



Dear Friends,

Are we entering a new phase of FMS legal activity? It seems likely. *Fraud* is the key word in two *criminal* trials described in the Legal Corner this month. Leading proponents of recovered memory therapy are faced with imprisonment and fines—punishments against which their malpractice insurance will not protect them. And in Chicago, Dr. Bennett Braun will appear before an administrative judge to determine if his license to practice will be revoked.

The federal criminal trial against five professionals associated with Spring Shadows Glen Hospital is set to begin in Houston on September 8, 1998. (United States of America v. Peterson, Seward, Mueck, Keraga and Davis) The trial is expected to take three months and will probably cover some of the many “treatments” at Spring Shadows Glen exposed in Ofra Bikel’s Frontline documentary “Search for Satan” (October 24, 1995, PBS). The charges include mail fraud, insurance fraud and knowingly misdiagnosing MPD in order to keep patients in the hospital. This trial is the first time that professionals have ever been treated as criminals for using “mind-altering” techniques for their own purpose rather than for the patient’s well-being.

One professional told us that this case doesn’t have any relevance to him or to most psychotherapists. We differ, although we acknowledge that this attitude is both prevalent and problematic. We see the trial as cutting to the heart of issues that concern all mental health professionals. By their silence and inaction, the major mental health organizations have contributed to a climate that tolerated fraud—from deceptive recruitment of patients, to kickbacks to doctors for patient referrals, to the use of dangerous memory-recovery techniques. We hope that criminal convictions and attendant media coverage may finally persuade some of the major professional associations that this casual stance is not tolerable by the standards of the community.

In this tragic time, when government prosecutors have been forced to assume the role of guardians of the profession, many therapists have cause to worry: therapists who used hypnosis or hypnosis-like techniques for memory work without informing patients of the risks; therapists who

diagnosed patients as suffering from the results of intergenerational satanic cult abuse; therapists who told patients that they had “all the signs of sexual abuse” and treated them for something that did not happen; therapists who defamed parents they never met, or who advised patients to cut off from their families—all such therapists are about to see those practices under attack in a federal *criminal* trial.

The Ramona case in 1994 was significant because it opened the door for someone other than a patient to sue a therapist. The Peterson, et al., trial, however, is significant in ways that directly affect the practice of psychotherapy. If it does nothing else, this trial emphasizes that there is no freedom to exploit or harm patients just because one is a mental health professional.

The legal action filed in August by the Illinois Department of License and Inspection to revoke Bennett Braun’s license is another significant and related event. Bennett Braun, M.D., whose recent \$10.6 million settlement with a patient received national attention, was key to the development and spread of recovered memory therapy practices. He was a founder of International Society for the Study of Multiple Personality (now ISSD) whose journals and conferences taught others about techniques for recovering “repressed memories.” “Every MPD patient in the country owes a personal debt of gratitude to Buddy [Braun]. He’s the first ever to get a unit set up for these people, and all the other units around the country followed the trail he has blazed,” said Richard Kluff, M.D. when honoring Braun in 1994.^[1] Gloria Steinem credited Braun in *Revolution From Within*, thus ensuring the support of the women’s movement.

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How long will discredited professionals and discredited beliefs be given credence? The criminal trial about to start in Houston brings disgrace to the whole mental health profession. The beliefs and actions that caused the federal government to step in did not take place in a vacuum. Professional silence conferred consent. It is long past time to end that silence and to update and revise professional statements about recovered memory. The Royal College of Psychiatrists "Reported recovered memories of child sexual abuse" *Psychiatric Bulletin* (1997) 21, 663-665 is a fine model. Families, professionals, friends who read this newsletter, let the mental health organizations listed in the box below know that now is the time for them to speak.

Pamela

1. quoted in Keenan, M "The Devil and Dr. Braun", *New City*, June 22, 1995

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Fund Drive Alert

Charles Caviness and Lee Arning are now working on the Foundation's financial needs to be addressed in our annual fall fund drive. Please keep your eye out for their letter due in October and remember how vital your commitment is to the continuance of our important work.

special thanks

We extend a very special "Thank you" to all of the people who help prepare the FMSF Newsletter. *Editorial Support:* Toby Feld, Allen Feld, Janet Fetkewicz, Howard Fishman, Peter Freyd. *Research:* Michele Gregg, Anita Lipton. *Notices and Production:* Ric Powell. *Columnists:* Katie Spanuello and members of the FMSF Scientific Advisory Board. *Letters and information:* Our Readers.

We are pleased to report that Allen Feld is recovering from the serious accident he suffered on June 7 when hit by a car while bicycling.

Allen is a prolific contributor to this newsletter. He is Director of Continuing Education for the Foundation, a position he has held since retirement as a professor of social work.

Allen and Toby Feld thank the many people who have sent messages and cards.

Canadian Psychological Association Wants Federal Inquiry

The Canadian Psychological Association has written that all criminal convictions based solely on "recovered memory" evidence should be the subject of a Justice Ministry inquiry according to the *Ottawa Citizen* (June 21, 1998). The association's board passed the motion to request such an inquiry at its meeting on June 6. The psychological association has 4,500 members and is the first mental health organization to call for the inquiry that was initiated in May by Alan Gold, president of the Criminal Lawyers Association.

Canada's Justice Minister to Review Sex Abuse Case

Canada's justice minister has agreed to review the case of a Manitoba man imprisoned for sexually abusing his daughters. The man and his supporters insist the man was wrongly convicted and jailed last summer on the basis of recovered memories. The man has already lost an appeal of his four-year sentence in Manitoba.

Doubt Cast on Story of Sybil

New York Times, August 19, 1998

Robert Rieber of John Jay College of Criminal Justice in New York says that newly-found 25-year-old tape recordings show that Sybil, the woman made famous in book and movie for her multiple personalities, was really just a single troubled personality. Rieber presented his analysis of the conversations between psychiatrist Dr. Cornelia Wilbur and author Flora Schreiber at the American Psychological Association meeting in San Francisco. (See *FMSF Newsletter*, December 1997 for more details about these tapes.)

Is More MPD in Store?

According to *Publishers Weekly*, June 22, 1998 Robin Williams has purchased the film rights to 'First Person Plural,' a biography about Cameron West's battle with 25 multiple personalities. Williams plans to star in the movie that will be produced by his company, Blue Wolf Productions.

Recovered Memory Flap

In June CNN fired two people, accepted the resignation of another, and then apologized for releasing a false story apparently based on a "recovered memory" incident:

"If, as with CNN, you rely on a source who later says he has experienced 'recovered memories,' you're in trouble." *San Francisco Examiner*, July 5, 1997.

"[R]epressed memories,' an exceedingly shaky source of information." *Providence Journal-Bulletin*, July 5, 1998.

"[V]erification came from a military official who had heard only rumors and an operation participant who recalled the nerve gas use as a 'repressed memory.' Ridiculously weak stuff on which to hang a news story..." *Las Vegas Review-Journal* July 7, 1998.

CNN asked Floyd Abrams, the famous first-amendment lawyer, to investigate. A widely quoted passage from his report:

"[H]e has in spectacularly self-destructive fashion, [Van Buskirk] stated that he had repressed memory syndrome. . . [R]ecent reports that he attributes to repressed memory his previous failure to recall the encounter with defectors as he now describes it makes continued reliance upon him all the more problematic."

False Accusations Stick

In July, a one-hour documentary of the life of Cardinal Bernardin was aired on PBS. About six minutes of the program were devoted to the accusation of sexual abuse based on a "recovered repressed memory" that was later retracted by Steven Cook. Each of the first ten reviews of this program appearing on Nexis mentioned the accusation and some even made the accusation the main topic of the review.

An accusation of sex abuse is not something that the media puts aside

even if it has been retracted by the accuser. When Cardinal Bernardin died on November 15, 1996, 57 papers covered by NEXIS published obituaries the next day. Most of them (79%) mentioned the accusation.

Continuing Education Watch

A glance at a New Age throw-away from Seattle, Washington indicates that a growing number of therapists are promoting themselves as "intuitive." We were not surprised, therefore to read in *Publishers Weekly* (March 16, 1998) about a new book called *Awakening Intuition: Using Your Mind-Body Network for Insight and Healing* by Mona Lisa Schulz, M.D. Readers of this newsletter (and perhaps the American Medical Association) will be interested in her claims. She calls herself a "medical intuitive" and claims "to be able, over the telephone, to discern a person's physical and emotional condition and the linkage between them." According to *Publishers Weekly*, she includes numerous examples of her remarkable intuitive readings. In one, she intuits that "her caller has a uterine fibroid cyst and labels it as the physical manifestation of an unhappy relationship with a cross-dressing lover."

Such notions are treasured and protected in our country of free speech. For skeptics, they provide the gist of fun. When "intuitive" psychological notions receive implicit endorsement by the American Psychological Association it is another matter. This summer we received a brochure advertising a seminar taught by one Caroline Myss, Ph.D., self-described as "a pioneer in the field of energy medicine and human consciousness." We learn that "she holds a doctorate in intuition and energy medicine from Greenwich University in Hilo, Hawaii—the country's first such degree." (Greenwich University is an unaccredited correspondence school in a town 200 miles southeast of Honolulu.) The brochure goes on: "From 1982-1995 she worked as a med-

ical intuitive: one who 'sees' illnesses in a patient's body by intuitive means...Caroline no longer does private readings."

The seminar has been approved for nine credit hours by The Association for Humanistic Psychology which, in turn, is approved by the American Psychological Association as a provider for continuing education credit. The topic of these talks will be "Archetypes and Sacred Contracts." What's a Sacred Contract? We quote: "an agreement we make before we incarnate."

CLOUSEAU LOAN FUND

The FMS Foundation is pleased to announce the formation of a special fund to help foundation members initiate educational meetings. A relative of a foundation family has donated \$500 to be used for loans to encourage conferences to which professionals are invited. Loans are limited to \$200 per state per occasion. The criteria for making those loans are specified as follows:

1. Loans are to be repaid from the proceeds of the conference.
2. Preferences will be given to locations that have not had professional conferences.
3. A secondary, yet important priority, will be for family meetings that invite professionals to attend.
4. Loans are intended to help defray expenses for getting professionals to attend (e.g. mailings, poster, advertisements).

