Dear Friends,

CBS is remaking the movie *Sybil* with plans to air it this spring. It was filmed in Halifax during January and February, is directed by Joseph Sargent, and stars Jessica Lange, Tammy Blanchard and JoBeth Williams. The movie “is based on one of the first documented cases of multiple personalities.”[1] And that is the problem. Since the gripping original 1976 movie, after which the number of diagnosed cases of multiple personality soared, *Sybil* has been shown to be a hoax. Her multiple personalities were caused by her unduly suggestive mental health treatment.

We have written in vain to CBS. (See letter page 3.) Now it appears that it will be necessary to reach as many television-movie reviewers as possible with information. To do that we need your help. Please send us by mail or e-mail or phone the name, publication and full address of the television-movie critics in your area. (E-mail addresses too.) Don’t forget the local weeklies, television, and radio reviewers. This is very important. We can send background information that may be helpful to TV-movie reviewers.

The remake of *Sybil* without clarification that this is not a documented case of multiple personality is an ethical issue. The publisher of the Wilkomirski memoir withdrew it from sale once it was shown to be false. Oprah recently apologized for misleading viewers with her support of the fraudulent Frey memoir, and Frey’s publisher has pulled out of it’s agreement with him. What is the ethical responsibility of movie producers? Is is OK to depict something as a “documented” case when, in fact, it is not?

Recently, a news article crossed our desk announcing the Charlevoix, Michigan Sheriff’s Department investigation of claims of Satanic ritual sexual assault dating back to the 1970s and early 1980s. [2] A spokesperson for the department noted that many of the people who took part in the alleged activity and who remained in Michigan may be immune from prosecution because of the state’s statute of limitations. He also invited people to communicate with the Sheriff’s Department on an anonymous basis. Will the Sheriff’s Department read the papers by Lanning, Goodman et al., and LaFontaine that we provided?

These two events are a reminder that the beliefs that fueled the recovered memory phenomenon remain lurking and ready to pounce. If further proof is needed, the following erroneous information was posted on the web site of The Leadership Council:

“In reality, the science is overwhelmingly on the side of delayed trauma recall: over 70 studies have documented this phenomenon in clinical, non-clinical samples using prospective and retrospective design and a variety of methodologies. No study that has investigated this phenomenon has failed to find it!! Population samples of those reporting histories of childhood maltreatment (sexual, physical abuse, etc.) consistently document the presence of delayed recall/ amnesia for trauma, as do studies of natural disasters, survivors of the Nazi Holocaust, Cambodian Holocaust, et al. In reality, these memories frequently return to the person under a variety of circumstances, not just during therapy: a combat veteran watching a news report about the Vietnam War; and incest survivor’s child reaching the age at which she was first abused, etc.” (Richard J. Lowenstein, M.D. (February 15, 2005). Letter to NPR Responding to Misinformation in the Media. Retrieved from http://www.leadershipcouncil.org/1/blog/s.html on February 23, 2006.)

Although these items may seem discouraging, we should keep in mind that a paragraph such as the one above would not be found in a respectable journal in 2006. The claimed studies have been misinterpreted. In this newsletter, we devote several pages to Pope et al.’s refutation of the claim that studies of natural disasters and Holocausts have found amnesia. Although Pope’s information has been

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available since 1999, and the chart is available on www.FMSFonline.org, we include it so that readers without internet access can also see the impressive “no” column for whether amnesia was found in the 76 studies.

The recent articles described on page 4 provide additional support to counter the claims of supporters of the accuracy and validity of recovered memories. Of particular interest is the study by Harrison Pope and colleagues comparing the number of publications of articles about dissociative identity disorder and dissociative amnesia with 25 well established diagnoses such as anorexia nervosa, alcohol abuse, and schizophrenia for the past 20 years. The established disorders showed constant or steadily rising publication rates. Articles about dissociative amnesia, on the other hand, showed a big increase and then a big drop. The authors conclude from the “bubble” of interest that “dissociative amnesia and dissociative identity disorder have not generated consistent scientific interest over the years... and suggest that these diagnostic entities presently do not command widespread scientific acceptance.” This is an important finding in terms of whether or not testimony on the topic meets the legal admissibility criteria of general acceptance in the professional community.

The legal section of this issue reports on two cases. In January, a New Jersey appeals court held that “a case based on repressed memories cannot be submitted to a jury without expert testimony diagnosing the alleged victim as having dissociative amnesia and explaining and justifying the concept that repressed memories can be accurately recalled.” [3] The opinion cited a law review article that found that “a fierce debate rages on whether memories of [childhood sexual] abuse can be repressed for a time and then accurately recovered later.” [4]

The other case, one of the dwindling—if not the last—recovered-memory medical malpractice trials, concluded in October, 2006 in Lancaster, Pennsylvania. A jury in a 12—0 decision awarded Rose Gray $330,000. The case demonstrates once again the terrible damage caused by uncritical belief in the accuracy of recovered memories and satanic ritual abuse conspiracies.

Although new claims of childhood abuse based on recovered memories and new day-care scandals are now infrequent, the fallout of past excesses is still with us. Newsletter readers will likely sympathize with the thoughts expressed in the commentary by Charles Pragnell on page 5. Readers will also likely appreciate the review of the recovered-memory phenomenon by FMSF Advisor Martin Gardner on page 14.

Thanks for your support, and please remember to send us the information about television-movie reviewers in your area.

Pamela


"In Scientific Consensus on Memory Repression and Recovery, 51 Rutgers L. Rev. 275 (1999), Professor Robert Timothy Reagan reviewed reports issued by seven national scientific societies in four English-speaking countries on dissociative amnesia. He noted that the American Medical Society considers the “existence of repression as considerably controversial and declares recovered memory reports to be unreliable without corroboration.” He described the Royal College of Psychiatrists as taking “no clear stand on whether memory repression and recovery exists.” He noted that the “Australian Psychological Society was skeptical about the existence of repression and declared recovered memory reports to be unreliable without corroboration.” And he similarly described the position of the Canadian Psychiatric Association. Based on his reading of a number of reports issued by the American Psychological Association, he found that “a fierce debate rages on whether memories of [childhood sexual] abuse can be repressed for a time and then accurately recovered later.” Ultimately Professor Reagan concluded that there was an absence of general acceptance of memory repression:

‘The scientific principle of memory repression, where an individual’s consciousness is denied access to traumatic memories until the individual is psychologically competent to cope with the memories, has simply not achieved general acceptance among memory scientists. This lack of acceptance is true, regardless of whether the purported phenomenon is called repression, dissociation, or anything else. In fact, the scientific evidence supporting the repression principle is remarkably weak.’


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.

If you have difficulty finding any of the articles mentioned in this newsletter, just send us an email at FMSFonline.org (put FMSF in the header) or send us a stamped self-addressed envelope with the name of the article you want, and we will be happy to send it to you.
LETTER FROM FMSF TO CBS

January 30, 2005
The CBS Team  Att: Mike Wallace
Mental Health Issues
51 West 52nd Street
New York, NY 10019
Dear Mr. Wallace:

Re: Remake of Sybil by CBS/Viacom

Tapes raise new doubts about ‘Sybil’ personalities

Twenty-five years after multiple personalities became the hot diagnosis, therapists are saying ‘Oops’
September 13, 1998, Toronto Star.

The real Sybil?
Historian: ‘Sybil’ never had personality disorder she made famous

The most famous case of multiple personality disorder wasn’t what it seemed
June 6, 1999, Star Tribune.

These headlines presage both a profound challenge and an important opportunity with regard to the remaking of the 1976 Sybil in 2006. The notion that Sybil suffered multiple personality disorder was a hoax that caused incalculable suffering for psychiatric patients and their families. CBS is in a position to ameliorate some of that harm and to prevent yet another epidemic of irrational malpractice.

