Recovered Memories:
Shooting the Messenger (Revisited)

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First published 1998 by Karnac Books Ltd.

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CHAPTER ELEVEN
Recovered memories: shooting the messenger
Ashley Conway
Dr Ashley Conway Publications

Books

Dr Ashley Conway (2014). *A Short Book on Child Sexual Abuse (and how men can overcome the effects of it).* London: Short Books.

Dr Ashley Conway (2014). *A Short Book on Child Sexual Abuse (and how women can overcome the effects of it).* London: Short Books.

Dr Ashley Conway (2013). *A Short Book on Trauma and Post-Traumatic Stress Disorder (and how to overcome it).* London: Short Books.

Chapters


Letters


A discourse of disbelief?

US clinical psychologist Dr Ellen Lacter (who runs the website endtraumaheal.org) warns mental health professionals not to dismiss reports of persecution and unusual beliefs, since ‘some abusers propagate bizarre beliefs (e.g. alien abduction) in victims to make them feel non-credible and paranoid’ (Lacter & Lehmann, 2008). It is therefore disconcerting that Professor Christopher French (‘Close encounters of the psychological kind, 2013) does not mention the possibility that neglect, abuse and torture by primary carers in the first five years of a child’s life can help ‘uniquely and comprehensively’ account for the ‘findings’ he profiles. Sufferers of extreme abuse are bound to struggle with the DRM (Deno-Roediger-McDermott) false memory procedure that French mentions, and naturally report more dissociative symptoms. The Somatoform Dissociation Questionnaire (SDQ) features ‘I can’t see for a while (as if I am blind)’ and ‘I can’t hear for a while (as if I am deaf)’ (Van der Hart et al., 2006). Mental health professionals need to get to grips with such disclosures and recognize them as indicators of likely neglect and/or abuse by primary carers in early childhood.

Then consider memory amnesia, one of the five key indicators of dissociative identity disorder (formerly known as multiple personality disorder). This can manifest itself in ‘lost time’, biographical memory wipe-out and everyday memory problems. The SSEPS (Tasking broad scale) may be elevated when those with dissociative symptoms truthfully report memory issues. Clients may express worry about everyday memory issues, and poorer performance on memory task would logically follow. Dorothy et al. (2014) comprehensively debunk a lot of the ‘false memory’ claims that abound – helping to clue back the territory originally marked out by Pierre Janet pioneering work on trauma a century ago. Beliefs of having experienced alien contact without being actually able to remember details fit the various extreme abuse scenarios described in Miller (2012), where children are tormented by ‘breaking-point’ and start splitting off alters who carry sensory memories that are not concurrently processed and may be gradually released later when the brain considers it safe(r) to do so. ‘Missing time experiences are typical when it comes to torture by extreme abuse groups. And taking Professor French’s favoured explanation of sleep paralysis, a plausible causal account of this phenomenon suggests a dissociative process that is closely linked to past cultural and personal experiences such as sexual abuse (see tinyurl.com/qtq6mgw). Poor practices by over-zealous therapists can potentially induce ‘false memories’. However, in their Extreme Abuse Survey Becker et al. (2006) found that more than half of the individuals responding had specific abuse memories before commencing therapy. Proponents of the ‘Discourse of Disbelief’ tend to ignore evidence that does not fit their worldview, and dismiss out of hand any disclosures of extreme abuse (see https://uk.linkedin.com/pub/rainer-kurz/6b/4/440).

As a volunteer advocate for sexual abuse victims I have been hearing witnesses to disclosures of extreme abuse, toddler rapes, missing babies and violent attacks. I firmly believe that practising psychologists need to be sceptical of the sceptics and help unravel rather than obfuscate the truth about extreme abuse groups and their traumatic impact on society.