To apply, send a one page description to the Foundation with the following information:

- Conference Title
- Date of Conference
- Speaker(s) who ha(s)ve tentatively agreed to participate
- Location
- Professionals to be invited
- Publicity and mailing plans
- Conference fee
- Budget
- Amount requested

ISTSS Report

In June, the International Society for Traumatic Stress Studies (ISTSS) published a pamphlet entitled "Childhood Trauma Remembered: A report on the current scientific knowledge base and its applications" under the Chief Editorship of Susan Roth, Ph.D., Duke University and Matthew J. Friedman, M.D., Ph.D, National Center for PTSD. When it was being prepared several respected memory researchers joined on as contributors ensuring that the information about the nature of memory is accurate. But the document as a whole is slanted, as was evidenced by the headline of a story about the report in Dr. Roth's hometown newspaper: "Expert debunks false memories of sexual traumas." (*The Durham Herald-Sun*, June 28, 1998.)

The slant can be found scattered throughout the text. For example, the Linda Williams 1994 study is described as reporting that 38% of the women in her sample "did not recall the documented abuse." As many have pointed out, that study said that 38% failed to report in a one-time interview the particular "index event." Many subjects remembered some abuse memories but not the particular "index event;" only 12% reported no abuse memories. Failure to report may indicate a failure to remember among other possibilities (non-reporting, etc.), but does not indicate dissociation or repression. There is much evidence that what one reports about one's childhood abuse in a first interview and what one reports in subsequent interview may be different. In any case, failure to report is not evidence of failure to remember. (Linda Williams edited this section.)

The slant becomes most noticeable in the suggested readings and the

false memory syndrome: a psychological condition in which a person believes that he or she remembers events that have not actually occurred.

Random House Compact Unabridged Dictionary, Special Second Edition, 1996, Addenda

accompanying comments. For example, in the final section (edited by ISTSS president, Sandra L. Bloom, M.D., a frequent contributor to *Psychohistory*) the reader is directed primarily to material that is directly antagonistic to the FMSF. The recommended authors are Bowman, D.Brown, L.S.Brown, Hammond, Knapp, Mertz, K.Pope, Schelfin, VandeCreek, and the authors of an amicus brief filed in the New Hampshire v Hungerford case. The latter is described as follows: "This 'friend of the court' legal document is concerned with the admissibility of testimony concerning recovered memories about childhood, sexual abuse, and more specifically with the court's recognition of traumatic amnesia as a well-documented symptom that may result from severe trauma." The reader is not told that this brief was directly refuted by the New Hampshire Supreme Court.

(The decision is available from the Foundation, (# 843__\$4). The influential trial decision that engendered the amicus brief is also available (#837__\$3.50) as is the Foundation's amicus brief (#809__\$30.). The ACLU also submitted a brief that supported the Foundation's position. None of these documents is mentioned in the ISTSS pamphlet.)

"[I]n any situation where false allegations are allowed to proliferate, those who have made well-founded ones are exposed. It is precisely for this reason, however, that false allegations should be exposed sooner rather than later. For if they are treated as if they were genuine, then the entire currency of complaints becomes debased and there is a grave danger that children who really are being abused (or adults who have been abused in the past) will find themselves once more being systematically disbelieved -- as has happened before with tragic results."

Richard Webster, p. 52
The Great Children's Home Panic
Oxford: Orwell Press, 1998

The Effects of the False Memory Syndrome on Australian Families

Merle Elson, MAPS

Newsletter readers know only too well the devastating effects of FMS in the United States. Sadly, this phenomenon has spread throughout most of the Western world, and Australian families, too, have experienced harm from the misuse of therapy to recover pseudomemories. Although the Australian continent covers an area as large as mainland USA, our population is only 18 million. The numbers affected by FMS, however, are as high in proportion as in North America.

In 1994, following unexpected and, to us, unbelievable allegations of sexual abuse against my husband by his 42-year-old daughter, we traveled to the FMS Foundation in Philadelphia and to the British False Memory Society in Bradford-on-Avon, desperately seeking information. Whilst overseas, we learned of several other accused parents in the State of South Australia who were also actively trying to comprehend the False Memory Syndrome.

Inspired by the heart-warming practical support we received in Philadelphia and from Roger Scotford in England, we contacted the South Australian parents on our return and held a meeting in our home in the State of Victoria in July 1994. From that small gathering of twelve families, the Australian False Memory Association (AFMA) was created. As a psychologist, I felt it imperative that the AFMA have an Advisory Board of reputable professionals and academics with expertise in the field of memory. We were fortunate to have the leadership of Irene Curtis as President of the AFMA. Many hundreds of affected Australian families have since contacted and received help and support from the Association.

Those who read August Piper's account of his recent trip to Germany in the April 1998 FMSF Newsletter may be interested to know that Australians, like Germans, do not enter therapy as

readily as Americans and, if they do, do not divulge it to others. They also generally keep their personal lives private and dislike public disclosure of any family problems. These traits have caused difficulties in building an active FMS association: although many hundreds make anonymous contact, few are prepared to become members, and only a handful have dared to appear on television or talk to the media. Those who have spoken out, however, have greatly improved the local situation. Recently two Melbourne lawyers have even initiated the first Australian legal action against a therapist for the implantation of false memories. Unfortunately, until those responsible for harm are held accountable financially and legally for the damage inflicted by RMT, there will not be a dramatic improvement in the behaviour of disreputable therapists.

During 1997/98, I conducted a survey of AFMA families regarding their personal experiences with the False Memory Syndrome. With 83 surveys returned, the response rate was 75%. The eight-page questionnaire was similar to one used by the FMSF and the British and New Zealand associations. Although the Australian study was on a smaller scale, it was fascinating to note the many similarities among families in the United States, Great Britain and New Zealand. I have briefly summarized a few of the interesting results of the survey:

The families: Typically the accused fathers in the Australian survey were similar to their American counterparts: well-educated, white, of high socio-economic status with an average age of 63. Over a third were born overseas, the majority in Britain. Ten percent of the fathers were members of the clergy. There was a disproportionate representation of 'fundamentalist' religions among accused families—39% compared to 3% of the total Australian population. As adults, 25% of the accusers were conducting religious activities. These factors may not be as noteworthy in the United

States, but present-day Australia is a more secular, non-church-going country.

The Accusers: The results confirmed the observations of accused families and FMS associations that a large percentage of accusers work in the fields of counselling and sexual abuse. The above-average intelligence of the accusers was also confirmed, not only by parental assessment but also by school completion rates and university attendance—60% compared to the current Australian average of 25% attending tertiary institutions. Another relevant variable in the accusers' lives was the absence of satisfactory personal relationships. Very few were in what the respondents classified as a happy marriage or partnership. Even amongst those who were married or in a relationship at the time of their allegations, many had broken up two to three years later. Therefore, in addition to other triggering events, being without a supportive partner appears to be a risk factor for an accuser. American parents may be shocked to know that 47% of the Australian accusers were known to have read the Bass & Davis book, *Courage to Heal* (1988).

Stress: It was observed, and supported by results in other surveys, that various stressors in the accusers' current stage of life appear to play a precipitating role in the recovery of false memories. The Australian survey demonstrated that the most prevalent stress factor affecting the accuser was moving from one house to another—not only rated the most frequent stressful event just

"Each time we re-member we remake the memory, literally, in terms of brain processes. Which is why 'false memories,' even if they only got there a few weeks ago courtesy of a psychotherapist, may be just as real to the person who has them as are historically verifiable 'true' memories. Memories are a way of ordering and making sense of our unique life histories."

Steven Rose

The Guardian, May 23, 1998

prior to the accusations being made, but also the highest rated event classified as family stress during the accuser's childhood.

Therapy: For a nation not generally considered "therapy-goers," it was surprising to see the level of involvement that the accusers had with therapists. Almost all were involved in therapy and had seen more than one therapist. One accusing person actually saw ten different therapists and one 20-year-old had already visited nine. The average length of time in therapy was 3 1/2 years, and at the time of the survey 31% were still attending. Where RMT is concerned, Australia has followed the American experience of vulnerable people becoming dependent on their therapists.

After-effects of accusations: Although one of the major limitations of this type of study is the lack of a control group, it is still possible to make some observations without implying a causal relationship between events. For example, this survey found that almost a quarter of the accusers either attempted suicide, committed suicide or had suicidal thoughts—in addition to self-mutilation, severe depression, violence, drug and alcohol abuse—following the recovery of their "memories."

The effects on the accused persons were just as dramatic: 96% reported deterioration in their health, including cancer, heart attacks, strokes, depression, mental breakdown and severe stress reactions. Three-quarters of their partners also experienced marked deteriorating health, including four deaths that were blamed on the stress of the accusations. Even allowing for the natural decline in general health in this age-group, these findings indicate some of the harmful side effects of accusations based on RMT.

Actual sexual abuse: The most unexpected and surprising finding in my survey was the prevalence of known sexual abuse experienced by the accusers earlier in their lives, including a large percentage during their childhood. In response to a question regarding childhood experiences, 13% of par-

ents reported sexual abuse perpetrated by some other person on their accusing child. This level of childhood sexual abuse is noteworthy as it was provided in response to a general questions about stressful *family* experiences that "may have affected the accusing child." Thirteen percent appears to be a high rate of childhood sexual abuse to be reported when not specifically asked about it.

A separate section asked if the respondent knew of any sexual abuse suffered by the accusing person. Respondents reported that 33% of the accusing persons *were known* to have been sexually molested, abused or raped (by persons other than the parents). While high, this figure may be an *underestimate* of all the abuse that occurred. As a psychologist in the field of sexual abuse for many years, I have observed that many genuine victims of sexual abuse often do *not* confide in their parents or others. The limited results of this survey indicate that more than one in five of this sample were known to have been sexually abused as children by others but not by those they are currently accusing based on their recently "recovered memories."