If there is any doubt about Sybil being a hoax, please review the following documents (included with this letter):

- The interview with Dr. Herbert Spiegel (who also worked with Sybil for four years). Dr. Spiegel, a Professor at Columbia University and one of the most honored living psychiatrists, did not believe that Sybil had multiple personality disorder, but rather her behavior was a consequence of her treatment by Dr. Wilbur. [1]

  - The audiotapes of treatment sessions and conversations between Dr Wilbur and author Flora Rheta Schreiber that have been discovered. These document the “fraudulent construction of a multiple personality.” [2]

  - The documentation that the stories of her real childhood do not match the childhood in Sybil. [3]

- Memory research of the past decade that shows that the suggestive therapeutic techniques used by Dr. Wilbur with Sybil can cause the symptoms of MPD. [4] Most psychiatrists are dubious about the diagnosis in general and question the possibility of iatrogenesis in specific. [5]

- In 1973, before the publication of Sybil, psychiatrists reported fewer than 200 possible cases of multiple personality disorder in the history of the world. Following Sybil, and especially following the enthralling 1976 movie, a psychiatric tsunami swept North America and thousands and thousands of cases were diagnosed. How could this be? Did doctors suddenly become better diagnosticians? Had there been an epidemic of child abuse preceding Sybil that caused the explosion of cases? Or was the medical profession and the public swayed by a compelling hoax? The research indicates the latter. [6]

  A 2006 Sybil could be more than just a remake of the original movie. It could be an opportunity for CBS to expand the story, perhaps with an epilogue that reflects 30 more years of the Sybil story. It could be an opportunity for CBS to educate the public and to have a positive impact in the mental health field.

Updating Sybil is very important:

  - To remake Sybil without including this full story will make CBS look foolish, or, even worse, put CBS in the position of perpetuating this bizarre and harmful hoax.

  - To remake Sybil with this full story will show that CBS is responsible in its effort to correct the hoax.

Thousands of people have had their lives destroyed because of fad of a misdiagnosis of multiple personality disorder. Here are the outcomes of a few of the hundreds of lawsuits against therapists that have been brought in the past decade by people diagnosed with MPD: [6]

  Fultz v. Carr and Walker, 1996, settled out of court, one for $1.57 million, and the other for a confidential amount. Patient sought help for mild depression and weight problems. She was misdiagnosed with childhood sexual abuse, ritual abuse and MPD. Her preschool children were also treated and persuaded that they were abused by a cult.

  Cool v. Olson, 1997, $2.4 million. Defendant agreed to settle after 15 days of courtroom testimony. Psychiatrist induced horrific and frightening memories of abuse, including demonic possession and misdiagnosed MPD. Olsen convinced Cool she had 120 personalities, one of which was a duck. (He then charged her insurance company for group therapy.) Patient had originally entered therapy for bulimia and help after a traumatic event had befallen the family.

  Hamanne v. Humenansky, 1995, $2.46 million. Woman sought treatment for anxiety after a move, but was diagnosed with MPD and told she experienced childhood sexual and ritual abuse.

  Carl v. Keraga, 1997, $5.8 million. Woman claims she was misdiagnosed and told she had over 500 personalities, one of which was a duck. Her teenage children were also hypnotized and told they were victims of a cult.

  Gale v. Braun, Sachs and Hammond, 2004, $7.5 million settlement. Woman with mild depression was brainwashed into believing she was MPD, a member of a cult, and required sterilization in order not to
bear any more babies to be sacrificed for the cult. Gale, 52, never had any children.

Burgess v. Braun, 1997, $10.6 million settlement. Patient originally sought treatment for postpartum depression but was diagnosed MPD as a result of supposed sexual and ritual abuse including cannibalism and torture. Her preschool children were also hospitalized, diagnosed MPD, and treated for satanic ritual abuse (SRA).

Over 24,000 families and patients whose lives have been devastated because of the unscientific beliefs in the type of therapy shown in Sybil have contacted the FMS Foundation.

If you have any questions, please do not hesitate to contact me. I would be pleased to provide you with more information, videotapes, or contacts with professionals and (with their permission) families and former MPD patients.

Yours very truly,
Pamela Freyd, Ph.D.

* MPD does exist but it is a consequence of the interaction between patient and a source of suggestion, usually a therapist. In the absence of outside influence, it can be caused by autosuggestion, a very rare phenomenon.

Enclosures:
6. Collection of articles about former MPD patients.

New Articles of Interest

Using PsycINFO, the authors counted indexed publications involving dissociative amnesia and dissociative identity disorder from 1984 to 2003 and compared the rates to well-established diagnoses such as anorexia nervosa, alcohol abuse, and schizophrenia. The results showed that annual publications involving dissociative amnesia and dissociative identity disorder rose from low levels in the 1980s to a sharp peak in the mid 1990s, followed by an equally sharp decline to only about one quarter of their peak levels by 2002 and 2003. All of the 25 comparison diagnoses showed constant or steadily rising publication rates; none showed the 'bubble' pattern of the dissociative disorders. The authors concluded that “dissociative amnesia and dissociative identity disorder have not generated consistent scientific interest over the years....and suggest that these diagnostic entities presently do not command widespread scientific acceptance.”

* * *


Available at: http://www.cpa-apc.org/Publications/Archives/CJP/2005/n ovember/loftus-IR-nov.asp

Highlights from the article:
• Many abuse survivors claim that they forgot their abuse for a time, but this does not mean that they repressed their memory of it.
• Many abuse survivors will not mention their abuse when asked, but this is not proof of repression.

• Memory is malleable. Details can be distorted, and wholly false memories can be planted.
• Just because a memory is detailed, confidently expressed, and emotional does not mean that it reflects a true experience. False memories can have these features.

* * *


Available at: http://www.cpa-apc.org/Publications/Archives/CJP/2005/n ovember/mcnally-IR-nov.asp

Highlights from the article:
• Memories of trauma are seldom, if ever, truly forgotten.

• Memories of trauma are often vivid, but they are not immutable (memory does not operate like a videotape machine).

• Not thinking about a trauma for a long time is not the same as being unable to remember it.

* * *


The authors review the literature showing that doctored photographs and also true photographs can cause people to develop false memories of personal events. In this article, they describe their recent work in which true photographs created false memories for current events. They raise the question of whether doctored photographs might help psychotherapy clients reframe unpleasant personal history and if it would be ethical to do so. They also raise the question of the effect that doctored photos might have on false confessions.
Slow Death of Child Abuse Hysteria

The detritus of the child abuse hysteria remains. In recent months cases in France, the United States, and England have been in the news.

Outrage over innocent 13 jailed in sex abuse scandal - The Times, January 20, 2006

The August 2004 FMSF Newsletter described the Outreau Case in France, the largest pedophilia case ever in that country. After 13 people were jailed and families and reputations destroyed, the case fell apart. French President Jacques Chirac sent a letter of apology to each of the people. French Prime Minister Dominique de Villepin apologized, as did many others. Now the country is demanding a reform of the system that allowed such a travesty of justice to have occurred.

I’m Sorry. A long-delayed apology from one of the accusers from the notorious McMartin Pre-School molestation case. Los Angeles Times Magazine. October 30, 2005.

One of the children who testified in the McMartin trial now says that nothing he told police and prosecutors about being abused was true. He has regretted it for years and now wants to apologize to the defendants. Although this case inspired researchers to study child suggestibility, neither it nor the hundreds of other similar cases have resulted in apologies or substantial reforms of the systems that allowed them to happen.


A BBC documentary has catalogued the errors and misjudgments that brought about the notorious Rochdale satanic abuse panic. Some children who were removed from their homes are now suing. Their own words are chilling.

Julie: “No one told us why we were taken away. We thought me or my brother Daniel had done something wrong—or something had happened to Mum and Dad—and that was why we couldn’t go home.”

