Imagine the following situation: An influential academic psychologist, renowned for his empirical and theoretical contributions, is speaking at a scientific conference about his latest findings and ideas about the intricacies of his discipline, cognitive science. Not far into the presentation, this famous professor veers into the territory of the recovered memory debate. He states with great certainty that science shows that women with recovered memories of abuse are suffering false memories.

As an attendee at this conference, you are a bit perplexed; the proclamation is made with authority and in a context that endows whatever is said with credibility, yet there is little offered in the way of empirical evidence (or at least clearly relevant evidence) for the proclamation. What has just happened here? A person with the label “scientist” has invoked the mantle of science to assert something. But is this science?

The answer to this question can be informed by the feminist ethical thought of the past 3 decades. Ethical principles initially applied to the therapeutic setting can guide other forms of practice, including research and scientific thought. The feminist principles of therapy introduced in the
early 1970s seemed quite radical at the time. Yet today many of the original ideas of feminist therapy are seen almost universally as “good” therapy. Similar revolutions in the practice of science were spurred on by early feminist critiques (e.g., Unger, 1983; Wittig, 1985). Today to a large extent, the practices recommended in these “radical” critiques are considered standard scientific and ethical principles (American Psychological Association [APA], 1992). Drawing from the ethical mandates of feminist therapy (e.g., Feminist Therapy Institute, 1990), we begin this review with three overarching tenets of an ethical and feminist science.

- The scientist has a responsibility to recognize and acknowledge her or his own biases.
- The scientist has a responsibility to act in the best interest of her or his participants.
- The scientist is not a god but an explorer, an interpreter of data, and a guide for future scientific knowledge acquisition.

At this point, a question arises that also applies to the therapeutic setting: Are the fundamentals of a feminist ethical science not just good scientific principles? The answer is, well, yes, to a large extent. But feminist ethics require an explicit statement of these principles and a systematic review of actual practices in light of these principles: bringing these ethical questions to the forefront, addressing them systematically, and making explicit decisions for action.

Beyond good practice, feminist ethics offer a more proactive approach. Laura Brown (1994) decried that in clinical practice, ethics has become dominated by rules to prevent lawsuits. Basing her work in part on the work of the Feminist Therapy Institute (1990), Brown discussed ethics as a statement of what clinicians should want to accomplish for their clients as opposed to proscriptions against very bad behavior. In this chapter, we take the same approach to the application of a feminist ethical science. Beyond proscriptions, we concur with others that a feminist ethical science raises questions about the values, interpretations, and intended uses of the science (Harding, 1993). Inherent to a feminist ethical science is a process whereby one constantly analyzes the research process and outcomes from a gendered and sociocultural perspective.

Some researchers may think explicitly about ethics in science only when appeasing their institution’s human subjects committee. Yet the research process can be viewed as a series of decisions, from the conceptualization of the problem to empowerment of those who are affected by the use of the results (Quina & Kulberg, 1988). Feminist ethics can inform each of those decisions. Science would be far better if researchers examined the activity that goes into their scientific knowledge base, the use of that knowledge base, and the treatment of humans (and animals) along the way.
In this chapter, we take the position that current scientific work may shed significant insight on any given issue, even such a difficult-to-research area as delayed recall of childhood abuse. We discuss some of the ways that science has been misapplied and principles of good science have been violated, using examples from the debate over delayed recall of childhood abuse. We demonstrate how a feminist ethical perspective can inform this debate, regardless of the position one assumes with respect to the issue. We also suggest some guidelines that may be useful in minimizing further misapplications of science through careful applications of feminist ethical principles.

We do not, in this chapter, attempt to explain memory phenomena in detail (see Freyd, 1996) or to discuss therapeutic interventions with sexual abuse survivors (Gold & Brown, 1997; Pope & Brown, 1996). Nor do we go into great detail about specific studies (e.g., Brown, 1997; Pope, 1996). Instead, we focus on the ethical issues to which feminist scientists could and should be paying attention. Although we focus more on the misuse of science to support the false memory position, the popular press and much of academia have embraced or promoted the position that science supports premises of false memory proponents (see Beckett, 1996; Bowman & Mertz, 1996b; Pope, 1996, 1997; and Stanton, 1997). Of course, misuse in the other direction can and has occurred.

