Dear Friends,

“What has happened to all the survivor newsletters that were around when the Foundation started?” we were asked. As we begin the thirteenth year of the FMSF Newsletter, the question seems particularly appropriate. On page 5 is a list of more than 40 survivor newsletters that includes what we were able to learn about their current status. It appears that only a few are still active. If nothing else, the Foundation and its newsletter have outlasted most. Many Voices, a newsletter for people with a diagnosis of MPD/DID that is supported by several hospitals with dissociative units, seems to be the most active survivor newsletter at this time. That says a great deal about where things stand.

It is amazing that so many of us are still concerned about the issues that originally drew us together. If any other medical product or medicine had harmed even a handful of the number of families who have contacted the Foundation, it would have been pulled off the shelves. But the accusations of child sexual abuse tossed into the mix led emotion to overwhelm reason in too many people. Professionals and professional organizations that had a vested interest in dissociative units and memory-recovery techniques provided leadership for maintaining the status quo.

Fortunately, cultural support for the recovered-memory frenzy that has uprooted our lives has been diminishing. Over the years, we have tried to record some of the events, the publications, the actions, and the ideas that have spurred this movement. That is the reason we believe that the FMSF archives of letters, videos, books, articles, advertisements, and other materials are so important. They provide the data for understanding how the recovered memory problem developed and how it began to be addressed.

On one point there is already general agreement: Legal cases against misguided therapists, unacceptable investigations, and overzealous prosecutions have exerted a tremendous force for change. In this issue there are several cases that we have been following over the years in which falsely accused people have been pushing boundaries in an effort for accountability. The Parlato case in New York was brought by a grandmother who wanted to be able to see her grandson after her daughter recovered memories and forbade contact. The Klassen case in Canada is based on the grounds of malicious prosecution. The Fairlie case in England is based on implanting memories. The many Wenatchee cases are being brought on civil rights violations.

These cases demonstrate the enormous burden to the courts and the serious financial drain to municipalities for mishandling investigations and prosecutions. The Wenatchee cases, for example, are expected to go on for decades as the children who were taken away from families become adults. It has been just over 10 years since the first retractor cases were brought, and it will be 10 years this spring since Gary Ramona won the first case of a third-party suit against his daughter’s therapist. The many legal cases described in the newsletter during the past decade have changed law, called attention to wrongs, and educated the public.

Converging evidence from different areas about recovered memories and child sexual abuse must surely facilitate changes. The legal cases could not have proceeded without the foundation of scholarly studies. The many articles and books described in the newsletter during the past decade have helped to change the climate. In this issue (page 3), Dr. Harold Merskey describes a study in the British Journal of Psychiatry that demonstrated that child physical abuse was associated with adverse mental health measures to a greater extent than sexual abuse. He cites an obvious observation made by Dr. Paul Mullen: “The precedence accorded child sexual abuse has also had negative consequences, socially
and scientifically, particularly in distracting attention away from physical and emotional abuse and from the whole context of disadvantage and neglect in which the sexual abuse often occurs.” And on page 6 there are some quotes from a review of Richard McNally’s book Remembering Trauma in the current Journal of the American Medical Association (JAMA). These are prestigious and influential journals.

On page 4, there is an article about a social worker who was sanctioned by the National Association of Social Workers. The social worker in question may be familiar to many readers because she was part of the Genesis group in Pennsylvania that was shown on the 1995 “Frontline” documentary Divided Memories. The complaint was filed by another social worker after the Commonwealth of Pennsylvania had already charged the therapist with 84 counts of unprofessional conduct. These charges were brought by the state because of the complaints of former patients and parents of patients in the group. The NASW code violations should give other professionals cause to think about how they practice, and this is another way in which change is hastened.

While transferring videotapes to DVDs here in the office, change seems literally fast-forwarded. During the 1980s and early 1990s, we see only token skepticism or none at all about claims of satanic ritual abuse or multiple personality on television programs. In 1984, for example, the “20/20” program, The People Inside Me, featured Richard Kluft, M.D., Cornelia Wilbur, M.D. and a Dr. Berendy as figures of authority who displayed their MPD patients. This particular program probably had a significant effect on the acceptance of MPD and its roots in child abuse. In the same year, the “Jane Wallace Program” People in Pieces featured Bennett Braun, M.D. and Cornelia Wilbur, M.D. who displayed more patients. In 1991, “Inside Edition” and several news programs featured Pamala Klein, an abuse counselor who has been credited with helping the spread of satanic ritual abuse beliefs. In 1991, Cory Hammond, Ph.D. made his famous Greenbaum speech, and preacher and radio host Bob Larson touted the reality of satanic rituals with guests such as Catherine Gould, Ph.D. During this same period, the Cavalcade Company made several videos to train professionals on how to uncover satanic abuse in patients.

By 1992, programs showed “both sides of the story” about recovered memories, satanic abuse, and multiple personalities. By 1995, however, we begin to see a host of documentary programs exposing the logical and scientific fallacies of recovered memory beliefs. The 1995 “Frontline” documentary Divided Memories is an outstanding example. Producer Ofra Bikel let both sides speak for themselves, and unless one were already committed to a strong belief in recovered memories, the evidence spoke.

Alas (or maybe hurrah!), we have no crystal ball to show us what the future holds in terms of the need for and the role of the FMS Foundation. Practitioners of Theophostic Counseling and other church-related counseling seem determined to keep FMSF active by creating more families torn apart by recovered memories. Some politicians, ignorant of the scientific evidence about the unreliability of recovered memories, insist on proposing statute of limitations laws based on incorrect information, and some plaintiffs and their lawyers still cling to their claims of recovered memories. The ongoing and widespread use of recovered-memories and multiple personality in literature and drama probably means that the cultural shift away from belief in the accuracy of recovered-memories will not be as fast as we would hope.

At a practical level, your response to our question about how you would prefer to receive the newsletter indicates that we are very rapidly approaching the time when the FMSF Newsletter will be fully electronic, perhaps a year or two at most. Readers who prefer to have a formatted paper version in their hands can now easily print out a copy with just a few keystrokes. If there are some individuals for whom this seems difficult, we will find a solution for them.