Daniel: “I was taken out of school and put in a car with a woman. I didn’t know where we were going.”

Lisa: “I remember waking up one morning to a lot of noise and people coming up the stairs and people going in my Mum’s room. I heard her screaming and shouting—they were telling her to get out of bed and get dressed.”

David: “To be 100% honest with you, I haven’t got a clue why it happened, why they chose our families, why they chose our estate, even.

Events such as these inspired the following commentary.

A History of Atrocity and Man’s Inhumanity to Man

Charles Pragnell

When the history is told, in some future years, of the last quarter of the Twentieth Century and the early years of the new Millennium in Britain and the United States of North America, there will be told a story of events which will rank alongside those of brave deeds of wars in Eastern countries and of the errors brought by self-destructive madmen and of changes to the world wrought by great politicians. These events will be of great atrocities committed against the children of these two countries and the families of ordinary people by State-empowered zealots.

They will be of events which will rank alongside others as examples of man’s inhumanity toward man and the joy which some men seek in the infliction of pain upon others. In times past such events included the Spanish Inquisition, the Salem and English Witch Hunts, the purges by the Nazis of the peoples of Germany and other European countries and by Stalinists of Russia, and of the McCarthy era in America and the events in South Africa under the State rule of Apartheid. The earlier of these atrocities being committed in the names of God and the latter events in the name of Man and the State in which they occurred.

The atrocities of our times are the tearing of children from their families—some to be thrown into stranger families as a social engineering experiment and others to languish and vegetate unloved in State care. Many hundreds more families, fortunate to keep their children but forever branded and stigmatized as surely as having the Star of Israel or the Cross of the Plagued painted on their door—their emotions brutalized and their good names ruined.

Yet these who carry out the atrocities are ordinary men and women carrying out the State’s will in an extraordinary fashion—men and women with families of their own but who have become uncaring and lacking in compassion. Just as the evils and atrocities carried out in the name of God were done by men who distorted and invented the meanings of the Scriptures for their own ends, so these men distort and invent their own meanings of psychology, also written by men to bring enlightenment to others and to help gain meaning of men’s behaviors. Of the creation of false beliefs by these child-saver zealots in Satanic Ritual Abuses of children, of questionable medical theories of child sexual abuse and of parents deliberately causing children’s illnesses and diseases and disabilities. Of false memories of childhood abuse created in them by the brainwashing powers of powerful professionals. And the justification for the committal of their State-mandated atrocities—the perverser pretext that they are protecting and saving these children from abuse and maltreatment. Just as those before them justified their actions with higher moral and religious and political goals.

The history of our times will show of many broken families, of children without a family to remember, of heartache and tears of fear and a lifetime of terror of that knock on the door at midnight. Of being wrenched from mother’s arms and of brothers and sisters disappearing, never to be seen again.

This will be the legacy of our times for future generations—it is now being written.

Charles Pragnell is an international adviser on child protection cases.
Former Recovered Memory Patient Awarded $330,000.


In October, 2006 after a two week trial and one day of deliberations, a Lancaster, Pennsylvania jury in a 12 - 0 decision awarded Rose Gray $330,000. The award is one of the largest in a medical malpractice suit in Lancaster history. Defendant Stephen Powers, M.D. has filed post-trial appeal motions.

In 1988, Rose Gray, a nurse, was diagnosed with major depression at St. Joseph's Hospital in Lancaster, Pennsylvania and referred to Stephen Powers, M.D. According to the complaint, Dr. Powers also diagnosed the plaintiff with major depression. He began treatment that included medications and psychotherapy. During 1989, he expanded her prescriptions to include various anti-psychotic drugs and also began to use hypnosis. Soon Dr. Powers told Rose that she had revealed disturbing memories from childhood and that different personalities had emerged. According to attorney Skip Simpson, this was Dr. Power's childhood and that different personalities had emerged. According to attorney Skip Simpson, this was Dr. Power's first MPD case and he found it fascinating.

Powers changed the diagnosis to multiple personality disorder and instructed the plaintiff to break off contact with her entire family. She did so with the exception of her husband and daughter. As therapy and hypnosis progressed, Dr. Powers told Rose that she had been a victim of satanic abuse by her parents and that she had spent her entire life in a satanic cult. Dr. Powers also told Rose that her husband was a member of the satanic cult. Dr. Powers became convinced that the cult might be trying to kill him and expressed fear for his life. Rose and her husband separated and then divorced in 1995. Until the divorce, Rose Gray's husband had paid for the therapy sessions. After the divorce, Rose continued in therapy with Powers, but was later discharged by him for failing to pay $300.

In March 1998, Rose Gray saw a television program showing that some therapists used techniques similar to those used by Dr. Powers for monetary gain. She then sought treatment with another psychiatrist who is successfully treating her. Gray sued Powers for medical malpractice and claimed he had misdiagnosed her with MPD. She claimed that the techniques he used such as hypnosis and exorcism caused her to develop false memories of sexual abuse and satanic ritual abuse. She also claimed that Dr. Powers failed to inform her of the risks and unreliability of memories recovered with the use of hypnosis.

The defense said that Gray herself brought up memories of satanic ritual abuse. They showed letters that she had written in handwriting that was different from her own. They also showed her drawings of people being chased by demons and argued that Dr. Powers based his diagnosis and treatment on the behaviors she showed during therapy.

Plaintiff's expert was psychiatrist John Cannell, M.D., from Atascadero, California who said that “Powers never tried to warn Gray her memories might be false, nor did he try to corroborate her assertions by looking at her medical or school records or talking to her family members.”

Defense expert was psychiatrist Phillip Coons, M.D., from Indianapolis, Indiana who said the he and many of his colleagues agreed with Dr. Gray’s diagnosis and that his treatment was appropriate.

Attorneys for the plaintiff were Skip Simpson and Stacy D. Michael from Frisco, Texas and Joseph F. Rizzo from Philadelphia, Pennsylvania. Attorney for the defense was Steven D. Costello from Allentown, Pennsylvania.

Attorney Skip Simpson commented that “This is one of the last false-memory cases that will hit the courts.” Simpson was the attorney for the first false-memory case in 1988.


A New Jersey Appeals Court overturned a $750,000 jury award to a woman who had claimed that her recovered repressed memories of childhood abuse had been triggered by a dream. The court held that “A case based on repressed memories cannot be submitted to a jury without expert testimony diagnosing the alleged victim as having dissociative amnesia and explaining and justifying the concept that repressed memories can be accurately recalled.”

In 2001, nineteen-year-old Melissa Phillips sued neighbors John and Barbara Gelpke claiming that John had sexually abused her from the time that she was three until she was eight. She claimed she repressed the memories until she was eleven and had a dream of sexual relations with John. The trial jury found John guilty. He appealed that the judge erred in allowing the case to go to the jury without expert testimony that Melissa’s memory was the result of dissociative amnesia or explaining how repressed memories might be accurately recalled.

Attorney Kevin Kovacs argued for the appellant. Attorney Richard J. Schacter argued for the respondent. The case was argued before Judges Coburn, Collester, and Lisa. The opinion of the court was delivered by Judge Coburn.
STUDIES OF PSYCHOLOGICAL SYMPTOMS IN TRAUMA SURVIVORS


Pope et al. performed a non-selective literature search for examples of studies between 1960 and 1999 where the investigators performed psychological assessments on groups of survivors of specific, historically documented traumatic events. There is no shortage of such studies; the studies summarized below that assessed victims of all manner of traumatic events are merely representative of a larger literature. “It is striking that none of the more than 11,000 victims is reported to have repressed the memory of the traumatic event. Admittedly, some of the survivors in some of the studies did exhibit amnesia for the trauma, but in all cases, the amnesia appears explainable for ordinary reasons, such as loss of consciousness or early childhood amnesia... Only two fragmentary case reports in two of the studies suggest even partial amnesia in individuals over the age of three who did not lose consciousness. Some of the studies in the table report ‘memory disturbances’ among some trauma survivors. However, ‘memory disturbances’ should not be misinterpreted as evidence that the subjects forgot the trauma itself. In fact, disturbances of memory and concentration are ubiquitous in mood and anxiety disorders, regardless of whether these disorders occur in the wake of trauma. Indeed, impairment of concentration is one of the criteria in DSM-IV for the diagnosis of major depressive disorder.”