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References

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References

Role of psychologists as expert witnesses in family court proceedings

Rainer Hermann Kurz

Introduction
A TEENAGER wanted to contribute to a better world considering clinical psychology studies. Instead I embarked on an occupational psychology career spanning over 25 years at leading assessment consultancies. At age 30 I vowed to make a difference in the mental health field in my fifties, and shortly afterwards embraced Buddhism. Since stumbling across an ‘unbelievable’ case in May 2012 I learned a lot about psychology, psychiatry and society leading me to write this article that attracted a poignant comment from a fellow psychologist: ‘I believe that Rainer’s article is a highly topical reminder of some of the disturbing history associated with child abuse and of the existence of indifference/bases in current practice. It is also pertinent for inclusion at this time considering recent court cases.’

‘Only the death penalty is more drastic than removing a child from its parents forever.’ This phrase, partly reported by Green (2014), was presented in a Panorama programme “I want my baby back” on 15 January 2014, to paraphrase what the President of the Family Court Sir James Munby said in a November 2013 speech. In the UK each month more than 1000 children are separated forever from their birth parents against their will in a Family Court process that veteran campaigner Ian Joseph calls Forced Adoption (see www.forcedadoption.com). Most of these parents are losing and law abiding.

Psychological assessment reports routinely inform such ultra-high stakes court decisions that are for biological parents more traumatic and life changing than losing a child to a social service or as they grieve the loss of their child who is “handed off” to the unknown new forever home (unless they seek out birth parents when reaching adolescence or adulthood).

Forensic psychology Professor Jane Ireland (2012) found that two-thirds of psychological assessment reports sampled from Family Court cases were ‘poor’ or ‘very poor’ in a groundbreaking research study commissioned by the government-funded Family Justice Council in the light of her 2008 publication on the topic.

Rather than producing heated discussion and a plethora of follow-up research an


Presentation at the European Society for Trauma and Dissociation (ESTD) Conference in Berne.


I Successful UK Prosecutions of Complex Abuse Trauma

II False Memories Discourse of Disbelief (Revisited)
   • Theme 1
   • Theme 2
   • Theme 3
   • Theme 4
   • Theme 5
   • Theme 6

III Obfuscation of Complex Trauma
1988 Old Bailey Hazel Paul plus 2 other offenders performed ritual abuse

1989 Nottingham Crown Court, 10 intergenerational family offenders abused 21 children

1989 St Albans Crown Court, Peter MacKenzie plus one other satanic offender (includes babies being abused and killed)

1990 Worcester Crown Court, Reginald Harris abused two sisters 15 years and younger

1992 Liverpool Crown Court; uncle raped niece three times a week between 10 and 12

1993/93 Manchester Crown Court, Michael Horgan (mate of Cyril Smith) raped daughter & and stepson and let others rape them

1993 Ealing Old Bailey Case, four family members abused 7 children

1994 Pembrokeshire, Swansea Crown Court, 6 men abused 13 children

1998 A West Country Crown Court, 6 men and 3 women in intergenerational abuse family; case had been reported 30 years earlier but not taken seriously; one dedicated police officer persevered; 300 interviews

2011 Kidwelly, Swansea Crown Court, Colin and Elaine Batley and two other women
Imagine the shock then at news of an occultist group operating behind the doors of seemingly normal new-build houses. Shock, the locals say, is something of an understatement.

As residents went about their daily life, they could not have imagined that Colin Batley, described as an "evil paedophile", was running a satanic sex cult from his home.

The self-styled high priest of the group, headed a paedophile ring run like a "quasi-religion".

Cult ringleader Colin Batley has been told he faces a lengthy prison sentence. One victim, who was repeatedly abused by Batley, told how he treated women like slaves. Batley would wear a hood to abuse his victims.

Once in their grasp, he would call the children to his service by clicking his fingers.

