Dear Friends,

A twist in the recovered memory legal battles caught our attention this past month. (See page 7.) As readers of this newsletter may recall, the first multimillion dollar jury decisions in false memory cases brought by former patients against their therapists were in Minnesota in 1995. First, Vynette Hamanne received $2.46 million in her suit against psychiatrist Diane Humenskky. That was followed by Elizabeth Carlson’s award of $2.5 million in a suit against Humenskky, and then several settlements in other cases against Humenskky. Dr. Humenskky’s legal defense was paid for by her American Psychiatric Association insurance with Legion Insurance and Professional Risk Retention Group. A year or so ago, Legion Insurance and Professional Risk Retention Group turned around and sued Humenskky’s defense lawyers for legal malpractice.

In February, the case went to a jury that decided in favor of the defense lawyers and against the American Psychiatric insurance companies—in spite of the massive amounts of money and resources that the insurance companies brought to the case. The fact that two of the five legal experts employed by the insurance companies are reported to have each received more than $100,000 is a pretty good indication of how much the APA and insurance companies are hurting from huge awards to former patients.

What does it say to the public and mental health consumers when the American Psychiatric Association and its insurance companies allocate resources to recoup their losses from a case in which a psychiatrist’s malpractice was of such significance that she even had her license suspended? What does it say to the public that resources do not appear to be allocated toward insuring that American Psychiatric Association members practice safe and effective therapy? The public should be able to expect therapy that is safe and effective. Even the recent Surgeon General’s report on mental health recommends the implementation of specific treatment methods, referred to as “evidence based practices,” that have proven to be effective in the treatment of mental illness.

Unfortunately, the evidence that the mental health profes-

sions are unable or unwilling to monitor themselves continues to mount. Last month we wrote about an investigative report from Ohio showing that the members of the Board of Psychology in that state not only had conflicts of interest but that they viewed their job as rehabilitating wayward professionals rather than protecting the public. On page 3 of this issue we review a report on trends in the doctoral training programs in psychology that documents a downward spiral in quality of professional education. In fact, the authors comment that “it will be increasingly difficult to count on individuals with Ph.D.s meeting a standard of scientific competence.” And on the same page we note that the University of Michigan School of Social Work is advertising a continuing education program in ritual abuse for this April. That information would be laughable if it were not for the fact that the beliefs fueled by the satanic ritual abuse panic have destroyed families and even put people in prison. How can the public take seriously the profession of social work if this nonsense is still going on at a prestigious university and training facility like the University of Michigan? Are the people in Social Work at Michigan so closed off from reality? Or do they just not care?

The tragic mistakes that brought about the formation of the FMS Foundation are not likely to be stopped by the professionals who committed them. There has been no evidence on the part of the professional organizations that they are going to undertake any significant changes in the education or monitoring of their members. Indeed, the evidence is just the opposite. The immense malpractice awards have
professionals circling the wagons rather than looking to ways to improve the quality of education and practice, as the suit against the Humenansky defense lawyers shows. The quality of training of psychologists has grown weaker. Social workers can still take continuing education seminars in ritual abuse! The fact that people have been greatly harmed and even wrongly imprisoned because of beliefs in satanic ritual abuse has not stopped its instruction.

It is necessary, then, to turn in other directions. That is the reason that we are asking all people who are concerned about the quality of mental health treatment in this country to write and ask that the problems of errors in mental health treatment be included in the Quality of Health Care project of the Institute of Medicine.]

The past month has brought sadness to the FMSF office because of the death of Scientific Advisory Board member Martin Orne, M.D., Ph.D. (See page 4) Dr. Orne and his wife Emily played a crucial role in the founding of the FMSF Foundation and in the establishment of the Scientific Advisory Board. Many FMSF members will remember the first FMSF Memory and Reality conference in April 1993 and the wonderful party that the Ornes arranged for participants. Dr. Orne cared deeply about the false memory issue. We will miss his brilliant and compassionate support.

The past month has brought happy moments too—loving letters, families reunited. We need to work together to ensure that more families have such happy moments. We must continue to work toward the availability of safe and effective therapy for everyone who is in need.

Pamela


Send your letters asking the Institute of Medicine to support the inclusion of medical errors in mental health practices in the Quality of Health Care project to:

Kenneth J. Shine, M.D.
President, Institute of Medicine
2101 Constitution Avenue NW
Washington, DC 20418

William C. Richardson, Ph.D.
President and CEO, W.K. Kellogg Foundation
One Michigan Avenue East
Battle Creek, MI 49017-1611

About the April Conferences

“You just never know!” ended the note from a father telling us that his daughter had sent him a loving letter just after Christmas. He said that after 11 years he had pretty much come to terms with the fact that his problem would probably never be resolved—and out of the blue came this letter. You just never know!

What draws some children back to their families? Why are others still mired in the cruel beliefs of a discredited therapy fad? What can parents do to reach an alienated child? What can they do when a child returns but other family members will not accept her? We don’t promise answers, but we do promise lots of active discussion on these and many more topics at the FMSF Family Conference “Memory and Reality: Return to Reason” on April 8 and 9 in Westchester, New York. The Roundtables on Saturday afternoon are the places where discussions begin and new contacts with people who have similar concerns are made.

Memory and Reality: Return to Reason conference information and registration are available on pages 10 and 11. Please note the cut-off dates and price changes for early registration for the hotel (March 6), the conference (March 15), and the celebration dinner (April 1). It is worth making your plans early.

We are pleased that the New York Medical College is sponsoring a separate professional conference. They are helped in this project with a grant from Eleanor and Elliot Goldstein of SIRS Publishing (Upton Books), the initiative of David Halperin, M.D., an FMSF Advisory Board member, the encouragement of Paul Kymissis, M.D., professor and Director of Child and Adolescent Psychiatry at the NY Medical College, and the support of the FMSF Foundation. Please note that the NY Medical College program is completely independent and is under the approval of their continuing education division. There is separate registration for this conference.

Please be assured that families are welcome at the professional conference and professionals are welcome at the family conference. FMSF members and newsletter subscribers should have already received programs and registration materials for both the family and professional conferences.

special thanks

We extend a very special “Thank you” to all of the people who help prepare the FMSF Newsletter. Editorial Support: Toby Feld, Allen Feld, Janet Feketwicz, Howard Fishman, Peter Freyd. Columnists: August Piper, Jr. and Members of the FMSF Scientific Advisory Board. Letters and information: Our Readers.
Changing Trends in Doctoral Training Programs in psychology:
A comparative analysis of research-oriented versus professional-applied programs
Brendan A. Maher
Psychological Science
10 (6) November 1999 475-481

The purpose of this article is to summarize changes that have taken place in research doctoral programs in psychology between 1982 and 1993. The author used data from the National Research Council's 1995 study of doctoral programs to provide a basis for the comparison of research-oriented Ph.D. programs in psychology and Ph.D. programs of professional-applied schools. He concluded that the professional-applied schools present a profile of faculty resources, attributes, and activities that differs sharply from that found in the research-oriented programs, and in Ph.D. programs in the other behavioral and social sciences. The difference in profiles suggests that the professional programs conduct Ph.D. training that departs from the training ordinarily regarded as necessary for the award of that degree. (Note that this study does not include the degree of Psy. D.)

The author commented: "If the trends described in this article continue, it will be increasingly difficult to count on individuals with Ph.D.s meeting a standard of scientific competence. It is hard to avoid the conclusion that this trend is a threat to the integrity of the scientific base of professional and applied psychology, and a reminder of the solid reasons for requiring that training for professional practice be embedded in scientific training in an environment in which research activity is a critical element."

The professional-applied programs are rated significantly lower in faculty quality, and therefore fall predominantly in the fourth faculty-quality quarter. They have a significantly lower average publication record (average of 1.5 publications per faculty member in the period 1988-1992):
- Depend significantly more on the service of part-time faculty members.
- Have significantly more students per faculty member.
- Admit candidates with median Graduate Record Examination scores significantly lower than those of students in the research programs.
- Have significantly increased their output of Ph.D.s since 1982.
- Have significantly higher output of Ph.D.s than the psychological research-science programs in all faculty-quality quarters.

Editor's comment: The FMS disaster occurred, in measure, because many professionals were ignorant of some of the fundamental facts about the working of human memory. The highly disturbing trends shown in this article have been noted previously in House of Cards: Psychology and Psychotherapy Built on Myth by Robyn M. Dawes in 1993. It is further evidence that the professional organizations are not responding to the lowered standards of psychology. The consequences of that inaction directly affect consumers in terms of the quality of care to patients. The consequences of that inaction affect society when professionals testify in court as experts on issues of whether abuse occurred or the psychological harm that may have entailed.