<table>
<thead>
<tr>
<th>Study</th>
<th>Event</th>
<th>No. Subjects</th>
<th>Data Collection Method</th>
<th>Amnesia</th>
<th>Remarks:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strom et al., 1961</td>
<td>Holocaust</td>
<td>100</td>
<td>Interviews</td>
<td>No</td>
<td>Subjects reported their experiences with “a vivid immediacy and wealth of detail.”</td>
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<tr>
<td>Chodoff, 1963</td>
<td>Holocaust</td>
<td>23</td>
<td>Psychiatric interviews</td>
<td>No</td>
<td>Authors note that “repression does not appear possible.”</td>
</tr>
<tr>
<td>Lepold et al., 1963</td>
<td>Marine explosion</td>
<td>34</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Terr, 1979, 1983</td>
<td>Chowchilla bus kidnapping</td>
<td>26</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Eaton et al., 1982</td>
<td>Holocaust</td>
<td>135</td>
<td>Interviews</td>
<td>No</td>
<td>Although 20 (15%) of the 135 survivors had memory problems, so did 15 (11%) of the 133 non-traumatized controls; none reported to have amnesia.</td>
</tr>
<tr>
<td>Wilkinson, 1983</td>
<td>Hyatt skywalk collapse</td>
<td>102</td>
<td>Questionnaire, interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Hoibert &amp; McCaugher, 1984</td>
<td>Collision at sea</td>
<td>336</td>
<td>Extracted records from Naval Health Research Ctr.</td>
<td>No</td>
<td>11% were hospitalized for various psychiatric difficulties following the collision. None suffered from amnesia.</td>
</tr>
<tr>
<td>Dollinger, 1985</td>
<td>Lightning strike disaster</td>
<td>38</td>
<td>Interviews</td>
<td>Yes (2 cases)</td>
<td>The 2 children that had amnesia were side flash victims.</td>
</tr>
<tr>
<td>Malmquist, 1986</td>
<td>Children who witnessed parental murder</td>
<td>16</td>
<td>Questionnaires (Impact of Events Scale)</td>
<td>No</td>
<td>“Recollection of vivid memories of the event were present in all 16 of the children.”</td>
</tr>
<tr>
<td>Kinzie et al., 1986, 1989; Sack et al., 1993</td>
<td>Cambodian concentration camp victims</td>
<td>40</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Shore et al., 1986</td>
<td>Mt. St. Helens explosion</td>
<td>548</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Aveline &amp; Fowlie, 1987</td>
<td>Ejection from military aircraft</td>
<td>175</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Earls et al., 1988</td>
<td>Flooding (children ages 6-17)</td>
<td>32</td>
<td>Interviews</td>
<td>No</td>
<td>Interviews were done with parents</td>
</tr>
<tr>
<td>Study</td>
<td>Event</td>
<td>No. Subjects</td>
<td>Collection Method</td>
<td>Amnesia</td>
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<tr>
<td>Malt, 1988</td>
<td>Accidental injury</td>
<td>107</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>McFarlane (series)</td>
<td>Australian brush fires</td>
<td>469</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td>After 11 months, firefighters with PTSD actually displayed better memory than those without PTSD</td>
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<tr>
<td>1988</td>
<td></td>
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<td></td>
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<tr>
<td>Pynoos &amp; Nader,</td>
<td>Children who witnessed sexual assault of their mothers</td>
<td>10</td>
<td>Interviews</td>
<td>No</td>
<td></td>
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<tr>
<td>1988</td>
<td></td>
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<tr>
<td>Dahl, 1989</td>
<td>Rape victims</td>
<td>55</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Ersland et al., 1989</td>
<td>Oil rig disaster</td>
<td>134</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Feinstein, 1989</td>
<td>Village ambushed in Namibia</td>
<td>14</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Hytten &amp; Hasle, 1989</td>
<td>Fire</td>
<td>58</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Maj et al., 1989</td>
<td>Earthquake</td>
<td>589</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Nadler and Ben-</td>
<td>Holocaust</td>
<td>34</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Shushan, 1989</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Pynoos &amp; Nader, 1989</td>
<td>Sniper attack at elementary school</td>
<td>133</td>
<td>Interviews</td>
<td>No</td>
<td>Some children “remembered” the sniper although they were not actually at the scene. None reported amnesia.</td>
</tr>
<tr>
<td>Stoddard et al., 1989</td>
<td>Burned children</td>
<td>30</td>
<td>Interview, review of records</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Weisaeth, 1989</td>
<td>Torture victims</td>
<td>13</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Weisaeth, 1989</td>
<td>Industrial disaster (explosion)</td>
<td>125</td>
<td>Interviews</td>
<td>No</td>
<td>Author notes memory impairment in 20 cases but not actual amnesia for the disaster reported.</td>
</tr>
<tr>
<td>Robinson et al., 1990</td>
<td>Holocaust</td>
<td>86</td>
<td>Questionnaires</td>
<td>No</td>
<td>82% of subjects reported hyperamnesia continuously since World War II.</td>
</tr>
<tr>
<td>Wagenaar &amp; Groeneweg,</td>
<td>Holocaust</td>
<td>78</td>
<td>Review of testimony in De</td>
<td>No</td>
<td>Almost all witnesses remembered Camp Erika in “great detail” even after 40 years.</td>
</tr>
<tr>
<td>1990</td>
<td></td>
<td></td>
<td>Rijke case</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Green et al., 1991</td>
<td>Buffalo Creek Disaster (children)</td>
<td>179</td>
<td>Interviews</td>
<td>Yes</td>
<td>7% unable to recall part of event, but 43 (25%) subjects were aged 2-7 at time of flood.</td>
</tr>
<tr>
<td>Nolen-Hoeksema &amp;</td>
<td>Earthquake</td>
<td>137</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Morrow, 1991</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Realmuto et al., 1991</td>
<td>Williams Pipeline Disaster</td>
<td>24</td>
<td>Interviews</td>
<td>?</td>
<td>Amnesia only briefly mentioned; no cases presented.</td>
</tr>
<tr>
<td>Stub et al., 1991</td>
<td>Pediatric bone marrow transplant patients</td>
<td>6</td>
<td>Interviews and assessment</td>
<td>No</td>
<td>Study of hospital-based personnel who worked with crash victims.</td>
</tr>
<tr>
<td>Weissberg &amp; Katz,</td>
<td>Crash of Continental 1713</td>
<td>15</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>1991</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Study of hospital-based personnel who worked with crash victims.</td>
</tr>
<tr>
<td>Realmuto et al., 1992</td>
<td>Cambodian refugees (children)</td>
<td>47</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Rothbaum et al., 1992</td>
<td>Rape victims</td>
<td>95</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td>Many subjects had impaired concentration and memory, but none described as having amnesia.</td>
</tr>
<tr>
<td>Study</td>
<td>Event</td>
<td>No. Subjects</td>
<td>Collection Method</td>
<td>Amnesia</td>
<td>Remarks</td>
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<tr>
<td>Brooks &amp; McKinlay,</td>
<td>Crash of Pan Am 103 in</td>
<td>66</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>1992; Scott et al.,</td>
<td>Lockerbie</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>1995</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Escobar et al., 1992</td>
<td>Flash floods, mudslides</td>
<td>139</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Mention amnesia in context of “pseudoneurological” but finds similar symptoms in non-traumatized comparison subjects. No actual amnesia for the trauma reported.</td>