Batley and three other members of the cult were found guilty of more than 40 sexual offences against children and young adults.
UK media coverage of the Ian Watkins case was extremely muted. Wales Online was seemingly the only media outlet providing clues that Ian Watkins may well have fallen under the spell of a ‘devil worshipping sex cult’:

http://www.walesonline.co.uk/all-about/ian%20watkins?pageNumber=1

- Starstruck youngsters even offered to worship Satan if he wanted them to.
- He had some weird sociopathic tendency to think he was above the law and everything. He didn’t come across as horrible. He came across as charismatic, charming and into the person he was talking to. He was just very confident and believed that whatever he did he would be okay. He thought he was a rock god and he thought he would get away with everything.
- He wanted to rape and kill children. He wanted to rape newborns. He liked bestiality.
- He described himself openly as ‘evil’.

The criminal investigation recovered abuse massive amounts of pornographic images. The computer password cracked by security services was ‘If***kids’. Among the damning evidence presented by the prosecution were email exchanges between Watkins and the ‘Superfans’ setting up planned abuse sessions in a hotel, and video-taped evidence of the attempted baby rapes. The ruling gives graphic details of the abuse acts:

http://www.slideshare.net/slideshow/embed_code/29386021#
Matthew Williams, 34, is reported to have gone "Hannibal Lecter" on his victim, Cerys Yemm. He was discovered in a hotel room in Argoed, near Blackwood, south Wales, after apparently eating the eyeball and half of the face of his 22-year-old victim. He died that same day after being tasered by police during his arrest. Williams, believed to have been high on a cocktail of drugs after just being released from prison, was tasered by police and died moments later after becoming "unresponsive".

Hotel owner Mandy: ‘His eyes were black and he was covered in blood’. I said to Matthew, ‘Do you know what you’re doing to that girl?’ He said, ‘That’s no girl’.
Black magic couple who sucked 11-year-old's blood before husband repeatedly raped her are jailed for total of 34 years

- Caroloe Hickman, 64, forced girl to have sex with her husband Albert, 65
- Court heard she pinned down girl's arms as he took part in 'terrible rape'
- Mrs Hickman used 'bojewelled knife' to cut girl's thumb and suck blood
- She also threatened to kill her mother, who was suffering from cancer
- Victim, now in her 50s, repressed memories until 2011 during counselling
- Mrs Hickman given 17 years for indecent assault, aiding and abetting rape
- Her husband sentenced to 17 years in prison for raping girl in the 1970s

A couple who used 'black magic' to convince an 11-year-old girl to take part in sex sessions where they sucked her blood have been jailed for 34 years.

Caroloe Hickman, 64, from St Athan, South Wales, told the schoolgirl that she was part of a powerful witches' coven before forcing her to have sex with her husband Albert, 65.

The victim had repressed memories of the abuse, which took place between 1972 and 1975, until they came back during counselling for bereavement and depression in 2011.

She told Cardiff Crown Court last month that Mrs Hickman had a special 'bojewelled knife', which she used to cut the young girl's thumb before sucking her blood.

1982, 9th Nov. Telford, Shropshire Malcolm & Susan SMITH/Albert & Carole HICKMAN

M.Smith Three X 14 year prison sentences for Buggery, Wounding and Rape of 4 children (aged 1 to 15 years). One 8 year, One 5 year sentence for specimen charges of Indecent assault. One 2 year sentence for a specimen count of unlawful sexual Intercourse.

S.Smith 2 years imprisonment for aiding & abetting.

A.Hickman 10 years imprisonment for specimen charges of Buggery & Assault.

C.Hickman 5 years imprisonment for aiding & abetting Rape, Buggery & Assault

The evidence presented (and admitted by defendants) was that a series of sexual and physical assaults had taken place on 4 children during the course of satanic rituals. The sex frequently occurred on an altar dedicated to the Devil.

Malcolm Smith convinced his child victims that he was 'Lucifer'. Trial Judge Mr Justice Drake said the children were 'mesmerised' by Smith's actions and rituals.

Smith carved an inverted (so called 'satanic') cross on one child's abdomen, inserted lighted altar candle in her anus & vagina and branded her genitals with a red-hot altar knife.
1. One person can have pseudo-memories implanted by another person.