WHAT IS THE CONTESTED MEMORY CONTROVERSY?

The contested memory controversy is an intense debate within mental health fields, academia, and segments of current Western culture at large (for reviews, see Enns, McNeilly, Corkery, & Gilbert, 1995; Freyd, 1996, 1998; Pope, 1996; and Pope & Brown, 1996). Questions about disbelief and belief, passionate testimonials, and assertions of scientific authority saturate this conceptual landscape. At question is whether memories can accurately be recalled after a period of being unavailable for recall. On the one hand are individuals and groups, including scientists and clinicians, who find very plausible evidence that people sometimes forget and then accurately recall sexual abuse; on the other hand are individuals and groups, including scientists and clinicians, who assert that noncontinuous memories of childhood abuse are likely to be (or, according to some, are always) false.

Questions about the existence of a false memory syndrome are particularly troubling because one group of individuals has been able to create a label without scientific evidence and to apply it freely to women without ever meeting them—often merely from the word of a parent (see a discussion in Pope, 1996). We argue that from the outset, it is a mistake to give the power of voice to just one side of a debate. We also need to focus on the
alleged perpetrator’s memories, framing this as contested memories rather than presuming false memories.

Freyd (1996) provides a review of the literature and a potential resolution to this debate. Her review of the cognitive science and memory literature concludes the following about scientists’ current state of knowledge.

- They should not assume, without more information, that a recovered memory of sexual abuse is true.
- They should not assume, without more information, that a recovered memory of sexual abuse is false.
- Essentially false memories exist, whether those memories are newly recovered or have been apparently continuously available.
- Essentially true memories exist, whether those memories are newly recovered or have been apparently continuously available.
- Most memories, whether recovered or continuously accessible, are a perplexing mixture of true and false.
- When an individual reports a recovered memory (or apparently continuously accessible memory), scientists do not yet know the probability that the memory is essentially true.
- When an individual denies an accusation of sexual abuse, scientists do not yet know the probability that the denial is essentially true.
- Given someone who did not experience parental sexual abuse, scientists do not yet know the probability that the person falsely “remembers” sexual abuse.
- Given someone who did experience parental sexual abuse, scientists do not yet know the probability that the memory becomes unavailable and then later available.

Given all this uncertainty about “truth,” it is essential that each case of contested memory be considered on an individual basis. Sometimes particular information in a case can provide evidence that reduces the general uncertainty; other times uncertainty remains dominant even in an individual case.

The first author’s (Freyd) research focuses primarily on the following questions: Does amnesia for child sexual abuse happen, and in particular, if so, why and how? How can someone forget an event as traumatic as sexual abuse in childhood? Betrayal trauma theory proposes that it is adaptive to forget certain kinds of betrayal—as in childhood sexual abuse by a trusted caregiver—and that this forgetting is understandable in terms of what is known about cognitive psychology (Freyd, 1996). This theory takes care
to disentangle the motivations, mechanisms, and phenomena of memory disruptions in response to trauma from one another.

Memory repression is shown to exist, not for the reduction of suffering but because not knowing about abuse by a caregiver is often necessary for survival. From a logical analysis of developmental pressures and cognitive architecture, we can expect there to be cognitive information blockage under certain conditions, such as sexual abuse by a parent. This information blockage creates various types of betrayal blindness and traumatic amnesia. Betrayal trauma theory makes testable predictions about when forgetting abuse is most likely to occur. Freyd (1996; in press); Freyd, Martorello, Alvarado, Hayes, and Christman (1998); and DePrince and Freyd (1999) discussed preliminary empirical support for this theory and future research directions.

Individual Cases and Population Studies

One source of evidence for the assertion that people sometimes forget sexual abuse and recover them with some accuracy comes from individual cases, such as the case of Frank Fitzpatrick who recovered memories of childhood sexual abuse by Father Porter and the case of Ross Cheit who recovered memories of childhood sexual abuse by William Farmer (see Butler, 1996; Cheit, 1998; and Freyd, 1996). Ross Cheit has an extensive website archive of systematically corroborated recovered memories at www.brown.edu/departments/taubman_center/recovmem/archive.html.

