

THE EXISTENCE OF REPRESSED MEMORY SYNDROME

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In 1990, George Franklin became the first person in history convicted on the basis of a recovered memory--his daughter Eileen's recollection of witnessing, twenty years earlier, his rape and murder of her eight-year-old friend. Eileen Franklin's memory returned, she told the court, when an innocuous gesture by her five-year-old daughter brought back a similar gesture by Eileen's childhood friend as she tried to ward off George Franklin's murderous blows.

Frank Fitzpatrick, a thirty-eight-year-old insurance adjuster in Rhode Island was lying in bed, trapped in an anguish he could not explain, when he remembered being molested as a child. "I began to remember the sound of heavy breathing," he said, "and I realized I had been sexually abused by someone I love." When Patrick went public with his suit against Father James Porter, several of the nearly one hundred Porter victims said they only remembered when they heard about the case on the news (Horn 54).

Both Eileen Franklin and Frank Fitzpatrick suffer from Repressed Memory Syndrome, where a traumatic event, such as a murder or rape during childhood is blocked out by memory, only to be recalled later in adulthood after something triggers the memory. However, many researchers feel that Repressed Memory Syndrome should be termed as False Memory Syndrome. They claim that there is a lack of evidence to prove its existence. But there is enough evidence to prove its existence, through true stories and case studies. If researchers continue to deny the problem, those who have been traumatized will be disregarded in future cases of abuse.

The term "repression" was coined by psychoanalyst Sigmund Freud. He believed that many of his patients were sexually abused as children and that their repressed memories of those events had caused them to develop psychological problems (Comer 625). But four years later, Freud changed his mind and stated that the patients' memories were their own fantasies. The term "repression" was forgotten--at least for a little while.

The term "Repressed Memory Syndrome" was coined almost one hundred years later in the late 1980's and early 1990's, when Eileen Franklin's case was brought to the courts. Since then, many others have made such discoveries about their pasts. Seeking therapy for various problems such as substance abuse, eating disorders, depression, or marital difficulties, unhappy adults (primarily white, middle and upper-middle class women in their thirties and forties) report memories of abuse that usually surface during the course of therapy (Robbins 478). Recovery groups, self-help conferences, and books on the subject of repressed

memories may also trigger these memories as well. These memories typically appear as terrifying images or flashbacks that proponents believe are genuine, if not precise, memories of earlier abuse (478).

In most cases, the accusations are brought by adult daughters against fathers long after the alleged incest. Fully one quarter of the charges involve both parents (Woodward 54). Other abusers may include religious leaders (as in Fitzpatrick's case), teachers, or other relatives. In any case, the abuser is usually someone a child trusts—all the time knowing that this child will hide the abuse from others. Ross Cheit, who was molested by his camp counselor as a child, remarked, "These were not just perverse acts, but the most profound betrayals possible for a kid" (qtd. in Horn 56).

The victim may even take the abuser to court. Since 1989, a total of nineteen states have passed legislation allowing victims to sue for recovery of damages for injury suffered as a result of childhood abuse remembered for the first time during adulthood. Since the late 1980's, more than 800 lawsuits have been reported to date (Neimark 49).

While there has been much support of the existence of Repressed Memory Syndrome, there is also much backlash against it. Many researchers doubt its existence because of the many claims of repressed memories that were actually false memories. In fact, an organization called the False Memory Syndrome Foundation, founded in 1992, helps families get back together after the pain from these false accusations. But there are reasons for the false claims of repressed memories.

One reason for these false accusations is the lack of experience on the therapist's part. Psychiatrist Herbert Spiegel warns, "We have a large number of poorly trained, inept therapists who are propagating a cottage industry of discovering child abuse in their patients. . . a good hypnotic will vomit up just what the therapist wants to hear" (qtd. in Woodward 55). Unfortunately, there are too many of these inexperienced therapists.

These inept therapists usually use methods such as sodium amytal ("truth serum") or hypnosis to find these memories in clients. These situations have been prone to controversy and abuse. In 1991, in Ohio, an appeals court upheld a malpractice award to a woman whose psychiatrist injected her with truth serum more than 140 times to help her uncover buried memories of alleged sexual abuse by her mother (Horn 54). Hypnosis is not always the best method either. If anything, hypnosis makes the patient more suggestible to the therapist's suggestions of possible abuse. While under hypnosis, the patient's mind becomes fertile ground for the therapist to plant false memories. Also, Harvard psychiatrist Judith Lewis Herman states that hypnosis may heighten a person's tendency to create remembrances in order to please a therapist (Bower 185). The therapist may be probing so deeply into the patient's unconscious that the helpless patient may surrender to their unyielding therapist.

These methods are not legally sound. In fact, the American Medical Association has already warned twice against techniques of hypnosis and injections of sodium amytal to uncover memories (Horn

55). Therefore, many of these false accusations stem from faulty methods of treatment. These are the types of memories that can be considered "false." The false accusations do not mean that Repressed Memory Syndrome is non-existent; it simply means that false cases are the fault of the incompetent therapist.