We thank you very much for your generous support to our annual fund raising request, and we look forward to continuing our work together in 2004.

Pamela

We Want to Hear From You

We rely on our readers to keep us abreast of local news and events relevant to the FMSF, so please take a moment to send us items of interest in your local media.

Newsletter readers tell us how much they value the letters from other readers. If you have a comment about an article, about your own situation or about other FMSF-related topics we would like to hear from you.

special thanks

We extend a very special “Thank you” to all of the people who help prepare the FMSF Newsletter: Editorial Support: Janet Fetkewicz, Howard Fishman, Peter Freyd, Members of the FMSF Scientific Advisory Board and Members who wish to remain anonymous. Letters and information: Our Readers.
In Memoriam
Margaret Thaler Singer
FMS Advisor

Margaret Singer, Ph.D., died on November 23, 2003, at age 82 in Berkeley, California, after a long illness. Dr. Singer was one of the world’s leading experts on cults and brainwashing. She testified in many high-profile cases about the types of behavior manipulation that various groups exerted on their members. Her investigations included everything from the techniques used by the North Koreans against American soldiers in wartime to the influence of the Symbionese Liberation Army over Patricia Hearst.

“Her testimony would help people understand the clinical impact of a cult’s manipulation and exploitation,” according to Richard Ofshe, Ph.D.


According to Daniel Goldstine, chief psychologist of the Berkeley Therapy Institute, Margaret Singer was most famous in the scientific community for her work in schizophrenia.

“There are simply very few people anywhere who had the clinical skills that she had,” he said.

One of the 15 founders of the FMSF Scientific and Professional Advisory Board, Dr. Singer always found time to help the hundreds of FMS families and former patients who turned to her during the past decade. Her gentle stalwart presence—always with a refreshing humor and joie de vivre—graced 11 years of faithful service to the Foundation. She will be very much missed.


Mental Health, Physical Abuse, and Sexual Abuse
Harold Merskey

An article in the October 2003 issue of The British Journal of Psychiatry (Coid, et al., 183:332-339) examines abusive experiences and psychiatric morbidity in women. The sampled women who were visiting their family doctors in the East End of London, England. A total of 1,207 native-born English and immigrant Turkish or Bangladeshi patients were interviewed about past and present experiences and given a self-report questionnaire to assess anxiety and depression.

The authors found that 9% reported unwanted sexual intercourse and 11% reported unwanted sexual activities before the age of 16 years, while 17% were severely beaten once, or more than once, in childhood. Among those beaten severely more than once, 21% reported experiencing unwanted sexual intercourse and 27% reported unwanted sexual activities. Two percent reported all three forms of abusive experiences before the age of 16 years.

Eight percent of women reported that they had experienced rape at the age of 16 years or older, and 9% reported sexual assaults of other types. Forty-one percent fulfilled the study definition for domestic violence.

These proportions fit with the common experience of many psychiatrists and other physicians. They are probably higher than would be found in a representative sample of the general population because abuse generally is more common among those more socially disadvantaged, while among those who visit primary-care doctors, the rates for both abuse and psychiatric illness tend to be higher than in a random sample of the overall population. The authors themselves note that they found strong cross-section associations between adult mental health and certain abusive experiences in both childhood and adulthood. However, in contrast to previous research their study demonstrated “...that childhood abuse in the form of a severe beating by a parent or carer was independently associated with several adverse mental health measures, whereas childhood sexual abuse was not associated. These findings also confirmed adult response relationship between repetition of physical abuse and anxiety, depression, PTSD, para-suicide, and other deliberate self-harm.” They note that there is much literature that finds a stronger association between adult misery and childhood sexual abuse, but suggest that those other studies may have been compounded by physical abuse in many instances.

The author of one of those studies, Dr. Paul Mullen, Professor of Forensic Psychiatry at Monash University in Australia, provided an invited commentary in the same BJP issue (pp. 340-341) in which he remarked: “The precedence accorded child sexual abuse has also had negative consequences, socially and scientifically, particularly in distracting attention away from physical and emotional abuse and from the whole context of disadvantage and neglect in which the sexual abuse often occurs.” However, he found fault with the sample as a non-random, convenience sample, investigated retrospectively, and emphasized that “Nobody should conclude on the basis of this paper that a real doubt has now been cast over the association between childhood sexual abuse and subsequent adverse mental health outcome.” He concluded with impeccable political correctness—perhaps displaying more emotion than is appropriate—“There are still those who would obscure and obviate the dreadful consequences of childhood abuse in general, and sexual abuse in
particular, and it would be shameful if such people were encouraged, however inadvertently, by this study.” It would indeed, but it is also valuable that the physical abuse from which patients often suffer will not be neglected at the expense of an overemphasis on another tragic topic.

Harold Merskey, D.M. is Professor Emeritus in Psychiatry at the University of Western Ontario and a member of the FMSF Advisory Board. He is the author of The Analysis of Hysteria: Understanding Conversion and Dissociation, 2nd ed.

Pennsylvania Social Worker Sanctioned by NASW

According to the October 2003 issue of National Association of Social Workers (NASW) News, Patricia Neuhausel, a Pennsylvania social worker who was one of the leaders of the Genesys group shown in the 1995 “Frontline” documentary Divided Memories, has been sanctioned by NASW. A member who acted as a surrogate complainant filed the complaint against Neuhausel in 1999, based on information from the Pennsylvania Bureau of Professional and Occupational Affairs after they charged Neuhausel with 84 counts of unprofessional conduct.

Neuhausel and her psychologist partner, Patricia Mansmann, violated the NASW Ethics Code. One of the techniques they used was “detachment,” in which clients were instructed to detach from all family, including small children. Another technique, “rage work,” required clients to hit a pillow with a bat and envision the person or problem that was causing them difficulty. This was done regardless of diagnosis, symptoms, or therapeutic progress.