Another source is current estimates based on systematic studies of various populations, which suggest that a sizable percentage of those who have been abused experienced some amnesia for the abuse. Table 5.1 shows results from three retrospective studies and one prospective study, which provide empirical evidence indicating forgetting abuse is a real (and not infrequent) phenomenon.

Evidence used to deny delayed recall of childhood abuse does not focus on the fact that recall is disrupted but instead on the accuracy of memories that appear to show up after a period in which the memory was not present. As with evidence in support of delayed recall, much of the data used to support the false memory position is anecdotal (e.g., Loftus & Ketcham, 1994; Pendergrast, 1996).

(Sometimes) Logical Arguments

Other authors have appealed to what appears to be a logical, but not empirical, form of argument. For example, Holmes (1990) has been often cited (by those who argue that recovered memories must be false) for his
Table 5.1
Empirically Determined Rates of Forgetting Sexual Abuse

<table>
<thead>
<tr>
<th>Study</th>
<th>Participants</th>
<th>Reported rates for forgetting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Herman &amp; Schatzow (1987)</td>
<td>53 women in short-term incest therapy groups</td>
<td>36% moderate memory loss, 25% severe memory loss</td>
</tr>
<tr>
<td>Feldman-Summers &amp; Pope (1994)</td>
<td>79 psychologists reporting childhood sexual or physical abuse</td>
<td>40% forgot and recovered some or all of their abuse</td>
</tr>
<tr>
<td>Loftus et al. (1994)</td>
<td>52 substance abuse treatment clients</td>
<td>19% forgot and recovered their memory of abuse, 12% partially forgot</td>
</tr>
<tr>
<td>Williams (1994, 1996)</td>
<td>129 women seen during childhood in hospital emergency room for sexual abuse</td>
<td>10% forgot and recovered their memory of abuse, 38% did not recall abuse</td>
</tr>
</tbody>
</table>

claim that “despite 60 years of research[,]” there is at present “no controlled laboratory evidence supporting the concept of repression” (p. 96). But Holmes defined repression as the involuntary “selective forgetting of materials that cause the individual pain” (p. 86) and hinted that anxiety is a necessary motivation in his definition.

Separating the phenomena of forgetting and recall from the potential motivations and mechanisms for these phenomena can avoid this logical error. In a detailed analysis of Holmes’s (1990) chapter, Gleaves (1996) concluded that Holmes’s conclusions “do not allow one to make inferences about the reality of amnesia for trauma or subsequent recovery of memories” (p. 1). The misapplications of this article are extreme and obvious. Holmes was interested in a particular mechanism, and he postulated particular motivations for forgetting. He claimed that good experimental evidence was lacking for this particular mechanism. This is very different than claiming to find no evidence for a particular phenomenon. Exhibit 5.1 summarizes some of the separate conceptual issues that get tangled in this debate, issues that must be carefully disentangled to discuss the empirical data logically (also discussed in Freyd, 1996).

Empirical Evidence

Data generated by experimental methodologies are readily gathered for both malleability and stability of memory in nontraumatic laboratory situations. In support of the malleability side of the debate, there have been demonstrations that children can be pressured or led by parents, or other presumably truthful adult sources, to make inaccurate claims (e.g., White, Leichtman, & Ceci, 1997), that adults can make errors in detailed memory
Exhibit 5.1
Separate Conceptual Issues in the Memory Controversy

<table>
<thead>
<tr>
<th>Terminology</th>
<th>Repression, dissociation, dissociative amnesia, traumatic amnesia, and knowledge isolation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observable phenomena</td>
<td>Experiencing a significant event but not consciously recollecting significant aspects of it, later recollecting the event</td>
</tr>
<tr>
<td>Proposed motivations</td>
<td>Avoidance of</td>
</tr>
<tr>
<td></td>
<td>• pain</td>
</tr>
<tr>
<td></td>
<td>• being overwhelmed</td>
</tr>
<tr>
<td></td>
<td>• threats to self-perception</td>
</tr>
<tr>
<td></td>
<td>• threats to assumptions of a meaningful world</td>
</tr>
<tr>
<td></td>
<td>• information threatening a necessary attachment</td>
</tr>
<tr>
<td>Possible mechanisms</td>
<td>Selective attention, inhibition of consolidation after initial encoding, state-dependent learning, and inhibition of accessing information already well stored</td>
</tr>
</tbody>
</table>

for elaborate lists or scenes (Roediger & McDermott, 1995), and that adults can be pressured to believe that nontraumatic childhood events occurred when told that an older family member remembers those events (Loftus, 1997). As noted in critiques by Pope (1996) and Freyd (1998), authors of these studies too often have drawn the conclusion that if one can demonstrate that some cognitive mistakes can be made (in remembering a list of words) or that some people can be convinced that something happened to them as children that is untrue, then delayed memories are most likely false.

