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Psychology 350

Major Paper

Validity of Repressed Memories
The issue of validity of Repressed Memories of childhood sexual abuse is a very controversial subject. The main problem is that there are multiple cases that can support both the validity and also the lack of validity in certain cases. Some believe that the power of suggestion as well as imagination can create certain events in a child’s mind that never actually occurred. In other cases, there are documented events that occurred that a person has forgotten and then remembered while in some sort of therapy. Two of the more famous psychologists involved in this issue is Richard Kluft and Elizabeth Loftus. Kluft believes that people can recover memories that had long been forgotten and has many cases which support his theory. Loftus does not believe that recovered memories are not valid and are often created due to the power of suggestion, she believes that many people simply create these “memories”.

The reason this is issue even comes in to question is because a patient’s past is very important to their future recovery of whatever mental problem they may be suffering from. In order to understand why a person is suffering from a form of psychopathology their past experiences definitely play an important factor. Usually a form of psychopathology arises from a combination of environmental factors as well as biological factors. It is thought the Dissociative Identity Disorder (DID) is a result of past traumas, and that patients create multiple identities in order to escape from their personal traumas. Although this is only one example of possible forms of psychopathology caused by childhood trauma, it could be the cause of many different disorders including depression.
As far as the general public goes, this is generally a very confusing issue. For most people, traumatic events tend to be permanently ingrained in our memory. It is hard to imagine the opposite being true and having a traumatic experience be completely blocked out. Most of us have not experienced the trauma that is likely to arise with being sexually abused so it is hard to imagine the pain that is involved in such memories. At the same time, I’m sure many of us have seen simple examples of falsely recovered memories. I personally have made up plenty of stories about things my sister has done in the past. She then believed them for a short period of time, only for me to be foiled by my parents telling her the truth. When you look at the basics it is still very difficult to decide whether or not these recovered memories are valid or not.

One of the advantages for the reality of repressed memories is that even if the memory is not true, it is almost impossible to prove whether it happened or not. If it is a family member accused of committing sexual abuse then it is very likely that they will deny it. So although it can be difficult to prove whether a memory is true or not, it is very unlikely it will be ruled completely imagined. In Kluft’s time as a psychologist he treated several patients who had recovered memories during therapy through hypnosis or other methods of therapy. In these cases he confirmed the patient’s stories with family members and friends proving that recovered memories can indeed be valid.

One of the major cases that exposed the general public to false recovered memories is the story of Lynn Carl. Carl received $5.8 million in a lawsuit against
her former psychologist due false recovered memories. Somehow in the therapy Carl was convinced that she was a Satan worshipper and that she had sexually abused her children as well as several other satanic rituals. She claims she was even forced to report herself to police over the child abuse. This resulted in the divorce of her husband and her no longer being able to see her children. Carl was told that she did not remember these events due to creating separate personalities in order to cope with what she had done. Eventually she did win, it is thought the psychologists implanted these memories in order to have Carl constantly returning to treatment. This is one case that clearly supports the false memories side, and it is one that brought the general public in to the debate. This case is not unique either, several other very similar cases have been made public as well. The cases of Nadean Cool, Beth Rutherford, and Elizabeth Carlson also show the same evidence that false memories can be implanted in a person’s memory.

One of Loftus’ main points is her experiment of telling a false story about a child being lost in the mall. Basically, Loftus told her participants that they had experienced a traumatic experience of being lost in the mall at about the age of five. Relatives also were told to confirm the story to the participants. In the end, 6 of the 24 patients, or 25% claimed to remember this false story and some even exaggerated the story more, adding in events not included in the story they were told. In a similar experiment at Western Washington University, students were asked questions about childhood events recounted by their parents. In each case one false event was included, either about being hospitalized overnight or a birthday party involving pizza and a clown. The students recalled about 84% of the
true events in the first interview and 88% in the second interview. In the first interview none of the students recalled the false event but in the second 20% said they remembered something about the false incident. This reveals that the power of suggestion can indeed implant false memories in the minds of individuals.

Loftus also believes in a phenomenon that she calls “imagination inflation”. A common strategy in therapy is to have the patients imagine certain scenarios in vivid detail. These can include any events but it is often used with sexual abuse. Loftus believes that these imagination exercises can lead to a person believing that the events they are imagining likely occurred. In a survey taken it was revealed that about 22% of clinical psychologists instructed their patients to let their imagination run wild. One of Loftus’ studies involved having participants imagine a time when they were playing inside and heard a loud noise by the window, when they ran to the window they tripped and broke the window with their hand. When asked about the incident later, one study showed that 24% had an increased belief that the event occurred. While only 12% of those who weren’t asked to imagine the event had a stronger belief that it occurred. Loftus therefore believes that the use of imagination in therapy can inflate the patient’s belief that an event that never occurred did in fact occur.