Following are the specific sections of the code that were violated:

- I.B.1, by practicing outside the boundaries of acceptable social work practice and her own competence.
- I.C.2, by using treatment modalities that caused grave harm to clients and their families.
- I.D.2, II.F.2 and II.F.4, by providing treatment devoid of time-measurable goals that promoted continued dependency and exploiting the professional relationship by employing clients as nutritional counselors, massage therapists, and financial counselors.
- II.F.1, by failing to take proactive steps during a crisis.
- II.F.7, by failing to inform clients about the potential risks associated with “rage work” and “detachment” and failing to offer alternative treatment options.
- II.G.3, by divulging information without the client’s permission.
- V.O.1 and V.O.2, by using practice methods that were not based on knowledge relevant to or evaluated by the social work community.

Two social workers are sanctioned. (2003, October) NASW News, p. 8.

Recovered Memories Critical to Plot of New Novel

Elaine Hatfield and Richard Rapson
Brief Review by FMSF Staff

Thirteen-year-old Reza Guerrero and the slightly older Sam Chavez were deeply in love, but because of a long-time feud between the Guerrero and Chavez families, the lovers were dramatically and tragically separated. They went their separate ways and grew up. A decade later, however, when Reza and Sam meet by chance, their love immediately rekindles.

Unfortunately, the feud between the families threatens once again to keep them apart. When Reza’s sister recovers “memories” of being abused by their father and then confronts him, all the Guerrero family relationships are set on edge, and the feud with the Chavezes is greatly exacerbated. All kinds of family secrets exist, and the past is a confusing puzzle. Reza notes:

“What a family! Her mother, obsessing with what might have been, J.B. [her dad] trying to forget what once was, and Aurora [her sister] dredging up memories of things that never were. She sighed. Such an odd thing. So much love. Such strangers.” (p. 33)

The novel Recovered Memories, set in 1999 in San Francisco and San Jose, is a Mexican-American Romeo and Juliet. Unlike the young lovers of old, however, the mature Sam and Reza are able to figure out a way to be together in spite of their sparring families. Reza and Sam’s fight to come to terms with Mexican family pride, and at the same time to be with each other, motivates this fast-paced love story.

FMSF Newsletter readers will find the many sections about recovered memories to be eerily familiar. The reactions of the family members and the confusion that ensues after the confrontation are experiences that most readers will recognize. Undoubtedly, the accurate descriptions of the recovered memory contexts and the resulting devastation is due in good measure to the fact that author Elaine Hatfield is a professor of psychology at the University of Hawaii. Her co-author is a professor of history at the same university.

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Survivor Newsletters: Where are they now?

In the summer of 2002, the Foundation received a letter from a member asking what had happened to the many survivor newsletters that existed during the early years of the Foundation. In order to answer the question, the FMSF staff decided to try to contact as many of these newsletters that we knew about. There may be many more.

We first examined the survivor newsletters in the Foundation archives looking for addresses; then some volunteers wrote to them. We also searched the Web for information.

It appears that only a small fraction of the newsletters that flourished in the early 1990s are still publishing. Except for Survivor Activist, we did not include newsletters that originated because of abuse by clergy, assuming that they are very active at this time.

Of the more than 40 listings below, we are aware of only a few that continue to produce newsletters; Of those, even fewer appear to mail printed copies on a regular basis.

If you have any information that can add to what is known about the newsletters below or other newsletters that should be included, please be sure to send it to the Foundation.

Above and Beyond
(no forwarding address)
Ann Arbor, MI
Accuracy About Abuse
(last issue July 2001)
Washington, DC
Adult Survivor
(still active)
Denton, TX
Along Together
(no information)
Norris, MT
B.E.A.M.
(continues to be active with support from several dissociative units: Del Amo Hospital, Torrance CA; Forest View Hospital, Grand Rapids, MI; River Oaks Hospital, New Orleans, LA; Timberlawn Mental Health system; Dallas, TX; Two Rivers Psychiatric Hospital, Kansas City, MO.)
Believe the Children
(no longer published)
Chicago, IL
Body Memories
(no forwarding address)
Seattle, WA
Breaking the Silence
(no forwarding address)
Afton, MN
C.A.R.E., INC
Treating ritual abuse survivors to live full and rewarding lives
(no forwarding address)
Kokomo, IN
Coalition of Accuracy Against Abuse
(no newsletter at this time)
Jackson, MS
Cutting Edge
(no information)
Cleveland, OH
For Crying Out Loud
(active)
Cambridge, MA
Grapevine
(newsletter by email or diskette only)
Charlottesville, NC
Healing Path
(no forwarding address)
Coos Bay, OR
Healing Woman
(no longer published)
Moss Beach, CA
HOPE Newsletter
(no information)
Irving, TX
Incest Survivors Resource Network International
(no forwarding address)
Las Cruces, NM
International Council on Cultism and Ritual Trauma
(not active since 1999)
Dallas, TX
Many Voices
(continues to be active with support from several dissociative units: Del Amo Hospital, Torrance CA; Forest View Hospital, Grand Rapids, MI; River Oaks Hospital, New Orleans, LA; Timberlawn Mental Health system; Dallas, TX; Two Rivers Psychiatric Hospital, Kansas City, MO.)
Maze
(for MPD) (no information)
Bonney Lake, WA
Moving Forward
(no longer published)
Arlington, VA
MPDignity
(no information)
Boulder, CO
MPD Reaching Out
(no longer published)
c/o Public Relations Department Royal Ottawa Hospital, Canada
M.U.L.T.I.P.L.E.
Minds Uniquely Linked Together in a Productive Loving Existence - (for people with MPD/DID)
(no information)
Marina Del Ray, CA
Mungadze Association
(no longer published)
Bedford, TX
NEEDID VOICES
(no information)
South Hadley, MA
Roots of Healing
(no longer published)
Quincy, MA
Repressed Memory Psychlaw Newsletter
(Ottawa Recovered Memory Page last updated July, 1999)
Ottawa, Canada
S.M.A.R.T
Stop Mind Control and Ritual Abuse Today
(remains active)
Florence, MA
S.O.A.R.
Survivors of Abusive Rituals
New Hope Healing Institute
(no forwarding address)
Indianapolis, IN
S.O.M.A.N.
(No forwarding address)
Decatur, GA
Stone Angels
(Survivors of Ritual Abuse)
(no information)
Thunder Bay, ON, Canada

Cincinatti, OH
There are those occasional books that restore faith in reason, whose authors have the courage to take on the professional and scientific ideologies of the age. Remembering Trauma, by Richard McNally, is such a book.