</tr>
<tr>
<td>Breton et al., 1993</td>
<td>Industrial disaster (PCB fire)</td>
<td>87</td>
<td>Verbal questionnaires</td>
<td>No</td>
<td>Study was done on children (ages 3-11) whose families were evacuated from disaster area.</td>
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<tr>
<td>Cardena &amp; Spiegel, 1993</td>
<td>Earthquake</td>
<td>100</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td>“Dissociative symptoms” described, but no subject had amnesia for the earthquake.</td>
</tr>
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<td></td>
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<tr>
<td>Krell, 1993</td>
<td>Holocaust</td>
<td>25</td>
<td>Interviews and therapy</td>
<td>No</td>
<td>Results largely non-quantitative.</td>
</tr>
<tr>
<td>Lundin &amp; Bodegard, 1993</td>
<td>Earthquake</td>
<td>49</td>
<td>Questionnaires</td>
<td>No</td>
<td>Study done on rescue workers.</td>
</tr>
<tr>
<td>Pelcovitz et al., 1994</td>
<td>Physical abuse</td>
<td>27</td>
<td>Interviews</td>
<td>No</td>
<td>One refused to answer, but none reported as having amnesia.</td>
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<tr>
<td>Bowler et al., 1994</td>
<td>Railroad chemical disaster</td>
<td>220</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td>Memory and concentration problems noted in both trauma group and non-traumatized comparison group.</td>
</tr>
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<tr>
<td>Hardin et al., 1994</td>
<td>Hurricane Hugo (adolescents)</td>
<td>1482</td>
<td>Questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Jones et al., 1994</td>
<td>Wildfires (children and</td>
<td>23</td>
<td>Questionnaires, interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td>adolescents)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Koopman et al., 1994</td>
<td>Firestorms</td>
<td>154</td>
<td></td>
<td></td>
<td>“Dissociation” reported, but no actual amnesia for traumatic event.</td>
</tr>
<tr>
<td></td>
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<tr>
<td>Carr et al., 1995</td>
<td>1989 Newcastle Earthquake</td>
<td>3007</td>
<td>17-page questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Hagstrom, 1995</td>
<td>Train collision (Norway)</td>
<td>66</td>
<td>Questionnaires</td>
<td></td>
<td>Avoidant behaviors noted but amnesia not mentioned.</td>
</tr>
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<tr>
<td>Turner et al., 1995</td>
<td>Underground railroad station fire</td>
<td>50</td>
<td>Assisted completion of questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Lee et al., 1995</td>
<td>World War II combat</td>
<td>107</td>
<td>Questionnaires</td>
<td>No</td>
<td>Cohort assembled in 1938 as college students and studied prospectively.</td>
</tr>
<tr>
<td>Ursano et al., 1995</td>
<td>Explosion on USS Iowa</td>
<td>54</td>
<td>Questionnaires</td>
<td>No</td>
<td>Study of body handlers.</td>
</tr>
<tr>
<td>Weine et al., 1995,</td>
<td>“Ethnic cleansing” in Bosnia</td>
<td>20/34</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>1998</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Najarian et al., 1996</td>
<td>Armenian Earthquake</td>
<td>49</td>
<td>Interviews, questionnaires</td>
<td>?</td>
<td>“Psychogenic amnesia” mentioned in table but was twice as common in a non-traumatized group as in Earthquake group. No example presented of a subject who forgot the earthquake.</td>
</tr>
<tr>
<td>Savin et al., 1996</td>
<td>Cambodian refugees</td>
<td>99</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Shaw et al., 1996</td>
<td>Hurricane Andrew (children)</td>
<td>30</td>
<td>Questionnaires and teachers’ ratings</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Study</td>
<td>Event</td>
<td>No. Subjects</td>
<td>Collection Method</td>
<td>Amnesia</td>
<td>Remarks</td>
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<tr>
<td>Tyano, 1996</td>
<td>Bus-Train Collision (children)</td>
<td>83</td>
<td>Questionnaires</td>
<td>No</td>
<td>Nine subjects actually on the bus that crashed, while 74 students witnessed the crash.</td>
</tr>
<tr>
<td>Terr et al., 1997</td>
<td>Challenger explosion</td>
<td>153</td>
<td>Interviews</td>
<td>No</td>
<td>Generally clear memories, though some mistakes; no amnesia for event.</td>
</tr>
<tr>
<td>LaGreca et al., 1996</td>
<td>Hurricane Andrew</td>
<td>442</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td>Multiple instruments administered at three points after exposure. Despite elaborate analysis and details, no mention of amnesia for all or part of trauma.</td>
</tr>
<tr>
<td>Carlier et al., 1997</td>
<td>Bijlmermeer plane crash</td>
<td>136</td>
<td>Interviews</td>
<td>Yes</td>
<td>12 (8%) of 136 victims were said to have “psychogenic amnesia” but no examples are given, nor is any case described in which a victim forgot the crash itself.</td>
</tr>
<tr>
<td>Groenjian et al., 1997</td>
<td>Armenian earthquake</td>
<td>64</td>
<td>Interviews</td>
<td>No</td>
<td>No mention of amnesia in either the 35 children receiving psychotherapy or the 29 children who did not receive psychotherapy.</td>
</tr>
<tr>
<td>DiGallo et al., 1997</td>
<td>Road traffic accidents</td>
<td>53</td>
<td>Interviews</td>
<td>Yes</td>
<td>Although amnesia is mentioned, it is also noted that 10 subjects lost consciousness during the accident. All of these subjects had vivid memories of the time before and after losing consciousness.</td>
</tr>
<tr>
<td>Southwick et al., 1997</td>
<td>Operation Desert Storm</td>
<td>59</td>
<td>Questionnaires</td>
<td>No</td>
<td>Describes inconsistencies in reports of veterans at 1 month and at 2 years post combat. However, the study provides no documentation that failure to report an event at either time point indicates amnesia for the event.</td>
</tr>
<tr>
<td>Engdahl et al., 1997</td>
<td>Prisoners of war</td>
<td>262</td>
<td>Interviews, questionnaires</td>
<td>No</td>
<td>Detailed follow-up of 262 victims, including case reports. No mention of amnesia.</td>
</tr>
<tr>
<td>Mollica et al., 1997</td>
<td>Cambodian refugees</td>
<td>182</td>
<td>Interviews</td>
<td>No</td>
<td>Interviewed about various psychological parameters; no mention of memory loss or amnesia.</td>
</tr>
<tr>
<td>North et al., 1997</td>
<td>Mass shooting</td>
<td>136</td>
<td>Interviews</td>
<td>?</td>
<td>Although “amnesia” is a symptom in about 10% of subjects, no evidence is presented that any subject actually forgot the shooting.</td>
</tr>
<tr>
<td>Jenkins et al., 1998</td>
<td>Rape victims</td>
<td>31</td>
<td>Questionnaires</td>
<td>No</td>
<td>The victims displayed poor memory of word lists, but no one is described as showing amnesia for the rape itself.</td>
</tr>
<tr>
<td>Asarnow et al., 1999</td>
<td>Northridge earthquake</td>
<td>63</td>
<td>Interviews</td>
<td>No</td>
<td>High rates of psychopathology but no mention of amnesia.</td>
</tr>
<tr>
<td>Koren et al., 1999</td>
<td>Traffic accidents</td>
<td>74</td>
<td>Interviews</td>
<td>No</td>
<td>No amnesia mentioned on the follow up</td>
</tr>
<tr>
<td>Becker et al., 1999</td>
<td>Bosnian War</td>
<td>10</td>
<td>Interviews</td>
<td>No</td>
<td>No descriptions of amnesia and no cases with scores greater than 1 on ratings of amnesia.</td>
</tr>
<tr>
<td>Favaro et al., 1999</td>
<td>Nazi concentration camp victims</td>
<td>98</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Sack et al., 1999</td>
<td>Pol Pot victims</td>
<td>27</td>
<td>Interviews</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
**Morbidity 6 Months Post-disaster, 25 PSYCHOL. MED. 539-55 (1995);**