The article reinforces the need for public action. The inability of the mental health profession to monitor itself and maintain standards means that the public must demand changes in the education of mental health professionals if treatment is to be safe and effective. The public must demand strong legislative action to ensure that mental health treatment is safe and effective.

The next article about a continuing education program for social workers indicates that that field also has severe problems in professional education.

It's Not Too Late to Join the Satanic Panic!

The Seminar Schedule for Continuing Professional Education at the University of Michigan School of Social Work advertises:

Ritual Abuse: An overview from research, law enforcement, and clinical perspectives - April 28, 2000

Participants will learn about tools to assess and treat ritual abuse. According to the notice, one of the three teachers of the seminar is a clinician who has treated adult survivors of ritual abuse for the last nine years.

Charter Behavioral Health System Expected to File for Bankruptcy

More than half of the 90 hospitals and treatment centers operated by Charter Behavioral Health System, the nation's largest chain of psychiatric hospitals, are expected to be closed. Charter has had a long troubled past, and patient care has deteriorated at many hospitals. Dissociative units at Charter hospitals have been mentioned in lawsuits brought by former patients and a 60 Minutes II documentary in April 1999 attested to patient problems.


New Look to FMSF Web Page

The FMSF Foundation expresses its gratitude to Greg Louis, Ph.D., for his valuable help in developing the "new look" of the FMSF web page

www.MemoryandReality.org or www.FMSFonline.org

Dr. Louis has been our volunteer webmaster since the site went on line in September 1998. Although still a work-in-progress, we think you will find the reorganized site full of interesting and informative material.
Can Myths be Created in Therapy?

Allen Feld

I’ve often asked myself if myths might be created during therapy. It’s a question I’ve also posed to students. Obviously, therapy and myth-making describe (or should describe) two distinct and separate activities. Yet I’ve come to believe that all too often myth-creating may be at play in many therapeutic processes. But even if the idea that therapy may lead to the creation of myths is valid, it would be wrong to conclude that clients may not reap important benefits from psychological therapy.

The interrelated concepts of historical truth and narrative truth, written about by Donald Spence, Ph.D. [1], may be useful in explaining the claim that therapy can lead to the creation of myths. The phrase “historical truth” suggests that the product of a therapeutic interaction is historically accurate. “Narrative truth,” on the other hand, describes a product of therapy that may or may not be historically accurate. I often refer to this as a “clinical narrative.” A clinical narrative can be—and often is—treated as describing something real to the client and therapist. It is within the concept of narrative truth that I raise the possibility of myth-creation during therapy. Since both “truths” are by-products of the interactions between therapists and clients, it would be wrong to overlook the potential influences of therapists in what evolves to be considered the “truth.”

When therapists and their clients fail to distinguish fact from fiction, the damage that can result is obvious. Yet there are therapists who arrogantly claim: “It makes no difference if it’s true or not.” Many who make that claim continue the therapeutic activity as if it were historically true: the supposedly metaphorical implications (another significant arena for developing myths) are abandoned; the legal quagmire that may be created is ignored; the alleged crime (fortunately for those falsely accused) often goes unreported; the client’s inaccurate revision of her personal history is encouraged; the family disruption is left to others to wrestle with. Former clients who have experienced false memory syndrome and families who have been devastated by clinically created narratives for which there is no external corroboration have attested to these horrors.

From its very beginning, the Foundation has held to the scientifically valid position about adults who claim new memories of childhood sexual abuse: the memories may be true (historical truth); the memories may be false (myth); the memories may be partially true and partially false (partial historical truth and part myth). External corroboration is the sole mechanism that currently exists to determine if these so-called memories are valid. FMSF is in very good company with our call for verification. Internationally, the major professional organizations, whose constituents include therapists, agree that corroboration is the sole means of validating so-called recovered memories.

The fault then lies with individual therapists when clients are helped to come to believe in the reality of events that are not known to have happened. As trained professionals, it is their responsibility to recognize that narrative truth DOES NOT EQUAL historical truth. Working with a client as if her narrative truth is reality can cause considerable harm to the client, her family and yes, (witness the many lawsuits) increasingly so to the therapists and the helping professions.


Allen Feld is Director of Continuing Education for the FMS Foundation. He has retired from the faculty of the School of Social Work at Marywood University in Pennsylvania.
EMPATHY IN THERAPY
Spencer Harris Morfit

The word “empathy” came into the American lexicon through the social sciences in the 1970s. “Empathy” means, literally, to feel what another is feeling. It has largely replaced the perfectly good word “sympathy” which means to feel with another.

I personally dislike the term “empathy” for two reasons: 1) To feel what another is feeling is usually an impossibility; 2) Like many terms from the social sciences, it implies a special meaning, and, in therapy, special techniques. What one feels with or for another is an attitude and an emotion. It cannot be turned into a “technique.” A good argument could be made that the minute you turn it into technique you are operating outside its meaning and in a manipulative way.

“Empathy” was adopted by many psychodynamic therapies as a necessary condition for therapy. The idea is that in order for the therapy to succeed the therapist must maintain “empathic attunement” at all times and that when “empathic attunement” is broken it must be restored for the therapy to proceed.

Let me be clear: I do not think that any person should or should have to work with a therapist who is unsympathetic. I sincerely believe that clients “come by their symptoms honestly” as one therapist expressed it. They suffer from these “symptoms” (which I think of as learned behaviors) and often others around them also too. As in any habit formation, it takes effort to bring these behaviors into focus and to practice and replace them with more constructive ones.

A client should legitimately expect understanding and respect for the effort he or she is making and the difficulty of the task. It would be difficult for any of us to accept help from a hostile source. And when therapist and client are not in sympathy, that is a message that some clarification needs to take place. This is a mutual effort and somewhat different from the way empathy plays out. When “empathy” becomes a professional technique it implies the therapist has to take primary responsibility for restoring the “empathic attunement.” This could subvert or delay the effectiveness of the therapy. In a worst case scenario, a client could be led to expect such effort from anyone.

I recall comments from Edwin Friedmann, rabbi, author and systems therapist who has worked not only with families but also in larger systems such as corporations and the military. Friedmann reported that in his work the demand for “empathy” was deflecting efforts towards more productive work and that in systems after system the weaker parties were receiving all the attention—attention that became a form of reinforcement. He reported, furthermore, that this frustrated the stronger parties and weakened the effectiveness of the entire system.

It is not surprising to me that Friedmann would be in a position to see the impact of this idea. The problem with the concept of “empathy” becomes most obvious as soon as you introduce other parties to a system. As soon as this happens, one would be presented with the challenge to decide “And to which party should the `empathy’ be directed?” To answer this, one would have to ask questions about the original task, sometimes to ask moral questions—a factor to which we might expect a rabbi to be sensitive. In the recovered memory movement, the idea of “empathy” plays out, among other things, in a reluctance to challenge the client’s beliefs, including such odd and extreme beliefs that he or she was abused in a Satanic cult or a past life.

Even in individual therapy, empathy” can be a challenge. We often find therapists addressing this challenge by identifying a “split” between the client’s “Inner Child” and his or her “adult” personality. If psychodynamic therapy focuses on “empathy” for the “Inner Child,” this is quite a different focus from identifying and developing behaviors that would be more appropriate to an adult, which is, after all, the eventual goal of most therapy. More behavioral therapies would see the “split” as a node for choice and proceed from there. As another therapist once said to me, “You can act your way into a new way of thinking faster than you can think yourself into a new way of acting."

I am saying that some kind of sympathy, patience and tolerance are important in therapy. It’s when it becomes some abstruse concept in the service of mindless technique that it is problematic. And my difficulty with many of these abstruse concepts is that they seem to foster mindless technique.

I can illustrate this with a case that was once reported to me. A man and his wife went into marital therapy together with a therapist who was very committed to the idea of “empathy.” It soon became obvious that a primary problem in the marriage was the way the husband made and broke commitments. Both in the marriage and in the therapy there would be elaborate negotiations around a common goal. The design of these agreements was always the same: The other party would engage in some effort, or temporarily make some sacrifice in order to help the husband to a stronger position. When he had achieved this stronger position, the husband would agree, he would make a sacrifice or effort to enable the other party. In this way, the system was to progress, each party chaining up the other. However, the husband routinely backed out of his commitments when it was his turn to reciprocate. This, of course, made the entire effort fail and left everyone else angry. The husband typically left the therapy session at this time.