***

In Remembering Trauma, we are treated to a brief but well condensed and precise summary of the major theories of memory, their essential constructs, and their empirical support.

***

The book [asks] the deceptively simple question, do people experience amnesia for their traumatic experiences? The answer is no!

***

Readers will be particularly interested in the “striking parallels between assumptions in Freud’s early work and those of today’s recovered memory therapists” (p. 168). Readers will find McNally’s critiques of the work of a number of clinicians and scientists, such as Lenore Terr, Jennifer Freyd, and Bessel van der Kolk, particularly ... informative.

***

I recommend this book to all those working in the field of memory and trauma and to lay readers with an interest in the intriguing field of psychological amnesia. McNally has set a standard for application of experimental and observational data to notions and hypotheses about memory and trauma. The book informs the current public and professional debates, clarifies battling ideologies, and avoids the “political correctness” that has been so damaging to scientific inquiry. The reader, whether lay or professional, will emerge more knowledgeable and more skeptical of many scientific and clinical assertions about memory and particularly amnesia.

Washington Jury Rejects Multiple Personality Defense of William Greene

In 1995 William Greene was convicted of tying up and sexually attacking a nurse who worked as his therapist, Maryalyce Stamatiou. He was sentenced to life in prison under Washington’s “three-strikes” law. In March 2002, acting as his own attorney, Greene convinced a federal appeals court that his trial had been flawed because experts were not allowed to testify that Greene had been diagnosed as having two dozen personalities. Greene said that it was one of his “alters” who had attacked the therapist.

The 53-year-old therapist who was attacked by Greene is the first person who diagnosed him with 24 personalities, as well as 15 fragment personalities, including a dragon named “Smokey.” Stamatiou was working as a prison counselor at the time she diagnosed Greene, but she resigned from that position when Greene was released. She continued to treat Greene in private practice. Stamatiou testified that she had gone to Greene’s apartment in 1994 because she knew he was stressed over work, and she feared he was suicidal. She said that he was high on cocaine and behaving like “Tyrone.” “Tyrone assaulted me. [He] was one of the bad guys,” she told the jury. The therapist has always stood behind her former client and believes Greene should be in a hospital, not a prison.

One of the defense experts was Dr. Marlene Steinberg, author of The Stranger in the Mirror: Dissociation, the Hidden Epidemic (2002) in which she explains Multiple Personality Disorder MPD in the same way as she explains memories of space abduction and past lives: They are all consequences of childhood sexual abuse. Dr. Steinberg, a long-time vice-president of the International Society for the Study of Dissociation (ISSD), told the jury that Greene fits the profile for someone with MPD.

Dr. Robert Olsen, former president of the Washington Psychiatric Association and an expert for the prosecution, had originally been hired as a defense expert in 1995. He told jurors that in the years since, he has learned more about identifying true cases of what most experts agree is a rare condition. When he re-examined Greene this year, he felt that Greene showed signs of faking.

Greene has been sentenced to life in prison. However, he also will be tried for the murder of a young woman in which he is implicated through DNA evidence.


Update of Cases We Have Been Following

Klassen [Saskatoon, Saskatchewan] Justice George Baynton decided that the malicious prosecution lawsuit filed by 12 people in Saskatoon who had been charged with ritualistic abuse of three children could proceed. He noted that the evidence that had been presented so far indicated that the police investigation consisted almost entirely of unreliable interviews with the children in order to obtain a confession. He wrote:

“Lacking a proper or at least more thorough investigation of the horrendous and serious allegations made in this case against so many individuals, I am satisfied that a reasonable person could conclude, in these circumstances, that the plaintiffs were probably not guilty of the host of serious offenses alleged against them.”

More than 12 years ago, the plaintiffs were charged with abusing the children in bizarre ways such as eating eyeballs, drinking blood, and watching newborn babies get skinned and buried. Even an elderly woman who was in a wheelchair was accused of chasing down a child and forcing him to perform sexual acts. At the time, the police called it the “scandal of the century.”

Most of the cases did not go to court. The children, who are now in their mid-20s, have since publicly said that they made up the stories. Richard Klassen has been acting as his own lawyer while the other plaintiffs have professional representation. With only a 7th grade education, Klassen spent years writing to authorities and picketing in order to gain attention for the case. The last arguments in the case were given on November 14, 2003, and Justice Baynton said he hoped to have a decision before Christmas.


Fairlie [England] In the first English case of an accused family bringing legal proceedings against a clinic for the use of memory recovery techniques, James Fairlie, the former deputy leader of the Scottish National Party, is suing the National Health Service and social services who treated his daughter. In 1994, Fairlie’s daughter, Katrina, was admitted to hospital to have her appendix removed, but doctors found nothing wrong with her. When her pain con-
continued, doctors believed that the symptoms were psychosomatic and admitted her to a psychiatric unit at Murray Royal Hospital in Perth, Scotland. She was treated with mind-altering drugs, hypnosis, and prolonged interviews—techniques since condemned by the Royal College of Psychiatrists. Katrina deteriorated rapidly, and she came to believe that her father and 17 other men had raped her and that he had beaten to death a six-year-old girl. Ms. Fairlie withdrew her claims in 1995.

Fairlie announced his case in 1998, and it has been slowly moving through the courts. The case was adjourned on December 11, 2003, pending further legal argument raised by the Council and NHS Trust. It is likely to be back in court early next year. The judge has yet to determine if the case can go forward.