The mind has been a mystery to researchers for years, so it is no doubt that they question the biology of memory in Repressed Memory Syndrome. Again, they argue that because there is not enough study done to determine exactly how or why we remember things, there is definitely nothing to support repressed memories. Memory researcher Elizabeth Loftus confirms this, stating, "Memory is not a computer or videotape recording. We do not just pop in a tape or call it up in perfect condition. Memory is not objective, but suggestive and malleable" (qtd. in Horn 55). True, memory is malleable. The false claims of abuse through faulty methods have proven this. Most people do recover their repressed memories through flashbacks or images. Of course it will not be a "perfect" picture as Loftus claims it to be, but the pieces of memory will still be there. Also, advocates of the phenomenon claim that Loftus' work simply does not apply to abuse. "She doesn't study traumatic memory, she studies normal memory," asserts Herman (Neimark 78).

Fortunately, there has been more research done on the memory since claims of repressed memories have surfaced. Scientists have understood for many years that memories are stored in the hippocampal region and are recorded over time. As for repression, Yale psychiatry Professor Michael Davis says "intensely traumatic events produce unusually strong nerve connections that serve as long-lasting memories." Years later, the right stimulus can set those nerve circuits firing and triggering with fear, with no immediate understanding of its source (Horn 54-55). Davis' study proves that the memories will eventually re-surface-such as Franklin and Fitzpatrick's did, by the tiniest stimulus, and will create flashbacks and bring back the horrifying memories of abuse.

Stress may also play a part in how the victims retain memories as well. According to Dr. Robert M. Sapolsky, the chronic severe stress that occurs with long-term abuse seems particularly able to impair activity in the hippocampal region thought to be critical in learning and memory (Cotton 1725). The stress a person experiences during this abuse is so great that in order to deal with it it must be blocked out.

In researching Repressed Memory Syndrome, researchers have used dozens of studies, many which prove its existence. This one, reported by *U.S. News and World Report*, states:

It has been estimated that 18-59 percent of sexual abuse victims repress memories for a period of time. In one follow-up study of 200 children who had been treated for sexual abuse, Linda Williams of the Family Violence Research Laboratory at the University of New Hampshire found that 1 in 3 did not recall the experience of abuse that had been documented in their hospital records 20 years before them. (Horn 56)

There have also been countless other studies done with former abuse victims, with the same positive results.

Child abuse is a growing problem in the United States--no one has to tell researchers that. But twenty or thirty years ago, there was hardly any discussion of child abuse. There were never any advertised hot lines or organizations such as the National Committee to Prevent Child Abuse. It was never discussed in households, for no one knew how to approach it. If it was reported, it was often overlooked. Herman agrees with this, claiming:

Until recently, perpetrators of child sexual abuse committed virtually "perfect" crimes. Their young victims rarely reported the offense to other family members or police, the criminal justice system treated the few accusations that arose with suspicion, and clinicians assumed that incest and sexual abuse hardly ever occurred. (Bower 184)

Therefore, many adults may have memories of the abuse return because they did not report it when it happened. A study done by researchers Pope and Hudson (1995) shows that even when conservative estimates of 10% of women and 5% of men are used, this indicates that 14,000,000 adults in the U.S. are now former victims (Robbins 481). Certainly, a great percentage of those victims have somehow repressed their memories in one way or another. The most frightening part of this figure is that sexual abuse may have happened to anyone, yet the individual may not know it.

Even with all the studies done, many researchers can still find countless reasons for not believing in Repressed Memory Syndrome. Loftus contends that "We do not yet have the tools for reliably distinguishing the signal of true recovered memories from the noise of false ones" (Bower 185). One victim received all the evidence and certainly more than she could ever want:

For Claudia . . . the sudden recall of sexual abuse took an entirely different turn. After losing more than one hundred pounds in a hospital weight-reduction program she had entered to battle severe obesity, Claudia experienced flashbacks of sexual abuse committed by her older brother. She joined a therapy group for incest survivors, and the memories of abuse flooded back. Claudia told group members that from the time she was four years old to her brother's enlistment in the army three years later, he had regularly handcuffed her, burned her with cigarettes, and forced her to submit to a variety of sexual acts.

Claudia's brother died in combat in Vietnam more than 15 years before her horrifying memories of abuse surfaced. Yet [because] Claudia's parents had left his room and his belongings untouched. . . she found a large pornography collection, handcuffs, and a diary in which her brother had extensively planned and recorded what he called sexual "experiments" with his sister. (Bower 184)

Although Claudia was not able to confront and question her abuser, her repressed memories were real. Sometimes, researchers need to stop looking at studies on memory and begin to look at the real evidence: the victims themselves. They have lived to tell about the worst nightmare possible. Their pain is more powerful than any study done on the effectiveness of memory. How many horror stories of true abuse will it take to make researchers realize that Repressed Memory Syndrome is real?

Unfortunately, it may be decades until researchers realize that people do in fact repress memories. With reports of childhood sexual abuse ranging from 200,000-300,000 annually (plus the many that go unreported), the next generation will be reporting their claims and will not be believed. Researchers need to take a look at the cases of true abuse, like Franklin, Fitzpatrick, Chiet, and "Claudia." It may be true that some memories are induced by the therapist, but a majority are true claims of abuse.

In conclusion, I feel that the Repressed Memory Syndrome does exist. Researchers who oppose it should take a look at the research done that supports it. But above all, they should take a closer look at the victims and their tragedies. True, there have been mistakes made in identifying memories, but there are plenty of true cases as well. Researchers, as well as our society, need to listen to and help these former victims. Above all, we need to see the reality in the phenomenon of Repressed Memory Syndrome.

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