, psychomotor disturbance, and self-inflicted injuries. This reads like a list of features of Charcot’s and Janet’s patients.

A 1957 article in a British Medical Journal reports “during periods of public emergency, this form of [psychogenic] amnesia may be responsible for 15% of all psychiatric admissions.”(Kennedy & Neville, 1957).

Thus, we’ve known about traumatic dissociation throughout the past century -- years before the rediscovery of child abuse -- and in a variety of contexts. The 19th century founders of the study of traumatic dissociation, Charcot, Janet, Prince, and Breuer, have received much attention in recent years, yet they were the few dissenters and were largely ignored by the developing dynamic psychiatry, which showed little interest in either the dissociative disorders or the traumatic etiology of them.

Duration of Amnesia. Some argue that the length of the delay (months vs. decades) affects the validity of recovered memories. Pope compares the amnesia of disaster victims with that of alleged abuse survivors (Pope, 1994). To make such a comparison, one might include all related indicators in the equation. A disaster or war trauma survivor should have none or perhaps a short memory delay since their entire world (homes, friends, lifestyle, etc.) reflects the incident, prompting a recovery of such memories. In contrast, child abuse survivors have little-to-no external information on which to base an understanding of their trauma or to prompt an immediate integration of any dissociated trauma.

Dissociation Foundation.

For the clearest understanding of both sides of the false memory debate, it would be helpful to understand the origins and roles these concepts have played in the unraveling of psychodynamic psychotherapy. Prof. John Hochman of the UCLA medical school has stated:

“Recovered memory therapy is based on pseudoscientific theory and should not be believed either in a context of law or the world in general. This therapy is a combination of pop-psychology, self-help recovery groups, and redefined Freudianism.” (Hochman, 1994)

As we will observe through examining a brief history of traumatic dissociation, recovered memory is *not* re-defined Freudianism, rather it is a reuniting of a tributary of psychiatry that split off from Freud when he abandoned the seduction theory of adult psychoneurosis.

Among the founders of the study of dissociation was French neurologist Jean Charcot who practiced at the famous Salpetriere hospital in Paris. In 1872, he noted that his hysterical patients’ stream of consciousness often broke into diverse components (Freedman, Kaplan & Sadock, 1972). He also noted a similarity between hysteria and hypnosis, and even viewed hypnosis as “artificial hysteria.” Charcot eventually raised hypnosis to a level of respectability as a primary investigative tool of dissociation. During 1885-86, a 29 year old Sigmund Freud came from Vienna, Austria to Paris to attend Charcot’s lectures and observe his use of hypnotism in treating hysteria (dissociative disorders).

He was sufficiently impressed with the clinical results that when he returned to Vienna, he began to practice hypnotic catharsis and abreaction with his hysterical patients. For several years, he collaborated with his close physician friend, Josef Breuer, a pioneer in abreactive and cathartic hypnosis. Together, they concluded that dissociation and personality-splitting were the central clinical features of their hysterical patients.

For the next decade, Freud and Breuer accepted their hysterical patients’ recovered memories of sexual and physical abuse. During the course of treatment, all 18 of Freud’s “hysterically neurotic” patients eventually disclosed in their treatment to have been sexually abused as children. Without pursuing it, Freud even happened upon corroboration for at least three of his patients’ claims. At age 40 he published his infamous paper *The Aetiology of Hysteria*, in which he argued that traumatic experience, notably “premature sexual contact” in childhood was the very root of adult hysterical neurosis--in stark opposition to the prevailing view. Freud even anticipated the false memory movement. He predicted skeptics would...

“insist either that the physician forces such scenes upon the docile patient, alleging them to be recollections, or that the patient tells him things which he has purposely invented or spontaneous fantasies which the physician accepts as genuine facts” (p.199).

At the same time, Freud remained convinced that he had not created false memories in his patients:

"I have never yet succeeded in forcing on a patient a scene that I expected to find, in such a way that he appeared to live through it again with all the appropriate emotions..." (p. 200).

Freud's Peer Influences. The publication of Freud's Aetiology of Hysteria brought him new scholarly attention. Freud was soon confronted with a cultural pressure that was incompatible with his clinically-based conclusions. He faced probably the most difficult decision of his career: maintain his findings on the abuse-hysteria link or concede to the prevailing anti-victim/ anti-woman prejudice of the day.

One such respected authority was the noted professor of neurology at the University of Berne, Dr. Paul Dubois. He was one of the first in French Neurology advocating psychotherapy for the psychoneuroses. The prejudices of his day -- a disrespect, disdain, or disbelief of hysterical patients-- were the most influential deterrent in preventing widespread acceptance of these accounts of abuse from hysterical patients everywhere. Anyone who desired recognition in the field would think twice before taking such a bold position on child sexual abuse. These prejudices are unmistakable in Dubois' widely accepted publication, translated by Funk & Wagnalls in 1905, *The Psychic Treatment of Nervous Disorders: The Psychoneuroses and their Moral Treatment* (Dubois, 1905). A few choice statements are listed to demonstrate this prejudice:

"I am led to believe that the various vague, unconscious or conscious, sensations which pertain to the sexual instinct play even in the virgin of the most immaculate thoughts a considerable role in the genesis of hysteria..."

"Rhythmic movements of the pelvis betray a lascivious state of mind, whether it is conscious or unconscious, in the most modest young girl as well as in the prostitute."

"In the hysterical patient suggestibility is the dominant quality or, more exactly, autosuggestibility. She--I say "she" because the woman is more subject to these symptoms--lives in a world of dreams and in the graver cases. . . the mental trouble amounts to an hysterical delirium . . . These patients are experts in the art of putting the stamp of reality, not only on their sensations . . . but on the phantoms created by their most vagrant imaginations" (pp. 172-173).

His editors and translators were highly respected leaders in the American psychiatric community and were enthusiastic to advance this perspective to the American medical establishment. In this social context, it is understandable why Freud abandoned his awkwardly glaring seduction theory. He surely would not have reached the pinnacle of recognition had he continued promoting this relatively brash concept about sexual abuse as the root of hysteria.

Apparently, due both to enormous peer and cultural pressure and perhaps by *repressing* his own convictions stemming from his clinical experience, he began a tremendously influential paradigm shift, opposing virtually everything he stood for on traumatic dissociation, yet with little supporting data. By 1905, he publicly retracted his "Seduction Theory" -- that children are seduced into sexual acts which later becomes the root of their adult psychoneurosis, and replaced it with the "Oedipus Complex" -- children have a sexual desire for their parents which would, among hysterics, reappear in adult years as memories, but originate from no more than childhood sexual fantasies.

With Freud's dramatic turnaround, the study of traumatic dissociation and its primary investigative tool, hypnosis, was thereby split off from the mainstream of medicine and from the developing psychodynamic and biological psychiatry. In the service of family denial, neither traumatic dissociation nor any co-conscious or dissociative disorders were made part of the developing psychiatric, medical or psychoanalytic paradigms.

"... I was at last obliged to recognize that these scenes of seduction had never taken place, and that they were only fantasies which my patients had made up . . . namely, that the father seduced her in childhood. This is the later reworking which is designed to cover up the recollection of infantile sexual activity and represents an excuse and an extenuation thereof. The grain of truth contained in this fantasy lies in the fact that the father, by way of his innocent caresses in earliest childhood, has actually awakened the little girl's sexuality (the same thing applies to the little boy and his mother) . . . And thus the motifs mingle in the most successful fashion to form this fantasy, which often dominates a woman's entire life (seduction fantasy): One part truth, one part gratification of love, and one part revenge" (Masson, 1984, p.12).

FMSF proponents might be tempted at first glance to promote the turnaround of this most famous psychotherapist as an example for other therapists to follow and to likewise begin considering their clients' recovered memories as rooted in fantasy. However, inseparable from his abandonment of the seduction theory was his tolerance of incest. He had not only changed his view on incest memories, but redefined these very traumas as acceptable:

“It is one of the most commonest things--psychoanalysis is full of such incidents--for children's genitals to be caressed, not only in word but in deed, by fond relations, including even parents.”(Freud, 1909/1974, p.64)

Thus, at the very core of Freud's denial of trauma-based dissociation as the primary root of hysteria, was his rejection of any incest as abusive or traumatic. We're left hanging as to how he accounted for the corroborated cases in his patients' recovered memories. We're also left hanging as to how he accounted for the recovered memories of abuse by people other than their fathers.

Freud's Dissenters. Although the study of traumatic dissociation was never popularized in Freud's day, not all of Freud's contemporaries succumbed to pressure to abandon the existence of dissociated traumatic memory. Pierre Janet, a fellow student during Freud's study with Charcot at the Salpêtrière and a distinguished French medical psychologist, was drawn to the study of dissociation through his interest in the dissociative symptoms of hysteria, including amnesias, fugues, trance states, and multiple personality. Janet was struck by the observation that some memories could become the nucleus of later psychopathology.