This Australian survey raises more questions than it has answered. Several issues require further investigation. For example, the impact of recovered memory allegations on the health of all concerned, and the possibility that those who have been sexually abused as children may later be susceptible to recovering false memories, especially in relation to the identity of their abuser. It would also be of interest to collate and compare all the findings already amassed by the various surveys conducted in the US, the UK, New Zealand and Australia.

Merle Elson, MAPS, is a counsellor at Monash University and a psychologist in private practice. She is a member of the AFMA Professional Advisory Board.

Contact Elson Psychological Services, PO Box 212, Black Rock, 3193, Victoria, Australia for information about the full 40-page report.

B O O K

— R E V I E W

**HOAX AND REALITY:
The bizarre world of
Multiple Personality Disorder**

by August Piper, Jr., M.D.
Northvale NJ: Jason Aronson, 1997

Reviewed by Loren Pankratz, Ph.D.

Paul McHugh's Foreward to *Hoax and Reality* eloquently explains the importance of this book. The concept of multiple personality disorder, he notes, has wielded considerable power over psychotherapists and consumed the time of courts during the past decade. How could we have wasted so much energy in this Sherlock Holmes fantasy in which therapists ferret out sexual abuse hidden behind the illusion of repressed memories?

McHugh is also correct in concluding that it must have taken a firm will to review this current fad. Indeed, Piper has meticulously gathered the heart of a vast body of literature in this field. The results of his efforts, however, are not tedious. This is a delightful book to read, and it is filled with the insights of a sensitive psychotherapist.

This is not a slash-and-burn book. Piper allows the strongest proponents of MPD to present their best case. This allows the reader to gain a strange sense of just how far they have strayed from common sense.

What do they say about the psychological cost of entering therapy? Unanimously, they admit that treatment often stirs up problems. Kluff believes that patients will be more symptomatic once therapy begins because symptoms become more complicated as more time is spent in treatment. Braun says the patient may become more dissociative, more anxious, or more depressed during therapy. Bass and Davis warn that the decision to enter therapy often wreaks havoc with marriages and intimate relationships. It can become hard to

function, to go to work, to study, to think to smile, to perform. Ross even says that amplifying a simple dissociative disorder into a full multiple personality disorder might not be a bad thing because it predicts a better treatment outcome. Piper rightly wonders why anyone would be surprised about an iatrogenic [treatment induced] outcome. The indicators for disaster ahead are clear. He quotes one patient asking her therapist something like, "Don't you think it's odd that all your patients want to kill themselves after they're in therapy with you?"

An attorney recently told me of an experience that highlighted the power of this book. He was preparing to depose a psychiatrist known to believe in MPD. That belief was of critical importance to the opposing side. The attorney prepared himself by composing questions directly from Piper's book. Although the psychiatrist may have believed in MPD in some abstract way, he endorsed the logic of the attorney's questions. The leading questions were so seamless, the opposing side could not insert an objection.

It is usually depressing to read a book of this type. In this instance, instead of simply hearing how bad things are, the reader is lifted by Piper's tune of good judgment, the ring of truth, and (most important) the clear notes of concern for patient welfare.

Loren Pankratz, Ph.D. is a Consultation Psychologist and Clinical Professor at the Oregon Health Sciences University, Portland, OR. He is a member of the FMSF Scientific Advisory Board.

Editor's Comment: Because of the flood of legal actions involving the diagnosis of multiple personality disorder (MPD), we consider it important to remind readers about this book. (See April, 1997 issue.) It is a major tool in understanding the controversy about the MPD diagnosis. We also strongly recommend *Multiple Identities and False Memories: A sociocognitive perspective*, Nicholas P. Spanos. (American Psychological Association, 1996)

FMSF Staff

**CRIMINAL INDICTMENTS ATTACK CONTROVERSIAL
IDEA OF REPRESSED MEMORY****Criminal Trial Against Therapists Begins in Texas**United States of America v. Peterson, et al., U.S. Dist. Ct.,
Southern Dist., Texas, No. H-97-237. [1]

Trial is scheduled to begin September 8th in Texas as four mental health professionals and a psychiatric hospital administrator face criminal charges that include allegations of "implanting" false memories during psychotherapy. The five have been charged with 60 counts of conspiracy to defraud insurance companies and mail fraud while operating a clinic at Spring Shadows Glen Hospital in Texas. They allegedly reaped millions of dollars in fraudulent insurance payments by "implanting" false memories of ritual satanic abuse using what the indictment calls "techniques commonly associated with mind control and brainwashing."

Soon after this indictment was handed down in October 1997, an unlicensed Missouri hypnotherapist entered a plea in a criminal prosecution related to recovered memory treatment she had provided her patient. Together, those two criminal prosecutions represent a new wave of legal actions involving the controversial theory of recovered memories.

1. See FMSF Brief Bank #176 and *FMSF Newsletter* December 1997.

**Missouri Hypnotherapist Sentenced**State of Missouri v. Geraldine Lamb, Thomas Lipsitz, Circuit
Ct., St. Louis Co., Missouri, No. ____ [2]

On June 26, an unlicensed Missouri hypnotherapist was sentenced to 30 months in state prison following a plea bargain. In April 1998, Geraldine A. Lamb had pleaded guilty to two counts of insurance fraud and one misdemeanor count of practicing psychology without a license. In her plea bargain, the felony charges that included "implanting" false memories were dropped.

Two psychologists who practiced in the counseling center Lamb founded, were charged with allowing Lamb to use their names on fraudulent bills submitted to insurance companies. Both pleaded guilty to misdemeanors. They were placed on probation and ordered to make restitution.

The indictment, originally handed up in April 1996, described how Lamb used undue influence to convince her client that she had been ritually abused, that she must cease all contact with her family, and that she must go on disability in order to get well.

2. See FMSF Brief Bank #121 and *FMSF Newsletter* June 1996.

Controversial Psychiatrist Faces Loss of License
Illinois Department of Professional Regulation v. Braun, No.
1998-10343-01 [3]

The Illinois Department of Professional Regulation issued a nine-count complaint outlining how, according to officials, Chicago psychiatrist Bennett Braun nearly destroyed the lives of a family he treated during the late 1980s. The complaint is the first step in the state agency's move to strip Dr. Braun of his medical license. It alleges gross negligence; dishonorable, unethical and unprofessional conduct; making false or misleading statements; and improper prescription of controlled substances.

According to Thomas Glasgow, chief of medical prosecutions for the Department, Braun used irresponsible combinations of Halcion, Xanax, sedatives, hypnotic psychotropic drugs, and prescribed Inderal, a blood pressure drug, at levels "that weren't even animal-tested at the time." Glasgow is quoted as saying, "[Braun] misused the course of treatment of multiple-personality disorder the way a surgeon misuses a knife. . . The problem here is that someone with an inordinate amount of trust, who was caring for extremely fragile and susceptible psychiatric patients, misused both his prestige and his medical ability."

Through conferences, videotapes and seminars, Braun, 58, has helped train many of those now treating multiple-personality disorder around the country.

A preliminary hearing before a Department of Professional Regulation administrative judge is scheduled for September 28. Braun's attorney, Harvey Harris, declined to comment other than to say he believed most of the sensational press coverage surrounding the case to be false.

According to the *Chicago Daily Law Bulletin* (8/13/98), Dr. Braun has been sued by five former patients. Four of the suits were filed in the last 3 years in Cook County Circuit Court, Illinois and one was filed this year in the U.S. District Court in Illinois. While details of the allegations vary, the suits contend that Braun misdiagnosed his patients as having multiple personalities and dredged up false memories that included accounts of murder, incest, rape, satanic worship, human sacrifice or other traumatizing events. Two of the suits have been settled without admission of liability on the part of Braun, while the others are pending. Last October, Braun and Rush-Presbyterian paid \$10.6 million to Burgus to settle a civil lawsuit against them. The amount is among the highest ever in a false memory case. [4]

3. See FMSF Brief Bank #203 for copy of Complaint. See also C. Grumman, *Chicago Tribune*, 8/13/98

4. See FMSF Newsletter November and December 1997.

"I think by and large, the professional and licensee organizations have not been very good at policing their own in this field. That is one of the primary reasons why the legal field has entered into the fray."
Attorney Skip Simpson of Dallas

Minnesota Therapist Censured for Mixing Beliefs and Practice M. Lerner, *Star Tribune*, (7/14/98)

The Minnesota Board of Psychology reprimanded Thomas Heyer, a Minnesota psychologist, in part for allowing his belief in "evil spirits" to inappropriately influence his treatment of patients with multiple personalities. Under the consent decree, Heyer agreed to stop treating patients with multiple personalities or dissociative disorders. He is also restricted to practicing under the supervision of another psychologist and must take a course in proper professional conduct.

Heyer admitted to the board that he engaged in "unprofessional conduct" while treating two patients. He admitted treating both of them at his home and admitted talking to them about satanic ritual abuse, which he believes can cause multiple-personality disorders.



Psychiatric Malpractice Trial Ends Two Weeks Early Greene v. Charter Pines Hospital, Wallace, Timmons, et al., Superior Court, Mecklenburg, NC, No. 96-CVS-5235 [5]

On July 5th, a psychiatric malpractice trial involving false memories began in North Carolina. Plaintiff Susan Greene sued her former treating psychiatrist, psychologist, and a hospital for medical malpractice, intentional and negligent infliction of emotional distress and fraud. Closing arguments were moved forward two weeks to August 17 after several defense experts failed to appear.

Greene is represented by Robert Dugan of Ashville and R. Christopher Barden of Salt Lake City. Plaintiff's experts include George Ganaway, M.D., August Piper, Jr., M.D., Keith Horton, M.D., Richard Ofshe, Ph.D., Elizabeth Loftus, Ph.D., and William Grove, Ph.D.