Experimental evidence is less readily found as a source of knowledge for the reality of traumatic amnesia and memory recovery. One reason is that experimental methodology is not as easily exploited in the study of traumatic memory as it is for “normal” memory; one cannot simply or ethically create many of the traumatic contexts hypothesized to be related to amnesia for trauma. Another reason is that it is easier (and more interesting for many scientists) to focus on “mistakes” in responses than on accuracies, even though researchers find important accuracies as well as errors (e.g., Pezdek, Finger, & Hodge, 1997; Pezdek & Roe, 1997). Although experimental evidence directly supporting forgetting and remembering real trauma is difficult to achieve, there is a solid empirical literature based on systematic, statistically evaluated data supporting the reality of both memory failure and recovery of traumatic material (Freyd, 1996).

Some people may have also underestimated the extent to which experimental results from studies of nontraumatic memory are at least as indicative of the plausibility of forgetting and later remembering abusive events because the results are indicative of the malleability of memory. Freyd (1996) offered a review of this research and its implications.
WHAT CAN A FEMINIST ETHICAL CRITIQUE
BRING TO THE CONTROVERSY?

As Ken Pope (1996) observed, “science, policy, and education suffer when the vigorous authoritative promotion of claims fails to meet vigorous critical examination” (p. 957). This concern echoes nearly 3 decades of feminist critiques of biases throughout the history of applications of science in psychology. In this section, we review several forms of inappropriate use of science in the controversy.

Truth, Falsity, and the Struggle for Authority

The fundamental disagreement is centered—or stuck—on the essential truth or falsity of recovered memories for childhood abuse. When the core issue is whether an alleged abuse happened and the abuse is contested by the alleged abuser, there arises a struggle for authority to define reality. Perhaps because the stakes are so very high, this struggle for authority has been at times vicious. It is a struggle seen over and over again in the history of raising awareness about and responding to sexual abuse in Western culture: An individual case becomes a struggle for authority in the media, scientific world, and popular culture.

An ethical concern inherent in this debate is problematic throughout science: attempting to boil a complex issue down to a simple “yes—no” or “true—false” dichotomy. In this simplistic view of the recovered memories debate, the true—false dichotomy leads to two red herrings. First, the debate sometimes looks like it is about whether people can and do sometimes forget (and later remember) abuse. But most people on both sides recognize that people can and do forget (and later remember) abuse (Freyd, 1996; Pope, 1996). Second, the debate is characterized as being about whether memory is sometimes essentially false. In fact, researchers on both sides have invoked the concept of memory distortion, and most also have invoked some notion of human suggestibility (see a review in Freyd, 1996). The debate is not about truth or falsity. Instead, the debate is about who has the authority to determine the truth about an individual’s experience. As Freyd (1998) pointed out, the debate would more accurately be described as one between the truth of the parent’s memory versus the truth of the child–adult’s, between the authority of the person denying abusive behavior or the authority of the one remembering abuse. There is no evidence that parents’ memories (or claims) are more accurate than their children’s, whether continuous or discontinuous.

At times, the struggle for authority has deeply threatened the agency and personhood of adult survivors (see Bowman & Mertz, 1996a; and Brown,
1996). Poole, Lindsay, Memon, and Bull (1997) reflected that in their often-cited study of therapists' techniques (Poole, Lindsay, Memon, & Bull, 1995), they

should have more scrupulously avoided language implying that the relationship we observed reflected an effect of therapy ... [and] agree with some of Pope's [(1996)] arguments (e.g., that claims about false memories have sometimes been exaggerated and that exaggerated claims about false memories may have a chilling effect on victim advocacy and support). (p. 992)

Although there may be an urgent need to adjudicate certain individual cases of alleged abuse, for most scientists it would be better to suspend judgment on contested cases and to investigate and research the underlying phenomena. Whatever one learns about the issues in general in the domain of science, for any particular case of contested memories one must look at the individual case. The difference between examining cases individually versus posing scientific questions to ask about the issues in general has sometimes been lost in this debate.