This is true. Memory is unreliable, and it is the case that people can have mistaken memories implanted or enhanced by another. However, there is a logical flaw that occurs repeatedly in the false memory syndrome message—because some people under some circumstances can have some memories implanted, there is an implicit assumption that where individuals and their alleged abusers disagree over “the truth”, then the accuser's memory must be false.

Now, I would ask why there is so little widely-known laboratory research looking at the other side of that coin. Whether false negative memories can be created as well as false positive, ie whether somebody can be persuaded that something did not happen, when actually it did. Such research might help to inform us more about failure to recall. This avoidance of looking at false negative memories maintains a bias in this research. Twenty years on my perception of this is not complicated. The False Memory Syndrome (FMS) advocates do not want evidence of false negatives – that we can experience something and then be persuaded that it did not happen, because that would not suit their narrative.
2. Because they are gullible, deluded, have axes to grind, or are greedy, therapists persuade clients to have false beliefs of having been sexually abused in childhood.

There is no evidence that anyone has ever had a false belief implanted that they were sexually abused as a child. Such evidence is not possible to acquire, as it is not possible to know for sure that a person has not been sexually abused, and it would not be ethical to conduct research attempting to implant such a belief.

... 

As I pointed out 20 years ago, and I feel even more strongly about this now, bias about beliefs in reports of abuse still frequently occur in the opposite direction - there are groups of people who seem to have a fixation on avoiding the evidence and denying the reality of the incidence of child sexual abuse.

The other point in this section was whether therapists make significant financial gain from creating a belief in CSA. In reality, working clinically with survivors of CSA is not a smart way to get rich - survivors are not usually a good source of income. What I would add now, however, is that the accused are likely to be willing to spend a large amount of money to walk free. So, in my opinion, if someone wants to get rich in the field of CSA, working in therapy is not the best option - If making money is the primary goal, work as a witness for the defence.
3. **Hypnosis makes inaccuracies more likely and increases confidence in these inaccuracies.**

It is sometimes true that hypnosis can be used to increase confidence in inaccurate memories. But it is also true that there is considerable evidence that hypnosis can also enhance accurate recall (e.g. Ewin, 1994; Nenliah, 1985). Again, the other side of the story is omitted by the false memory syndrome advocates. It would seem sensible to suggest that nothing about the truth or falsehood of hypnotically recovered memory can be assumed without corroborating evidence.

Hypnosis can help induce a state of relative calm where clients can work through their traumatic experiences without being overwhelmed by them. Good clinical research, with carefully applied use of hypnosis, by trained clinicians, might reveal whether hypnosis has a positive role to play in recall and healing from trauma. The original American False Memory Syndrome Foundation advisory board included at least two experts on hypnosis: Martin Orne and Ernest Hilgard. I wonder why they did not promote such research?
4. **A number of accusers have retracted, therefore accusations are unreliable.**

It is true that accusers have retracted, but this does not mean that accusations are unreliable. In its statement on memories of sexual abuse, the American Psychiatric Association (APA, 1993) reports that retracting can follow an initial report of childhood abuse in victims with documented abuse. One of the few studies on retracting suggests that this is frequently part of the disclosure process, and the retraction is often subsequently withdrawn and the accusation maintained (Gonzalez, Waterman, Kelly, McCord, & Oliveri, 1993).

Retraction, as I pointed out then, is a complex issue, and may be a part of the disclosure process for some, with the retraction being subsequently withdrawn. Oversimplifying this complex area leads to greater confusion and less understanding.
5. Having an explanation for one's problems by claiming child sexual abuse is an easy cop-out for the accusers - it means that they can blame someone else for their problems.

The suggestion that alleging child abuse is an easy option has no foundation in reality - it is simply untrue. Coming to terms with childhood abuse is a long and painful process. On the other hand, it could be argued that denial is a much more comfortable (but perhaps ultimately less sane) option both for victims and for their families.

My original thoughts about an abuse explanation being a cop-out are unchanged. Denial is a much less stressful route than reporting abuse.
6. There is no such thing as traumatic amnesia, repression, and therefore recovered memory, and greater levels of trauma are more likely to be remembered.