Janet was the first to note that dissociated *states* often follow childhood physical or sexual abuse. He was also the first to observe that spontaneous dissociative reactions function as *defenses* to keep traumatic memories out of consciousness (Janet, 1889). He explained that while traumatic experiences were split-off from the mainstream of consciousness, they could still exercise harmful influences on thought and behavior, not consciously understood (Janet, 1924).

Another who remained faithful to his clinical findings was Morton Prince, a contemporary of Freud and Janet's. In 1906 he published the first clinical study of multiple personality and dissociation (Prince, 1906). He later went on to develop the concept of coexisting, simultaneous consciousnesses he titled *co-consciousness* (Prince, 1919) amidst the wave of negative reaction against MPD in 1910. Prince, Janet, and several other prominent clinicians were so convinced by their clinical findings that they opposed the evolving all-or-nothing conscious-unconscious duality of psychoanalysis' explanation for mental disorder in favor of the concept of parallel or *co-consciousness*.

It's curious to note how differently World War I psychiatrists treating “battle fatigue” accepted symptoms of traumatic dissociation as such (including amnesia and fugue states) in soldiers (Mira, 1943), while dismissing the very same thing in female hysterics of the day. While it was apparent to them that the men's symptoms had a traumatic etiology, they related the women's symptoms to character, moral, or biological issues.

Contemporary Context. The study of traumatic dissociation languished primarily in the hypnotic community until the resurgence of interest in hypnosis in the mid 1970's, largely popularized by Milton Erickson's work, followed by a rekindled interest in the dissociative disorders such as in the 1984 founding of the International Society for the Study of Multiple Personality and Dissociation (ISSMPD).

This resurgence of interest in dissociation was potentiated by several factors: First was the renewed interest in hypnosis in the 1970's. The mobilization of the rape crisis and sexual assault center movement, galvanized by Burgess and Holstrom's 1974 pioneering study of inner-city rape victims and the description of the Rape Trauma Syndrome. This brought our attention to the existence of sexual abuse and trauma of women and children and began to break down societal denial over sexual abuse and assault. The next factor that contributed to this was the development of broad-based yet unseen cultural movements in the 1980's beginning with the Adult Children of Alcoholics movement, which led to Adults Molested as Children movement. This again increased our sensitivity to child abuse and in this case to its intergenerational effects. Lastly, the recognition of Post-Traumatic Stress Disorder (PTSD) in 1980 and the creation of the International Society for the Study of Traumatic Stress in the early 1980's. All of these factors during the past decade have given us a wider lens to see the universality of dissociation as a response to trauma.

Evidence for a False Memory Syndrome.

The most significant evidence for the existence of a False Memory Syndrome consists of:

- n **Elizabeth Loftus' research.** An experiment conducted by Professor Elizabeth Loftus (a psychologist from the University of Washington and member of the FMS Advisory Board). In this experiment, she asked students to suggest falsely to their younger siblings a time they were lost in a mall. Five of her students' younger siblings reported remembering such events. A fourteen year old boy even remembered the color of the shirt the man was wearing who returned him. Dr. Loftus has also conducted experiments on adults watching a film clip of a multi-vehicle auto accident. There is a strong correlation between the suggestive wording of the questions (about the presence of a sign, colors of cars, and directions cars were moving) and how the subjects recalled the accident (Wade & Tavris, 1993).

- n David Lotto (1994) cites an experiment conducted by **Dr. Steven Ceci**, a psychologist at Cornell University. Parents were asked to make a list of 10 events, 2 of which happened and 8 of which didn't. Each child was then asked "has this ever happened to you" about each event and on a weekly basis. By the 11th week of this procedure, 56% of the children reported at least one false event as being true. Some children reported all of the fictional events as having occurred and the children frequently elaborated on these events producing detailed and believable sounding accounts (Goleman, 1993).

Acknowledging this evidence, it is critical to point out that although these experiments lend strong credence for the fabrication of memories, this is nonetheless normal narrative, memory which is quite malleable due to the integrative process aligning such experiences into categories of *association*. Normal memory is apparently quite subject to confusion through repeated suggestion. *Dissociation* on the other hand occurs in overwhelming traumatic situations and is clinically distinguished by the accompanying dissociative symptoms and sequelae as documented in survivors of all types of trauma. This crucial distinction in the two types of memory processing is detailed in Bernard van der Kolk's pre-FMSF paper (van der Kolk and van der Hart, 1991).

Other support for false memories consists of:

- n **The Ramona Case.** Still, some state that false abuse memories have been proven in the courtroom in the this case. Note, however, that when the spokesman for the jury was asked on a daytime talk show about this proven case of false memory, he adamantly stated that they did not find the memories to be false--only that the therapist's behavior was unethical.
- n **Ingram Case.** In the very complex Ingram SRA case of 1988 in Olympia, Washington, a curious-to-skeptical professor, Richard Ofshe from UC Berkeley, CA, conducted an experiment on Paul Ingram in which he falsely advised Ingram that his son and daughter were disclosing that he had forced them to have sex together. Ingram then elaborated on this (relatively not so far-fetched) event. This case is discussed with more detail in *Alternate Explanations*.

It is understandable in light of these results, that people without firsthand experience with survivors would assume false memory syndrome exists, fully explaining the sharp rise in the number of incest and SRA survivors, especially when the memories were recovered decades after the fact and even more so when well respected parents fully deny any such offenses.

Checklists are often the target of false memory proponents. However, the understated purpose of these lists is to describe indicators of dissociative disorders and the often accompanying traumatic memories. Important to note is that these lists are not meant as an all or nothing indicator of past abuse, but merely a varying degree of probability of abuse dependent on the correlation with various items. When several symptom clusters exist across several broad categories, it is not inappropriate to consider the possibility of dissociative disorders and traumatic memory (Calof, 1994).

Recanters.

Recanters are commonly referenced to prove induction of false memories. The picture of a woman in irreparable regret, and recanting her false memories and accusations toward her father strikes unparalleled strings of sympathy in most of us and suggests the strong possibility of false memories as well. Further, acknowledging that in therapy we all desire to discover a central source for all of our problems, when combined with the secondary gain of sympathetic approval from an admired therapist who also advises us of the likelihood of repressed memories of sexual or satanic abuse, undoubtedly results in a motive to construct such memories.

However, in this scenario, we cannot ignore the foundational counter-motives of any patient to reject such severe images -- *if* they really occur at all with the element of recognition innate to memory. Even the known cults who brainwash haven't been reported to result in false memories; just a general disdain. Yet false memory proponents require as commonplace this very process of uncritical acceptance of such fabrications of both imagery and a sense of recognition. Regardless, in this light, it is very likely that *some* recanters were persuaded of a false survivorship with, or perhaps without, significant memories and due to their remorse over the tragedy of falsely accusing a loved one, have become crusaders assuming all recovered memory is false.

Secondly, as therapists know well, the denial process is an extremely strong mechanism, and it is therefore quite possible that *some* who recant, claiming their memories were falsely acquired, are actually lapsing into a denial about their painful pasts and/or deciding on some level that the break in family relationship is much more painful than anticipated. Recanting is the clearest, if not the only, way to consciously or subconsciously deny one's own accusations if the goal of the confrontation (confession and healing) was not met.

Finally, a recanter suffering from a dissociative disorder often has the ability to separate many ordinary things from consciousness. Thus, especially when motivated, all prior knowledge and conviction of one's own abuse can likewise be split off from consciousness, providing a means for deep denial and a full retraction. This is the same mechanism under which a DID patient may "lose time" and the memory of immediate, but normal everyday experiences.

Evidence for Recovered Memory.

To most critically discuss the evidence for recovered memory, we must not ignore the forefront alternate explanations offered for each. Such counterperspectives are perhaps best presented in an interview of **Harrison G. Pope, M.D.**, Associate Professor at Harvard Medical School and member of the FMS scientific advisory board (Pope, 1994). Dr. Pope, holding that virtually all recovered memories are false, questions each and every otherwise conclusive piece of research on the commonality of delayed traumatic memory, including all reports of corroboration. In final consideration of Dr. Pope's comments, it is noteworthy that he relies on the contingency being fact in every case he dismisses. That is, Dr. Pope must assume that every explanation he offers to counter each and every results is correct, however slight the probability. Such a position requires faith in an ever shrinking probability.

The most significant evidence for recovered memories consists of:

Linda Meyer Williams, Ph.D. of the Family Violence Research Laboratory at the University of New Hampshire conducted a follow-up study 17 years later on 129 women *hospitalized* as children for sexual abuse and found that 38 percent did not recall the experiences documented in their hospital records 17 years earlier. (Williams, 1993). **Dr. Pope** contends that these results resemble other *non-disclosure* findings from both a similar prior survey conducted by Femina & colleagues (1990) and in Federal Government investigations in the 60's and 70's, in which people elect not to tell about various life events of which they were in fact conscious. Thus he holds that *all* 38 percent of these women did know of their abuse, but elected not to disclose this incident which had prompted a hospital admission 17 years earlier.