The therapist’s consistent advice to the wife was to “Try to understand his
universe.” To her credit, she also instructed the husband to “Try to understand her universe.” There came a time when the husband negotiated a payment schedule for his bill. The couple subsequently left the therapy because it wasn’t going anywhere. The bill was still unpaid. The therapist called the husband to renegotiate a payment schedule. The husband failed to meet the agreed payments. The therapist called to negotiate again. When this third agreement also failed, the exasperated therapist wrote the husband a letter threatening a lawsuit if he did not make payment by a certain date. When the wife innocently came across this letter while housekeeping, she photocopied it. With a large red marker she wrote across it, “Try to understand his universe,” and shipped it off to the therapist.

Spencer Harris Morfit is an author and business woman. She is a member of the FMSF Scientific Advisory Board.

“A successful man is one who can build a firm foundation with the bricks that others throw at him.”

David Brinkley

Have you read these?

Confabulations
True Stories of False Memories
Beware the Talking Cure
Psychology Astray
Smiling Through Tears
Selling Serenity

Upton Books
800-232-7477
www.sirs.com/ptonbooks/index.htm

For inquisitors have always understood that an idea can be extinguished most effectively by suppressing all memory of a defining word (or an inspirational person).

Stephen Jay Gould, “What does the dreaded “E” word mean anyway?”
Natural History, 109 (1) 2/00, 28-44

FMSF Staff
Nos. 86938, 85941 cons.

The Illinois Supreme Court upheld a strict statute of limitations in abuse cases in a decision on January 21, 2000. The court held that abuse victims must file lawsuits within two years of turning 18 and rejected the argument that the two-year clock should begin running only when a victim discovers the earlier abuse is the cause of adult psychological problems.

The case involves a claim by Teresa Clay that Brother Richard Kuhl, a member of the Roman Catholic Society of the Missionaries of the Sacred Heart, abused her approximately 900 times from the time she was 8 or 9 until she was 15 or 16. She claimed to have always remembered the abuse but did not know it was the cause of her psychological problems.

The court held that since Clay remembered the abuse, she had enough information to decide whether to sue. The plaintiff argued that “the injuries she incurred as a consequence of Kuhl’s alleged misconduct were, like those caused by exposure to asbestos, slow to develop and unknowable at the time of the occurrence.” The court rejected the analogy, writing “We believe that there are substantial distinctions between cases involving exposure to asbestos or other dangerous substances, in which the risk of harm is not immediately apparent, and cases involving events that give rise to an immediate awareness of injury.”

The plaintiff brought her suit in 1996 at age 32. The defendants moved to dismiss on the claim that it was barred by the statute of limitations, arguing that the instances of alleged misconduct were sudden traumatic events. The trial court granted the defendants’ motions that the action was untimely, relying on the Appellate Court’s opinion in M.E.H. v. L.H., 283 Ill. App. 3d 241 that “had characterized occurrences of child sexual abuse, for purposes of the statute of limitations, as sudden, traumatic events that triggered the running of the limitations period once the victim of the abuse attained majority.” The plaintiff appealed and the appellate court reversed and remanded, concluding that “the action was not barred by the statute of limitations.” (The Clay case was originally brought in conjunction with a suit by Josefina Ferrer. The Ferrer case, however, was settled while the appeal was pending.)

The Supreme Court reversed the appeal court, concluding that it did not need to determine whether the instances of childhood sexual abuse alleged should be considered sudden, traumatic events for the purposes of the statute of limitations. The court said that it did not believe the discovery rule was of assistance to the plaintiff.

The court did not make a determination on whether the discovery rule would toll the running of the statute of limitations in repressed memory cases. Justice Ben Miller wrote for the majority, Justice S. Louie Rathje took no part in the consideration of the decision and Justices Charles Freeman and Moses Harrison II dissented.

The FMSF Foundation filed an amicus brief in this case. It is available as # 817 for $30.00.
Associated Press State & Local Wire January 21, 2000 “Court upholds strict statute of limitations in abuse cases.”

George Franklin may not sue psychiatrists Kirk Barrett and Lenore Terr for allegedly conspiring to present false testimony at his murder trial in 1990. The 9th U.S. Circuit Court of Appeals said that witness testimony is legally protected from damage suits.

In 1990, George Franklin was convicted of murdering Susan Nason after his daughter Eileen suddenly remembered the killing in 1989. Franklin was freed in 1996 after his conviction was overturned by U.S. District Judge D. Lowell Jensen, who said jurors had been wrongly told that Franklin’s silence in jail was an admission of guilt. Prosecutors decided against a retrial after learning that Eileen has also accused him of a second murder that he could not have committed and because Eileen’s memories has been retrieved with the help of hypnosis.

After his release, Franklin brought a lawsuit against prosecutors, police and two psychiatrists. Kirk Barrett was Eileen Franklin-Lipsker’s therapist. Eileen Franklin first disclosed her recovered memory of the murder to Barrett during her third therapy session. Franklin’s complaint alleged that Barrett conspired with several other witnesses to testify falsely that he did not hypnotize Eileen Franklin during her therapy. Lenore Terr is a psychiatrist who practices in general and child psychiatry.

Franklin’s suit against prosecutors and police is not affected by the decision.


Never doubt that a small group of thoughtful citizens can change the world. Indeed it is the only thing that ever has.

Margaret Mead

Insurance Companies Lose in Suit Against Humenansky Case Defense Attorneys

A lawsuit alleging legal malpractice brought by Legion Insurance and the Professional Risk Retention Group against the attorneys and law firm who defended Diane Humenansky, M.D. in the medical malpractice case Hamanne v Humenansky ended in a jury verdict in favor of the defense attorneys and against Legion Insurance and Professional Risk Retention Group. The insurance companies, who insure the American Psychiatric Association, argued that Humenansky was not adequately defended in the 1995 case in which a jury awarded former patient Vynette Hamanne $2,46 million.

According to attorneys, the plaintiff insurance firms employed five legal experts for the trial, two of whom were paid in excess of $100,000 for their services. They also employed psychiatric experts David Spiegel, M.D., Colin Ross, M.D. and Bessel van der Kolk, M.D.

The lawyers for the defense were William V. Johnson, William A. Geiser, and Mary Kenny of the firm Johnson and Bell in Chicago.

Hamenansky was not the only patient to sue Diane Humenansky. In 1996 Elizabeth Carlson, who like Vynette Hamenansky was represented by Christopher Barden, received a $2.5 million jury award and that was followed by settlements in several other cases. Treatment in both the Haman and Carlson cases involved the diagnosis of MPD. Dr. Humenansky used hypnosis, guided imagery and sodium amytal to help her patients recover memories, some of which involved belief in a satanic ritual abuse cult. The Minnesota Board of Medical Practice ordered the suspension of Humenansky’s license in February 1997 for an indefinite period of time.

Former Patient Retains the Right to Speak About her Experience

The three women who ran the former Genesis Counseling in suburban Philadelphia sued a former patient, claiming she violated the terms of a confidential settlement agreement, when she gave a television interview and held a discussion at a symposium in which she described the Genesis group as a “cult” that “tears families apart.”

The case had its roots in a suit Carol Diemant filed in 1996 in U.S. District Court in Philadelphia for medical malpractice against Genesis. She said that in her years in Genesis she was forced to give up contact with her children and cut off relations with her husband. In her talks, Diemant never mentioned the name of the group, therapists, or the amount of the settlement.

More than 15 former patients have prevailed in or settled suits against the counseling center. The therapists have also come under fire from state agencies for their controversial “detachment” treatment methods.

Philadelphia Judge Matthew D. Carrafiello found that there was no restriction in Diemant’s settlement that would—even at a stretch—have kept Diemant from talking about her experiences. He ruled that the settlement “does not prevent Diemant from discussing her experiences receiving therapy or from offering her thoughts on the matter.”

The three therapists have also sued the parents of a former patient for defamation and the lawyer who represented several of the former patients who brought suit against them. They were unsuccessful in these efforts.

Daily Local News, February 15, 2000

“Genesis ruling defends First Amendment rights” by Michael P. Relihan

Florida Psychiatrist is Fined

On February 5, 2000, the Florida Board of Medicine fined psychiatrist Alan Tesson $10,000 and ordered him to take a course in medical record keeping. The Health Department had charged Tesson with failing to get informed consent to do hypnotherapy, hiring a female patient to work in his office, having lunch with her and going to her home and failing to document 25 therapy sessions with her, and for losing his scientific objectivity by having a personal fascination with satanic ritual abuse.