It is clearly untrue that there is no such thing as traumatic amnesia. Inability to recall important aspects of a trauma is a diagnostic criterion for post-traumatic stress disorder and dissociative amnesia (DSM IV: APA, 1994).

... This sixth point is the one that I would pick out now as perhaps the most important. One of the biggest changes in my awareness of the field in recent years has been seeing how data derived from experimental research, often with students, has been inappropriately and misleadingly assumed to inform us about memory processes involved in recall of abuse during childhood. Since the 1990's it has become clearer that trauma has a significant impact on memory. Neuroscience advances have shown us that brain activity can be grossly disrupted by trauma. Memory processes during and after traumatic experiences are unlike memory processing during non-traumatic times. Van der Kolk (2014) is an excellent source on the development of this new understanding: “The imprints of traumatic experiences are organised not as coherent logical narratives but in fragmented sensory and emotional traces: images, sounds and physical sensations … when people fully recall their traumas, they “have” the experience. They are engulfed by the sensory or emotional elements of the past.” …
Traumatic memories are fundamentally different from other kinds of memory from the past, they are dissociated. That is, there is a disruption of the normal integration of consciousness, memory, emotion, perception and behaviour. As van der Kolk says: "Dissociation is the essence of trauma". Dissociative symptoms can potentially disrupt every area of psychological functioning. He also points out that childhood trauma is radically different from traumatic stress in adults, and that different forms of abuse have different impacts on various brain areas at different stages of development.

With regard to recall of abusive childhood experiences: “There have in fact been hundreds of scientific publications spanning well over a century documenting how the memory of trauma can be repressed, only to resurface years or decades later…. Total memory loss is most common in childhood sexual abuse, with incidence ranging from 19 percent to 38%”. And "Every single scientific study of memory of childhood sexual abuse, whether prospective or retrospective, whether studying clinical samples or general population samples, finds that a certain percentage of sexually abused individuals forget, and later remember, their abuse." (Van der Kolk, 2014, Note on p.398 re p.190). And Ross Cheit, (2015) has provided us with a remarkable online resource of over one hundred corroborated cases of recovered memory.
At the time of writing The British False Memory Society supported by its scientific advisors states on its website (bfms.org.uk) “… sexual abuse is easy to remember and extremely difficult to forget. Genuine victims unfortunately cannot repress or forget what has happened to them.”

But, as noted above, inability to remember an important aspect of traumatic events, typically due to dissociative amnesia, has long been a diagnostic criterion for post-traumatic stress disorder. Is the suggestion from the advisory board of the BFMS that trauma experts have got this wrong for decades? Or that sexual abuse is not traumatic? And is the implication of the BFMS statement that those who have experienced traumatic amnesia are not “genuine victims”? These are all extreme minority opinions that appear to be presented as facts.
The demands of the position of the false memory syndrome groups are tricky: we are asked to believe that memory is unreliable, but in only one direction - that we can have false positive memories (we can be led to believe that something did happen, when in fact it did not), but not false negatives (we cannot apparently be amnesic about something that did happen), and that false memories can be implanted in adults by persuasive therapists, but not, apparently, in children by persuasive adults (see e.g. Marsden, 1994).

Additionally, a claim of abuse is considered incredible, whereas a retraction by the same person is credible. When individuals re-accuse, do they become incredible again?

Both the American Psychiatric Association (APA, 1993) and the British Psychological Society (Morton et al., 1995) statements on recovered memories acknowledge the possibility of dissociative amnesia.