**Wenatchee [Washington]** Lawsuits resulting from the 1994-95 investigations and convictions spearheaded by detective Bob Perez are likely to continue for years. According to the *Wenatchee World*, more than three dozen lawsuits have been filed against the city of Wenatchee, the state, and Chelan and Douglas counties. Most of the lawsuits are based on civil-rights violations. The plaintiffs include those people who were convicted and then exonerated of abusing children. With 18 cases still pending, the defendants have agreed or been ordered to pay plaintiffs at least $10 million to date. The state of Washington estimates that it has spent about $1.3 million defending itself, but the Association of Washington Cities has not disclosed the amount it has spent defending Wenatchee. However, Wenatchee liability insurance has risen from under $200,000 in 1994 to almost $700,000 in 2003.

Although the statute of limitations for filing suits has expired for most adults who might want to sue, all of the minors who were taken away from their parents or interrogated by police have until they turn 21 to file suit.


**Houl [Massachusetts]** David Hoult, 68, was arrested and sent to prison in October 2003. The now-retired MIT professor Hoult was originally accused by his daughter, Jennifer, who had begun therapy in the fall of 1984 with an unlicensed New York psychotherapist for problems that included divided loyalties surrounding her parents’ divorce. Jennifer recovered memories that she had been abused, and she sued her father in 1988, claiming she had been molested from the ages of 4 years to 17 years, hundreds if not thousands of times and sometimes with many family members nearby. She claimed that she buried these memories until she was 24 years old.

The case went to trial in U.S. District Court in Massachusetts (Houl v. Hoult, 1993). Jennifer Hoult was on the stand for three days and had experts to support her. David Hoult’s attorney had no experts or even character witnesses. The attorney apparently believed that the implausibility of the “memories” would be enough. He thought wrongly. A Massachusetts jury awarded Jennifer $500,000 that David Hoult never paid, the reason he is now in prison.


**New York Grandmother Wins Supervised Visits with Grandson**


Josephine Parlato sought reasonable visitation with her grandson, Shane, who was born in 1991. The issues before the Court were whether Mrs. Parlato had standing to bring a petition for visitation. According to Court documents, Shane resided with his grandmother intermittently from his birth to 1994. Shane and his mother then lived with her between 1994 and 1998. In 1998, Shane’s mother remarried, and she moved to her own home. Shane continued to visit with his grandmother until the fall of 2001. At that time Shane’s mother began to decrease the time Shane spent with his grandmother. The evidence shows that Shane and his grandmother had a loving relationship until 2001, and she played an active role in his life. All contact was stopped in March 2002, and the relationship is now acrimonious.

Shane’s mother had been receiving therapy due to depression and anxiety, and recovered memories that Mrs. Parlato had abused her when she was 7 years old. Shane’s mother also claimed that Mrs. Parlato had touched Shane in a sexual manner in 1999, and that was a reason for stopping contact between Shane and his grandmother.

Shane told the Court that he did not want to visit his grandmother. Family Court Judge Kevin M. Carter noted, however, that Shane’s testimony appeared to be rehearsed and staged and that it appeared that his mother was pressuring him to view his grandmother negatively.

The Court found that Josephine Parlato did have standing to bring a petition for visitation and that it would be in Shane’s best interest to “afford him an opportunity to visit his [his grandmother] in a therapeutic supervised setting. The Court further believes that Shane is torn between his parents and Petitioner…. and that a therapeutic supervised setting monitored by a licensed psychologist would provide for a safe and healthy environment that is conducive to a healthy reunion between Petitioner and her grandson, who once had a warm and loving relationship.”
I Can’t Even Imagine

Our problem began about a year and a half ago. The articles in the newsletter that I often have the most difficulty with are the ones in which a family is reunited with a returner who has not retracted but who is willing to “forgive and forget.” I don’t understand how the families do it.

Our daughter is out of contact with both my husband’s and my extended family—except for rare, brief, superficial “instant message” conversations with one of her sisters. This is by our choice and also the choice of family members. When our daughter first sent the accusing email with copies to several family members, she was shocked that the response was a cut-off of communication from the people in the family. She had no concept of what she had done. To the few people with whom she still had contact, her stories varied from person to person and from day to day. For a few months she still had contact with one of her sisters and her aunt. At one point she told her aunt that even if the sexual abuse wasn’t true, she had still been mentally abused and that was just as bad.

A few months ago, she told her sister that she misses her family and that she has been reading articles about victims and their families reconciling without either party admitting that they were wrong. I am unable to even imagine doing something like that.

A sad mom trying to cope

We Sent Flowers

I want to let you know that our daughter has been in contact with us for about a year, and we have just had a visit from her and our grandson. It had been about 11 years since we had seen her.

I have loved reading the Newsletter, especially the letters from other parents. I actually followed the advice of one of the letters. I sent our daughter flowers on her 50th birthday, and that did the trick. After one more birthday—for which I sent only a card—she wrote a note thanking us for the card. The letter also contained a small bit of news saying she would like to hear from us. After a few letters and e-mails, she called and apologized—said that she suddenly “woke up” after years of being in a haze. That is all she has ever said about it, and we don’t push her.

Her sisters still will have nothing to do with her after all the nasty things she said about their Dad, but we are happy to be in contact. Thanks for all the support. It melted some of the ice in our hearts.

Happy parents

I Doubt We Would See Daughter’s Return

I am a parent who has gone through the agony of losing a daughter to repressed memory therapy. She was counselled while in a college in America. When we first began to get references to “abuse even in respectable Christian homes,” we assumed she was referring to other people. In 1992, when she cut off all contact with us after making some rather broad sweeping statements about our parenting, we were devastated.

We had no idea what was happening, and we were kept ignorant by the people at the college. We flew half way around the world to see them, but although we had made appointments to see the principal, he was unfortunately out of town and unable to be contacted when we arrived.

We left the United States and went to South America very downhearted, but while we were there, we were given a copy of a book called Confabulations. After reading this, we realized what was happening. We went back and confronted the people involved, but we had lost our daughter.