54. R. Hagstrom, The Acute Psychological Impact on Survivors Following a Train Accident, 8 J. TRAUMATIC STRESS 391-402 (1995);

55. S. W. Turner, J. Thompson, & R. M. Rosser, The King’s Cross Fire: Psychological Reactions, 8 J. TRAUMATIC STRESS 419-27 (1995);


57. R. J. Ursano, C. S. Fullerton, T. Kao, & V. R. Bhartia, Longitudinal Assessment of Posttraumatic Stress Disorder and Depression After Exposure to Traumatic Death, 183 J. NERVOUS & MENTAL DISEASE 36-42 (1995);


61. J. A. Shaw, B. Applegate, & C. Schorr, Twenty-one Month Follow-up Study of School-age Children Exposed to Hurricane Andrew, 35 J. AM. ACAD. CHILD ADOLESC. PSYCHIATRY 384-91 (1996);


65. I.V.E. Carlier, B.P.R. Gersons, Stress Reactions in Disaster Victims Following the Bjellmermeer Plane Crash, 10 J. TRAUMATIC STRESS 329-335 (1997);

66. A.K. Goenjian, I. Karayan, E.L. Spitznagel, One-Year Follow-Up of Survivors of a Mass Shooting, 154 AM. J. PSYCHIATRY 1606-1702 (1997);

67. M.A. Jenkins, P.J. Langlais, D. Delis, R. Cohen, Learning and Memory in Rape Victims with Posttraumatic Stress Disorder, 155 AM. J. PSYCHIATRY 278-9 (1998);

68. J. Asarnow, S. Gunn, R.S. Pynoos, J. Nahum, D. Guthrie, D.P. Cantwell, B. Franklin, When the Earth Stops Shaking: Earthquake Sequelae Among Children Diagnosed for Pre-Earthquake Psychopathology, 38 J. AM ACAD. CHILD ADOLESC. PSYCHIATRY 1016-23 (1999);


70. D.F. Becker, S.N. Weine, D. Voyvoda, T.H. McGlashan, Case Series: PTSD Symptoms in Adolescent Survivors of “Ethnic Cleansing.” Results From a 1-Year Follow-up Study, 38 J. AM. ACAD. CHILD ADOLESC. PSYCHIATRY 775-81 (1999);

71. A. Favaro, F.C. Rodella, G. Colombo, P. Santonastaso, Post-traumatic Stress Disorder and Major Depression Among Italian Nazi Concentration Camp Survivors: A Controlled Study 50 Years Later, 29 PSYCHOL. MEDICINE 87-95 (1999);


**High Hopes**

Our two daughters are still not making contact with us but we send a monthly letter of love telling them what happens in our lives. We are not having them returned at this point which means either they are reading them or filing them in the round file. We still have high hopes and are thankful for the information we receive in the newsletter as to what helps to get our daughters back. Thanks again.

A mom and dad

**Wonderfully Weird**

As you know, my daughter returned after 15 years — not just returned but about to move into a condo one half block from mine. A close friend summed it up aptly with the comment, “How wonderfully weird.” It’s good to have such candid friends. Remarkably, I seem to have lost all anger and bitterness. That too, is wonderfully weird.

A mom

**After 14 Years!**

This past summer was the first gathering in 14 years of our entire family including all the children, grandchildren, foster grandchildren and step-grandchildren. Our family is close now, although not all relationships are totally healed.

Whatever might have been if our children had not been affected by FMS has been lost. But we move on. Our hearts were especially full earlier this year when our children collaborated on our Golden Anniversary party. Each of them contributed fully.

We continue to thank God for the help given by the Foundation and pray for continued healing for all FMS families.

A mom and dad

**Response to Severe Trauma, 154 AM. J. PSYCHIATRY 1576-81 (1997);**

70. R.F. Mollica, M.A.R., C. Poole, L. Son, C.C. Murray, S. Tor, Effects of War Trauma on Cambodian Refugee Adolescents’ Functional Health and Mental Health Status, 36 J. AM. ACAD. CHILD ADOLESC. PSYCHIATRY 1098-1106 (1997);

71. C.S. North, E.L. Smith, E.L. Spitznagel, One-Year Follow-Up of Survivors of a Mass Shooting, 154 AM. J. PSYCHIATRY 1606-1702 (1997);

72. M.A. Jenkins, P.J. Langlais, D. Delis, R. Cohen, Learning and Memory in Rape Victims with Posttraumatic Stress Disorder, 155 AM. J. PSYCHIATRY 278-9 (1998);

73. J. Asarnow, S. Gunn, R.S. Pynoos, J. Nahum, D. Guthrie, D.P. Cantwell, B. Franklin, When the Earth Stops Shaking: Earthquake Sequelae Among Children Diagnosed for Pre-Earthquake Psychopathology, 38 J. AM ACAD. CHILD ADOLESC. PSYCHIATRY 1016-23 (1999);

She Read Our Letters

It is with great pleasure that I can report that we have a Returner — after 12 years. She first connected with her sister early in 2004, with me that fall, and then wanted to see her father this past fall.

We find ourselves quite content with the Returner status. This is a bit of a surprise, but we realized that quite a load had lifted, even though we thought we had accepted the situation.

For all these years I kept sending cards, notes, or letters, hoping to keep the connection open. It is very gratifying to have my daughter tell me that she had read all my mail and so had kept up with all the family news.

In 1992, a friend spotted a story in the NY Times about the FMS Foundation the very week we were accused in the therapist’s office. Knowing that we were not alone or unique was very helpful and the ongoing support and encouragement kept our spirits up—most of the time.

We are happy to continue to contribute to FMSF to help other families.

A happy mom and dad

After 14 Years

Over the past 14 years, we have called the Foundation for advice from time to time. We read the newsletter and because of what we learned, we did try to keep some contact with our daughter. In 1992, she accused her Dad of molesting her and she cut off all contact. I find it difficult to write even though it’s been so many years since this happened.

In December of 2005, she left a phone message saying she and her children had moved and that she and her husband were getting a divorce. We returned her call and offered to help in whatever way we could. She asked me to come and explained that she would talk with her father at a later date.

A month later, she called her Dad and apologized for her accusation. She talked to both her brothers and said she is very sorry for everything.

She has three young children and is working so she doesn’t have a lot of time, but she is certainly interested in finding information about the therapy she received.

It took so many years for our daughter to figure out what had happened to her. Many times we were discouraged but we were thankful we knew where she was. We sent cards, short notes, phone calls when she would accept them. I write this because I realize there are still parents waiting for their daughters or sons to come back. Please don’t give up. There is certainly no “one sure way” to bring them back, but we pray each will find his or her way back home.

A happy mom

We Finally Talked

I thought of the FMSF the other day because my daughter and I finally touched on the bad therapy she had. Her daughter is now 15 and my daughter put her in therapy. When she told me, I mentioned that she should be careful about the therapist and ask to see her license, etc. She said she had already done that because she did not want her daughter to go through what she had, and she did not want to go through what she knew I had.

We have been very close since her daughter was about two, although she never brought up the accusations or retracted them to me. She did, however, let me know she was wrong by asking me one evening if I would babysit overnight. I said I would and suggested that she send along a sleeping bag as I had only one bedroom apartment at the time. She looked at me and said it would be fine if she slept in my bed with me. From that moment until this current incident, we’ve never mentioned the past.