However, in Williams' experiment, significant time was taken to establish only the highest rapport with each woman before interviewing, to counter this very contention, yet it is not clear whether Femina, et al took the same time and care to develop such a rapport with their sample who did admit their knowledge of the initially non-disclosed abuse during a second "clarification interview" when they were confronted with their documented histories. Further, and discordant with Pope's position, is that out of a subsample of the 23 women who received the *highest* credibility rating by the interviewer, and with documented medical evidence of genital injury, Williams found *52 percent* did not report the abuse. It seems that those in the highest credibility group would have disclosed more often rather than less often if non-disclosure accounted for *all* 38 percent.

Finally, and to counter Pope's statement that "a 38 percent non-disclosure rate for an embarrassing event that had occurred 17 years earlier is consistent with what one would predict," Dr. Williams points out that of the women who elected not to tell, 68 percent told the interviewer about *other* sexual assaults. Yet it is not clear how many in Femina's study disclosed other sexual assaults, as did in Williams' participants.

Judith Herman, M.D. conducted a study of 53 women in group therapy (groups are often cited as a source of false memories), all of whom recovered amnesic memories of abuse, found 74% were able to find corroboration from family members, pornographic photos, or diaries. (Herman & Schatzow, 1987). Further, Herman notes that denial signifies little. Research with known pedophiles has illustrated that they often exhibit a cognitive distortion; they often deny the offense until corroboration is presented at which time, if they admit it, will then often minimize or rationalize their behavior (Horn, 1993).

Corroborated Recovered Memory Cases.

n Francis S. Van Derbur was an ambitious boy who went through college on scholarships, worked every spare minute, played piano by ear and recited poetry by heart. A former mayor of Denver once called Mr. Van Derbur "a figure in the state's history," and he was named the Outstanding University of Denver Alumnus for 1951. Mr. Van Derbur was an important influence on the Cleo Wallace Village for Handicapped Children, Colorado Women's College, the University of Colorado, the Denver Center for the Performing Arts, the Civic Theater, the national Intrafraternity Council, and the Boy Scouts. His death by heart attack in 1984 made the front pages of the Denver papers, and he is interred in a mausoleum atop Mt. Lindo near a huge neon cross which he built for his mother and which is now an official Jefferson County landmark, serving as a reference point for airline passengers flying into Denver.

Perhaps the most impassioned theme for false recovered memories is that the accused are often well liked, positive, productive, even philanthropic people, such as Francis Van Derbur. It can be difficult to accept that someone of such notable character would entertain even a fleeting incestuous thought, let alone molest

his children throughout childhood. Friends of his family would know no less than a beautiful family life to be envied, and family pictures are just as pristine.

Francis Van Derbur insisted that each of his four daughters, like himself, volunteer, and the youngest of his four daughters Marilyn, spent hours at the Wallace Village, serving in programs for emotionally disabled children. She had a seemingly beautiful childhood, was a popular girl with unsurpassed poise which served her well enough to become Miss America of 1958. Such a picture is not compatible with her recovered memories of incest by her father, occurring from age five *through her teens* until she left for college. Her “day child” had no awareness whatsoever of incest--until at age 24 the mere suggestion over lunch from her longtime friend and former youth group minister, Reverend D.D. Harvey, triggered a rush of overwhelming emotion and memories. After sobbing uncontrollably, her first words were “Don’t tell anybody.” The city of Denver did not respond with empathy or belief. Callers to talk shows asked such things as “Why should we believe her?” or “Is she just trying to be famous again?”

Corroboration arrived only three days after Marilyn went public. On May 11, Fawn Germer, of the Rocky Mountain News reported a phone interview with Gwen Mitchell, Marilyn’s oldest sister, who had moved to California to work as an attorney. Gwen said that she, too, had been sexually abused by Francis S. Van Derbur. But unlike Marilyn, *Gwen had always remembered*: The incest began when she was 7 and ended *when she was 18*. Until that moment, Gwen assumed that she was the only abused child in the family. Lenore Terr, M.D. offers a thorough and captivating narration of the family history as well as an analysis of the memory processes of Marilyn and Gwen (Terr, 1994).

n Eileen Franklin Lipsker charged her father with the murder of her best childhood friend Susan Nason after recovering the memory 20 years later. Her father was found guilty and went to prison. Many have used this high profile case as a tragic example of how false memories have been used to convict an innocent man. However, to make an informed conclusion one must have the context, which I will attempt to summarize.[\[7\]](#)

Eileen began recovering the memory while alone on her couch one day at home watching her daughter play on the floor. When her daughter looked up and over her shoulder, pivoted her head a certain way and the sunlight shone over her freckled face, red hair, and blue eyes, she suddenly remembered something as a picture. She could see her redheaded friend Susan Nason looking up, twisting her head, and trying to catch her eye. Eileen knew that Susan was terrified. Suddenly, Eileen felt something move to one side. She saw the silhouette of her father. Both of George Franklin’s hands were raised high above his head before he struck Susan’s head with the large rock. Eileen didn’t question the content of this memory, only its long absence. She feared that if she revealed this to anyone, she would be classified insane and her children would be taken away. For months, Eileen continued retrieving pieces of the incident, but told no one. She found herself inundated with a slow but inevitable memory cascade, all of which occurred without therapy.

Eventually, the whole episode came back. Her father was a fireman and had afternoons off. One afternoon, she went off with her father on a drive after he suggested “playing hookey” from the usual after-school routine (it was during this very incident that she learned the meaning of the word “hookey”). She and her father spotted Susan playing in an open field near their house. Eileen begged Susan to come along with them in the van so she did. He drove the two girls up a mountain road past a lake that Eileen had always loved. He stopped the van, let the girls play and after a smoke and a beer told Eileen to go up front. She remembers hearing the weak cries, seeing the white socks and white children’s underwear, and at 8 years old somehow knew this was rape. She remembered being so terrified that she had rolled herself into a tight ball in the front seat. When George then took Susan out of the van, Eileen followed. At the last moment of Susan’s life, she pivoted her head to catch Eileen’s eye and the sun shone across her freckled face, red hair, and blue eyes just as it had on her own daughter’s the day her memory surfaced. As she ran back to the van, her father ordered her to forget all about this, that “No one will ever believe you” and that she would be “put away” if she told because it had been her idea for Susan to get into the van; and finally that he would kill her, too, if she didn’t stop crying. At home, she developed a bad case of the shivers and slept with her older sister, trembling all night long.

Lenore Terr met with Eileen and eventually realized that she was a Type II trauma victim--a repeatedly traumatized child. She had *always remembered* her father’s violence, throwing all five children against the walls. There were times she was certain he would kill her mother right before her eyes. Six months after her first memory returned, she saw a psychotherapist, Kirk Barrett, about her marriage problems and wondered out loud whether it was possible “for a person to have a really horrible memory of something that had never been remembered before.” Barrett assured her this could happen, but couldn’t be certain whether such a memory would be real.

When she later mentioned the memory of the murder to her older brother, he was so incredulous she felt

suddenly the need to endow herself with some extra credibility. "I recovered the memory under hypnosis," she lied, but George Jr. remained skeptical. Eileen then told her mother, Leah Franklin, about her memory, and her mother was not shocked. She said that George Sr. was certainly capable of killing and it was a wonder she wasn't killed during their stormy marriage. Although Leah spent months in mental hospitals during the marriage, she entirely recovered after leaving George, subsequently remarried, attended law school, and opened a successful legal practice. When Leah asked Eileen about why the memory was gone for so long, Eileen responded "Hypnosis," reaching once again for a magic sounding source of credibility.

Eventually she told her husband, Barry, under the condition that he promise not to tell anyone. He believed her, and then began talking to the district attorney's office, using only his first name, saying he had information about an old unsolved murder. One day, he suddenly told Eileen that she was wanted on the phone, thereby prompting her to disclose, which eventually led to the trial.

Evidence: 1) Leah washed a bloody shirt of George's shortly after the time of the murder. He explained that it was from a painting accident. Leah then asked him at that time *whether he murdered Susan Nason*. He denied it. 2) Then in 1984, six years before Eileen's memory, her sister Janice --the third member of the family to independently consider George's involvement-- actually went to the Foster City police to accuse her father of the killing. When the police called her on the phone, George answered the call, said she was unavailable, and after hanging up, kicked her so hard in the base of the spine that her back hurt for weeks, and she kept quiet from then on. 3) Eileen eventually recovered memories of her own sexual victimization by her father--explaining her implicit understanding of rape at age 8 *and* her access to dissociative abilities. The case was so strong for Eileen's sexual abuse that the defense accepted these charges. Further along this line, Eileen and Barry had cut off all communication with her father two years prior--due to his inappropriate actions around their own daughter and his sexual perversion about kids in general. Moreover, the D.A.'s men found George living out his retirement in a Sacramento apartment "filled to the brim" with child-size dildos, child pornography, and books on incest. However, note that any mention of this evidence would have so prejudiced the jury that it was ordered out by preliminary judicial ruling. 4) The defense attempted to show that Eileen could have acquired her many details from newspaper articles. Eileen testified under oath that she had not read the papers detailing Susan's murder (she was only 8 at the time), yet her recollection included many accurate details: the size of the rock, location of the blow to the head, "some hair that was no longer attached to her body," Susan's injured hand and crushed ring, and more. As a child, Eileen became withdrawn after Susan's disappearance. She began pulling at her hair at the same location where Susan had received the horrible blow--it is common for survivors of trauma to unconsciously repeat elements of the traumatic events (Terr, 1994). 5) Finally, the jury verdict was "guilty"--beyond a reasonable doubt--even without any consideration of the pedophile paraphernalia found in George Franklin's apartment.