Tesson neither admitted nor denied the allegations that stemmed from his treatment of a former patient from 1991 to 1993. That patient settled a lawsuit with Dr. Tesson.

Palm Beach Post. February 6, 2000
See FMSF Newsletter Vol 6 (2) February 1997.

WENATCHEE UPDATE

Ralph Gausvik is seeking a new trial, claiming that authorities manufactured accusations, a doctor misled jurors and his public defender never investigated the case.

Gausvik was brought into the investigations in 1995 when the alleged victim toured Wenatchee with her foster father, Police Detective Bob Perez, and identified his home as one of 25 where she and other children had been sexually abused.

During Gausvik’s trial the prosecutor told jurors that Gausvik’s children couldn’t remember the details of the alleged abuse because they’d likely blocked out bad memories. In the appeal, Gausvik claims his children were subjected to multiple interviews, called liars when they denied abuse and were given rewards in exchange for allegations.

Robert Rosenthal of New York and Alyse Collins of Seattle, attorneys with Innocence Project Northwest, the legal group that has been filing appeals for people convicted during 1994-95 sex-abuse investigations, wrote:

“This case represents a total breakdown of the criminal justice and judicial processes from investigation, through accusation and conviction. Evidence of the perversion of the criminal justice system in pursuit of ambition and convictions at any cost is vivid in the details of this case.”

Wenatchee World, January 18, 2000
“Man convicted of child rape seeks new trial” by Stephen Maher

A hearing has been ordered for Gene Town, who, with his wife Cherie, were the first two people arrested by Bob Perez in the 1994-95 sex-abuse investigations. Gene Town is appealing his conviction and the Court of Appeals has ordered a judge to determine whether he confessed voluntarily to Perez. Town’s attorneys claim the detective browbeat him and told him if he didn’t sign the confession that Perez had typed “he might just end up in an orchard somewhere.”

Serious questions have been raised about the reliability of accusations made by Town’s two sons. Medical evidence that was not presented at the trial indicates that one of his sons was delusional and distorted reality and that the other had an IQ of 49. Town’s lawyers claim that the prosecution withheld this important information.

Wenatchee World, February 12, 2000
“Hearing ordered for man appealing conviction” by Stephen Maher

The ongoing cost of the Wenatchee sex abuse investigations:

- Annual premium for liability rose from $198,944 in 1994 to $410,719 in 2000. The hike is tied to the sex-abuse litigation as well as inflation.
- In 1999 the Association of Washington cities, Wenatchee’s insurance carrier, began charging an extra $26,468 a year to help cover costs associated with defending Wenatchee in litigation.

Wenatchee paid $100,000 in 1999 to help settle four lawsuits. The city has a $25,000 deductible for settlements and jury awards up to $1 million on claims originating before January 1, 1995, and up to $2 million after that. If a settlement or award is higher than those limits, the city must pay.

Six people are currently suing the city over the handling of the 1994-95 cases. The number is expected to grow as more people are released from prison and as the children caught in the investigation turn 18.

Wenatchee World, January 22, 2000
“Paying the Price” by Stephen Maher

Court of Appeals of Washington, Division One, No. 43812-3-1, February 22, 2000, LEXIS 308 In a unanimous decision, the Court of Appeals found that a Superior Court judge erred before a 1998 civil trial when he dismissed a negligent-investigation claim brought by pastor Robert “Robby” Roberson and others against the city of Wenatchee.

Lawyers in the case say that the decision breaks new ground because it allows parents and children to sue law-enforcement agencies for conducting faulty child-abuse investigations. The city of Wenatchee plans to appeal to the Washington Supreme Court.

“[T]ruth about recovered memory may lie at either end of the continuum: nothing requires us to assume that it must constitute a compromise between two sharply divergent views. Analogously, one person may believe that the earth is round, whereas another may believe it is flat, but a ‘balanced’ view of the matter does not compel us to conclude that the earth is therefore oblong.”

R.J. McNally
Editor's Note: As the recovered memory movement retreats, it leaves debris such as shattered families, books, letters, biographies, and advertisements. How will people in the future obtain meaning from the debris? The book review that follows is such an attempt. What did the creators of the bibliography intend?

**Doubt the Bibliography**  
Loren Pankratz, Ph.D.

This is the second and final part of an analysis of a bibliography produced by Believe the Children in 1989. In the first part, I reviewed 9 occult titles. I finish here with five more and some commentary.

10. Murray, M. *God of the Witches*. [1921/1996] Margaret Murray is often cited as an example of how scholars can get overwhelmed by their own work [See, Wernick in Smithsonian 1994; 24 (12), pp 108-124]. Murray discovered in her study of witchcraft documents that witches confessed to details about their activities that were remarkable similar to the old pagan religions that had existed for thousands of years. These women, Murray concluded, must have been trying to keep alive an underground movement. She charged right into full conspiracy theory mode by suggesting in her next book that pagans had controlled European governments for several centuries. But if these conspirators are as powerful as Murray proposed, Wernick wonders, why are they no more formidable than the covens in our modern suburbs that meet to commune with the moon and grow herbs? Let's hope those naked dancers pictured in Holtzer's Encyclopedia are not ruling the world.

Murray was a crackpot. But her research shows that in the 16th century, tortured people provided just the information that their tormentors expected. What happened, of course, was that the tormentors subtly gave clues about what they expected to hear, and the accused reported their general beliefs about witchcraft. This lesson was forgotten by those recent therapists who treated Satanic Ritual Abuse. Why are all these patients giving similar stories about Satanic Ritual Abuse if there is not some underlying truth? Because therapists give patients the clues about what they expect to hear, and patients provide information they generally know about occult activity.

Martin Orne[21] demonstrated this subtle interactive process in a series of clever experiments using hypnosis. He concluded that the “behavior of the [Subject] in trance is then determined by the S's preconceptions about how a hypnotic S acts, and the cues, both explicit and implicit, as to the desired behavior which the hypnotist communicates in the process of trance induction.” Orne's important studies demonstrated that the hypnotist and subject have a powerful effect on one another. The implications of his studies help explain the historic statements of accused women being tortured for witchcraft and the current problems in unexpected drug effects. Skip Margaret Murray and read Martin Orne.

11. Seabrook, W. *Witchcraft: Its power in the world today*. Harcourt, Brace & Co, New York, 1940. William Seabrook was a newspaper reporter who tried to make an extra buck by publishing books. He traveled extensively, especially in Africa and Haiti, where he hung out with the lowlife crowd that practiced witchcraft and were entangled by superstition. He also got into considerable trouble with alcohol during this time. Because he writes such detailed dialogue, the reader may not be aware that Seabrook is writing on his experiences of fifteen to twenty years earlier. His own experiences are all reported with this-is-God’s-truth soberness; however, he slips to his skeptical journalist role when reporting the stories of others. For example, he uses the criticisms of magician John Mulholland to debunk the parapsychology research of Dr. Rhine.

I was surprised to discover that this same Seabrook also wrote the primary biography of Dr. Robert Wood, the distinguished American physicist who debunked spiritualists and scientific nonsense, like the N-Rays of French scientist Blondlot. I had both of these books in my library without connecting them until now. When Seabrook wrote on Dr. Wood, he knew that he had an audience of knowledgeable scientists who could hold his feet to the fire. When he told stories about Africa, he could stoke the fires of credulity with impunity.

12. Summers, M. *History of Witchcraft*. Does the bibliographer refer to *History of witchcraft and demonology*, Kegan Paul, 1926, or to *A popular history of witchcraft*, Kegan, Paul, 1931, both of which have been reprinted?

Montague Summers had a vast store of arcane knowledge even as a youngster. He was ordained as a priest but spent his life teaching, collecting occult books, and writing. Although admired for his scholarly work, many laughed about his castigation of black magic in his writing while personally admiring Oscar Wilde and Aleister Crowley.