The defense began its presentations August 4th. Witnesses for defendant psychiatrist J.W. Scott Wallace are Seymour Halleck, M.D., John Reckless, M.D., and Joseph Weiss, M.D. Witnesses for defendant psychologist Daphne Timmons include Judith Armstrong, Ph.D., and Tom Guthiel, M.D. Five announced defense expert witnesses failed to appear: Daniel Brown, Ph.D., Doug Jacobs, M.D., John McIntyre, M.D., Richard Lowenstein, M.D., and John Gunderson, M.D.

Greene originally sought help from Timmons to deal with an eating disorder. Timmons reportedly told Greene she believed her to be a victim of childhood sexual abuse and that she suffered from multiple personalities. Any resistance from Greene was labeled as part of the illness and was punished with threats of abandonment, endless mental illness, and confinement in a state mental hospital.

In an attempt to "revive" memories of abuse, the treatment included the use of sodium amytal interviews, hypnosis, guided imagery, and role-playing exercises in which

Wallace portrayed a kidnapping and murder and sometimes tied Greene up with rope, touched her, kissed her, and held a toy gun to her head. She was not informed of the hazards of such treatment. Instead she was told that while under hypnosis and sodium amytal she had revealed a long history of sexual and physical abuse at the hands of numerous people.

As a result of these methods, Greene was hospitalized on numerous occasions and became addicted to the medications prescribed for her. Greene was told that she could never recover without accusing her relatives and numerous other individuals of sexual molestation. As Greene tried to follow her therapist's demands to remember more incidents of abuse, she became more depressed and anxious, which ultimately caused her to withdraw from college.

We have been informed that in North Carolina, if the jury assigns any portion of the responsibility to the plaintiff in a malpractice case, they do not have to make any award to the plaintiff.

5. See FMSF Brief Bank #199.



Settlement Negotiations Underway in Pennsylvania Psychiatric Malpractice Suit Marietti, et al. v. Kluff, Dissociative Disorders Program and Institute of the Pennsylvania Hospital, Ct. of Common Pleas, Phila. Co., Penn., No. 9509-02260 [6]

A psychiatric malpractice trial against Richard Kluff, M.D. and the Institute of Pennsylvania Hospital began June 26th in Philadelphia. After two days of testimony in which Nancy Marietti described her first weeks of treatment under Kluff's care, the judge dismissed the jury, telling them that a settlement had been reached. At the time we went to press, no announcement as to the details of the settlement had been made by either of the parties.

Nancy Marietti is represented by James L. Griffith of Philadelphia and Richard Harrington of San Francisco.

6. See Brief Bank #192 and *FMSF Newsletter* July 1998. The Complaint names Nancy Marietti and her parents as plaintiffs. The July 1998 *FMSF Newsletter* mistakenly reported Nancy's husband as a plaintiff.



All Defendants Settle in Illinois Malpractice Suit Shanley v. Braun, et al., U.S. Dist. Court, Ill., No. 95 C 6589.

In December 1997, a U.S. District Court rejected a motion to dismiss a psychiatric malpractice claim brought by Mary Shanley against her former psychiatrist Bennett Braun and 17 other individual and corporate mental health care providers in the Chicago area.^[7]

Since then, all parties have amicably resolved their differences and the case has been settled for a confidential amount.

Mary Shanley was represented by Zachary M. Bravos

of Wheaton Illinois. Mr. Bravos also informed us that the Illinois Department of Children and Family Services, after a review of the evidence, has voluntarily agreed to remove Mary Shanley's name from the state registry of "indicated" child abusers.

7. *Shanley v. Braun, et al.*, 1997 U.S. Dist. LEXIS 20024, Memorandum Opinion and Order, docketed Dec. 10, 1997. At the time of the December 1997 decision, defendants included Bennett Braun, M.D., Dale Giolas, M.D., Forest Health System, Inc., Forest Hospital, Robert J. Simandl, Elaine Shepp, A.C.S.W. and David McNeil, M.D. Several defendants including Karen Gernaey, Rush North Shore Hospital, Roberta Sachs, Raymond Kozial and Frank Leavitt had previously settled out-of-court. See also *FMSF Newsletter*, March 1998 and FMSF Brief Bank #42.



Editor's Note: Two state appellate courts recently considered the application of statutes of limitations in therapeutic malpractice cases. Earlier decisions in other jurisdictions have recognized the particular difficulties patients receiving so-called Recovered Memory Therapy may have in understanding their injuries.¹⁸¹

8. See, e.g., *Shanley v. Braun et al.*, 1997 U.S. Dist. LEXIS 20024, Memorandum Opinion and Order dated Dec. 10, 1997; *Lujan v. Mansmann, et al.*, 956 F. Supp. 1218 (E.D. Pa., 1997); *Lujan v. Mansmann, et al.*, 1997 U.S. Dist. LEXIS 14987.

Georgia Appeals Court Stands Firm on Deadline for Patients to Accuse Therapists of Inducing False Memories *Engstrom v. Kohout, Vargas v. Kohout, Cobiella v. Kohout*, 1998 Ga. App. LEXIS 995, July 15, 1998.¹⁹¹

Georgia Court of Appeals refused to give a psychiatric malpractice claim any extension on the statute of limitations. It rejected plaintiff's argument that the two-year clock on her malpractice suit should have started only after she changed therapists and realized her problem. The decision, however, does not affect plaintiff Kim Kohout's claim against her primary treating therapist, Donna Ulrici. That claim, which was not on appeal, is expected to go to trial.

In her suit against several therapists and medical institutions, Kohout claimed she was brainwashed through hypnosis and suggestive techniques into believing she remembered sexual and Satanic ritual abuse from her childhood and suffered from MPD. Her alleged memories grew increasingly disturbing and bizarre, including animal torture, being stabbed by her mother and being buried alive in a coffin. She didn't realize the nature and extent of her injuries from the false memories, Kohout alleged, until she left treatment and began therapy elsewhere in May 1995, six months before the suit was filed.

The appellate panel found that the misdiagnosis, not Kohout's later discovery of a proper diagnosis, was the injury. Furthermore, the court concluded that "plaintiff knew the facts of her past" and chose to believe her therapists' opinion and allow treatment to continue. Though she later came to believe their opinion was wrong, both of her views, the court said, "were based upon the same knowledge in her possession, but were interpreted in different ways."

The court also rejected Kohout's fraud claim, which would have tolled the running of the statute. The court found no evidence that the defendants knew they had misdiagnosed the plaintiff before the suit or intended to conceal anything that would give Kohout a cause of action.

Kohout's lawyers have filed a petition for *certiorari*, seeking to have the case reviewed by the Georgia Supreme Court. Kohout is represented by Christopher Yetka, of Minneapolis and by Charles Goetz of Atlanta.

9. See FMSF Brief Bank #201.



New York Court Holds Psychologists Are Subject to Longer Limitations *Karasek v. LaJoie, et al.*, 1998 N.Y.

LEXIS 1837, July 7, 1998

In a decision interpreting the New York statute of limitations for malpractice cases, a New York Court of Appeals held that the services provided by mental health professionals who do not have medical training are not "medical" services prescribed under the New York medical malpractice statute of limitations. The services fall under the longer three-year statute of limitations for professional malpractice. The court, therefore, denied defense motions to dismiss a malpractice claim against a psychologist as time barred.

The plaintiff in this case alleged that her former treating therapists had negligently misdiagnosed her as having MPD even though she had no prior history of mental illness. She claimed that subsequent treatment, including hypnosis, caused serious emotional harm so that she ceased to function as a homemaker and artist.

The court recognized that there are similarities in the methods used by psychiatrists and other mental health professionals but also noted several differences. For example, only psychiatrists can prescribe psychotropic drugs. Non-physician professionals may or may not have any training in somatic disease. In addition, the court noted, diverse professionals ranging from psychiatrists to faith healers diagnose and treat somatic ailments. "Surely, not all diagnostic and treatment activities undertaken by this range of practitioners are properly classified as 'medical,'" the court wrote. The court concluded that only the element of medical training could distinguish among the mental health services provided by various professionals.



NEW PSYCHIATRIC MALPRACTICE SUITS FILED

Illinois: A psychiatric malpractice suit was filed recently in Cook County Illinois against Bennett Braun, M.D., Roberta Sachs, Ph.D., Rush-Presbyterian St. Luke's Medical Center, and Corydon Hammond, Ph.D. The plaintiff, who had been hospitalized continuously for four years, is represented by Zachary Bravos of Wheaton Illinois and Todd Smith of Chicago.

Oregon: Linton v. Carr and Marrs, Circuit Court, Multnomah Co., Oregon, No. 9807-05115. ^[10] In July 1998, an Oregon man sued his former treating clinical psychologist Sophia Carr and social worker Robert Marrs for the misdiagnosis of MPD and the use of suggestive techniques to "recover" supposedly repressed memories of traumatic events.

The Complaint alleges that techniques including hypnosis, journaling, dream work, guided imagery, and Eye Movement Desensitization and Reprocessing, caused Plaintiff to experience the images and feelings associated with the imagined trauma as if they were real. They also caused Plaintiff to simulate multiple personalities and to become increasingly dependent on Carr. The Complaint states that defendants failed to obtain informed consent, to consider less pathological diagnoses, or to recognize and control the effects of her personal beliefs in treating plaintiff.

According to the Complaint, Carr believed herself to be a victim of a Satanic cult and that she herself had MPD. She reportedly told her client that this cult created MPD in its victims so that the cult could program them to carry out the cult's work without conscious knowledge. In 1998, the Board of Psychologist Examiners recommended that Carr's license be revoked for ethical violations in connection with her work with another patient who was similarly misdiagnosed as having multiple personalities and had acquired false memories of past trauma.

Plaintiff is represented by J. Michael Dwyer of Portland.