- n Herald v. Hood, C.A. No. 15986 (Court of Appeals of Ohio, July 21, 1993). Julie Herald sued her uncle in 1989 alleging sexual abuse from age 3 (in 1962) through age 15. The memory returned when Herald was watching her 4-year-old daughter playing with a friend. She was awarded \$150,000 in compensatory damages and \$5 million in punitive damages. The Ohio Supreme Court recently upheld the decision. Herald presented a taped telephone conversation in which her uncle indicated his guilt, and two therapists testified about the confession he made in their presence. The case has been covered in the Plain Dealer since December 17, 1993.
- n Pfiefler v. Hustwaite, No. 98-2-00044-8 (King County Superior Court, Seattle, 1991). Mentioned in Anastasia Toufexis, "Can Memories be Trusted?" Time Magazine, October 28, 1991). Ms. Pfiefler received \$1.4 million from her church-run school in settlement of her recovered memory claim that a teacher repeatedly raped and sodomized her two decades earlier. According to Verdicts, Settlements & Tactics, "discovery revealed several other victims whose testimony was helpful in establishing that the Seventh Day Adventist defendants should have known of the teacher's propensities."
- n From the St. Petersburg Times, March 6, 1994: "Frank Leonard of Fort Lauderdale said that therapy in 1992 helped him recover memories of sexual abuse in the 1960s by his uncle, Tampa publishing executive Frank Louis Cowles Jr. Records were produced showing that Cowles had been convicted in 1959 of sexually abusing young boys in Clearwater, and had been sentenced to probation and counseling. According to the lawsuit, Leonard's uncle admitted the abuse and then killed himself after a confrontation. Leonard won a settlement from Cowles' estate."
- n Jane Doe v. Budge (Case No. NWC 10610; Van Nuys, California) Verdict date: January 15, 1993. The case was originally tried in 1989; this was a retrial on the question of punitive damages. Plaintiff (age 26) alleged sexual abuse 14 years earlier. "Defendant admitted to a few acts, but denied most allegations. Defendant also argued that he had changed his life since the incident." Verdict in the amount of \$1.25

million -- nine day trial; jury deliberations: 1 hour, 10 minutes.

- n In the spring of 1992 in Providence, R.I., John Robitaille heard a news report about Father James Porter, a pedophile priest, and suddenly recalled that he, too, was his victim. His *specific* memories were confirmed by two classmates. Porter later pleaded guilty to molesting 28 of the *153 reported victims*. Harvard psychiatrist Stuart Grassian surveyed 43 of them in 1993 and found another 8--or 19 percent--who reported no memories of the childhood abuse *until* the case broke in the media. Others reported years of forgetting (Butler, 1996). Suggestive therapy was keenly absent in these recovered memory cases.
- n In 1992, a 26 year-old Michigan police clerk, who, again was not in therapy, was typing probation reports about child sexual abuse cases when she remembered being abused at the age of 8 in Ohio by her mother's boyfriend. Ohio police detectives eventually tracked down former child psychologist David A. Hoffman in Poughkeepsie, N.Y. He confessed in 1994 and was sentenced to two years in prison. Hoffman had also been convicted of sexually abusing children at a New York State children's home in 1986 (Butler, 1996).
- n To further contend the typecast of recovered memories limited to middle-class white women in suggestive therapy, is a 1995 survey by psychologist Diana Elliott of UCLA. Elliott surveyed a group of 505 randomly selected, demographically balanced men and women across the country of all races. An astonishing 72 percent said they had witnessed or endured a serious trauma, such as combat, assault, serious car accident, mugging, natural disaster, rape, child sexual abuse, or drive-by shooting. Of those victimized 15 percent (55) reported a period of total amnesia; of that relatively small minority, only 8 were in therapy when their memories returned. Most recollection was triggered by a book or media event like Oprah Winfrey's TV show, by an incident reminiscent of the original trauma or by talking to family members. *Combat veterans were more likely to report memories triggered by therapy than were sexual abuse victims*. Although Elliott did not confirm the accuracy of these various memories, that would have been a much larger and more invasive task than the original survey (Butler, 1996).
- n A recovered memory case typical of those categorically dismissed by false memory activists involves Chereese Franklin of Salt Lake City. Franklin entered therapy in 1992 for panic attacks. Using a technique suggested to contact her "inner child," she used her left hand to record detailed memories of seemingly unbelievable abuse by a teenage cousin, Kenton Stevenson. Her vivid journal entries included bizarre accounts of being raped with sticks, being stuffed into the carcass of a dead deer and being made to watch her cousin mutilate a rabbit. Were it not for corroboration, FMS advocates might use this case as evidence of false memories through suggestive therapy. Indeed, both the memory-recovery technique and the sadistic, seemingly preposterous content would elicit at least some skepticism by most critical thinkers. But after recording her memories in a *dated* journal, Franklin hired a private detective, found Stevenson's former wife and learned that Stevenson had been found to have abused his own children as well. At a trial in August 1996, Stevenson's 16 year-old daughter testified that her father had sexually abused her. A stepdaughter testified he had *mutilated animals* in front of her. The accounts were supported by a 1986 Family Court divorce and custody ruling, finding that Stevenson had sexually abused his son and two daughters, and had *raped one with a coat hanger*. A Salt Lake City jury awarded Chereese Franklin \$750,000. The verdict suggests that, in some court cases, the presence of substantial external corroboration may outweigh suspicions about the therapeutic techniques involved or the bizarreness of the reported abuse (Butler, 1996).
- n In 1996, a 39 year-old Toronto woman identified only as D.M.M., while involved with Alcoholics Anonymous, recovered memories of being repeatedly abused by her family doctor. She had returned to Toronto where the abuse took place, and was writing in a journal in 1991 when her memories poured onto the page. Last March, a provincial justice ordered Leo Pilo, M.D., to pay her \$95,000--despite the testimony of FMSF advisory board member and psychiatrist, Harold Merskey, M.D., who suggested that D.M.M. was probably suffering from "false memories." However, D.M.M.'s accusations were supported by four other women who said Pilo had sexually abused them in childhood, too. Pilo's medical license had been previously revoked in a separate proceeding in which he admitted the women's charges (Butler, 1996).
- n Ross Cheit, a lawyer and ethics professor, recovered memories of childhood sexual abuse by a camp counselor. These memories were externally verified not only by fellow campers, but also by the, albeit rationalizing, camp founder and the offender himself (Horn, 1993). In my correspondence with Cheit, he contests a recent minimizing of his case in a book by Harvard memory researcher Daniel Schacter. According to Schacter, Cheit's incident probably wasn't traumatic and therefore is less evidential of traumatic amnesia; Schacter mischaracterized his case by distorting a quote of Cheit. Schacter also claims that there is a lack of corroboration for more horrific abuse which occurred over many years. However, as noted in several other cases within this section, as well as in the case of "Rene," by the Irelands (1994)

(described in the SRA corroboration section), and others still, there is in fact substantial corroboration for the more horrific long-term recovered memories as well.

- n David Calof (1993) answers the key objections of proponents of the False Memory movement and explains in his article that therapist-induced suggestion is by far the exception to recovered memory. *1)* In his article, Calof tells the initially unbelievable stories of two of his over 400 clients during his 20 years as a clinician who have recovered memories of sexual abuse and were able to corroborate them apart from the denying, but eventually confessing offenders (Calof, 1993). *2)* Calof describes his initial skepticism -- 6 years of disbelieving his first SRA client's memories. He later corroborated the case by *two others*, one an eye-witness and the other a *victim of the same perpetrators 15 years later* in the same small town (Calof, 1994).

Only Remaining Argument: False narrative memories. As Paul McHugh noted in the FMS Newsletter in response to the Linda Williams Research (Williams, 1993), the existence of delayed memories does not preclude the existence of false ones. This is the final attestation to the otherwise conclusive evidence validating recovered memory, as well as the key distinction between the malleable normal memories and the inflexible traumatic-type memory. A survey of those who recover memories in therapy would quite likely show that virtually all possess the indicative symptoms of dissociated traumatic memory, versus the narrative memory distortions described by the FMS supporters.

Conditionless Responses?