The first editions of his books (some numbered because of limited printings) are highly sought by collectors, including the books he edited and annotated. Yet his introductions to Sinistri's *Demoniarty*, Remy's *Demoniarty*, Kramer and Sprenger's *Malleus Maleficarum*, and Scot's *Discovery of witchcraft* all show remarkably gullibility. For example in the introduction to Remy, he says:

However, until it has been theolog-ically disproved, I, for one, am willing to accept, with certain minor reserva-

Continued on page 12
FAMILY CONFERENCE  Memory and Reality: Return to Reason
Sponsor: FMS Foundation  Location: Crowne Plaza Hotel White Plains New York

PROGRAM

Saturday, April 8, 2000

MORNING SESSION
8:15  Registration and Coffee
9:00  Welcome and Opening Remarks
      Pamela Freyd, Ph.D.
9:15  Community Effort and the Memory Wars
      Paul McHugh, M.D.
10:30 Coffee Break
10:45 From False Memories to Reality: Retractor Panel
      Terence Campbell, Ph.D., Moderator
12:00 Lunch (on your own)

AFTERTNOON SESSION
1:30  Paving the Road to Reason with Science
      Elizabeth Loftus, Ph.D.
2:45  Many Paths for FMSF Families: Professional
      Panel  Harold Licf, M.D., Moderator
4:00  Break
4:15  Roundtables (Sign up at registration. Topics
      include: Mediation; Dealing with a Returner; Sons
      as accusers; Moving on; Religious counseling.)

7:00  Celebration Dinner
      An evening of appreciation and celebration is sched-
      uled for Saturday Night at the family conference with Pamela
      Freyd as the featured speaker. RESERVATIONS ARE
      REQUIRED! The cost of the dinner is $60.00 per person. If
      the cost of the dinner is prohibitive, please pay what you
      would expect to spend for a special Saturday evening dinner.
      CUT-OFF FOR DINNER RESERVATIONS IS APRIL 1.

Sunday, April 9, 2000

MORNING SESSION
8:30  Brunch
9:00  Spectral Evidence vs. Science: Legal Issues
      Ralph Slovenko, J.D., Ph.D., R. Christopher
      Barden, J.D., Ph.D., Martha Churchhill, J.D.
10:00 Caught in the Middle: Sibling Panel
      Hollida Wakefield, M.A., Moderator
11:00 Coffee
11:15 Telling the FMS Story: Author Panel
      Eleanor Goldstein, Moderator
12:15 Closing Remarks
      Pamela Freyd, Ph.D.

A special conference room-rate for the FMSF Family
Conference of $110 plus tax (Single or Double) per night at
the Crowne Plaza is obtainable only until 4 weeks before
the conference—March 6, 2000. To make your reservation
call 800-PLAIN52 or 914-682-0050.

The Crowne Plaza is about 30 miles north of Manhattan.
The Westchester County airport is approximately 10 minutes
away from White Plains and LaGuardia airport is approxi-
mately 40 minutes away. White Plains can be reached by train
and is easily accessible by automobile. It is close to the Tappan
Zee Bridge. The hotel provides complimentary shuttle service
from Westchester County airport and White Plains Metro
North. Shuttle service to the New York Medical College meet-
ing on Friday will also be provided.

PROFESSIONAL CONFERENCE  False Memory Syndrome: New Perspectives
Sponsor: New York Medical College Dept Psychiatry and Behavioral Sciences  Location: Westchester Country Club, Rye, NY

PROGRAM

8:00  Registration and Continental Breakfast
9:00  Welcome
      Joseph T. English, M.D., Paul Kymissis, M.D.
9:30  Lessons Learned and Experiences Had in Dealing
      with the False Memory Syndrome
      Paul McHugh, M.D.
10:30 Coffee Break
11:00 Creating False Memories
      Elizabeth Loftus, Ph.D.
12:15 Luncheon Presentation: False Memory Syndrome
      and the Therapeutic Culture
      Wendy Kaminer, Ph.D.
1:45  The Duty of the Therapist Toward Family Members
      Ralph Slovenko, Ph.D., L.L.B.
2:30  The Role of the Clinician
      David Halperin, M.D.
3:15  Panel Discussion

Registration for False Memory Syndrome: New Perspectives  (New York Medical College Professional Conference)

$85.00 before March 31, 2000; $100.00 after March 31, 2000. $50.00 New York Medical College students and residents
Visa and Mastercard accepted. Checks should be made payable to: Office of Continuing Medical Education, New York Medical College, Valhalla, New York 10595, Telephone 914-594-4487, Fax: 914-594-4699
Include: Name, Title, Phone, Address, City, State, Zip, and Organization.
NY Medical College designates this activity for a maximum of (7) hours in Category 1 credit towards the AMA Physician's recognition award.
FMSF FAMILY CONFERENCE
MEMORY AND REALITY: RETURN TO REASON
Saturday April 8 and Sunday April 9, 2000
Crowne Plaza Hotel White Plains, New York

NAME
ADDRESS

PHONE # ___________ FAX # ___________ EMAIL ___________

REGISTRATION
EARLY REGISTRATION DISCOUNT UNTIL MARCH 15, 2000.

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REGULAR PRICE IN EFFECT AFTER MARCH 15, 2000

Please Print the Name of Each Registrant

CREDIT CARD (PLEASE CIRCLE): VISA MasterCard DISCOVER

NAME ON CARD (print) ___________________________ CARD # ___________________________
Expiration Date ___________ Signature ___________________________ AMOUNT ___________________________

MAIL Registration and Dinner Reservation to FMS Foundation,
3401 Market St. Suite 130, Philadelphia, PA 19104.

*A dinner celebration is planned for Saturday night, with Pamela Freyd speaking. RESERVATIONS ARE REQUIRED. The cost of dinner at the hotel is $60.00 per person ($65 per person for non-members). If the cost of the dinner for a member is prohibitive, we ask that you pay what you would expect to spend for a very special Saturday evening dinner. CUT-OFF date for dinner reservations is APRIL 1, 2000. You may pay for the dinner separately anytime before the cut-off date.

Circle A or B
A. I will be attending the dinner. _____ reservations
B. I will not be attending the dinner.
tions, the thesis that the octogenarian Sinistrari, rich in wisdom and experience, laid down in his Daemonicity more than two hundred years ago.

Remy’s work, in reality, is full of frightening nonsense. He says, for example, that Witches and Wizards copulate with Demons after a solemn profession of obedience and he knows this is true because many have confessed while being tortured. He also endorses the idea that witches are responsible for hailstorms and that the “other sheep” mentioned by Jesus are the non-human incubi that attach themselves to the bodies of witches.

Scholars on witchcraft all use works of Summers, but I think they dismiss many of his comments as insincere gestures arising from his religious affiliation.


14. Waite, A.E. Book of ceremonial magic. University Books. New York, 1961. [Originally published in 1911] This book is not in my library, but I have several of his many books including, The secret doctrine in Israel, The secret tradition in Freemasonry, his autobiography, and his translation of Levi’s Mysteries of Magic. It has been said that Arthur Edward Waite’s scholarship is shrouded by portentous and obscure style. I must confess that I have never read past the first few pages of any of these books. They are impossible. Let me know if you ever meet someone who understands this stuff. Perhaps his fans believe this style reflects his reluctance to reveal directly the secrets of occult mysteries. But how would we know if we were hearing heavy secrets or nonsense?

I went to the bookstore to view some of the other books on this list that I ordinarily pass by. As I suspected, many of the titles were complete nonsense. One of my favorites was Modern Witches Spellbook by Sara Morrison. She provides specific spells and incantations for current concerns such as protecting your apartment, ensuring safe air travel, making a judge friendly, and causing rain. With complete seriousness, each situation has a modern equivalent of “eye of newt” formula and an associated ritual.

There are always individuals in colorful costumes sitting on the floor reading these books at my bookstore. I think they are looking for answers that have eluded them. The word occult means secret, and these individuals are searching for any secret that might give an advantage or remove the pain in their lives. Sometimes I fantasize that I sit down beside one and tell him that the secret to life is found in what his mother told him. Sometimes the secrets are really simple, and sometimes they are hard because few short cuts exist.

What will people learn by consulting this bibliography? People will interpret this information in vastly different ways, depending on their initial belief systems and knowledge. But it is difficult for me to see how it could help anyone.

Doubt the bibliography.

[1] Believe the Children, an organization that shut its doors in 1997, was based in Chicago. The newsletters and conferences organized by this group helped to spread the belief in a satanic ritual abuse conspiracy.


Loren Pankratz, Ph.D. is a Consultation Psychologist and Clinical Professor, Oregon Health Sciences University, Portland OR. He is the author of Patients Who Deceive, Charles C. Thomas, 1998. Dr. Pankratz is a member of the FMSF Scientific Advisory Board.
Good Intentions Gone Awry
Kathy Begert
This article appeared in Wooster Daily Record 101 (226) January 20, 2000
Reprinted with permission of the author.