In 1997 we went to the FMSF conference in Baltimore, and we were challenged by the story from Beth Rutherford. We came home, determined to find out if our daughter was alive, and where she was living and to attempt to renew contact.

It has taken a long time and many failed attempts, but finally we found her. Knowing where she lived was one thing. Establishing contact was another. We began by sending flowers on her birthday and eventually she responded.

Last month, we visited her and met her face to face for the first time. We met her husband, his family, and our two grandchildren.

I have read many testimonies from other parents about this happening, and I must say I doubted we would ever see it. In fact, after one failed attempt to see our daughter, I became convinced we never would. But things can change. Our church has been a wonderful support and has offered many prayers about this. There is still a long way to go, but we feel we are at least on a path towards reconciliation.

A mom and dad

Confabulations (1993) by Eleanor Goldstein and Kevin Farmer is available through Upton Books.

Not Off the Hook Yet

Thanks so much for being there for so many of us during these past horrendous years. We are now reconnected with our three estranged children. The accusation is still there, but we’ve had some really nice family times together. It was obvious that they missed family. However, they are not off the hook yet—we need to come to some resolve.

A mom

The palest ink is better than the best memory.

Chinese Proverb
Missing a Hug

Despite recent efforts to reunite with our daughter, we are still separated from her., but we do have some contact with our granddaughters through letter writing.

Recently one of our granddaughters represented our country in a world competition, and she did very well. The local media picked up the story, and she had many interviews on television. The articles and television gave us a lot of information about her and her interests. It was so wonderful to see her, even if on television, after 15 years. Oh, how I wanted to give her a hug!

A longing Grandmother

After 10 Years

After 10 years, our daughter wrote us a note in late August and has written five letters since. Each letter sounds more like her “old self.” We respond, but do so very carefully thanks to advice we have gotten from the Foundation. We were advised that it was a slow process. So we understand much better now. We owe it all to the Foundation.

Thankful parents

Unconditional Love

We had been estranged from our fourth daughter for more than a decade when we had heard that she was having serious marriage problems. One day, we happened to see her at our local supermarket. Taking courage and a prayer, we went over to ask if there was any way we could help. She looked at us for a moment and then asked if we would be willing to meet with her at her church with two pastors. She said that we could bring our pastor with us.

We met for one and a half hours. Her husband came, and we found out that he had left her sometime earlier. She said that she still believed that these “things” had happened, but she was forgiving us and wanted to be reconciled. She then asked her husband to forgive her for the years she had taken her bitter anger toward us out on him. Her husband said nothing.

I said “It must be very hard to forgive us believing that these things really happened. I commend you for this choice. We do not believe these events happened, but we love you and are overjoyed to have reconciliation.”

She came to visit on Father’s Day, and she brought me my favorite pie that she had freshly baked. Since then we have talked, and she has been to our house several times. The last visit was very encouraging. We talked a little about how painful life can be. I said that it sounds as though her husband has made up his mind to get a divorce.

As we talked she broke down and said, “I am so sorry. I am so sorry.”

So it seems as we are together, and she sees how our other grandchildren are always so glad to see us and as she feels the love we try to give unconditionally, God is working to bring truth and healing.

It has been 12 long, painful years. We are still praying for our other daughters.

Will It Never End?

A former co-worker dropped by my office to tell me about her youngest son, who had told her and his dad, as well as his sister and brother, that he no longer wanted to have any contact with them. He said he needed to sever ties from them in order to heal. According to my friend, the son had been in therapy, although the rest of the family was not aware of it.

My co-worker friend had been scheduled to go and visit all three children, who live in another state. She had made up her mind to visit the youngest son and his expectant wife to see if they would talk with her. But before she was scheduled to leave, she received an e-mail from that son telling her that they had lost their baby. So the rest of the family sent flowers and decided to leave the couple alone for the time being.

When this friend contacted me, I think all the emotions and feelings that I usually kept under wraps surfaced. I prayed and cried most of the weekend. Those of us who have been through this ordeal hurt so badly for each other. Many friends, co-workers, and relatives do not understand what a family goes through. It is discouraging because they don’t even try to seek information, which is so plentiful now, to understand the causes of false memories.

Another mess! It breaks my heart. Will it never end?

A mom

More Thoughts on Wisconsin Conference

After hearing your reports, I am finally hopeful that the Wisconsin recovered memory wars may be about over! Gone is the 1000+ attendance! Largely gone, too, is the “survivors of incest and recovered memories” hysteria, which was fueled by invited speakers such as Marilyn Van Derbur, Judith Herman, Laura Brown, Roberta Sachs, etc. To be sure, there are still some presenters talking the recovered memory talk, but most are defensive and cautious. To be fair, I must mention that Elizabeth Loftus, Steve Lindsay, and Brooks Brenneis did appear in 1994, but they never returned again.

The conference no longer seems so focused on incest. (Until 2000, it was called the Midwest Conference on Child Sexual Abuse and Incest.) The craze may be self-limiting, but I believe the changes are due, in large part, to the enlightening work of education by the FMS Foundation and to lawsuits. Perhaps economic factors are also playing a role. And we should not forget the possible influence of some persistent families who appealed for change.
It is great to know that at this year’s conference FMSF literature was distributed to hundreds of young criminal justice and family service workers. The reports were heartening. I hope we will continue have the energy to remind people that the Foundation and concerned families are still here, to stamp out any fires that may flare up, and to fight for those left behind.

To those of you who staffed the table, I thank you for your work and your messages.

A mom

Have You Heard of a Case Like This?

The following is an excerpt from a letter my wife received from the daughter of one of her cousins:

... And that is why I didn’t want my father to have my address. ... In September 1999, psychotherapy enabled me to understand, through reliving the experience, that my father had sexually molested me and my sister when we were babies, at an age when we are not supposed to remember it consciously and when only the body's memory can keep a record of such events. The result of this abuse is that my sister has been psychotic for more than 30 years and I lost the sight in one eye when I was 10 months old.