Martin Smith (1987, 1992) has identified a chain of three levels of conditioned memories and cognitions: everyday anxieties and worries (third order); obsessions, dreams, taboos, and phobias (second order); and the first order of conditioned responses of terror, rage, dread and despair. To believe in false memories, we must know how a non-conditioned (suggested or non-suggested) stimulus can transcend all three orders of conditioned responses. In other words, can a memory be "planted" and then escalate to terror and panic-based responses at nearly reflex levels of consciousness without any such conditioning? Can mere inadvertent suggestion infuse death terror? To accept false memories, we might seek to know how panic responses triggered by everyday items and experiences can coexist in the same subconscious mind which merely created the memories in the first place.

The Foundation of the FMS Foundation.

Perhaps most significant on the topic of false memory is that the very title "False Memory Syndrome" was coined by the co-founder of the FMS Foundation, Dr. Ralph Underwager, a psychologist and director of the Institute for Psychological Therapies in Northfield, MN. In addition to resigning from his position in the Foundation for his indifference and/or approval of "adult-child sexual relations" in an interview printed in the winter 1993 issue of *Paidika*, a pro-pedophilia Dutch Journal, eight states have investigated him for his performance as a professional expert witness.

Via his "expertise," he was instrumental in the acquittal of, among others, an Australian daycare in which approximately 20 children were allegedly abused. In this case, he successfully barred the testimonies of the 4 to 8 year old child victims due to their "inability to form an opinion of right and wrong." He also disqualified blatant medical evidence from the trial, which included such injuries as anal tearing. When he was later interviewed by the Australian equivalent of *60 Minutes*, he denied having made the statements they quoted him as making. The interviewer then presented the court transcripts, at which time Dr. Underwager ended the interview and said to the interviewer, "Sir, you are the most despicable human being I have ever met!" Further, he has required that his clients sign a contract to pay all legal fees if he is sued for lying on the stand (Calof, 1994).

The other co-founder and present director of the FMSF is Dr. Pamela Freyd, who claims to be the wife of a falsely accused husband. Her daughter, Jennifer, a psychology professor specializing in memory, realized that her two years of silence was being framed by the media as complicity with her parents' claims of false memory. She reluctantly went public to counter her mother's widespread inferences of substantiated false memories, thus setting the record straight that she had *not* retracted her memories nor her private accusations of sexual abuse (Mitchell, 1993 & Calof, 1994).

By the phrasing of the recruitment question, "Do you know of someone who was falsely accused?" the False Memory Syndrome Foundation is making an unscientific blanket assumption that all denied accusations are false.

Media Influence.

Many are skeptical about the existence of SRA simply because if it was real, why wouldn't they have heard

more unsensationalized news reports about it?The media has both downplayed the actual findings, such as the McMartin tunnels, while sensationalizing the “falsely accused” along side survivor accounts.

Contrarily, the false memory movement *has* received media attention, further shaping public opinion away from belief of the unbelievable. As an example, twenty articles from across the country on the topic of False Memory Syndrome were recently analyzed for content and were found to be lifted directly out of publicity releases from the FMS Foundation(Calof, 1994) with validity assumed categorically.The mass media is undoubtedly left in a difficult position and must rely on information from its sources; however, it is irresponsible journalism not to portray both sides of a debate bearing such profound implications.

5. HISTORIC CONSISTENCY OF SRA

Some have suggested that our cultural demonology (legendary cultural symbols of evil, e.g., witches, skeletons, hauntings, etc.), when combined with patient suggestibility results in SRA reports (Stevens, 1992). The following records show that the opposite is more likely true: Traditional practices maintain an unbroken progression of various occult activities through time, including satanic ritual abuse.

19th and 20th Century Records.

Many have proposed the view that a “Satanic Mass Hysteria” began in the early 1980’s with the publication of *Michelle Remembers* and the McMartin Preschool trial. However, note that these cases did not comprise the beginning of such reports, but take their place in an age old continuum of both overt and covert occult practices which often involved respected citizens. The sudden publicity of these cases is most likely due to a larger cultural readiness to accept such previously ignored disclosures (see False Memory section for more background on this cultural change).

- In 1934, a scholarly treatise was published “intended for circulation only among members of the learned professions, mature scholars of the sexual sciences and other educated adults.” French Professors Emile Laurent and Paul Nagour, trace the history of Black Magic and erotic occultism. Pulling from “all the fleeting pages of history,” the authors describe widespread practices of the Black Mass and erotic occultism from the 12th century to the early 20th century:

“...there are numerous societies throughout the world that celebrate Satanism and which are highly organized...The biggest of these societies founded as long ago as 1855 is the society of the Re-Theurgistes Optimates. Beneath an apparent unity it is divided into two camps, one aspiring to destroy the universe and the other thinking simply of imposing upon the world a demoniac cult of which it shall be high priest. The society has its seat in America...For a long time it has had branches in France, Italy, Germany, Prussia, Austria, and even Turkey” (p.82-83).

The book is replete with numerous illustrations of sexual torture and abuse as a part of Satanic rites going back to the middle ages. Consider the “abominable practices” of a certain Abbe Guibourg, for example:

“He celebrated many masses on the abdomens of famous women . . . The ritual of these ceremonies became standardized. Generally, a child was kidnapped and burnt in a furnace out in the country somewhere, the ashes were saved and mixed with the blood of another child whose throat had been cut, and of this mixture a paste was made...That was the material of the sacrament” (p. 79).

- In 1930, the famous American psychiatrist, Karl Menninger, describes hearing contemporary accounts of the Black Mass and erotic occultism, including child sacrifice. Intended for medical students, this book found a wide market and was the first book to popularize psychiatry in America. Menninger observes:

“One of the most curious examples of perversion is found in the Black Mass, which I am told is celebrated in Paris and New York city and probably in all other large cities, though an attempt is made to keep the rite absolutely secret...In the common version, on the altar is a naked body of a woman. The celebrant is a deposed priest...The service follows the Christian Mass, either Roman or Anglican, making it blasphemous in every place possible. The members of the congregation are naked throughout the service and at the engage in both normal and abnormal sex relations. Sometimes, it is alleged, the blood or the ashes of a murdered child are used in the ceremony.” (Menninger, 1930).

- Aleister Crowley is a name recognized around the world as a deceased leader of the occult. *Passport* magazine (1986) describes how Crowley maintained a lifelong attitude of setting himself up in god’s place. The article describes Crowley’s involvement in similar activities:

“For a time, he lived with disciples at the Abbey of Thelema...near Cefalu in Sicily, Italy. Satanism was practiced at the abbey and animal sacrifices were offered up to the devil by the men and women who lived there. After finding out about the black magic rituals taking place at the abbey, the Italian government investigated and discovered that human infants born to the disciples were also being killed in rituals. Crowley was expelled from Italy.” (*Passport Magazine*, 1986).

- In 1836, the book *Awful disclosures of the Hotel Dieu Nunnery of Montreal* sold 300,000 copies and prompted numerous others to come forward with accounts of similar experiences. It was written by a

woman who described her escape from a cult that bred babies for sacrifice.(Johnson & Padella, 1991).

Pre-Inquisition Records.

Further back in history yet are the results of a survey conducted by Hill and Goodwin (1989) of pre-inquisition historical documents describing Satanism and satanic practices.They compiled a list of 11 elements of satanic ritual:(1) secret nocturnal feasting around a special table or altar; (2) ritual orgiastic sex involving incest, homosexuality, and anal intercourse; (3) imitations and reversals of the Christian mass; (4) ritual use of blood, semen, urine, or excrement; (5) sacrifice of embryos and infants often using knives followed by cooking in a cauldron and/or ritual cannibalism; (6) ritual use of animals; (7) ritual use of torches, candles, and darkness; (8) chanting, especially of names of demons; (9) drinking a drug or potion; (10) dancing backwards in a circle or other ritual use of the circle; and (11) dismemberment of corpses and extraction of the heart.Although Hill and Goodwin do not suggest that this historical evidence proves that patients' reports of ritual abuse by satanic cults are true, they do suggest that this be considered for further investigation. They also acknowledge that credibility is a key issue in the treatment of survivors of extreme childhood trauma and abuse.It is interesting to note how the elements they list correlate with the abuses reported in the attached surveys.

Biblical Records.

Additionally, there are numerous biblical references specifically to the pagan practice of child sacrifice to demons/ false gods, spanning thousands of years.Read in the Old Testament Psalm 106:36-39, Deut. 12:31 with 32:17; II Chron. 28:1-4, Isa. 57:3-8, Lev. 18:21, Ezek. 16:20-21, and Jer. 19:4-5, supported much later in the New Testament by I Cor. 10:20.In Psalm 106:36-39, king David told of the lamentable deeds of those who had worshipped false gods:

“They worshipped their idols, which became a snare to them.They sacrificed their sons and their daughters to demons.They shed innocent blood, the blood of their sons and daughters, whom they sacrificed to the idols of Canaan, and the land was desecrated by their blood.They defiled themselves by what they did; by their deeds they prostituted themselves.”