Kloft has some very good arguments that I tend to agree with when it comes to these implanted memories, specifically the lost in the mall situation. The relationships used to convince the participants of this story were often family members. If my mother or father swore to me that a certain event happened to me
when I was 5, and that they were there and witnessed it themselves, I assume that I would believe them. Whether I remember it or not, why would my parents who love me and know I trust them lie to me about something like that. The relationship between a direct family member who you usually love and respect and a therapist is nowhere near the same. If my parents had told me about this story, it would have been them being a direct eyewitness to this event. There are many events that happened to me at the age of five that I do not remember, and although this event is mildly traumatic I am sure that there are many other mildly traumatic events from when I was five that I do not remember. A therapist would not have been an eyewitness to this event, and in most cases therapists would not use a parent and have them lie to the patient, which is a much stronger form of suggestion. There is a big difference between using the trust of a family member and lying to convince a patient something happened or possibly suggesting an event occurred. The idea of children being lost is also somewhat imbedded in a child’s mind. Parents often give their children lectures about the importance of not leaving their sight and what could possibly happen if they did. Children getting lost and then taken by a stranger is sensationalized in the media and is something that definitely influences parents to warn their children of such events. If this is imbedded in a child’s mind then it should be much easier for the child to believe such an event occurred. The same cannot be said of sexual abuse. Unless a child is sexually abused it is very unlikely that they would have those types of imagines imbedded in their mind.
Another good argument produced by Kluft is the notion that if a child can be convinced that an event has occurred then it would be along the same principles that a child could be convinced an event didn’t occur.

This brings up Roland Summit’s Child Sexual Abuse Accommodation Syndrome, which involves five steps used by the family in order to convince a child that a certain event did not occur. Summit believed that if a family was determined enough they could convince a child that actual events did not occur. Summit included five categories in to his theory; secrecy, helplessness, entrapment and accommodation, delayed conflicting and unconvincing exposure, and retraction. Secrecy is the attempt by adults to make what happened seem like it was bad and dangerous and that no one else should find out about it. Often times if a child doesn’t immediately complain then there is no second chance. The people around them often don’t believe the stories, saying things such as “Why did you wait so long to tell me?” Helplessness is as simple as it sounds, the child often knows they have no real way of defending themselves so they simply try to hide. Entrapment is used to describe the ensuing events, if a child does not seek help after the first account of abuse it is likely they wont in the future either. This makes the child feel trapped, and the only option they feel they have is to attempt to deal with the problem and simply survive. Delayed, Conflicted, and Unconvincing Disclosure is when the anger builds up and eventually the child lets go of the secret. It is hard for parents to believe that their normal child would put up with sexual violations for any amount of time without letting someone know. Other children still seem to thrive despite the abuse and this also makes it very difficult for family and authority to believe that
abuse is occurring. Retraction is when the child eventually withdraws their accusations. If a child does convincingly tell stories of abuse often time the family is separated and that child then becomes the one blamed for tearing the family apart. Summit believes that all of these factors lead to children eventually being convinced that sexual abuse did not occur.

In the end, the validity of recovered memories is a very controversial subject. To me, it all depends on how valid you need these memories to be. If it is a question of a possible legal suit where these recovered memories would be used to persecute someone, I would say they are definitely not valid. In several cases it has been proven that patients can be convinced that some traumatic event occurred when there is absolutely no evidence to support such an event. At the same time there are many cases where a repressed memory has turned out to be valid. If a repressed memory comes up in therapy without intense suggestion, and possible use of imagination exercises, I would consider them valid and worth attempting to treat.

I do think that Loftus has a point about the power of suggestion and imagination, and that can be shown through some of her research. I do not have much knowledge on the techniques often used by clinical psychologists but according to Loftus’ study 22% encourage their patients to let their imagination run wild. Techniques such as this could definitely lead to recovered memories that never happened and therefore I would think it would be better not to use techniques such as that. This could also include hypnotherapy. If no such techniques are used and the patient believes they have recovered a memory about childhood
sexual abuse I believe that that memory is much more likely to be true. If the patient is then treated as the event is true and they subsequently become better then I can only see this as a good thing. Clearly both arguments have very valid points and overall I think it is up to the therapist to decide whether it is appropriate to deal with the recovered memory or simply view it as a false recovered memory. If dealing with this recovered memory helps the patient deal with their psychopathology then I do not see any problem with dealing with the memory as if it is valid. Otherwise, if it becomes a matter of a lawsuit, I don’t think the recovered memory could be used as evidence at all. False memories can definitely be both valid and made up which is why I think it will be a long time before psychologists can come to one conclusion on whether or not repressed memories are valid.
Works Cited