To err is human. Human endeavors, though motivated by the best of intentions, often fall short of desired ends. In this imperfect world, attempts to alleviate suffering sometimes actually cause injury and harm. When physicians inadvertently and unintentionally cause rather than cure disease, the result is an iatrogenic (from the Greek, doctor-generated) disorder. Often the result of unwanted side-effects of medication, iatrogenesis is always a concern for the ethical, prudent practitioner. (It is interesting to note that the Greeks' only word for “drug”—pharmakon—did not distinguish between the power to cure and the power to kill.)

Mistakes made by individual physicians, again even those made with the intention of alleviating suffering, can culminate in a larger problem for the whole of society, a kind of social iatrogenesis. Over-prescription of antibiotics by individual practitioners leads to the development of resistant strains of bacteria and the necessity of developing stronger medicines with harsher, more deleterious side-effects. Society, as a whole, is affected.

Experts in mental health also create iatrogenic disorders. As Paul Simpson amply illustrates in his book, “Second Thoughts—Understanding the False Memory Crisis and How It Could Affect You,” entire belief systems can be instilled into vulnerable clients by well-intentioned therapists who fail to recognize their own biases and, thus, are unaware of their own iatrogenic influence. When belief systems, whether of the existence of previous incarnations, of abductions by space aliens, or of “repressed memories” of childhood sexual abuse, are instilled into clients, they are then able to fantasize traumatic events. Through

the suggestions and encouragement of the therapist and other “believers,” they come to believe that their imaginations are memories of actual events. They have become recipients of therapy-induced delusions.

When this scenario is repeated over and over again, as, unfortunately, has happened, social iatrogenesis is the result. The 1970s and 1980s witnessed the growth of the psychology industry and the proliferation of sex abuse hysteria, documented by Richard Gardner in “Sex Abuse Hysteria, Salem Witch Trials Revisited.” Belief in the prevalence of child abuse led to the desire to seek out contemporary “perpetrators” and to “save the children.” Children's advocates, unaware of their own iatrogenic influence and the vulnerability of children to suggestions, well-documented by Stephen Ceci in Jeopardy in the Courtroom: A Scientific Analysis of Children's Testimony, planted the seeds of fantasized child abuse in the fertile imaginations of children. The result: horrific iatrogenic delusions.

This social iatrogenesis was exacerbated by the good intentions of U.S. Congress members, understandably concerned about what was reported by experts to be a pandemic of child abuse in this country. In 1974, the Mondale Act brought into being “mandated reporting” of any suspicion of child abuse, which, of course, flooded and overwhelmed the system with what often would become unsubstantiated accusations.

But another provision in the Mondale Act has repercussions for each of us who, presumably, has the right to due process. Due process in an adversarial judicial system like that found in the U.S. requires a delicate balance between the prosecution and the defense, with each weighted equally. The Act gives immunity from prosecution to anyone bringing about a false accusation of child sexual abuse. This tilts the scales unfairly toward prosecution even of an innocent person. There is no deterrent for bringing an unfounded accusation. The result: innocent people have been accused and convicted of horrific crimes by child witnesses with iatrogenic delusions.

Self-described child advocates insist that even if an accusation is false, they are "errring on the side of children." To err is human. But to insist that one’s errors, the errors that create delusions in children, are “for their good” is inhumane. Good intentions are admirable, but perhaps we should be mindful of St. Thomas Aquinas and his definition of the morally perfect act: an act which fully satisfies the demands of reason and, not content with merely willing the good, actually achieves it.

Kathy Begert is a registered nurse who lives and works in Wooster, Ohio. She has been a guest columnist for the Akron Beacon Journal and the Wooster Daily Record.

Recovered Memories of Child Sexual Abuse: Psychological, Social and Legal Perspectives on a Contemporary Mental Health Controversy
Editor: Sheila Taub, J.D.
Publisher: Charles C. Thomas
Hardback $44.95 Paperback $31.95
ISBN 0398070059

What do we know about the families who have contacted the FMS Foundation? What were they accused of and by whom? Who has been sued? And what was the outcome?

This book contains articles on memory, clinical treatment and social context based on talks presented at a conference in the fall of 1997. Authors are: Sheila Taub, J.D., Arthur Taub, M.D., Mark Pendergrast, M.L.S., David K. Saksheim, Ph.D., Jerome L. Singer, Ph.D., Jonathan Schoeller, Ph.D., D. Stephen Lindsay, Ph.D., Pamela Freyd, Ph.D., Anita Lipton, B.S. Of particular interest to FMSF members may be chapters on the "History of the FMS Foundation" and on the FMS legal history, "Rise and Fall of a Social Problem."
Editor’s Comment: Will it ever be the same? Maybe it can be better. People who share adversity often find bonds of greater strength than previously existed. Time and love are masterful healers.

No Apology

I can’t help noticing that the apology theme predominates month after month in the letters from the readership of the FMSF Newsletter. I am a victim of therapists who implanted false memories in me that my parents were part of a satanic cult. As a result I cut off all contact with my parents and siblings for a period of seven years. Happily, we were reunited in 1997 and all is well, in fact all is wonderful. Unfortunately, I also lost my own children and husband who were turned against me by the same therapists when I left the fold. That period of estrangement is now entering its seventh year.

I have been on both ends of the spectrum, the accuser and the accused. When I returned to my family they welcomed me with open arms. They allowed me to set the timetable and said over and over that they knew I had to have been under tremendous coercion to do and say what I did because it was so out of character for me.

While it is excruciatingly painful to have no contact with my children and husband, I have lived their kind of delusions and understand them well. It is my belief that if a person has falsely accused another through implanted memories they are not responsible in any way for their actions. They are brainwashed and not at all in a position to make choices. Of course I told my parents and siblings I was sorry for what they had been through. To say I was sorry for what I did to them while I was brainwashed would be taking responsibility for being a victim of atrocious, unethical therapy. That I cannot do. It was not my fault. I can only acknowledge that many people have suffered greatly as a result of what happened to me.

If and when my children and husband can break through their brainwashing I will welcome them with open arms. At some point I will probably need to tell them how hard it was for me, but I will never demand an apology. A phrase from the bible comes to mind, “Father, forgive them for they know not what they do.”

A Mom, A Daughter, and A Sister

It Helps to Leave A Message

My daughter has been lost to me for about ten years. She obtained a permanent restraining order against me in May of 1998. I have been trying to write to her and did manage to send three letters. She has now obtained her Ph.D. in physics and has probably left the area of her university.

She is never far from my thoughts. Her accusations included satanic ritual abuse as well as ordinary sexual abuse. She said she has forgiven me in advance and has never admitted that she might be wrong. I just want to hug her and love her.

I have been using my computer to try to connect with her and any other recovered memory survivors. Using a nom de plume, I have joined the chat line www.spectre Evidence.com/chat. This is something newsletter readers might want to check out. It is a way to leave messages. I have been having a dialogue with one survivor and I think that others who are questioning their memories might read our dialogue to try to sort things out in their minds.

Newsletter readers should know that this is a web site that is available for them to leave messages to their loved ones. They don’t have to say much and they can use just their first names. Who knows who may read their messages of love?

A Mom
Where is the Justice?

I want to share with you the greatest gift for the year 2000 I could have received. After more than nine years, last September we received a phone call from our daughter. She spoke and communicated far better than I had expected. Her over-zealous doctors had kept her in the dark with drugs, hypnosis and control and led her to believe she should have no contact with her family.

When my daughter called, we spoke quite some time. After a few minutes, she said, “Dad. It didn’t happen!”

To have suffered all these years with a witch hunt, where is the justice? These people are still operating. Yes, she is back, but nine years without each other, not knowing where she lived or worked. It is tragic.

I never gave up hope for my daughter’s return. It’s a waiting game.

I hate no one and believe that one should “love your enemies.” But at the same time, I’ll never understand how people who have done these things to our children can survive and manage to go unpunished.

A Dad

They Probably Don’t Care

When my daughter came under the influence of The Courage to Heal and made her accusations, her father and I thought we were alone. Then I read about the FMS Foundation and I will be eternally grateful for the literature you sent and your understanding.

My daughter has come back into my life. Although she is three thousand miles away, I was so happy to hear her voice and hear her say, “I love you, Mother.” But there is also much sadness in our happiness because my daughter has a serious type of cancer. My heart is breaking because of her illness, but at the same time I am thankful that she is reconciling with us and her brothers. I believe it will be easier for her to fight this dreadful disease as she rids her mind of the built-up hatred and knows she has the love and support of her family.