10. See Brief Bank #200. See also Eultz v. Carr, et al., Circuit Ct. Multnomah Co., Oregon, No. 9506-04080.

Pennsylvania: Gray v. Powers, Philhaven Hospital, Lancaster Co. Ct., Pennsylvania, No. _____. In a Complaint filed August 14, plaintiff Rose Gray claims that she became suicidal and severed ties with her husband and family after her treating psychiatrist Stephen Powers told her she had been victimized by the cult as a child. Exorcism, hypnotism, and drugs were the prescribed treatments during a decade of therapy, she said. The Complaint states that "Powers told [Mrs. Gray] that she had recalled, under hypnosis, that she had attended meetings and ceremonies which involved killing babies, drinking their blood and eating their hearts, and that a sex orgy would take place afterwards."

Plaintiff is represented by Joseph Rizzo of Darby, Pennsylvania and Skip Simpson of Dallas.

New York: O'Brien, J., *The Post-Standard* (Syracuse, NY), 3/19/98 A malpractice suit recently filed in Monroe County, New York, claims that a psychotherapist brainwashed a patient into believing she was a child victim of sexual

abuse. Stephanie Brigham now says her therapist, Paul Pickett had nothing to substantiate the memories he planted.

Brigham said she went to Pickett in 1992 for treatment of anxiety and insomnia. Within two years, she said, Pickett rewrote her past. The therapy produced memories that she had been sexually abused by her mother and father. Pickett told her she was the victim of a "Manson family" upbringing, Brigham said. Brigham is convinced now those memories were false.

In the lawsuit, Brigham said she made allegations against her parents at Pickett's urging, and under his threat of having her daughter taken away from her. She accuses Pickett of planting the false memories under hypnosis because he was bent on making her dependent on him and no one else. She was told she should come to his office daily for up to seven hours at a time and separate from family and friends as part of an "experiment."

Stephanie Brigham's parents and her daughter are also plaintiffs in her lawsuit. In addition to therapist Pickett, the suit names the agency Pickett works for, Synchronicity Counseling Services, and its director John Carnevale as defendants.

Texas: Tyo v. Ross Mark H. Iola of Dallas has filed suit against Colin A. Ross, M.D. on behalf of Martha Ann Tyo. Details in October.



THIRD-PARTY SUITS

**Illinois Supreme Court Bars Father from Suing
Therapist in Repressed Memory Case** Doe v. McKay,
1009 Ill. LEXIS 913, dated June 18, 1998. ^[11]

In June 1998, the Illinois Supreme Court affirmed a trial court's dismissal of a third party claim by a father that his daughter's therapist was guilty of negligence and intentional interference with a family relationship. The Complaint states that during several counseling sessions attended by plaintiff, his daughter, and defendant psychologist Bobbie McKay, McKay told plaintiff that his daughter's memories of alleged abuse had been repressed until they were retrieved during therapy. McKay also suggested that plaintiff had repressed his own memories of the abuse and that he might harm his daughter further. The plaintiff denied that he ever sexually abused his daughter. The Illinois Supreme Court held that the therapist owed a duty to the daughter, but not to the non-patient third party. Counts based on plaintiff's allegations that he himself was a patient of McKay remain pending; they were not at issue in the present appeal.

The court discussed the basis for a negligence claim: a complainant must allege facts that are sufficient to show the existence of a duty, and an injury to the plaintiff proximately caused by the breach. In deciding whether a duty exists in

a particular case, a court will consider the foreseeability of the plaintiff's injury, the likelihood of the occurrence, the magnitude of the burden of guarding against it, and the consequences of placing that burden on the defendant.

The court expressed concern that allowing this action would improperly enlarge physicians' duty of care, that recognition of the plaintiff's action could be inconsistent with the therapist's duty of confidentiality to his or her patient, and that the injury complained of was non-physical and resulted from decisions made by the daughter.¹² In addition, the Illinois Supreme Court rejected application of the concept of "transferred negligence" which the Illinois appellate court had applied.¹³

The Illinois Supreme Court also held that no monetary damages can be recovered for loss of the society of a child unless the child is dead. In effect, this says that someone could kidnap or interfere with an Illinois family without repercussions.

In a strongly worded dissent, Justice Harrington stated that the majority opinion fails to see "what this case is about at all." The majority's goal to protect medical providers from liability to some indeterminate class of nonpatient third parties is misplaced, he wrote. In this case, the plaintiff is not a "random member of the general public." Plaintiff was a relative of the patient, was accused of sexual abuse, and was used as a tool in the plaintiff's treatment program. The therapist specifically arranged to have him join the patient's therapy sessions and his injury "was the product of a failed course of treatment formulated by a mental health professional." Concerns about compromising patient confidentiality make no sense, the dissent wrote, where the therapist chose to make that third party an integral part of a patient's treatment and did so with the patient's consent: "Divulging the patient's complaints to John Doe was, in fact, the very foundation of the therapist's treatment plan."

Plaintiff's attorney Zachary Bravos, of Wheaton Illinois, said he intends to submit a petition for reconsideration.

11. See FMSF Brief Bank #46.

12. For a discussion of these and related issues, see FMSF Publications # (all 3rd party amicus briefs), and FMSF Brief Bank # 170.

13. See Doe v. McKay, 286 Ill. App.3d 1020.

"The damage that John Doe [an accused father] allegedly sustained as a result [of defendant therapist's actions] was foreseeable by any meaningful standard. The likelihood of injury was great, the burden of guarding against that injury was slight, and there would be no significant adverse consequences from placing that burden on the therapist."

Dissenting Opinion, Doe v. McKay, Illinois Supreme Court.

Illinois Appellate Court Remands Case; Trial Court Must Determine Whether Repression is Scientifically Recognized Clay v. Kuhl, 1998 Ill. App. LEXIS 414, 6/22/98.

In June 1998, an Illinois appellate court reversed dismissal of a delay-filed sexual abuse claim and remanded the matter back to the trial court for a determination of the reason for the plaintiff's alleged memory loss. The plaintiff, a 28-year-old woman, claimed she had been sexually molested repeatedly by a priest who worked at a Catholic elementary school she attended years earlier. Plaintiff stated she had no memory of the events until 1995, but did not offer a reason for her memory loss.

The appellate court noted that several Illinois courts have held that the discovery rule applies to childhood sexual abuse cases where the plaintiff repressed her memory of the abuse. The court also noted that the validity of repressed memories has been found to be "both controversial and of suspect nature," primarily because of the lack of independent verification of repressed memory claims.

The court ruled that, as a matter of law, mere forgetfulness cannot constitute sufficient ground to toll the statute. Allowing plaintiffs who claim they did not remember being injured until shortly before filing to escape the statutory limitation period, would, in effect, allow an unlimited time to sue. If, on the other hand, the court wrote, the plaintiff's intention is to rely on a psychological condition such as repressed memories to toll the statute of limitation, she is obligated to plead the condition with sufficient specificity to advise the defendants of the alleged basis on which the Illinois statute (13-202.2) applies. "It then would be for the trial court to determine, as a matter of law, whether such a condition is a scientifically recognized condition that would prevent the plaintiff from reasonably discovering the abuse," the court wrote.

Early in August, the defendant petitioned the Illinois Supreme Court to clarify the appellate ruling as to whether the common-law discovery rule applies to delay the statute of limitations on claims of childhood sexual abuse. Specifically the court is asked to decide whether childhood sexual abuse constitutes a "sudden and traumatic event" that places the victim on immediate notice of any resulting injuries.



West Virginia Supreme Court Dismisses Repressed Memory Claim; Declines to Apply Discovery Rule Albright v. White, 1998 W.Va LEXIS 60, June 22, 1998.

In June 1998, the Supreme Court of West Virginia affirmed dismissal of a repressed memory claim as time barred. The court held that the cause of action accrued at the time the alleged incident occurred and not, as the plaintiff argued, at the time of "discovery."

Plaintiff, a 38-year-old man, alleged that it was not until he entered therapy in 1994 that he was able to recall an incident of sexual contact by an Episcopal priest over 25 years earlier. He claimed that defendant's conduct caused him to repress any memories of the sexual abuse.

The West Virginia Supreme Court held that under the state statute (55-1-15), plaintiff was required to file his lawsuit not later than 2 years after reaching the age of majority, or under the most liberal construction of the facts in plaintiff's favor, not later than 20 years after the date on which his injury occurred, that date being in 1989. Since the Complaint was not filed until 1996, his suit, the court held, is time barred by statute. The court held that the plain language of the statute clearly prohibits the application of the discovery rule to extend statutory filing periods. In addition, the court noted the "discovery rule" is to be applied "with great circumspection" on a case-by-case basis only where plaintiff shows he was prevented from knowing of the claim at the time of the injury.

The court specifically declined to address or otherwise resolve whether a plaintiff's claim of repressed memory may validate a cause of action. The court reserved that discussion for a more factually and legally appropriate case.



Utah Supreme Court Dismissed Repressed Memory Claim *Burkholtz v. Joyce*, 1998 Utah LEXIS 58, July 31, '98.

The Utah Supreme Court recently held that the discovery rule does not apply where the plaintiff, at some point during the limitations period, has knowledge of the facts underlying his cause of action. The court referred to an "unbroken line of cases" dealing with the discovery rule which held that the statute of limitations may be tolled (extended) only where the Plaintiff did not know and could not reasonably have discovered the facts underlying the cause of action.

Although plaintiff in this case claimed that due to repression and dissociation, he was never really aware of the alleged sexual abuse by a former teacher 10 years earlier, a U.S. District Court determined that plaintiff was aware of the fact of his abuse for a period after he turned 18. Following that factual determination, the federal court certified a question for the Utah Supreme Court's ruling on whether the statute of limitations is tolled when plaintiff's knowledge of the abuse is interrupted by periods of psychological repression when he is unaware of such facts.