Now, I happen to know that the writer was born blind in one eye because of a cataract and that her sister takes after her mother, who also was bipolar. What is interesting about this case is that she does not actually remember the incident (i.e., no alleged repressed memories were uncovered). She just believes what the psychotherapist told her and now blames her poor father for her physical handicap and her sister’s psychosis.

Have any of your readers come across similar cases? It’s hard to imagine that this one is unique.

David Romney, PhD, Professor Division of Applied Psychology, Education, University of Calgary, Alberta, Canada

A Complexity of Experiences Claudia Dabbs

As I was growing up, I was aware that some of my father’s behavior was damaging to our family, especially to my mother. I also knew that in many respects my father was a courageous man who lived his life with admirable integrity. He taught me many valuable lessons.

My mother suffered from extreme, chronic clinical depression from childhood, and her five siblings had all been institutionalized with diagnoses of schizophrenic disorder. She was a wise woman, however, and despite the severity of her depression, she continued to take care of our family. When I left home to go to college, I harbored no feelings of neglect or abuse. I believed that both parents did the best they could to support my five sisters and me.

Even before I attended graduate school from 1979 to 1981, I knew that severe mental illnesses were neurobiological disorders. I attended Tulane’s MSW program, which was rigorous and demanding and required the ability to think critically. I never heard about the concept of “repressed memory trauma” or “memory retrieval therapy.” Furthermore, during my schooling and subsequent 15 years successfully practicing social work in New Orleans, I never encountered a report of a patient diagnosed with MPD.

In 1994, my partner and I decided to relocate. As we were in the process of exploring our options, I received a call from one of my sisters telling me that my father had committed suicide. Stunned, confused, and full of grief, I quickly packed and drove home. As I attempted to gather information, I learned that one of my sisters had been hospitalized for one month at a private for-profit psychiatric hospital in Shreveport for depression and anxiety. While in the hospital, she was “informed” that her depression and anxiety were the result of repressed traumatic memories of severe sexual abuse allegedly perpetrated by both of my parents and that the abuse was part of some sort of satanic cult ritual. At the end of her hospitalization (i.e. when her insurance ran out), she was encouraged to call my father and confront him with the accusations.

My sister was released from the hospital one day after my Dad killed himself. She was released with increased depression, confusion about her alleged memories, guilt because she felt responsible for Dad’s suicide, and no arrangements for follow-up care. My sister disconnected from everyone in the family, and I heard several years later that she had shot herself. As I write this, I do not know if she is alive or dead. I do know that given our family history of mental disorders, she should have been treated for depression—not repressed memories.

After these disheartening events, my partner and I moved to a city in Wisconsin. Several weeks after I began working on an inpatient psychiatric unit, I learned that there was a huge debate raging within the local mental health community about “repressed memories of traumatic sexual abuse” and the consequent treatment of clients who were uncovering such memories. Most of the patients had previously been diagnosed and treated for schizophrenia or bipolar disorders. The psychiatrist in charge of the County Mental Health Services began rediagnosing these clients with MPD and telling them that their symptoms were the result of repressed memories. He advised them to seek treatment that would help them uncover and relive the repressed memories. He confidently told them that they would remain symptomatic if they did not receive memory retrieval therapy and cease taking their previous medications.

As I attempted to understand the dynamics of the debate, I saw that it resembled a feud. The clients became
Eleven years ago, I developed psychiatric symptoms that I feared would develop into a schizophrenic disorder, and I feared possible institutionalization—given my family history. I sought treatment from a psychiatrist who accurately diagnosed me and began appropriate pharmacological treatment. I was also referred to therapy for supportive case management.

Due to the HMO that dictated which therapists they would cover under their insurance plan, I was referred to a therapist at the County. I was unaware that this person had been trained by the County psychiatrist who diagnosed large numbers of clients with MPD. I did not receive treatment for my diagnosed illness. Instead I was treated as a victim of severe childhood abuse that I had obviously repressed.

At times I trusted this therapist and began to believe I had MPD, even though my psychiatrist never agreed with that diagnosis. I began to believe I had alters and that unknown to me, these alters would come out in therapy sessions. At times I questioned the validity and efficacy of the therapy. I continued to decompensate and over a 10 year period was hospitalized more than 25 times.

Eventually, I terminated therapy with this therapist, a difficult and painful process. My therapist and I both behaved badly, but only I was held accountable for bad behaviors. Finally, after an almost successful suicide attempt, I began treatment with a psychologist who actually treated me for the diagnosis I had been given by my psychiatrist. Her primary therapeutic approach is based on cognitive therapy and interventions to help me deal with anxiety and panic attacks.

I contacted the FMS Foundation prior to my termination with my previous therapist. The people with whom I spoke were helpful, objective, and professional. When I saw a notice in the FMSF Newsletter for a local conference, I decided to attend.

After attending the conference, I decided to write about my experience for the Newsletter because I felt that some of the people attending the conference seemed unaware of the variety and complexity of experiences that could lead a person to false memories.

I heard people generalize about patients, using terms such as “personalities prone to confabulate,” “attention seekers,” and “women who brought grave pain on their families,” as if these generalizations were facts rather than opinions. There seemed to be acceptance that these were the factors that resulted in FMS. However, my story does not fit any of these stereotypes. I never blamed my parents. Just the contrary, I attempted to help my family heal from the pain that resulted from Dad’s suicide and the loss of our sister.

I had a stable, satisfying career for 20 years, a stable relationship, and a satisfying social life, and then I developed a neurobiological disorder. Due to the severity of my disorder, I was not capable of shopping around for a reliable therapist. I was also extremely limited about my provider choices due to the mandates of my insurance.

Not a day goes by that I don’t feel guilty and stupid for failing to leave this “therapy” before it caused grave damage. Nothing positive resulted from what I can say was a sham in the guise of legitimate therapy. I do not have a personality prone to confabulate, and I am not attention seeking, and I do have strong critical thinking skills. The catch-22 is that my disorder manifests in periodic disability of rational thought processes.

I hope that in telling my story, Newsletter readers will remember to consider the complexity of experiences that can result in false memories.