In good science data is gathered and a theory is formed. In bad science a theory is formed and the evidence is gathered to fit the theory. Now, after 20 years, I think that my 1998 chapter was naïve. I thought that there was a debate about matters of fact, of science. Now, I don’t think that the conflict has much to do with fact or science. I think that the problem is to do with the dogma of those who aim to deny the incidence and consequences of CSA.
Professor Christopher French is a scientific advisor to the British False Memory Society and he founded the Anomalistic Psychology Research Unit at Goldsmith’s College, at the University of London. In an article in The Psychologist (2018) he states an interest in researching “ostensibly paranormal experiences”. He states: “It is worth emphasising that exactly the same techniques are used to ‘recover’ memories of alien abduction and past lives as are used to ‘recover’ allegedly repressed memories of childhood sexual abuse …” This is a classic example of casting doubt by association. Linking alien abduction to child sexual abuse is not just insulting to those who have been abused – it creates confusion where there could be clarity. It is unclear why the British Psychological Society continues to enable such obfuscation about such a serious issue in its house publication, circulated to tens of thousands of psychologists. The belief that there is no such thing as traumatic amnesia, and that hundreds of thousands of people report child sexual abuse because they have been brain-washed by deluded therapists is a topic truly worthy of research by those interested in anomalistic psychology. Hopefully, the real science will prevail in the very near future.

http://www.theguardian.com/science/2014/nov/18/satanic-child-abuse-false-memories-scotland
When the film *Spotlight* came out it highlighted the extent of abuse by priests in Boston, and the way in which those in power covered up the priests’ abuse. How would FMS advocate Elizabeth Loftus deal with this? By Tweeting a link to an article telling us “Why Spotlight is a Terrible Film” (Loftus Tweet of February 29th, 2016). The first line of the article that we are directed to is: “I don’t ‘believe the victims’”. It goes on to say “I don’t believe the ... lawyers or the Boston Globe’s Spotlight team” or “the prosecutors who pursued tainted cases or the therapists who revived junk science or the juries that sided with them or the judges who failed to act justly”. So that becomes the explanation for what happened - *Everyone* was wrong. A further example of the success in creating confusion and a blind belief in the reality of FMS was illustrated in an article on allegations about Harvey Weinstein’s accusers (adult women reporting continual memory of sexual harassment by him) - "I suspect that false memory syndrome has increased the velocity of these tales..." (Emily Sheffield in the London Evening Standard 12th Oct 2017).
A further example of distracting focus is the use of ad hominem attacks. One example is how to deal with a former president of the American Psychological Association when he reported awkward information and opinion. Koocher (2014) described what he considered to be ethically inappropriate behaviour by Elizabeth Loftus, and additionally stated that he had been told that Loftus resigned from the American Psychological Association because she had been tipped off that there had been complaints made to the Association about her, enabling her to resign before the ethics investigation could be initiated. So, how did Loftus respond? Simple - Tweet that he is dishonest, or in fact that he is a “Slimeball liar” (Loftus Tweet of October 11th, 2015)

In dodging reality, one strategy is to respond to a perceived criticism by portraying yourself as the victim (coincidentally as abusers frequently do – see reference to DARVO below). In her 2013 TED talk, Elizabeth Loftus states: “I became part of a disturbing trend in America where scientists are being sued for simply speaking out on matters of great public controversy”. But the litigation issue was not about speaking out on matters of great public controversy. A few moments earlier she reported the real reason that she was being sued: “… for defamation and invasion of privacy.”


https://www.ted.com/talks/elizabeth_loftus_the_fiction_of_memory
‘False Memory’ accusations may be used as one of a number of the weapons of DARVO – an acronym for Deny, Attack, and Reverse Victim and Offender (see eg Harsey et al, 2017), where perpetrators and their supporters use active strategies to confuse and silence their victims and the media.

Now it is acknowledged that “Memory researchers motivated by their own agendas and interests do not necessarily respond to acknowledged research gaps” Goodman-Delahunty et al (2017) and “Contemporary research findings demonstrate that concerns about the prevalence of false memories of child sexual abuse appear to have been exaggerated”.

In reviewing my 20 year old chapter "Shooting the Messenger" my conclusion is that we are well overdue switching our attention from the messenger (client or clinician) and should instead turn the spotlight on those doing the shooting.
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