Wreck Revived Abuse Memories *Pokrifchak v. Weinstein*, 1998 Wash App. LEXIS 898, June 9, 1998, unpublished ⁽¹⁴⁾

In 1995, a 47-year-old woman sued the teenage driver who caused a traffic accident in which she was injured. The woman claimed that during physical therapy required by

the accident, she recovered memories of childhood sexual abuse by her father and that those memories led to protracted emotional problems. She sued the driver (and the driver's parents) for the emotional problems related to the recovered memories caused by the therapy required because of the accident. The trial court dismissed these claims and the woman appealed. In June 1998, a Washington State Appellate court affirmed partial summary judgment. Physical injuries from the collision and the emotional response to those injuries are "clearly within the boundaries of legal causation," the court held. However, there is no sound policy for extending liability to the effects of "preexisting conditions" traceable to the earlier criminal acts of another party.

14. This case and a similar claim filed in Massachusetts were reported in the *FMSF Newsletter* Jan. 1996.



Arizona Court Finds Repressed Memory Testimony Inadmissible *Logerquist v. Danforth*, Superior Court, Maricopa Co., Arizona, No. CV 92-16309 ⁽¹⁵⁾

Following an evidentiary hearing as instructed by the Arizona Court of Appeals, an Arizona Superior Court concluded that "the theories advanced by Plaintiff's experts are not generally accepted in the relevant scientific community of trauma memory researchers." Therefore, the court ordered the exclusion of "expert testimony of Plaintiff's alleged repressed memory, and Plaintiff's theory that such evidence can be recalled with accuracy."

Plaintiff filed a claim almost 20 years after the alleged sexual assaults occurred. She based her claim on a series of "flashbacks" that she claims to have experienced while watching television. The court conducted a *Frye* hearing [16] to determine the admissibility of expert testimony regarding repression of memory and whether this memory can be recalled with accuracy.

15. See *FMSF* Brief Bank #202 for full text of ruling. See also *Logerquist v. Danforth*, 932 P.2d 281 (Ariz. App. 1996).

16. *Frye v. United States*, 293 F.2d 1013 (D.C. Cir. 1923). The purpose of a *Frye* evidentiary hearing is to determine whether the scientific principles advanced and used as a basis for expert testimony are generally accepted in the relevant scientific community. The court determined that the relevant scientific community includes both basic researchers and researchers with clinical training and/or experience.



Update: Souza Motion for New Trial Denied

On July 7, Massachusetts Judge Elizabeth Dolan denied a motion for a new trial but did not say whether the Souzas, both 66 and under house arrest, must go to prison. Kevin Nixon, attorney for the Souzas said he has appealed Dolan's decision. Pending a decision from the appeals court, the Souzas are expected to remain at home under house arrest.

REFLECTIONS OF A DISSIDENT PSYCHOLOGIST

Tana Dineen

Editor's note: An updated and expanded second edition of Manufacturing Victims: What The Psychology Industry Is Doing To People has been released. It contains fresh examples of phoney maladies being marketed, phantom cures being promoted and self-protective maneuvers being taken. It provides more "meat," for sensible people who will find it helpful in their own efforts to purge the Justice System, Health Care, Education, Religion and their own personal lives of the influence of junk psychology. What follows is Dr. Dineen's account of some of the reactions to her book.

Many years ago the distinguished MIT linguist/activist Noam Chomsky said: "One waits in vain for psychologists to state the limits of their knowledge." A letter he wrote to me in April of this year ended with the comment: "I'm sure we'll continue to 'wait in vain.' Too many careers at stake!"

I waited a very long time—almost three decades, before abandoning my own career as a clinical psychologist. My first teacher in the field, the renowned McGill University neuropsychologist, Donald Hebb, insisted that psychology must be "more than common sense" and that, as psychologists, we have an obligation to subject our opinions to scientific scrutiny and to make a clear distinction between theories and findings. Sadly, his warning has been largely ignored. The professional organizations which claim to protect the public, fail to insist on scientific scrutiny; dangerous methods are sanctioned, and untested therapies, dubious "expert opinions," and utterly absurd diagnoses go unchallenged. I have seen too much harm inflicted on people by virtue of this negligence; so, I find myself in this strange role of trying to curb the pervasive influence of my own chosen profession.

When the first (1996) edition of *Manufacturing Victims* appeared, Beth Loftus called the book "dynamite" and Dr. Laura, declaring herself my "fan," encouraged her listeners to read it. It was

an "expose," an admittedly sweeping and brutal attack, which identified recovered memory therapy as just the tip of an iceberg. A seriously researched book, with close to 1,000 endnotes, it was my apology for years of having bitten my lip. I hoped that it would be useful to people in raising questions, making arguments, winning legal cases, facing moral dilemmas and getting on with life. I was not entirely prepared for the volatile reactions from within the Psychology Industry. The book was instantly dismissed as "a conspiracy book" by the executive director of the British Columbia Psychological Association; a member of the Finance Committee of the American Psychological Association called it "the Ripley's Believe-It-Or-Not Of Psychology;" the 1997 President of the Canadian Psychological Association, not even having seen the book, wrote a letter to an Ottawa newspaper condemning me for my "unsubstantiated opinions." A psychologist in Vancouver, who had never met me, diagnosed me as suffering from "burnout," and another, who knew nothing about my life, publicly stated that I was lucky to have never experienced a trauma for which I needed a psychologist's help.

A clinical psychologist in a small town in Ontario went even further. After watching a national television show on which I cautioned consumers about the perils of trusting psychologists, he lodged a complaint with my licensing board. And, believe-it-or-not, they took his complaint seriously. For 16 months I and my book were under investigation as possible "threats to the television-watching public." Finally, in a written decision in June, 1998, the Complaints Committee acknowledged that it found no violations of standards and it affirmed my status as a "psychologist." In dismissing the complaint, the College conceded that it was bound by the Canadian Charter of Rights, which guarantees everyone the fundamental freedoms of thought, belief, opinion and expression, and it ascribed a new title to me, that of "social critic."

While I tended to shrug off these displays of self-interest, intolerance and arrogance, I have been heartened by signs that some people, at least, are making good use of the book. I have heard from psychology students who have begun to challenge what they are being taught and from retired colleagues who regret not having tried harder to fight the radical and overtly political influences. I have heard from men who are serving prison terms in cases where "reasonable doubt" would have prevailed had psychological testimony not carried such weight. And I have heard, as well, from criminal lawyers who are defending and appealing such cases and from civil lawyers who are working to make psychologists accountable for their actions. Skip Simpson, when he first phoned me from Dallas, had just used my book to frame the closing argument in one of those cases which yielded a 5.8 million dollar settlement.

When personal lives can be torn apart by virtue of professionally sanctioned misinformation, it is, I believe, unethical for anyone within that profession to remain silent.

Last summer, when an Ottawa journalist called me a renegade and gave me the title "The Dissident Psychologist," I laughed. However, the issues are not funny. And, sadly, recovered memory therapy is only one of the many psychological products about which consumers deserve to be warned. When personal lives can be torn apart by virtue of professionally sanctioned misinformation, it is, I believe, unethical for anyone within that profession to remain silent.

Author's note: Since books can only be printed every few years or more, I have set up a frequently updated and extensive website which provides information both on the book and on speeches and newspaper columns, as well as current information on related issues. I welcome comments, reactions, and questions. The web site address is:

<http://scholefieldhouse.com/mv/>

When bad men combine, the good must associate; else they will fall one by one, an unpitied sacrifice in a contemptible struggle.

Edmund Burke Vol. i. p. 526.
Thoughts on the Cause of the Present Discontent

Montana: A few can make a difference. I am enclosing a copy of a letter announcing the removal of the book entitled *Confronting Abuse: An LDS Perspective on Understanding and Healing Emotional, Physical, Sexual, Psychological and Spiritual Abuse.*

This book has been used extensively throughout the L.D.S. church in teaching Priesthood Leaders how to deal with those who report abuse. Several chapters contained erroneous information regarding recovered memories and satanic ritual abuse. Two of our five daughters and their Priesthood Leaders were influenced by the content of the chapters.

Through research we found that Deseret Book Store in Salt Lake City uses a formal complaint process when their readers become concerned about the content of a book.

We initiated a write-in campaign using the FMSF Newsletter to find other L.D.S. families who were also adversely influenced by the book. Many families across the nation used the complaint process. I do not know the exact number of complaints that were mailed, but I am sure it was less than 50. Those complaints led to a review and ultimately a withdrawal of the book from distribution and sale immediately.

I am very grateful for those at Deseret Books who listened to their readers, conducted their own research, and reached the conclusion to withdraw that book.

Frustrated Families

Some families are growing so frustrated at the lack of professional action to stop dangerous practices that they are becoming activists. Frustrated families handed out information at a seminar in San Francisco in July to alert attendees that the speaker advocates separation from family and that he uses mind-altering hypnotic-like techniques in his program. Also in July, frustrated families in Chicago protested outside a conference featuring a talk by an author of *Courage to Heal*, and several talks about satanic ritual abuse and international CIA conspiracies. They protested, they told us, because the Attorney General of Illinois opened this conference thus conferring credibility on discredited and dangerous ideas.

Judith Herman, M.D. is scheduled to give plenary addresses on October 7 at conferences sponsored by the University of Wisconsin in Madison and by Northwestern University in Evanston. Several families in those locations say they are asking university officials to consider the appropriateness of sponsoring a person who paid \$30,000 in settlement of Drug Enforcement Administration civil charges because she failed to keep records of controlled substances missing from her lab.⁽¹⁾

1 PR Newswire Association, July 5, 1995, *Mental Health Law Reporter*, April 1995

One mother whose daughter recovered "repressed memories" of abuse while attending Northwestern University would like help to encourage that university to present a program that presents the dangers of recovered memory to balance the scheduled October 7 event.

Contact Mattie: 847-885-9515

Send your ideas to
Katie Spanuella
c/o FMSF

Unexpected Problem

We have an unexpected problem. Our daughter accused us and her two grandfathers in January 1992. We were in despair until we found out about false memory syndrome from television. Our grandson was living with us at the time and he and his dad both commented, "That's mom's problem."

Our daughter contacted us about five years after that horrendous time and she resumed being part of the family. But it didn't last. It was another year before she returned and now seems back to stay.