David's people had their struggles with demon worship, as even his own descendent became involved a few generations later:

“Ahaz was twenty years old when he became king, and he reigned in Jerusalem sixteen years.Unlike David his father, he did not do what was right in the eyes of the Lord.He walked in the ways of the kings of Israel and also made cast idols for worshipping the Baals.He burned sacrifices in the Valley of Ben Hinnom and sacrificed his sons in the fire, following the detestable ways of the nations the Lord had driven out before the Israelites (2 Chron 28:1-4).”

It therefore is very possible that the *historical* satanic ritual activity is at least the origin of both our culture's general demonology and SRA as well.

The Constants.

Constant:Power and control.

Although the ancient pagan cultural atmospheres may have been quite different than our western culture surrounding today's SRA, the central theme has remained constant through nearly all occult and pagan religions:Power and/or control (real or perceived) may be attained through certain pagan rituals and mystical methodologies.This is in stark contrast to the Judeo-Christian faiths which place the self in subordination to God; the self is subservient to an infinite *God* whose ultimate glory will prevail (Psalms 34, Ps. 46:10, I Cor 10:31, Eph. 3:20-21, etc.). Judeo-Christian religions oppose any spiritual activities prescribed to bring pleasure or benefit apart from God's provision (Lev. 19:26, II Chron. 33:1-6, Acts 16:16-18, Gal. 5:20). Christians trust that through the demonstration of His self-sacrificial love (via Jesus), this provision for us will be grand indeed.SRA is clearly anti-Judeo-Christian, not only in behavior, but in its very purpose to (temporarily) fulfill a power-hungry self at great expense to others.

Although SRA activity is considered a deviant/pathological behavior, survivors claim the same philosophy as is shared with the pagan/occult religions throughout time.To reapply Virginia Doland's wording (Doland, 1992, p. 339) “the fundamental meaning may be more complex than its literal surface,” SRA occurs not simply to be hateful or to terrorize children, but more profoundly as a self-perpetuating cycle of abuse including an addiction to a methodology of pursuing *power and control*.

Constant:Human Nature.

The Bible consistently demonstrates how human nature does not change very much. Throughout the Old

Testament, Israel repeatedly abandoned God to participate in the, albeit overt, pagan practices (which included child sacrifice) even while they recorded God's miraculous signs and wonders occurring every few generations. The New Testament also supports the concept that human nature is a constant (Matt. 23:25-39, Luke 11:29-54, Acts 8:51-53, and Rom 1:18-23 & Rom 3:9-23). Thus, since human nature has apparently remained constant, some people in today's Judeo-Christian based societies would likewise also abandon God for the very same purpose of seeking forbidden gratification, real or perceived.

Constant: Power via addiction to sexualized evil.

If this gratification is sufficient to perpetuate the existence of child-sacrifice for thousands of years, from the days of Moses into the early 20th century, perhaps it is sufficient to perpetuate its existence even today among people who are similarly bound to just such a multigenerational addiction to power through sex and death rituals. Although not necessary, it is much easier to accept this if one holds the biblical concepts of a sinful human nature, Satan, and demons (see Job chs. 1-2, Zech. 3:1-2, II Cor. 11:14, esp. Eph. 6:10-18 and throughout Matthew, Mark, Luke, and John), who are able to supply immediate gratification through sin which is in conflict with the spiritual life described in the Bible (Rom. 8:5-9, Gal. 5:16-25). Further, Matt. 14:8-9 implies Satanic rewards for Satanic worship.

6. ALTERNATE EXPLANATIONS CONSIDERED

In the skeptical literature, there exists a variety of proposed alternatives to explain the existence of this “mass hysteria.” Each author discussed below employs various combinations of the following explanations to discredit all SRA claims:

- (1) SRA disclosures were nonexistent before the 80’s.
- (2) Therapist (“iatrogenic”) creation of MPD
- (3) Screen memories for other real traumas
- (4) Social Scapegoat Theories:
 - a. Parental guilt over daycare
 - b. Fundamentalist “moral crusade”
 - c. Conservative response to Feminist movement
 - d. Decline of communism requires a new evil
- (5) Social theories such as Group Polarization (group conclusions are more drastic than any one member of the group)
- (6) Exposure to, or suggestion of SRA specifics:
 - a. McMartin daycare case (the first one)
 - b. Books, chiefly *Michelle Remembers*
 - c. Innate cultural symbols of evil (“demonology”)
 - d. Therapist suggestion (direct or implied)
- (7) Incompetence of those making SRA claims:
 - a. Pre-existing mental instability of those reporting SRA
 - b. Financial/Reputation gain of therapists treating survivors

Skeptical professionals and journalists elaborate on various combinations of the above explanations, and in many cases have misrepresented the survivor population and ignored significant corroboration to support their objective of debunking all SRA. In the process, they avoid the definitive contexts of the victims and others personally involved, yet presenting such explanatory backgrounds is counterproductive to their purposes of discrediting all accounts.

Skeptics tend toward several methods for achieving this end: a search is made for incidents to exaggerate into *ad hominem* labels of persons, assigned such that informants’ and therapists’ entire personhoods are confined to a particular negative incident, devoid of any personal context (“psychotic break and alcoholism” used by both Nathan and Lotto to fully discredit Judy Johnson, the McMartin whistleblower; see footnote under Corroborative Evidence for context). Secondly, corroborative evidence is minimized or severely mischaracterized, if sought at all. Writers have insufficient involvement with those on the victim’s side to make an accurate “diagnosis” of FMS, and have little-to-no relevant background with any *known* offenders to qualify them as discerning their innocence. And third, items from survivor accounts are simply listed in a tone of repugnance, presenting a form of peer pressure by inferring the gullibility of any reader who would believe in such things. There seems to be an inherent negation in the mere *listing* of the abuse claims and personal labels.

Blanket Assumptions. The skeptical literature turns several important observations into blanket assumptions. One such assumption is that there were no reports before the 1980s, implying that the concept had not yet been *invented*. As we have seen in the previous section, this is incorrect; these reports have persisted over hundreds of years, into early this century and of course continue today. The dramatic increase in reports since the 1980s, not their invention, should be the topic of investigation. Even this dramatic rise in disclosures must be examined *within the context* of the enormous shifts in the cultural perceptions of child abuse and the broad acceptance of counseling.

Society’s Shift. The shameful stigma of being sexually abused is continuing to be transformed from a freak-type disposition to painfully common in all demographics. Alongside this, the stigma of counseling in general has nearly evaporated. Society at large has become much more accepting of the validity of counseling not only for marriage problems, but for personal growth as well.

Psychotherapy’s Shift. Therapists’ capacity to believe such accounts has paralleled the reporting of them. Not

only are therapists open to patients' accounts of such trauma, but they typically offer much more hope for healing and treatment of childhood trauma. The atmosphere between professionals has also evolved considerably to validate each others' cases, allowing consultations and comparisons of such cases that were previously considered too paranormal to treat. Finally, three decades ago, when the more general images were not initially accepted, the threat of institutionalization prevented the flow of any such details from all but the most severely disordered dissociative patient. Such accounts were likely considered delusory and patients reporting them were under risk of the label "insane", lengthy hospitalizations, and anti-psychotic medications, from even the best-meaning psychiatrists, who were incapable of belief and/or sufficient treatment of childhood trauma.

Debbie Nathan (1987, 1990, 1993, 1994)

Debbie Nathan was perhaps the first journalist to offer in-depth alternate explanations for the emergence of SRA allegations. She won the H.L. Mencken Award for Investigative Journalism for presenting socially parallel explanations (comprised of above items 1, 4, 6, and 7), in her 1987 work, "The Making of a Modern Witch Trial" (Nathan, 1987). In this article, she presents an articulate social argument against the criminal convictions of two women in her same town of El Paso, arrested on similar charges. She attributes this SRA case along with eight others across the country, all of which involved women (and men), to the McMartin case. She presumes the women must be innocent, and that each of these cases is a strategic reaction from Reaganite 80's conservatives against the feminist movement with the daycares as the obvious scapegoat. In all of her articles, she dismisses the children's claims chiefly by citing them. She then offers an alternate explanation in rhetorical parallels.

In her 1990 article, she blamed the McMartin case on the psychotic allegations of Judy Johnson, apparently without investigation into the context of her illness (discussed in footnote 4). She then cited the publication of the book *Michelle Remembers* as an explanation for how "large numbers of literate, secular people" were duped into a Christian fundamentalist "paranoia about Satanism," and that co-author Lawrence Pazder met with police and parents in the early days of the case, thereby concluding that the ritual abuse details came from grown-ups through suggestion to the children. Psychiatrist, Dr. Roland Summit, became involved on the victim side of the case offers quite another account. As a participant-observer, he asserts the correct order of events, describing that it was only *after* children had been growling obscenities and death threats in half-awake nightmares and telling their naive parents and therapists similar stories about costumes, ceremonies, chants, bloodshed, and death that parents and police looked to out-of-town experts who could offer some form of explanation. Dr. Pazder came not to introduce these concepts, but to explain and empathize.