I remember going to one of the FMS seminars and the speaker stating that it was important to get the child back into the fold and not to make them feel wrong. That’s a little hard to do when you have been accused as we have been, but I did that. I really was able to put it in the past and my daughter and I grew close. Now that her daughter is a young woman I believe my daughter is beginning to look at what happened to us with the accusations.

In our recent conversation she told me that at one time she thought about suicide and I said I had known that and had talked to the clinic at the time with my concerns. They poo-pooed my concern. She told me that she really didn’t want to bring up those horrible times but that she is very aware of how vulnerable anyone with any issue can be, and she intends to watch her daughter’s progress carefully. It was enough for me. I did tell her that I had been in counseling myself and active with an FMS organization at the time and that all that support got me through it.

I sometimes wonder what would have happened if I had not listened to that late night show so many years ago and heard about the Foundation. It saved my sanity. Thank you so much for all you have done for so many of us.

A very happy mom.

I Was Adamant But...

Our youngest daughter has returned. Over the years, I have been adamant against returning without confessing, but she forced her way on us, just showing up on our door stoop. She visited us this past Thanksgiving with her two children and new husband. I had planned to confront her, but after watching the Rutherford tape, I’m just going with the flow and see what happens. I hope that it isn’t a mistake. Our oldest daughter who was the instigator is still “out there.” I’ll try to keep you informed.

A mom
The Memory Wars: Part 1  
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It was a tragic mental health scandal: accusations resulting from supposedly long-repressed memories of childhood sexual abuse brought to light by self-deluded therapists and questionable and suggestive techniques such as hypnotism. The false memory wars, which raged throughout the late 1980s and early 1990s, are slowly subsiding, but they are far from over.

Martin Gardner

In the late 1980s and early 1990s the greatest mental health scandal in North America took place. Thousands of families were cruelly ripped apart. All over the United States and Canada, previously loving adult daughters suddenly accused their fathers or other close relatives of sexually molesting them when they were young. A raft of bewildered, stricken fathers were sent to prison, some for life, by poorly informed judges and juries. Their harsh decisions were in response to the tearful testimonies of women, most of them middle-aged, who had become convinced by a psychiatrist or social worker that they were the victims of previously forgotten pedophilia.

On what grounds were these terrible accusations made? They were (supposedly) long-repressed memories of childhood sexual abuse brought to light by self-deluded therapists using powerful suggestive techniques such as hypnotism, doses of sodium amytal (truth serum), guided imagery, dream analysis, and other dubious methods.

Of all such techniques the most worthless is hypnotism. Mesmerized patients are in a curious, little-understood state of extreme suggestibility and compliance. They will quickly pick up subtle cues about what a hypnotist wants them to say, and then say it. The notion that under hypnosis one’s unconscious takes over to dredge up honest and accurate memories of a distant past event is one of the most persistent myths of psychology. There simply is no known way, short of confirming evidence, to distinguish true from false memories aroused by hypnotism or any other technique. After many sessions with a sincere but misguided therapist, false memories can become so vivid and so entrenched in a patient’s mind that they will last a lifetime.

An early leader in debunking the belief that recollections of childhood traumas can be repressed for decades is the distinguished experimental psychologist Elizabeth Loftus, a professor at the University of California, at Irvine. She was awarded the prestigious $200,000 Gragemeyer Award for Psychology given annually by the University of Louisville, and also elected to the National Academy of Sciences. Her passionate book The Myth of Repressed Memory, written with Katherine Ketcham, has become a classic treatise on what is called the false memory syndrome (FMS), see also her article “Creating False Memories,” in Scientific American (Vol. 277, No. 3, 1997).

Another influential and tireless crusader against FMS is educator Pamela Freyd. In 1992 she established the nonprofit FMS Foundation after she and her husband Peter were falsely accused by their daughter of sexually molesting her when she was a child. Freyd continues to edit the Foundation’s bimonthly newsletter, and provides information and moral support to wrongly accused parents. By 1992 more than ten thousand distressed parents had contacted the FMS Foundation for advice on how to cope with a son or daughter’s charges. Today dozens of Web sites carry on the fight against FMS.

Over the past twenty years hundreds of papers and dozens of excellent books have shed light on the FMS epidemic. In addition to Loftus’s book I reluctantly limit my list to three others: Eleanor Goldstein’s Confabulations: Creating False Memories, Destroying Families; Mark Pendergrast’s Victims of Memory: Incest Accusations and Shattered Lives; and Frederic Crews’s The Memory Wars: Freud's Legacy in Dispute. See also three eye-opening articles on “Recovered Memory Therapy and False Memory Syndrome,” in The Skeptics Encyclopedia of Pseudoscience (Vol. 2), edited by Michael Shermer. Psychiatrist John Hochman’s article should be read by every attorney who defends a victim of the FMS. Here is his final paragraph:

Meanwhile, there is a large FMS subculture consisting of women convinced that their “recovered memories” are accurate, therapists keeping busy doing RMT [Repressed Memory Therapy], and of authors on the “recovery” lecture and talk show circuits. In addition, there are some vocal fringes of the feminist movement that cherish RMT since it is “proof” that men are dangerous and rotten, unless proven otherwise. Skeptical challenges to RMT are met by emotional rejoinders that critics are front groups for perpetrators, and make the ridiculous analogy that “some people even say the Holocaust did not happen.” RMT will eventually disappear, but it will take time.

In 2001 the FMS Foundation sent a survey questionnaire to 4,400 persons who had contacted the Foundation for advice. An overwhelming number of the accusers (99 percent) were white, 93 percent were women, 86 percent were undergoing mental therapy, and 82 percent later accused their fathers of incest when they were children. Ninety-two percent said the recovery of repressed memories was the basis of their accusations.

The number of charges peaked in 1991-1992, which accounts for 34 percent of the accusations, then the rate slowly declined. By 1999-2000 the number was down to .02 percent. The decline prompted psychiatrist Paul McHugh of Johns Hopkins School of

The authors of this valuable paper distinguish three stages of accusers:

1. Refusers. Those whose beliefs about past abuse are set in concrete. They refuse all contacts with anyone who does not share their convictions.

2. Returners. Those who return to their families but do not retract their charges or discuss them.

3. Retractors. Those who eventually realize that their awful memories are fabrications. They reconcile with their parents. The authors quote from a retractor’s moving letter:

> I could not face the horrible thing I had done to my parents, so I had to believe the memories were true. Even though I got away from that horrible therapist, I could not go back to my entire extended family and say that I was temporarily insane and nothing had happened. It was easier for my self-esteem to pretend that I had been sexually abused by someone, and it was still my parents’ fault because they should have protected me. [FMSF Newsletter, December 1998]

In the 1990s the FMS mania also blighted the lives of hundreds of preschool teachers and daycare personnel. Small children were taken by hysterical parents to trauma therapists, convinced that their children had been sexually exploited even though at first they could not recall such abuse. After many therapy sessions, repressed memories seemed to surface.

One of the most publicized cases involving preschool children concerned the Little Rascals daycare center in Edenton, North Carolina, a town decimated by the case. On the witness stand, brainwashed little rascals told wild, unbelievable tales. They “recalled” seeing the center’s co-owner, Robert Kelly, murder babies. One child said “Mr. Bob” routinely shot children into outer space. Another lad told the court that Kelly had taken a group of youngsters aboard a ship surrounded by sharks. He threw a girl overboard. Asked if the sharks had eaten her, the boy replied no, he (the boy) jumped into the water and rescued her!

Robert Kelly was convicted on ninety-nine counts of first-degree sex offenses and sentenced to twelve consecutive life terms. It was the longest sentence in North Carolina history. Kelly spent six years in prison before an appeals court released him on $200,000 bond. Kelly’s friends and coworkers, including his wife and the center’s cook, got harsh sentences. A 1995 television documentary, Innocence Lost, left no doubt that the children had confabulated.