Claudia Dabbs would be pleased to answer any questions. She may be contacted through the FMS Foundation.

Editor’s Comment: It is unfortunate that statements regarding “personalities prone to confabulate,” “attention seekers,” and “women who brought grave pain on their families” were interpreted to mean that the accuser engaged in these behaviors consciously or intentionally. This is almost never the case. Young women, like the writer, have experienced anguish and inordinate pain, as have their innocent families because they were misled by misguided therapists.

Magnificent Memory Machine
Excerpt from computer game review.

“Joy has a strange talking mechanical device that was built by her late father. The device, which bills itself as Miles the Magnificent Memory Machine, challenges Joy to solve a series of riddles with the goal of recovering repressed memories of her long-dead mother; Nancy pitches in with the solutions. So Nancy’s deductive skills are needed not only to find a culprit, but also to lead someone on a journey of self-discovery, making our heroine what may be the world’s only detective-therapist.”

**Web Sites of Interest**

- [comp.uark.edu/~lampinen/read.html](http://comp.uark.edu/~lampinen/read.html): The Lampinen Lab False Memory Reading Group, University of Arkansas
- [www.exploratorium.edu/memory/](http://www.exploratorium.edu/memory/): The Exploratorium Memory Exhibit
- [www.ctnow.com/memory](http://www.ctnow.com/memory): Hartford Courant memory series
- [www.tmdArchives.org](http://www.tmdArchives.org): The Memory Debate Archives
- [www.francefms.com](http://www.francefms.com): French language website
- [www.StopBadTherapy.com](http://www.StopBadTherapy.com): Contains phone numbers of professional regulatory boards in all 50 states
- [www.itech.net/OHIOarmhp](http://www.itech.net/OHIOarmhp): Ohio Group
- [www.bfms.org.uk](http://www.bfms.org.uk): British False Memory Society
- [www.geocities.com/retractor](http://www.geocities.com/retractor): This site is run by Laura Pasley (retractor)
- [www.geocities.com/therapyletters](http://www.geocities.com/therapyletters): This site is run by Deb David (retractor)
- [www.religioustolerance.org/sra.htm](http://www.religioustolerance.org/sra.htm): Information about Satanic Ritual Abuse
- [www.angryparents.net](http://www.angryparents.net): Parents Against Cruel Therapy
- [www.geocities.com/newcosanz](http://www.geocities.com/newcosanz): New Zealand FMS Group
- [www.werkgroepwfh.nl](http://www.werkgroepwfh.nl): Netherlands FMS Group
- [www.nasw.org/users/markp](http://www.nasw.org/users/markp): Excerpts from *Victims of Memory*
- [http://www.rickross.com/groups/fsm.html](http://www.rickross.com/groups/fsm.html): Ross Institute
- [www.hopkinsmedicine.org/jhjpsychiatry/perspec1.htm](http://www.hopkinsmedicine.org/jhjpsychiatry/perspec1.htm): Perspectives for Psychiatry by Paul McHugh
- [www.enigma.se/info/FFI.htm](http://www.enigma.se/info/FFI.htm): FMS in Scandinavia - Janet Hagbom
- [www.caseassist.com](http://www.caseassist.com)
- [www.findlaw.com](http://www.findlaw.com)
- [www.legalengine.com](http://www.legalengine.com)
- [www.accused.com](http://www.accused.com)
- [www.abuse-excuse.com](http://www.abuse-excuse.com)

**Legal Web Sites of Interest**

- [www.caseassist.com](http://www.caseassist.com)
- [www.findlaw.com](http://www.findlaw.com)
- [www.legalengine.com](http://www.legalengine.com)
- [www.accused.com](http://www.accused.com)
- [www.abuse-excuse.com](http://www.abuse-excuse.com)

**Psychology Astray:**

*Fallacies in Studies of “Repressed Memory” and Childhood Trauma*

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

Upton Books

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

To Order: 800-232-7477

**“Ask an Expert,”**

*This American Life*

June 14, 2002

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

[www.thislife.org](http://www.thislife.org)

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

Producer: Alix Spiegel

**Remembering Trauma**

by Richard McNally

Harvard University Press

The most comprehensive review of research about trauma and memory

Highly recommended

**Science and Pseudoscience in Clinical Psychology**

S. O. Lilienfeld, S.J. Lynn and J.M. Lohr (eds.)


Highly recommended
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Louisville - Last Sun. (MO) @ 2pm
Bob 502-367-1838

MAINE
Rumford -
Carolyn 207-364-8891
Portland - 4th Sun. (MO)
Wally & Bobby 207-878-9812

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Andover - 2nd Sun. (MO) @ 1pm
Frank 978-263-9795

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Greater Detroit Area -
Nancy 248-642-8077
Ann Arbor
Martha 734-439-4055

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Pat 816-738-4840
St. Louis Area - call for meeting time
Karen 314-432-8789
- last Sat. of month) @ 12:30pm
Tom 417-753-4878
Roxie 417-781-2058

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Montrose

Deadline for the March/April Newsletter is February 15. Meeting notices MUST be in writing and should be sent no later than two months before meeting.
Do you have access to e-mail? Send a message to pjf@cis.upenn.edu if you wish to receive electronic versions of this newsletter and notices of radio and television broadcasts about FMS. All the message need say is “add to the FMS-News”. It would be useful, but not necessary, if you add your full name (all addresses and names will remain strictly confidential).

The False Memory Syndrome Foundation is a qualified 501(c)3 corporation with its principal offices in Philadelphia and governed by its Board of Directors. While it encourages participation by its members in its activities, it must be understood that the Foundation has no affiliates and that no other organization or person is authorized to speak for the Foundation without the prior written approval of the Executive Director. All membership dues and contributions to the Foundation must be forwarded to the Foundation for its disposition.

The FMS Newsletter is published 6 times a year by the False Memory Syndrome Foundation. The newsletter is mailed to anyone who contributes at least $30.00. It is also available at no cost by email (see above) or on the FMSF website: www.FMSFonline.org

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