In Nathan's (1993) articles dismissing the Country Walk daycare case in Miami, she ignores all the documentation in the 592 page account of Jan Hollingsworth, who, again, *lived in* the community, and participated in the case -- a much different account than Nathan's.

Perhaps her most aggressive dismissal is her pre-publication internet post of her now recent book, *Satan's Silence*. She titled this post *McMartin Preschool Tunnels: Evidence of a Hoax*. Although she cites Summit's and Faller's 1994 articles at the beginning of her text, she misrepresents many of the claims described in these same two articles. She begins by adversely labeling each person involved, leaving out any background which would fully explain each of these items. Secondly, she misrepresents the findings so as to contradict both what the children had reported and what was actually unearthed. Specifically, she compares one child's *pre-dig* description of a 10'x10' secret room with the dimensions of the excavated tunnel--with no mention of the room of the said size that *was also excavated* as described in Summit's article, which she references.

She also omits Summit's eye-witness description of how the tunnels *did not* conform to plumbing trenches, and to the contrary cites contractors who, without inspection, said the tunnels "*sounded like* channels dug for plumbing," again the opposite of what was printed in the article she cites. She also conveniently excludes from her take on Summit's article: all tunnel-specific findings, including the contrast in soil in the tunnel compared to the soil surrounding it; hand shovel marks found along the tunnel walls, and the mechanical backhoe marks which were confined to the alternately described utility trenches. Neither does she mention from Coulborn-Faller's article that 2,000 artifacts were excavated, including 100 animal bones, coinciding with children's reports of the killing of animals.

She then concludes that parents planted all the artifacts, based on no more than a confusing incident five years earlier (March 1985). A group of parents (who were not involved with the later tunnel excavation project) dug up two turtle shells found with green leaves in the hole, followed 9 days later by the discovery of a 3"x5" map-note of the vacant lot, inside a toy box in the preschool displaying the location of the two turtle shells. She concludes that whoever planted the turtle shells left the note for the digging parents. Although the turtle shells appear to have been planted (because of the green leaves), it is unclear who planted them or wrote the note. There would be an equally strong motive (of the defense) to discredit any future findings from those most

motivated to look. Such an odd incident comprises a more than convenient fail-safe by cracking open the door of doubt on any and all evidence that would someday turn up, no matter how otherwise conclusive.

Nathan also states that one of the preschool children (Jackie McGauley's daughter) has a so-called "history" of false accusations since McMartin, and thereby concludes that the original McMartin accusations were thus also falsified. According to Nathan, McGauley had a close relationship with a young reporter who was diligently cooperating with McGauley to write about the McMartin case as it unfolded, until suddenly McGauley's daughter accused this reporter of sexual abuse, ruining his promising career.

I spoke with Jackie McGauley over the phone in September 1996, and found her to be a very coherent positive person, quite different than Nathan's description. She had not read any of Nathan's articles (at Dr. Summit's suggestion) and explained among many other things how this reporter was in fact no more than a roommate with McGauley and her two children. In fact, she was not even aware that this reporter was covering the McMartin case at all. When she sought medical attention for her daughter who was experiencing severe pain, it was apparent to the doctor that she was being sexually abused, and when the doctor asked who had done this, both her daughter and her son reluctantly disclosed that this roommate had abused them. Further, as McGauley was moving his belongings out of her residence, she found a box of child pornographic photos belonging to the man.

The reporter was eventually tried, found guilty, and served time for molestation. McGauley says that as her children disclosed this, she struggled deeply about whether or not to press charges, and "just wanted to do the right thing". In retrospect, she says that she may not have pursued allegations if she knew how much unfair exposure this was going to give her family. Nathan's account again diverges sharply from that of the victim's. In asking Jackie about the disparity between Nathan's articles and her own experience, she answers that she won't talk to Nathan. Similarly, in my conversations with Dr. Summit and with Beth Vargo (president of Believe the Children), they have each said the same out of a confirmed fear that she will misquote and mischaracterize them, leaving little recourse on their part.

Finally, she discredits the archeologist, Gary Stickel, Ph.D., a graduate of the UCLA school of archeology, because he has retained his 185 page report, comparing this to other "California archeologists" who make their work available for peer review. Again, Jackie McGauley described to me how the tunnel project unfolded, that several parents contacted Dr. Stickel who headed a team of eight archeologists on the project and that after the tunnel discovery, McGauley was left to pay for half of the project herself. She also explained that archeologists are more than welcome to review the report, but that there haven't been any requests. She says this is most likely due to the more social ramifications than archeological, and that there just hasn't been the interest. As of this writing, the report has yet to be published, due to a lack of funds.

The reports of other archeologists are first, typically their employer's property, and second, not usually subjected to such hostile scrutiny, but in this case, the report has remained in private hands until the funds are available for large scale publication.

One must keep in mind that parallel social concepts combined with biased representations of SRA doesn't necessarily establish any link whatsoever. Although when evidence is selectively ignored or misrepresented when it cannot be ignored, a link may appear quite convincing.

Lawrence Wright (1993)

In the very complex Ingram SRA case of 1988 in Olympia, Washington, a curious-to-skeptical professor, Richard Ofshe from UC Berkeley, CA, conducted an experiment on Paul Ingram in which he falsely advised Ingram that his son and daughter were disclosing that he had forced them to have sex together. Ingram then elaborated on this (relatively not so far-fetched) event. Further, Wright discredits the daughters throughout the article not only via their inconsistent reports and behavior, but also in his descriptions of their extreme emotional states. One of the daughters had implicated even one of her strongest supporters as a member of the cult. Near the end of the article, he quotes one of the daughters on *Sallie Jessy Raphael* daytime talk show blatantly contradicting a medical exam that had previously found no scars on her back, and claiming to have spent most of her life in hospitals.

Before commenting, it is significant to note both the uniqueness in this case and the biased portrayal, from both Wright's and Ofshe's articles and their publishers. Wright's article was written from the point of view of Paul Ingram, which is an obvious bias, especially since *he* didn't write it; and *The International Journal of Clinical and Experimental Hypnosis* refused to print any of several rejoinders countering much of the material presented in Ofshe's article (Calof, 1994).

First of all, throughout the investigation Ingram used a hypothetical past tense in his confessions (e.g., “I *would have* opened the door...”), which may have been an intentional tool to appear coerced to the point of incompetence. If it was intentional, it obviously backfired in the end. Second, Wright’s descriptions of the two daughters portrayed not only extreme swings of emotional states, but several of his descriptions of their states closely resembled very young child alters of MPD. Not to employ circular logic, but only correlation: On the *Raphael* show, the high degree of blatancy in the daughter’s contradictions is unusual enough to also be characteristic of MPD alters, rather than implicating her as a vicious liar slandering her father and his friends. Further still, when the reporter tracked down Paul Jr., Ingram’s son, without knowledge of the extent of the accusations against his father, guessed they were sexual offenses, and proceeded to cite a time when he was 10 or 11, which *he had always remembered*. His father nearly knocked him out after he happened upon his parents and three of his father’s friends in an orgy-rape, during which his mother was tied to the bed, a rather indicative activity.

Ofshe’s Role in Ingram Case. Sociologist Richard Ofshe, in spite of his employment with the prosecution, during his first day on the case devised an experiment intended to prove that false memories had been created in Ingram. Ofshe told Ingram falsely that his daughter and son had alleged that they were forced to have sex together, something not too far from Ingram’s voluntary confession (Peterson, 1990). Ofshe concluded that the inadvertent use of hypnosis during Ingram’s interrogation (supposedly the result of relaxation techniques used by the interrogation team’s psychologist), when coupled with the influence exerted by authority figures, convinced Ingram of his guilt (Ofshe, 1992). However, Ingram’s initial confession to having sex with both of his daughters (some of which he described in graphic detail, Peterson, 1990) occurred on the same day the initial allegations surfaced, *before* he met with the interrogation team’s psychologists, and without the use of any relaxation techniques. Despite Ingram’s 16 years’ experience as a law enforcement officer and prior knowledge of the pending charges, Ingram waived his right to an attorney, a very strong indication of his immediate sense of guilt.

Despite the fact that Paul Ingram was not in therapy and that all the “mental health professionals” that Ofshe cited were part of the prosecution’s interrogation team, Ofshe indicts mental health professionals for “Influencing their clients to find ‘memories’ that the therapists believe to be buried in the client’s unconscious” (p. 153). Ofshe has not limited his claims to brainwashing, but has generalized them to explain the majority of sexual abuse disclosures by adult survivors *and* accounts of ritual abuse (Goleman, 1992; Meacham, 1993; Watters, 1993; Wright, 1993; Olio & Cornell, 1994b), *even though nothing in Ofshe’s experiment was designed to determine the veracity of ritual abuse claims*. In summary, it is clear that Dr. Ofshe was not an objective scientist stumbling across a surprising discovery as Wright (1993a,b) portrays him to be. (Olio & Cornell, 1994a).

