

July 2007: Update to “Scholarly Resources”

Forgetting Traumatic Events

Amnesic Syndromes of War

Sargant, William; Slater, Eliot

Proceedings of the Royal Society of Medicine

1941 June, Vol. XXXIV, pp. 757-764

Loss of memory is much commoner in soldiers in war-time than in civilian practice in peace. From the previous records of our patients, it seems that the condition is often overlooked in civilian life; in the Army a stricter routine and discipline make this impossible. Attention in the past has been mainly directed to states of fugue, and civilian practice suggests that behind these there often lies a criminal act or a situation from which an immediate, even though an illusory, escape is desired. Cases occurring in war, however, indicate that other causes, such as terror, bomb blast and exhaustion, may produce not only fugues both at the time and subsequently, but also large gaps retrospectively in the patient's memory of the past.

Amnesia for Traumatic Events Among Recent Survivors: A Pilot Study

Yovell, Yoram; Bannett, Yair; Shalev, Arieh

CNS Spectrums

2003, September, Vol. 8(9), pp. 676-685

Objective: Traumatic amnesia has been amply documented in the psychoanalytic literature but inconsistently in the research literature. **Method:** Six trauma patients were followed prospectively. Survivors were interviewed 7, 30, and 120 days following the traumatic event. Each interview each interview documented in detail their recollections on the day of the trauma. **Results:** In four subjects who did not develop posttraumatic stress disorder (PTSD), we found brief, stable, and persistent memory gaps, which coincided with the moment of greatest emotional intensity. In two subjects who developed PTSD, we found, in addition to the previous form of amnesia, longer, progressive, and unstable memory gaps. **Discussion:** Neurobiological research offers two explanatory mechanisms for the observations: A failure of acquisition of episodic memories may account for the stable deficits seen in all subjects. This could coincide with stress-induced malfunction of the hippocampal declarative memory system. A failure of spontaneous recall may account for the more extended traumatic amnesia that was observed in PTSD patients. This resembles the psychoanalytic description of repression. **Conclusion:** These preliminary findings suggest that brief, irreversible memory gaps are common in trauma survivors, whereas longer, progressive and potentially reversible amnesia occurs among survivors who develop PTSD.

Repressive Coping and the Directed Forgetting of Emotional Material

Myers, Lynn; Brewin, Chris; Power, Mick

Journal of Abnormal Psychology

1998, Vol. 107(1), pp. 141-148

Using a *directed* forgetting task, the authors tested in 2 experiments the hypothesis that repressors would be superior to controls in forgetting negative experimental material. Consistent with previous studies, there was an overall *directed* forgetting effect, with significantly more to-be-remembered material recalled than to-be-forgotten (TBF) material. In both experiments, repressors forgot more negatively valenced words in the TBF set than did nonrepressors, suggesting that repressors have an enhanced capability for using retrieval inhibition. The data offer preliminary support for a cognitive account of repressors' deficits in recalling negative autobiographical memories.

A Comparison of Normal Forgetting, Psychopathology, and Information-Processing Models of Self-Reported Amnesia for Sexual Trauma

Mechanic, Mindy; Resick, Patricia; Griffin, Michael
Journal of Consulting and Clinical Psychology
1998, Dec. Vol. 66(6), pp. 948-957

This study assessed memories for sexual trauma in a nontreatment-seeking sample of recent rape victims and considered competing explanations for failed recall. Participants were 92 female rape victims assessed within 2 weeks of the rape; 62 were also assessed 3 months postassault. Memory deficits for parts of the rape were common 2 weeks postassault (37%) but improved over the 3 month window studied (16% still partially amnesic). Hypotheses evaluated competing models of explanation that may account for reported recall deficits. Results are most consistent with information processing models of traumatic memory.

Recovered Memory Debate/ False Memory Theory

Suggestibility and Treatment as Key Variables in the Recovered Memory Debate

Leavitt, Frank
American Journal of Forensic Psychology
1999, Vo. 17(4), pp. 5-18

Alleged inducement of sexual trauma memory was studied from the perspective of suggestibility as embodied in false memory theory. The controversial assumption that therapeutic suggestion operates to cause events to be falsely remembered was tested using a sample drawn from practices that contained patients who did, as well as those who did not, recover memories while in treatment. Following two years of treatment, the most suggestible of the patients did not recover memories.

Paradoxically, those with the weakest levels of suggestibility recovered memories from the same practices. Since it is not logically conceivable that therapeutic suggestion operates only in the nonsuggestible, the assumptions of false memory theory were interpreted as not relevant for understanding the emergence of memories of childhood sexual trauma. Claims involving simple cause and effect relationships between treatment and memory recovery are not viable.