How I wish the money-hungry publicity-seeking people who wrote the trashy recovery books could see the heartbreak they caused. But then again, they probably don’t even care.

A Mom

Sweethearts of the Millennium

Editor’s Comment: The following was written for a local newspaper’s Valentine Day contest by a returner who has not yet spoken about past accusations. What could she say that would ever reveal her feelings more deeply?

My parents amaze most people who know them. They have been married for 42 years, and they still hold hands whenever they are out around town. After 42 years!

Valentine Day has always been a special day for my parents because it’s my mom’s birthday. When I was a small child, and we didn’t have the money for extras, my dad always tried to make it a special day for my mom. I remember one Valentine Day, with the “help” of three small children Dad baked mom a heart shaped cake. I don’t think Dad had ever baked anything before in his life, so the result wasn’t beautiful by any stretch of the imagination. But the look on my mom’s face was.

When all of us kids were out of the house and money was a little easier to come by, Dad decided to buy Mom the present she had always dreamed of but never truly believed she would receive: a diamond ring. He and I shopped and shopped until he found just the right ring. Then he went to elaborate measures to make sure that mom, who almost always knows everything that goes on in our house, didn’t find out about this surprise. He used the money he made teaching a night class to pay for the ring and had me make the layaway payments. It was fun watching him in the weeks before Christmas. I don’t think any child ever anticipated that magical day more than my dad did that year. The looks on both of their faces, the tears in their eyes, will always have a special place in my heart. For me, that ring says, “Thank you for all the years of love” in a way not words could express.

Then, after 40 years of marriage, my mom got sick. And she stayed sick. For a long time the doctors couldn’t seem to find out what was wrong. When she couldn’t get out of bed for much more than her meals, Dad had to take on all the domestic chores he had avoided for more than 60 years. He cooked and cleaned and, yes, even did the grocery shopping. Friends never heard him complain. The most he would say is, “I just want my wife to get well.” When I watch them now, holding hands as they walk, I realize that it’s not just a loving grip. Dad is supporting Mom, giving her strength and balance. But then, maybe that is the most loving grip of all, after 42 years of handholding.

And when I think of that, I’m speechless.

Chapter Closed

I am writing to let you know that your publications, with regular details of success in solving false memory tragedies, have worked for this family. So well, in fact, that I can now close a miserable chapter in our lives: ten years without a loving daughter.

My daughter was the victim of a greedy “therapist” who convinced her

FREE
“Recovered Memories: Are They Reliable?”
Call or write the FMS Foundation for pamphlets.
Be sure to include your address and the number of pamphlets you need.
of false memories of unspeakable acts on my part. I am convinced that this evil person had her eyes on the ongoing patient/therapist sessions, spread over several years, all funded from the generous health-care insurance provided by my daughter’s wealthy corporate employer.

I was far luckier than some poor fathers who were publicly trashed and spent time in jail and who may never recover. There were no claims of Satanic rites to contradict—just the absence of her love and tenderness that once graced our lives and, it appears, may do so once again. As for her therapist, she has earned a special, terrible level of hell to the end of time.

Over a period of time, with the use of both the success stories printed in the newsletters and the friendly persuasion from her siblings, she is coming around to where she now visits and dines with us. She is gradually returning to the daughter we used to dream about.

A million thanks to you all.

A Dad

My Experience with False Memories

I have wanted to write about my experience with false memories for a long time, but every time I started to put something down on paper, I quickly found something else to do. This is a very painful topic for me to discuss, but I hope in writing it in this newsletter, I will help others.

In March of 1989, I started working with a therapist (psychiatric social worker) to deal with issues surrounding a breakup of a romantic relationship. By May 1989, it was very clear to me that I had bigger problems than just a failed romance. I was extremely depressed and felt very needy and had a strong urge to act out (threatening suicide and self-mutilation). One topic that my therapist and I discussed was my relationship with my mother. My therapist asked me to detail a list of the things that bothered me about my relationship with my mother. One of the items was that I was angry that when I was six years old, I asked my mom to tell my dad to stop coming into the bathroom when I was taking a bath and she did not tell him. At the time of writing that item, I truly thought no more of it than what it was—a six-year-old wanting some independence—and I again believe that to be true. When I read my list aloud to my therapist, she raised her eyebrows at that entry. That was it—that is when my false memories started. I can honestly say that my therapist did not “dig” into my brain and cause the false memories. They just happened. She did listen to whatever fabrication my brain came up with each week, and she was supportive of me talking about whatever the subject was, but she did not encourage me to delve any deeper.

As the weeks went on, I became progressively sicker and very preoccupied in remembering things that did not happen to me. The book The Courage to Heal became my lifeline. I believed that that book and my therapist were the only things in the world I could rely on. I also became obsessed with the novel Sybil. On Labor Day weekend of 1989, I was hospitalized for the first time because of suicidal ideation. By November, I was sure that not only my father, but also a neighbor and a deceased, paternal aunt had sexually abused me. I began working with a psychiatrist who also listened and encouraged me to express my feelings, but he also did not strive to delve deeper into my past. He encouraged me to talk with my parents about what I was experiencing. Therefore, in November of 1989 I confronted my parents and told them that my dad and aunt sexually abused me and that my mom did nothing to stop it. This, by far, is the biggest regret of my life. I separated myself from my parents for only one month, but the false memories haunted me for many years.

I literally felt tortured by my thoughts. One moment I was sure that those horrible things occurred, the next I knew that I was lying and that something terrible was wrong with my mind. I have saved journals from this time that clearly indicate that I was in a vast amount of pain over those thoughts and false memories. I became extremely self-injurious—requiring numerous trips to emergency rooms to suture serious cuts in my arms, legs, and breasts. In addition, I made two suicide gestures—both were overdoses. Though my parents were not aware of these incidents, they knew that something was terribly wrong, because in April of 1990 I was hospitalized until March of 1991.

My story also includes a “survivors'” group that I know was detrimental to my mental health. It was an art therapy group that in the beginning was supportive and caring but was very damaging. The members of the group, with the assent of the therapist, pressed each other to remember and to express the tortures that were experienced as children. This group became important to me for a long time until I finally realized that many of the members had very similar memories. I felt ostracized because I refused to believe that my parents were part of a cult and I had been ritualistically abused. When I expressed my opinion that the group was unhealthy, it was made clear by the other members that I was in denial and I was injuring them by not believing their stories. With the support of my psychiatrist, I quit the group.

Over the years, my therapist and I have discussed that I will never know what is fact and what is false memory. By 1996, I was sure that most, if not all, of my memories were false. I have apologized to my father repeatedly. He refuses to discuss the issue. He will only say that he always knew that he did not do anything harmful to me and that he always loved me. I find it amaz-
ing that after all those terrible accusa-
tions he never stopped loving me. I
will never know if or to what degree he
was angry with me, because he will
not talk about it. But he has every right
to be very, very hurt and outraged by
my actions. My mom was obviously
angry and I am very glad she was able
to express it. My parents joined a sup-
port group for families of the mentally
ill. I know that it was a great source of
help and comfort to them.

I am still working with the same
therapist/psychiatrist. He was the first
to tell me about FMSF. In retrospect, I
believe that I am the one that is
responsible for my actions, I was in
intense pain because of my personality
type. I needed a way to explain the
pain and my father was my scapegoat.
I have a personality disorder. I work
daily—actually moment to momen-
to remember that my thoughts and
misconceptions of life are not neces-
sarily real. I also have to remind
myself daily that I do have normal
thoughts, and not every negative feel-
ing I have is abnormal. I have a tend-
dency to have very punitive feelings
toward myself because of the false
memories. I still have them—false
memories—though they are very rare.
I still have strong urges to self-muti-
late, but I do not and have not for a
long time.

It took me a number of years to
fully believe that my memories were
false. Then, I didn’t want to apologize
because it would have opened things
up for discussion—which I was afraid
of. What was most helpful to me was
that I knew my parents loved me
despite my allegations and that they
never distanced themselves from me.
In addition, I feel very fortunate that I
have a therapist who educated me
about false memories and pointed me
in the direction of FMSF.

A Retractor

"You can either complain that rosebush-
es have thorns—or rejoice that thorn
bushes have roses." Anonymous

IMPORTANT NOTICE
FOR FAMILY CONFERENCE
PARTICIPANTS

CHURCH COUNSELING:
WHAT CAN WE DO?

Time: Sunday April 9 at 1:00 P.M.
(after the Memory and Reality con-
ference)

Location: Announced at meeting.