Parrott and Perrin (1993)

In a Christianity Today article dismissing SRA as rumor-based, authors Parrott and Perrin (1993) make two important observations: 1) They infer a red flag due to 90% of the survivor population being female. Gender respect issues aside, since neither author is a therapist, they may be unaware that historically 90% of all counseling clients have been female. 2) They also call attention to the fact that supposed survivors almost always begin counseling for unrelated reasons such as depression or anxiety, recovering SRA memories only after beginning therapy. However, just because one begins counseling for a particular presenting reason, doesn’t invalidate the underlying more private problems and pain uncovered. Further, this observation is once again consistent with the DSM explanation of dissociative disorders. Accordingly, the personality that presents itself for treatment may have little or no knowledge of the existence of other personalities. Those who were able to dissociate the severe abuse successfully, such as with MPD, are also able to function successfully in society and are able to admit their need for counseling when problems arise, although since these people were able to dissociate successfully, they are not usually aware of the other personalities or of the SRA at the onset of counseling. On the other hand, those who were not able to dissociate the abuse can develop character disorders, and may become narcissistic, not willing to admit they have problems (Peck, 1983), and/or perhaps become the next generation of perpetrators.

Passantino & Passantino

The Passantinos, skeptics of SRA, well advised in their article that “because something is possible, that does not mean that it is true” (Passantino & Passantino, 1992, p.301). Note that this doesn’t mean something *isn’t* true either; rather, and to quote them again, “we must exercise critical thinking in what we choose to believe” (p.302). Of course, we must also exercise critical thinking in what we choose *not* to believe. We need to examine all information, not just the results of formal law enforcement investigations. An intelligent person *can* rationally conclude SRA exists to some degree without being categorized as “gullible” (p. 301).

Later in their article, they described those who believe in the validity of some reports of SRA as “pro-sensationalists” and that the SRA believers’ advice to the skeptics is “Believe the stories because there’s not evidence,” inferring that the primary source for belief is that “there’s not evidence” (p.305), or at best they believe simply because it is too bizarre to be made up. Perhaps there are some “gullible” people who do take this approach, but this description is untrue for the vast majority of laity and professionals *experienced* with SRA survivors, who believe, not just because it was convincingly claimed, but because of the internal and external consistencies.

Phillip Stevens, Jr.

One explanation that openly accounts for the similarities in victim accounts is Phillip Stevens’ article, “Universal Cultural Elements in the Satanic Demonology,” (in which a demonology is defined as a set of legendary cultural symbols of evil, e.g., witches, skeletons, hauntings, etc.). However, he regularly made the leap from theoretical to factual to support his conclusions. On page 240, he states *as if fact*: “the satanic rumors constitute a Christian form of a widespread *legend type* ... [italics added].” I also beg to differ with his comment (p.243, lines 10-15 of his conclusion) that “elements of the satanic mass are firmly embedded in our popular culture, and only a hermit-like existence can isolate people from them.” I doubt most people have been culturally exposed to the 15-20 items (via folk lore, films, Halloween, etc.) in any manner *resembling typical victim accounts*. In his conclusion on page 243, he says, “. . . even if diffusion is the cause . . . ,” implying that the *worst case* is a diffusion, perhaps some form of suggestion, without any consideration to actual SRA as a worst case possibility. *If* his presupposition is correct, *then* his conclusion would follow, but he should clearly acknowledge this, at the outset, as an assumption.

Non-cultural elements present. Interviewing techniques, “legend ostension” (Ellis, 1992), or even a broad sweeping cultural demonology do not adequately explain all the consistencies *in the obscure areas*. If the similar details in victim accounts were limited to the typical anti-religious, “bad-to-the-bone” concepts, then a cultural demonology could adequately explain the SRA phenomenon—but there are common, yet non-cultural, reports of: secret operations in which bombs were implanted which would explode upon revealing cult secrets; needles, pills, or beverages-- not initially recalled as drug inducement--yet often associated with sadistic child porn, being forced to chant, “Baby Jesus is Dead” (Chicago Tribune, 1985; Hudson, 1988, p.62; Friesen, 1991, p. 87-88; Givens, 1985), chanting in another language, child holding knife with adult who then stab the victim together, the star and pentagram, mock weddings, death threats to extreme secrecy, etc. These are not cultural elements in our understanding of the manifestations of evil, yet they are common elements in survivor accounts. Further, the few survivors I personally know always avoided such media as horror films and thriller books, for obvious reasons.

The Alternate Explanations offered for the “Satanic Panic” have yet to provide either adequate explanation for the profound similarities in reports and symptoms of survivors, rather these articles consistently mischaracterize the survivors and the findings. The skeptical literature is at best selective and unfortunately many times misleading.

Acknowledging our Predispositions.

So, what are the factors that cause a person to believe SRA exists? Most would agree that exposure to first hand accounts along with a compatible world view are the major contributors to belief. What are the determining factors causing disbelief? Minimized corroborative evidence and/or an incompatible world view are the most likely factors. Perhaps some psychological authorities have taken positions not primarily because of consistent patient reports on one hand, or a lack of evidence on the other, but mostly due to their world views. It is good to go out of our way to consider all of the possible, alternate explanations, as long as we’re truly open to all explanations, including the clinically encountered one—that the cited events actually occurred as described. Regardless, for objectivity sake, we on *both* sides of this issue might ask ourselves, “What *specific* pieces of information are necessary for me to change my mind about the existence of SRA?”

It is important to note that most arguments supporting the existence of SRA are logically consistent, but may never be “scientific” in nature. In adult MPD clients, there is a strong relationship between the alter personalities, the respective memories of each personality, and the respective triggers and phobias. It is clearly logical, not scientific, that certain alter personalities are formed to contain the pain of the abuse; they are absolutely consumed with it. Newly discovered alters are terrorized, sometimes *weeks before* they acknowledge SRA memories. What else could generate such dread and terror? It is purely logical that severe emotional debris implies a compatible storm.

Conclusion

In pursuit of truth, we must constantly reevaluate whether our goal actually is truth in itself, regardless of how our thinking may have to change. If truth is our goal, we must be willing to believe not our emotional preferences, but the resultant sum of *all* information (scientific and otherwise) from *all* perspectives. Finally, *very few want* to believe SRA occurs, but given all this information, it is quite reasonable to conclude that some reports of SRA are authentic, and the consistent accounts accompanied by consistent symptoms do reflect a sadistic reality of a self-perpetuating addiction to power through sexualized evil, in which there is a confirmed code of secrecy.

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- [1] See the HBO production of "McMartin", written by Abby Mann, a personal friend of the defense, and the two PBS Frontline presentations, the two part series "Divided Memories" and the one hour "Searching for Satan", both produced by Ofra Bikel.
- [2] It's difficult to form an alternate explanation for this one, yet **Lotto** (1994) demonstrates his own *confirmation bias* by ignoring this and other corroboration listed in the same paper (Young, et al, 1990). To dismiss these reports, Lotto cites *only* the authors' allowance for contingencies. He also dismisses all daycare cases, not by substantiation, but by leaving out evidence and key context (regarding Judy Johnson's role in the McMartin Preschool case and the Fusters' in the Country Walk case), which Summit provides firsthand in his rebuttal.
- [3] Wade and Tavis are staunch skeptics of the existence of SRA, even though in addition to the entrapment similarity they also explain in another part of the textbook that four year olds may remember events from age two-and-one-half.
- [4] Judy Johnson *personally consulted* Dr. Summit who maintains that she was quite sane and emotionally contained at the beginning of the case, her psychotic break and alcoholic toxicity beginning only *afterward*, due to inconceivable multiple stressors: she was alienated from her husband, living only with her two children, one a victim of sexual abuse, the other dying of a brain malignancy, and she became increasingly alienated by the other McMartin parents. Summit provides the full situational context, firsthand.
- [5] Dr. Summit spoke with Ileana after her testimony to better understand how at first she so perfectly claimed her innocence and even passed the polygraphs if she was actually guilty all along of the things she more recently confessed to. "I didn't do those things," she protested, "I couldn't do things like that; I'm not that kind of person; *Frank made me do them!*" He manipulated her to perform the crimes, so really, she was telling the truth both times, contrary to those interpreting her claims at face value and concluding both of the Fusters' complete innocence (see Lotto, 1994).
- [6] Such physiological and neurological responses include cold sweats, exaggerated startle response, numbing of face or limbs, inhibited vision and/or hearing, body memories, everpresent sensations, continually re-experiencing traumatic event, flashbacks, panic attacks and other responses inappropriate to the present day context, yet triggered by ordinary but *abuse-related* stimuli.
- [7] For much more complete context, see Lenore Terr's book, *Unchained Memories*.
- [8] Much of the content in the False Memory Analysis section was provided through this taped workshop by David Calof.
- [9] Dale McCulley provided a wealth of research for this paper, both directly and through others. He runs Cavalcade Productions, (707) 743-1896, a source for training videos on sexual and ritual abuse recovery.