Empirical Studies of Recovered Memories

Relations Among Childhood Memory, a History of Abuse, Dissociation, and Repression

Melchert, Timothy

Journal of Interpersonal Violence

1999, November, Vol. 14(1), pp. 1172-1192 The author of this study investigated several questions regarding the relationships between a history of child abuse memories, childhood memory in general, repression, and dissociation. Of the total sample (n = 560 undergraduate students), one quarter reported a history of child abuse, and 18% of these reported a period when they lacked memories of their abuse. These participants endorsed a variety of descriptions of their recovered memories, many of which do not suggest a lack of conscious access to the memories. General quality of childhood memory was found to be unrelated to a history of abuse, and most participants, regardless of their abuse history, reported recovering memories from their childhood in general. Repressive personality traits were found to be unrelated to recovering abuse memories, but dissociative traits were found to be weakly associated with recovering abuse memories.

Recovered Memories of Abuse in Women with Documented Child Sexual Victimization Histories

Williams, Linda

Journal of Traumatic Stress

1995, Vol. 8(4), pp. 649-673 This study provides evidence that some adults who claim to have recovered memories of sexual abuse recall actual events that occur in childhood. One hundred twenty-nine women with documented histories of sexual victimization in childhood were interviewed and asked about their abuse history. Seventeen years following the initial report of the abuse, 80 of the women recalled the victimization. One in 10 women (16% of those who recalled the abuse) reported that at some time in the past they had forgotten about the abuse. Those with a prior period of forgetting – the women with “recovered memories” – were younger at the time of abuse and were less likely to have received support from their mothers than the women who reported that they had always remembered their victimization. The women who had recovered memories and those who had always remembered had the same number of discrepancies when their accounts of the abuse were compared to the reports from the early 1970s.

Self-Reports of Forgetting and Remembering Childhood Sexual Abuse in a Nationally Representative Sample of US Women

Wilsnack, Sharon; Wonderlich, Stephen; Kristjanson, Arlinda; Vogeltanz-Holm, Nancy; Wilsnack, Richard

Child Abuse and Neglect **Objective:** The purpose of this article is to describe patterns of forgetting and remembering childhood sexual abuse (CSA) in a nationally representative sample of US adult women. **Method:** The respondents were a national probability sample of 711 women, aged 26 to 54 years, residing in noninstitutional settings in the contiguous 48 states. In a 1996 face-to-face interview study, trained female interviewers asked each respondent whether she had experienced any sexual coercion by family members or nonfamily members while growing up; whether she believed that she had been sexually abused (by family members or others); and whether she had ever forgotten the CSA experiences and, if so, how she had subsequently remembered them. **Results:** Twenty-one and six-tenths percent of respondents reported having sexually coercive experiences while growing up; of these, 69.0% indicated that they felt they had been

sexually abused. More than one-fourth of respondents who felt sexually abused reported that they had forgotten the abuse for some period of time but later remembered it on their own. Only 1.8% of women self-described as sexually abused reported remembering the abuse with the help of a therapist or other professional person. **Conclusions:** The findings indicate that, among women who report CSA, forgetting and subsequently remembering abuse experiences is not uncommon. According to the women surveyed, however, very few (1.8%) of those who felt abused recovered memories recovered memories of CSA with help from therapists or other professionals. As one of the few studies of CSA memories in a nationally representative sample, this study suggests that therapist-assisted recall is not a major source of CSA memories among women in the US general population.

Adult Memories of Childhood Trauma: A Naturalistic Clinical Study

Herman, Judith; Harvey, Mary

Journal of Traumatic Stress

1997, Vol. 10(4), pp. 557-571 The clinical evaluations of 77 adult psychiatric outpatients reporting memories of childhood trauma were reviewed. A majority of patients reported some degree of continuous recall. Roughly half (53%) said they had never forgotten the traumatic events. Two smaller groups described a mixture of continuous and delayed recall (17%) or a period of complete amnesia followed by delayed recall (16%). Patients with and without delayed recall did not differ significantly in the proportions reporting corroboration of their memories from other sources. Idiosyncratic, trauma-specific reminders and recent life crises were most commonly cited as precipitants to delayed recall. A previous psychotherapy was cited as a factor in a minority (28%) of cases. By contrast, intrusion of new memories after a period of amnesia was frequently cited as a factor leading to the decision to seek psychotherapy. The implications of these findings are discussed with respect to the role of psychotherapy in the process of recovering traumatic memories.

Explaining the Forgetting and Recovery of Abuse and Trauma Memories: Possible Mechanisms

Epstein, Michelle; Bottoms, Bette

Child Maltreatment

2002, Vol. 7, pp. 210- 225

Much attention has been focused on memories of abuse that are allegedly forgotten or repressed then recovered. By retrospectively surveying more than 1,400 college women (aged 18-60 yrs), the authors investigated (a) the frequency with which temporary forgetting is reported for child sexual abuse experiences as opposed to other childhood abuse and traumas and (b) exactly how victims characterize their forgetting experiences in terms of various competing cognitive mechanisms. Rates of forgetting were similar among victims who experienced sexual abuse, physical abuse, and multiple types of traumas. Victims of other types of childhood traumas (e.g., car accidents) reported less forgetting than victims of childhood sexual abuse or multiple types of trauma. Most victims' characterizations of their forgetting experiences were not indicative of repression in the classic Freudian sense but instead suggested other more common mechanisms,

such as directed forgetting and relabeling. The implications of these findings for psychological theory, clinical practice, and law are discussed.