Our problem: Our loyal family supporters, all of them, will *not* accept her—even with her apology letters and sincere regrets. We have forgiven. Why can't they? What can be done now, if anything?

A Mom



Time Will Take Care of That

The last meeting my wife and I had with our daughter involved a bitter exchange and an ultimatum in her therapist's office. We realized that there was no way we could talk with our daughter again until she came to her senses and recanted the false claims about us. I said I would not dignify her ravings by listening to them. That was December, 1991. For two years, she became more and more isolated from the rest of the family. But then to everyone's surprise, she started to return to others saying how she missed her family and what good times she remembered. She did this after severing her contact with the therapist.

I wanted to sue her therapist but believed that doing so might drive my daughter away from the family again. My wife and I desperately wanted her back but realized that her reunion with others in the family was a prerequisite to our resolving our differences with her. About this time, Foundation members were reporting success with the position that recanting was not essential to reunification and that recanting had taken place in some families

after they reunited.

My wife and I decided to write to our daughter and tell her how happy we were that she was involved with others in the family again. We told her that we were wrong when we gave her the ultimatum about retracting, something done in the heat of frustration, hurt, and anger. We told her we would be glad to discuss any of her accusations with her without preconditions under calm rational circumstances or, if she preferred, we didn't need to discuss anything.

We hoped that this would make her feel safe enough to return to us. We felt that she was beginning to realize that she had made a mistake and was searching for a way to come back in the face of guilt.

We were right! Though she has not recanted her charges verbally, her subsequent actions and our current relationships speak louder than actual words. We are often invited to her home for dinners, we are allowed to play and hold our granddaughter and she has stayed overnight at our home. My daughter and son-in-law are teaching our granddaughter to love us.

The other day I invited my daughter to offer a prayer on the lunch we were having. With tears running down her cheeks, she expressed her gratitude for us and her thankfulness for our being such good parents.

As experiences like these continue, we know that the day will come when we can discuss the terrible hurts and offenses of the past, but for now, the wonderful times we are having with her and her family are too precious to worry about requiring any apology. Time will take care of that.

A Dad



I'm Being Quiet

I've prayed daily for the FMSF and for our precious daughter to return to us. Finally, after six years she called and we started meeting on a regular basis. It was very touchy at first, but

things are getting easier. Through her six years in therapy, she has been to hell and back. After an eight-year marriage, she finally got pregnant only to have her husband leave her. Now she has a four-year old whom we met last week! It has been tearful. She has called everyone in our large family.

This change came about because my daughter attended a program in which she was told that she could not be all that she should be as long as things were left unresolved with her family. These words seemed to give her permission to return. She has not retracted. She says the accusations don't matter, and she wants her family back. I am being quiet, loving, and forgiving.

A Mom



No Common Ground

As our daughter's 50th birthday approaches, we are anguished that our family has no common ground on which to meet, much less celebrate. Over the past five years, the important occasions that bind a family have not been part of the fabric of her life—through her choice. Those of us affected by fully understand such heartache.

God bless this child

In all her fantasy and pain

Neither let her stray too far

Nor find her lonely pathway

blocked

Yesterday was Good—if she but knows.

A Mom



Hard-Liner

In response to Dr. Piper's request, put me down as a hard-liner. During the past several hundred years the Christian religion as well as other religions have preached forgiveness. Whatever you do that harms either yourself or your fellow human beings is wiped out if you simply say "I'm sorry." In recent years the mental health profession has gone even farther by saying "It isn't your fault; it is

because someone or something did bad things to you in the past."

As a result we have become a civilization that accepts no individual responsibility. We simply say "I'm sorry" or blame our transgressions on causes over which we had no control. I do not believe in punitive punishments, but I firmly believe that in forgiving, we also enable. The forgiven person can say "I got by with that, so I can do it again." We should love, encourage, and help the transgressors in every way possible, but we should not let them off the hook. They should be made aware of the wrong they have done and should only be reinstated as a caring human being after proving through kindness and service that they merit the honor.

A Dad



Make up Your Mind

We accused have to make up our minds what we really want. Do we want revenge or do we desire to have a normal relationship with our children and/or grandchildren. The first priority for me is a normal relationship with my children.

In July 1989 we got the fateful phone call. My daughter spoke of hypnosis. She said she could only heal if she did not talk to me or to anyone who supported me. I lost 35 pounds in 6 months. I tried to remember what I might have done. My wife divorced me. Other family members restrained me from suing my daughter's therapist. They said it would be self-defeating because if I won, my daughter would never speak to me.

In 1995 after participating in a therapy program promulgating forgiveness, I picked up the telephone and spoke to my daughter's answering machine. With perspiration running down my whole body, I asked for forgiveness for any harm I might have done to her. The next year my daughter was informed by family members that I had prostate cancer. My daughter

called. No mention was made of the years of silence.

I had remarried and my new wife restrained me from asking my daughter too many questions. Communication began, but it was very difficult to leave the slander unpunished. Communication grew a bit warmer.

By 1997, she came to visit. I hardly recognized her. She looked aged and battered. We talked about happenings before 1989 and the future that included her upcoming wedding. There were no apologies nor explanations. I told her that I would never forget the concentration camps in Germany, but that it was senseless to be bitter now. We have to learn to live with some experiences. I don't know if she understood my conception of the relationship between the Nazi atrocities and those of the implanted memory practitioners. They seemed to enjoy lunch and stayed for four hours.

The period between my daughter's visit and the wedding was nearly unbearable for me. Communications were sporadic and less than warm. Besides worries about my health I was concerned about what my daughter would do—from the best to the worst. I dreamed of going to Boston and being arrested for child rape. I had speeches prepared in defense of the accusations, as well as others recounting happy past events. My poor wife had to take the brunt of my nervous state of mind. E-mail exchanges and a few phone calls with my daughter cleared the air a little.

I had written a report on my visit to Germany in 1996. It included my impressions of the visit of the former concentration camp in Dachau. In the report I again compared the leaders of the Nazis with the bigshots of the recovered memory movement. After she requested it, I sent the unabridged report to my daughter. Her reaction was: Daddy, I didn't know that your English was so good. In another E-mail message she disclosed that she thanks her recovered memory therapist for a much better life. She could not have

hurt me more if she had stuck a knife in my back. During a later conversation I told her that she should concentrate on her upcoming marriage and that we could talk about unexplained questions after the wedding. She agreed.

The wedding was beautiful. But the problem is not solved when the victims of implanted memories talk to the accused again. It requires a lot of work and a tremendous amount of good will and patience on all sides.

May all families soon be peacefully re-united again.

A Dad

Life is Good Again

My husband and I are in the process of selling our family home in a community where we have lived for forty-one years. About a month ago, our four children came to look over and select furniture, lamps, etc. that they could use in their own homes. Our oldest son who had accused me of sexual abuse probably had as good a time as any of his siblings looking over items and recalling fun times. In retrospect had our son not been welcomed back into our family without an apology, that family day would have been very sad indeed dividing furniture by three rather than four.

We confirm and support the feelings expressed by Robert M. Koscielny in the July/August newsletter. He states, "This does not mean that the actions of the accused are accepted or condoned, but instead are set aside in the interest of restoring and repairing family relationships." Extending ourselves with love to our emotionally bruised son has proven to be very positive. He moves ahead in small steps each time we see him, and we would do nothing to upset that progress.

We don't know what the future holds for our son, but we are involved in his life again and with his wife and two children. We will not let our ideal, the wish for an apology, derail the progress we have made. We are focussing on the larger picture of a fam-

ily reunited.

I never thought that after eight years I could say this, but life is good and we are grateful.

A Mom

AREA CODE CHANGE?

PLEASE HELP US SAVE TIME TRYING TO CALL YOU!

IF YOUR AREA CODE HAS CHANGED, PLEASE LET US KNOW.

THANK YOU FOR HELPING US TO SERVE YOU BETTER.

ADDRESS CHANGE and SNOWBIRD ALERT!

PLEASE REMEMBER, WE NEED YOUR ADDRESS CHANGE EVERY TIME YOU MOVE. THANK YOU FOR HELPING US TO SERVE YOU BETTER.

The address of the web site maintained for FMSF by Patrick Fitzgerald is:
<http://advicom.net/~fitz/fmsf/>

ESTATE PLANNING

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

THE RUTHERFORD FAMILY SPEAKS TO FMSF FAMILIES

"This video helped me realize what my daughter went through!"

A Dad

Don't miss it.

Order form on last page.

STATE MEETINGS / NOTICES

Call persons listed for info & registration

EASTERN MISSOURI AND SOUTHERN ILLINOIS

Saturday, September 19, 1998 9 a.m. - 3 p.m.
St. Louis, Missouri

speakers: The Rutherford Family

Public and FMS family sessions

For information call Karen at 314-432-8789

PENNSYLVANIA

Saturday, September 12, 1998 1:00 - 4:00 P.M.

Family Meeting, Wayne, PA

Speaker: Pamela Freyd, Ph.D.

For more information call:

Jim or Jo: (610) 783-0396

MICHIGAN, OHIO, ILLINOIS, INDIANA, WISCONSIN, NORTHWESTERN WEST VIRGINIA AND WESTERN PENNSYLVANIA

"WE CAN MAKE A DIFFERENCE"
Stopping the Plague of False Memories

Saturday, October 3, 1998 Ramada Inn, Toledo, Ohio

Speakers:

Pamela Freyd, Ph.D.

Eleanor Goldstein

Sharla Kimmel

Chris Koronakos, Ph.D.

Dr. Paul Simpson

Nicole Bishop

For more informaton call:

Kalamazoo: Chris (616) 349-8978

Columbus: Carol (440) 888-7963

Ann Arbor: Martha (734) 439-4055

or (734) 439-8119

ILLINOIS

FALL MEETING

Sunday, October 18, 1998

DoubleTree Hotel, Glenview

1400 Milwaukee Ave. Chicago, Illinois 60025-1400

Keynote Speaker: Pamela Freyd, Ph.D.