Many recent investigations have established how easily children can be led by inept therapists to imagine events that never happened. This was amusingly demonstrated by a simple experiment reported by Daniel Goleman in his article “Studies Reflect Suggestibility of Very Young Witnesses” (New York Times, June 11, 1993). A boy was falsely told he had been taken to a hospital to treat a finger injured by a mousetrap. In his first interview he denied this had happened. By the eleventh interview he not only recalled the event, but added many details. In fact, only extremely rarely are memories of traumatic events repressed until years later, only then emerging under suggestive therapy. On the contrary, it is far more common for victims to try vainly to forget a traumatic incident.

There are books defending the revival of long-repressed memories. By far the worst is The Courage to Heal, by Ellen Bass and Laura Davis. A bestseller in 1988, its rhetoric persuaded tens of thousands of gullible women that their mental and behavior problems were caused by forgotten childhood sex abuse, and led them to seek validation through trauma therapy.

Another book, almost as bad, is Secret Survivors, by trauma therapist Sue Blume. “Incest is easily the greatest underlying reason why women seek therapy,” she wrote. “... [i]t is not unreasonable that more than half of all women are survivors of childhood sexual trauma.” Both statements are, of course, preposterous.

In 1989 Holly Ramona sought treatment for bulimia. After months of therapy by a family counselor, and later by a psychiatrist, she began to get memories of being raped by her father when she was an infant. Firm believers in Freudian symbols, Holly’s two therapists convinced her that she disliked mayonnaise, soup, and melted cheese because they reminded her of her father’s semen. She was unable to eat a banana unless it was sliced because it resembled her father’s penis. Under oath she testified that her father had forced her to perform oral sex on the family dog!

Holly’s father sued the two therapists. Lenore Terr, a psychiatrist who was an expert witness at the trial, told the jury that Holly’s dislike of bananas, cucumbers, and pickles confirmed her recovered memories of being forced to perform oral sex on her father. Terr has been an “expert witness” on other similar trials. Basic Books carelessly published her shameful work, Unchained Memories: True Stories of Traumatic Memories, Lost and Found. Happily, a California court refused to buy Terr’s Freudian speculations. Holly’s father won a settlement of half a million dollars.

As the FMS plague spread it took on ever more bizarre forms. Quack psychiatrists began regressing patients back to traumas in their mother’s
wombs. One therapist uncovered memories of traumas while a patient was stuck in a fallopian tube!

Those convinced that evil aliens kidnapped and tortured them with horrible experiments in hovering UFOs started to confirm their fears by repressed memory therapy. The most absurd of many books on recovered memories of flying-saucer abductions are by Temple University’s historian David M. Jacobs, and two books by the late John E. Mack, a Harvard psychiatrist. Mack believed that the extraterrestrials are friendly, and come here from higher space dimensions. Harvard was unable to fire him because, like Jacobs, he had tenure. (See the interview with Mack in The New York Times Magazine, March 20, 1994.)

A more tragic application of the FMS rested on the beliefs of countless Protestant fundamentalists that the horrors of the End Times are fast approaching. Satan, aware of the Biblical prophecy that Christ will return to Earth and cast him into a lake of fire, is now on an angry rampage. He is establishing vile cults throughout the United States, Canada, and elsewhere — cults in which unspeakable rituals are performed, such as eating babies and drinking blood and urine. Dozens of shabby books about such madness have been published in spite of a thorough investigation by the FBI which concluded that, aside from the acts of pranksters, there is no evidence that Satanic cults exist here or anywhere else. In England a report by the U.K. Department of Health reached a similar conclusion after investigating eighty-four cases of alleged organized Satanic cults.

If revived memories of cannibalizing babies are true, thousands of Satanically mutilated infant bodies should be buried around the nation. Not one has been found. Why? Because, fundamentalists argue, the Devil is so powerful that he is able to obliterate all such evidence! For lurid accounts of bogus memories of Satanic rituals and details about false recollections, see chapters 6 and 11 in my book Weird Water and Fuzzy Logic.

Among a raft of books and articles debunking the myth of Satanic cults, one of the best is Lawrence Wright’s “Remembering Satan” (The New Yorker, May 17 and 24, 1993). It is reprinted in his book with the same title. Another excellent reference is sociologist Jeffrey Victor’s book Satanic Panic: The Creation of a Contemporary Legend.

A third crazy spinoff from the false memory wars concerns New Age psychiatrists who believe in reincarnation. Under suggestive therapy, Shirley MacLaine has recalled numerous adventures experienced in her past colorful lives. A few incarnation therapists are even using hypnotism to retrieve “recollections” of events a patient will experience in future lives!

In 1991 Geraldo Rivera introduced three trauma survivors on his talk show. One woman said she had murdered forty babies while in a Satanic cult but totally forgot about it until her memories emerged during therapy. Well-known entertainers spoke on other talk shows about their long-buried memories of pedophilia. Comedienne Roseanne Barr revealed that her parents had abused her when she was three months old! Her wild tale, vigorously denied by her dumb-founded parents, made the cover of People magazine.

The memory wars are slowly subsiding, but they are still far from over. There are four reasons for the decline:

1. Reversals by enlightened appellate courts of harsh, undeserved sentences, many for life, of innocent victims of FMS.

2. The gradual education of judges, jurors, attorneys, police officers, and people in the media.

3. An increasing number of “recanters,” now in the hundreds, who realize how cruelly they have been misled.

4. A growing number of large settlements of malpractice lawsuits against therapists by recanters and wrongly accused relatives.

For sensational accounts of a few such actions see chapter 11, cited earlier, of my Weird Water book.

(Parts 2 and 3 of this article will discuss the case of Massachusetts priest Paul R. Shanley. You can find them on the web site of the Skeptical Inquirer.)

For more than twenty-five years Martin Gardner wrote the Mathematical Games department of Scientific American. He is the author of some seventy books, of which The Annotated Alice is best known. His latest book, Are Universes Thicker Than Blackberries?, consisting in part of his columns in SKEPTICAL INQUISITOR, was published in 2004 by W. W. Norton. Martin Gardner is a member of the FMSF Scientific Advisory Board.

“"As to the question whether or not the Sybil case was an out and out fraud, that of course depends upon your personal definition of the term. No matter what you wish to call it, it was a conscious misrepresentation of the facts...there is a fine line between deception of self and deception of others...In the final analysis Sybil is a phony multiple personality case at best.”


“"Before the publication of Sybil, there were only about 75 reported cases of MPD; in the 25 years since, there have been, by one expert’s estimation, 40,000 diagnoses, almost all in North America.”

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

Available in DVD format only:
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ABDUCTED
How People Come to Believe They Were Kidnapped by Aliens
Susan A. Clancy
Harvard University Press, 2005

A very readable book recommended to all FMSF Newsletter readers. Chapter 3, “Why do I have memories if it didn’t happen?” will be of particular interest.

In an article in the British press about her research, Clancy wrote:

“We’ve all been seeing aliens for more than 50 years. Preparing this article, I showed 25 people a picture of an alien and Tony Blair: all recognized an alien, fewer than half recognized Tony Blair.”

“The trick to creating false memories is to get confused between things you imagined, or read, or saw, and things that actually happened.”

“For almost all abductees, the seed of their belief is a question. ‘Why did I wake up in the middle of the night terrified and unable to move?’ ‘Why are these odd moles on my back?’ ‘Why do I feel so alone?’ ‘Why am I different from everyone else?’ ‘Why are my relationships so bad?’ Questions generally lead to a search for answers and our search is limited to the set of explanations we have actually heard of.”

“For better or worse, being abducted by aliens has become a culturally available explanation for distress—whether that distress comes from work, relationships or insecurity.”

“Many of us have strong emotional needs that have little to do with science—the need to feel less alone in the world, the desire to be special, the longing to know that there is something out there, something bigger and more important than you watching over you.”

October 22, 2005, The Express, p. 45.
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