Remembering and Forgetting Childhood Sexual Abuse

Fivush, Robyn; Edwards, Valerie

Journal of Child Sexual Abuse

2004, Vol. 13(2), pp. 1-19

Twelve white middle-class women who had been severely sexually abused as children by a family member were asked to provide a narrative of their *abuse* and discuss their subsequent *remembering* and *forgetting* of these experiences. Most claimed they had undergone periods during which they had not recalled their *abuse*, but also claimed that they had never forgotten their experiences at another point during the interview. Nine of the women had actively tried to forget the abusive experiences, although 8 still experienced recurrent and often relentless intrusive memories. Our findings suggest that women with continuous memories may have longer and more coherent narratives than women without continuous memories. Implications of these findings for understanding the phenomenology of memory experiences and the concept of "recovered" memories of *childhood sexual abuse* are discussed.

*** Book Chapter**

Recovered Memory and Amnesia in Russian College Students

Palesh, Oxana Gronskaya; Dalenberg, Constance

In College Students: Mental Health and Coping Strategies

Editor: Landlow, Mery

2006, pp. 153-165

Three hundred and one participants from Moscow State Linguistics University participated in a survey. Two hundred and one participants completed a demographic questionnaire, the Dissociative Continuum Scale, Zung Self-Rating Depression Scale, the Traumatic Events Survey, the Violence History Questionnaire, questions regarding *memory* status and attitudes towards child abuse. An additional one hundred participants completed a demographic questionnaire, the Dissociative Continuum Scale and the Violence History Questionnaire. Among participants who reported child abuse experiences ($n = 45$), twenty one reported partial or full *amnesia* of the abuse. The frightening and shameful parents factor generated from the Traumatic Events Scale was the most consistent predictor of *amnesia* and *recovered memory*. Subjective experience of fear and terror during trauma (Criterion A trauma of PTSD) and chronicity of trauma also accounted for a significant amount of variance in predicting *amnesia* and *recovered memory*. Participants' alcohol use and recency of trauma did not predict *recovered memory*. Participants in the study who reported trauma and history of child abuse had more dissociative symptoms and were more depressed than non-traumatized participants.

The Reality of Recovered Memories: Corroborating Continuous and Discontinuous Memories of Childhood Sexual Abuse

Geraerts, Elke; Schooler, Jonathan; Merckelback, Harald; Hauer, Beatrijs; Ambadar, Zara
Psychological Science

In Press Vol. 18(7), pp. 564-568

Although controversy surrounds the relative authenticity of discontinuous versus continuous memories of childhood sexual abuse (CSA), little is known about whether such memories differ in their likelihood of corroborative evidence. Individuals reporting CSA memories were interviewed, and two independent raters attempted to find corroborative information for the allegations. Continuous CSA memories and discontinuous memories that were unexpectedly recalled outside therapy were more likely to be corroborated than anticipated discontinuous memories recovered in therapy. Evidence that suggestion during therapy possibly mediates these differences comes from the additional finding that individuals who recalled the memories outside therapy were markedly more surprised at the existence of their memories than were individuals who initially recalled the memories in therapy. These results indicate that discontinuous CSA memories spontaneously received outside of therapy may be accurate, while implicating expectations arising from suggestions during therapy in producing false CSA memories.

Memory Disturbances in Childhood Abuse Survivors

Autobiographical Memory Disturbances in Childhood Abuse Survivors

Edwards, Valerie; Fivush, Robyn; Anda, Robert; Felittle, Vincent; Nordenberg, Dale
Journal of Agression, Maltreatment and Trauma
2001, Vol. 1(4), pp. 247-263

There is growing recognition among trauma researchers, clinicians, and human rights activists of the need for greater understanding of the nature, impact, and mediators of traumatic exposure among trauma survivors from diverse cultures and contexts and a growing interest in the phenomenon of resiliency and the possibility of recovery in the aftermath of traumatic exposure. This introduction briefly describes the articles that comprise this volume, emphasizing their status both as individually unique and worthwhile contributions to this literature and as a collection of works that speak powerfully to the promise of multi-cultural research and practice and to the need for a theoretical framework able to account for wide variations in individual expressions of psychological trauma, trauma recovery, and resilience. For us as co-editors of this volume, that framework resides in the ecological perspective of community psychology and in the attention to culture and context inherent in ecological theory. (PsycINFO Database Record (c) 2007 APA, all rights reserved)