For more information, call 847-803-9800

HOLD THESE DATES:

Southern California

Family Meeting:
November 7, 1998

Speakers:

Pamela Freyd, Ph.D.

Eleanor Goldstein

For more information call:

Cecilia: (310) 545-6064

Carole: (805) 967-8058

Skeptic Society Meeting:
November 8, 1988

Baxter Lecture Hall, California

Institute of Technology

Pasadena, CA

Speakers:

Pamela Freyd, Ph.D.

Eleanor Goldstein

For more information call:

(626) 794-3119

The Power of Suggestion,

A documentary video produced by Sue Inder
Aired on March 31, 1998.

The price is \$36.24 U.S. or \$47.55 Canadian

Pay to the order of: Shaw Cable

11 Penticton, 1372 Fairview Rd,

Penticton, BC, V2A 5Z8, Canada

Appearances by: Barry Beyerstein, Pamela Freyd, Roma Hart,
Michael Kenny, Elizabeth Loftus, Paul McHugh, Chuck
Noah, Richard Ofshe, Jim Pennington, and Stan Stevens.

SEARCHING...

for dramatic films to illustrate trends in a lecture/film presentation on "How Hollywood Has Treated Recovered Memories." All suggestions going back to the beginning of cinema are of interest. Please contact:

George Paul Csicsery

P.O. Box 2833

Oakland, CA 94618 USA

email: 75430.3310@compuserve.com

Exploring the Internet

A new web site of interest to FMSF Newsletter readers:

<http://www.StopBadTherapy.com/>

Useful information on this site:

- Phone numbers of professional regulatory boards in all 50 states.
- Links for e-mailing the American Psychiatric Association, the American Psychological Association, the American Medical Association, and the National Association of Social Workers.
- Lists of online and printed resources: links, articles, books, videos.
- Ideas for taking action.
- Retractor stories from *Victims of Memory*.
- A way to submit your own story for publication on the net.

CONTACTS & MEETINGS - UNITED STATES**ALASKA**

Kathleen (907) 337-7821

ARIZONABarbara (602) 924-0975;
854-0404 (fax)**ARKANSAS****Little Rock**

Al & Lela (870) 363-4368

CALIFORNIA**Sacramento - (quarterly)**Joanne & Gerald (916) 933-3655
Rudy (916) 443-4041**San Francisco & North Bay - (bi-MO)**Gideon (415) 389-0254 or
Charles 984-6626(am); 435-9618(pm)**East Bay Area - (bi-MO)**

Judy (510) 376-8221

South Bay Area - Last Sat. (bi-MO)Jack & Pat (408) 425-1430
3rd Sat. (bi-MO) @10am**Central Coast**

Carole (805) 967-8058

Central Orange County - 1st Fri. (MO) @ 7pm

Chris & Alan (714) 733-2925

Orange County - 3rd Sun. (MO) @ 6pm

Jerry & Eileen (909) 659-9636

Covina Area - 1st Mon. (MO) @ 7:30pm

Floyd & Libby (626) 330-2321

San Diego Area

Dee (619) 941-4816

COLORADO**Colorado Springs**

Doris (719) 488-9738

CONNECTICUT**S. New England - (bi-MO) Sept-May**Earl (203) 329-8365 or
Paul (203) 458-9173**FLORIDA****Dade/Broward**

Madeline (954) 966-4FMS

Boca/Delray - 2nd & 4th Thurs (MO) @ 1pm

Helen (407) 498-8684

Central Florida - Please call for mtg. time

John & Nancy (352) 750-5446

Tampa Bay Area

Bob & Janet (813) 856-7091

GEORGIA**Atlanta**

Wattie & Jill (770) 971-8917

HAWAII

Carolyn (808) 261-5716

ILLINOIS**Chicago & Suburbs - 1st Sun. (MO)**

Eileen (847) 985-7693

Liz & Roger (847) 827-1056

Joliet

Bill & Gayle (815) 467-6041

Rest of Illinois

Bryant & Lynn (309) 674-2767

INDIANA**Indiana Assn. for Responsible Mental Health Practices**Nickie (317) 471-0922; fax (317) 334-9839
Pat (219) 482-2847**IOWA****Des Moines - 2nd Sat. (MO) @ 11:30am Lunch**

Betty & Gayle (515) 270-6976

KANSAS**Kansas City - 2nd Sun. (MO)**

Pat (785) 738-4840

Jan (816) 931-1340

KENTUCKY**Louisville - Last Sun. (MO) @ 2pm**

Bob (502) 367-1838

LOUISIANA

Francine (318) 457-2022

MAINE**Bangor**

Irvine & Arlene (207) 942-8473

Freeport - 4th Sun. (MO)

Carolyn (207) 364-8891

MARYLAND**Ellicott City Area**

Margie (410) 750-8694

MASSACHUSETTS/NEW ENGLAND**Andover - 2nd Sun. (MO) @ 1pm**

Frank (978) 263-9795

MICHIGAN**Grand Rapids Area-Jenison - 1st Mon. (MO)**

Bill & Marge (616) 383-0382

Greater Detroit Area - 3rd Sun. (MO)

Nancy (248) 642-8077

Ann Arbor

Martha (734) 439-8119

MINNESOTA

Terry & Collette (507) 642-3630

Dan & Joan (612) 631-2247

MISSOURI***Kansas City - 2nd Sun. (MO)**

Pat 738-4840

Jan (816) 931-1340

St. Louis Area - 3rd Sun. (MO)

Karen (314) 432-8789

Mae (314) 837-1976

Springfield - 4th Sat. (MO) @ 12:30pm

Tom (417) 883-8617

Roxie (417) 781-2058

MONTANA

Lee & Avone (406) 443-3189

NEW JERSEY (SO.)

See Wayne, PA

NEW MEXICO**Albuquerque - 1st Sat. (MO) @ 1 pm****Southwest Room - Presbyterian Hospital**

Maggie (505) 662-7521 (after 6:30pm) or

Sy (505) 758-0726

NEW YORK**Westchester, Rockland, etc. - (bi-MO)**

Barbara (914) 761-3627

Upstate/Albany Area - (bi-MO)

Elaine (518) 399-5749

OHIO**Cleveland**

Bob & Carole (440) 888-7963

OKLAHOMA**Oklahoma City**

Dee (405) 942-0531

HJ (405) 755-3816

Rosemary (405) 439-2459

PENNSYLVANIA**Harrisburg**

Paul & Betty (717) 691-7660

Pittsburgh

Rick & Renee (412) 563-5616

Montrose

John (717) 278-2040

Wayne (Includes S. NJ) - 2nd Sat(MO)@ 1pm

Jim & Jo (610) 783-0396

TENNESSEE**Wed. (MO) @ 1pm**

Kate (615) 665-1160

TEXAS**Houston**

Jo or Beverly (713) 464-8970

El Paso

Mary Lou (915) 591-0271

UTAH

Keith (801) 467-0669

VERMONT

(bi-MO) Judith (802) 229-5154

VIRGINIA

Sue (703) 273-2343

WASHINGTON

Phil & Suzl (206) 364-1643

WEST VIRGINIA

Pat (304) 291-6448

WISCONSIN

Katie & Leo (414) 476-0285

Susanne & John (608) 427-3686

CONTACTS & MEETINGS - INTERNATIONAL**BRITISH COLUMBIA, CANADA****Vancouver & Mainland - Last Sat. (MO)**

@ 1- 4pm

Ruth (604) 925-1539

Victoria & Vancouver Island - 3rd Tues. (MO)

@ 7:30pm

John (250) 721-3219

MANITOBA, CANADA**Winnipeg**

Joan (204) 284-0118

ONTARIO, CANADA**London - 2nd Sun (bi-MO)**

Adriaan (519) 471-6338

Ottawa

Eileen (613) 836-3294

Toronto /N. York

Pat (416) 444-9078

Warkworth

Ethel (705) 924-2546

Burlington

Ken & Marina (905) 637-6030

Sudbury

Paula (705) 692-0600

QUEBEC, CANADA**Montreal**

Alain (514) 335-0863

St. André Est.

Mavis (450) 537-8187

AUSTRALIA

Irene (03) 9740 6930

ISRAEL

FMS ASSOCIATION fax-(972) 2-625-9282

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Task Force FMS of Werkgroep Fictieve

Herinneringen

Anna (31) 20-693-5692

NEW ZEALAND

Colleen (09) 416-7443

SWEDEN

Ake Moiler FAX (48) 431-217-90

UNITED KINGDOM

The British False Memory Society

Roger Scotford (44) 1225 868-682

(* - see the State Meetings List, page 17.
 Deadline for the October Newsletter is Sept. 16
 Meeting notices MUST be in writing and should be
 sent no later than two months prior to

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September 1, 1998

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Do you have access to e-mail? Send a message to pjf@cis.upenn.edu

If you wish to receive electronic versions of this newsletter and notices of radio and television broadcasts about FMS. All the message need say is "add to the FMS list". You'll also learn about joining the FMS-Research list: it distributes research materials such as news stories, court decisions and research articles. It would be useful, but not necessary, if you add your full name: all addresses and names will remain strictly confidential.

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FOUNDATION

FALSE MEMORY SYNDROME

3401 Market Street, Suite 130

Philadelphia, Pennsylvania 19104 - 3315

FORWARDING SERVICE REQUESTED.

Mail Order To:
FMSF Video
Rt. 1 Box 510
Burkeville, TX 75932

FMS FOUNDATION VIDEO TAPE ORDER FORM for "When Memories Lie....." *The Rutherford Family Speaks to Families*"

Ordered By:

Ship To:

DATE: / /

Please type or print information:

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	444	The Rutherford Family Speaks to Families	10.00	
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ADDITIONAL CONTRIBUTION				
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Allow two to three weeks for delivery. Make all checks payable to: FMS Foundation
If you have any questions concerning this order, call: Benton, 409-565-4480

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THANK YOU FOR YOUR INTEREST