Paul Simpson, Ed.D., author of
Second Thoughts: Understanding the
False Memory Crisis and How It
Could Affect You, will meet with all
people who are concerned about
recovered memory practices by
church counselors.

"An overwhelming body of
research indicates that hypnosis
does not increase accurate
memory, but does increase the
person’s willingness to report
previously uncertain memories
with strong convictions.
Furthermore, the hypnotized
individual has a pronounced
tendency to confabulate in
those areas where there is little
or no recollection; to distort
memory to become more con-
gruent with beliefs, hopes, and
fantasies; and to incorporate
cues from leading questions as
factual memories. Finally, there
is a high likelihood that the
beliefs of the hypnotist will
somehow be communicated to
the patient in hypnosis and
incorporated into what the
patient believes to be memories,
often with strong conviction."

Orne, Martin & Dingee, David,
(1989)
Comprehensive Textbook of
Psychiatry IV, Vol 2, 5th Ed.,
Kaplan and Sadock (Eds.),
Baltimore: Williams & Wilkins,
Page 1516.

www.MEMORYANDREALITY.org
or
http://www.FMSFonline.org
Have you seen the new look of our
webpages and checked out the new
unit on hypnosis?

Web Sites of Interest

www.StopBadTherapy.com
Contains phone numbers of professional regu-
larly boards in all 50 states

www.IllinoisFMS.org
Illinois-Wisconsin FMS Society

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

www.bfms.org.uk
British False Memory Society

www.geocities.com/retractor
This site is run by Laura Pasley (retractor)
www.geocities.com/~therapyletterson/in-
dex.htm
This site is run by Deb David (retractor)
www.sirs.com/uptonbooks/index.htm
Upton Books

www.chordate.com/therapys_delu-
sions/index.html
Website about book Therapy’s Delusions.

Did you move?
Do you have a new area code?
Remember to inform the
FMSF Business Office

If you are having trouble locating
books about the recovered memory
phenomenon because bookstores tell
you they are out of print, try the
Recovered Memory Bookstore
www.angelfire.com/tx/recovered-
memories/

ESTATE PLANNING
If you have questions about how to
include the FMSF in your estate
planning, contact Charles Caviness
800-289-9060. (Available 9:00 AM
to 5:00 PM Pacific time.)
ALASKA
Kathleen (907) 337-7821

ARIZONA
Barbara (602) 924-0975; (602) 854-0404 (fax)

ARKANSAS
Little Rock
Al & Lela (870) 363-4336

CALIFORNIA
Sacramento
Joanne & Gerald (916) 933-3665
San Francisco & North Bay - (BI-MO)
Glendale (415) 359-0254 or
Charles (415) 984-6666; (415) 435-9618 (pm)
East Bay Area
Judy (925) 376-8221
South Bay Area
Jock & Pat (631) 425-1430
Central Coast
Carole (805) 964-8058
Central Orange County
Chris & Alan (949) 731-2995
Orange County
Jerry and Eileen (909) 659-9536
Covina Area - 1st Mon., (quarterly) @ 7:30pm
Floyd & Libby (626) 330-2321
San Diego Area
Dave (760) 941-4816

COLORADO
Colorado Springs
Doris (719) 488-9738

CONNECTICUT
N. New England -
Earl (203) 329-8365 or
Paul (203) 458-9173

FLORIDA
Dade/Broward
Madeline (954) 966-4FMS
Boca/Delray - 2nd & 4th Thurs. (MO) @ 1pm
Helen (561) 496-8894
Central Florida - Please call for mtg. time
John & Nancy (352) 750-5446
Tampa Bay Area
Bob & Janet (727) 856-7091

GEORGIA
Atlanta
Waller & Jill (770) 971-8917

HAWAII
Carolyn (808) 261-5716

ILLINOIS
Chicago & Suburbs - 1st Sun. (MO)
Eileen (312) 985-7693 or
Liz & Roger (847) 827-1056
Peoria
Bryant & Lynn (309) 674-2767

INDIANA
Indianasn for Responsible Mental Health Practices
Nickio (317) 471-0922; fax (317) 334-9839
Pat (219) 499-9907

IOWA
Des Moines - 2nd Sat. (MO) @ 11:30am Lunch
Betty & Gayle (515) 270-6976

KANSAS
Wichita - Meeting as called

Kentucky
Louisville - Last Sun. (MO) @ 2pm
Bob (502) 367-1536

MAINE
Bangor
Irvin & Arlene (207) 942-8473
Rumford -
Carolyn (207) 364-8891
Portland - 4th Sun. (MO)
Wally & Bobby (207) 878-3512

MASSACHUSETTS/NEW ENGLAND
Andover - 2nd Sun. (MC) @ 1pm
Frank (978) 263-9976

MICHIGAN
Grand Rapids Area, Jenison - 1st Mon. (MO)
Bill & Macon (616) 383-0382
Greater Detroit Area -
Nancy (248) 642-8077
Ann Arbor
Martha (734) 439-8119

MINNESOTA
Terry & Collette (507) 642-3630
Dan & Joanne (612) 631-2247

MISSOURI
Kansas City - Meeting as called
Pat (785) 738-4840
St. Louis Area - call for meeting time
Karen (314) 432-8799
Springfield - 4th Sat. (MC) @ 12:30pm
Tom (417) 753-4878
Romie (417) 781-2058

MONTANA
Lee & Avane (406) 443-3189

NEW JERSEY
Sandy (609) 927-5343 (Southern)
Nancy (973) 729-1433 (Northern)

NEW MEXICO
Albuquerque - 2nd Sat. (BI-MO) @ 1pm
Southwest Room, Presbyterian Hospital
Maggie (505) 662-7521 (after 6:00pm) or
Sy (505) 758-0726

NEW YORK
Westchester, Rockland, etc.
Barbara (914) 761-3287
Upstate/Albany Area
Elaine (518) 399-5749
North Carolina
Susan (704) 538-7202

OHIO
Cincinnati
Bob (513) 541-0816 or (513) 541-5272
Cleveland
Bob & Carole (440) 356-4544

OKLAHOMA
Oklahoma City
Rose (405) 942-9531 or
H1 (405) 755-3816
Tulsa
Jim (918) 582-7363

OREGON
Portland
John (503) 297-7719

Pennsylvania
Hickory
Paul & Betty (717) 691-7660
Pittsburgh
Rick & Renee (412) 563-5509
Montrose
John (570) 278-2040
Wayne (includes S. N.J.)

TENNESSEE
Nashville - Wed. (MO) @ 1pm
Kate (615) 655-1100

TEXAS
Houston
Jo or Beverly (713) 464-8970
El Paso
Mary Lou (915) 591-0271

UTAH
Keith (801) 467-0669

VERMONT
Judith (802) 229-5154

VIRGINIA
Sue (703) 273-2343

WASHINGTON
See Oregon

WISCONSIN
Katie & Leo (414) 476-0285 or
Susanne & John (608) 427-3686

Contact & Meetings - International
BRITISH COLUMBIA, CANADA
Vancouver & Mainland
Ruth (604) 925-1539
Victoria & Vancouver Island - 3rd Tues. (MO)
@ 7:30pm
John (250) 721-3219
MANITOBA CANADA
Roma (204) 275-5723
ONTARIO, CANADA
London - 2nd Sun. (BI-MO)
Adrian (519) 471-6383

Quebec, Canada
Montreal
Aidan (514) 335-0863
St. André Est.
Mavis (450) 537-8187

AustraliA
Mike (754) 841-346; Fax 0754-841-051

ISRAEL
FMS Association Fax (972) 2-625-9282

Netherlands
Task Force FMS of Workgroup Fibromyalgia
Herinneringen
Anna (31) 20-693-5692

New Zealand
Colleen (59) 416-7443

Sweden
Ake Maller Fax (08) 431-217-90

United Kingdom
The British FMS Memory Society
Macmillan (44) 1225 886-682

Deadline for May-June Newsletter is April 15. Meeting notices MUST be in writing and received no later than two months prior to the meeting.
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March 1, 2000

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Yearly FMSF Membership Information

Professional - Includes Newsletter $125
Family - Includes Newsletter $100
Additional Contribution: $ 

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FORWARDING SERVICE REQUESTED.

DON'T FORGET

False Memory Syndrome: New Perspectives
Friday April 7, 2000
Sponsored by New York Medical College
Westchester, New York

Memory and Reality: Return to Reason
Sponsored by the FMS Foundation
Saturday April 8 and Sunday morning April 9, 2000
Westchester, New York