Misrepresentations of Data and Results

Pope (1996) noted that many of the claims of an epidemic of false allegations are made without sufficient empirical support. Beyond serious questions about the extent of false remembering of abuse going on in the population at large (Pope, 1996), it is important to ask questions about the data presented to support claims in this controversy. For example, Salter (1992) reviewed over 100 references from a book authored by a false memories proponent and found extreme misapplications of research cited. Her efforts to achieve scientific accuracy were rewarded with a lawsuit, in which she (and independent science) ultimately triumphed, although at great personal expense (Salter, 1998).

One of the most egregious suggestions is that there is an epidemic of false memory syndrome. From its inception, the False Memory Syndrome Foundation has made media influence a priority, funnelling public perceptions of the research literature through a specific value-laden filter (Stanton, 1997). Yet there is no research to date documenting either a set of symptoms making up such a syndrome or an epidemic of those symptoms, in spite of the widespread promulgation of this term for political uses. We need to ask the following: Do false denials happen? If one is going to name syndromes, one also needs to ask about a false denial syndrome, which work with abusers suggests (Salter, 1995).

Evidence from one domain has been used to make claims about another unrelated domain. As Dahlenberg (1996) and Freyd (1998) pointed out,
there is no evidence that a memory that is not persistent (i.e., has been forgotten for some period of time) is any more or less true than one that has always been recalled. Yet the key empirical evidence cited as support for false memories consistently fails to separate these two dimensions of memory, claiming without support that noncontinuous memories are more or most likely to be false (Freyd, 1998). Likewise, memory research in laboratory settings has been used to make claims about real-life case studies—an issue addressed later in this chapter.

Unfortunately, to many people not intimately familiar with the empirical literature on trauma and memory and not acutely skeptical about claims to scientific authority, the contested memory debate is easily passed off as a war between therapists and scientists. The controversy is often described in ways that prejudice the issues, namely, applying labels such as “true believers” versus “skeptics” (terms that could be misapplied to either side, actually). Therapists are accused of believing their clients’ accounts of recovered memories of abuse, no matter their implausibility, and of unwittingly or intentionally implanting those very stories. Some scientists, aware of the research on the malleability of nontraumatic memory and perhaps shocked by the large numbers of abuse stories, doubt the accuracy of delayed abuse allegations. Personal experiences and clinical case studies are pitted against data from laboratory studies. As a consequence, not only is this controversy intense, but it is also confusing.

The scientist-versus-therapist characterization of the debate has also been greatly exaggerated; this exaggeration is one of the many current entanglements standing in the way of progress. In fact, it may be fair to characterize most clinicians and most scientists (and most who use both labels) as holding positions that are moderated by an awareness of many evidential and epistemological ambiguities and uncertainties.

Perhaps most distressing from a compassion standpoint has been the misrepresentations of individuals who have recovered memories and of those who have been accused of perpetrating abuse. Jennifer Hoult (1998), a survivor who successfully sued her father, poignantly described misrepresentations of her and the facts of her case by those with a different agenda.

Conflicting Values in Researchers With Multiple Roles

It is common teaching in psychology that an empirical (and hence scientific) approach is essentially amoral and that motives, whether monetary or passionate, have no place in science (Quina & Kulberg, 1988). Nearly every undergraduate in the country is taught the scientific method, in which theoretical bias as well as moral and emotional issues are presumed to be disconnected from the researcher and her or his relationship with the
participants (for a historical perspective, see Danziger, 1985). We go further
and argue that objectivity has too often been equated with a lack of compas-
sion or emotion and that having compassion or feelings is perceived as unscientific. Yet this disconnection virtually never occurs in the real world
of science, particularly not in any arena that has meaning beyond the
laboratory (and most hope their research will have some meaning!). Nodd-
dings (1988) in fact argued that including an ethic of care should be a
primary concern of education, including education about research. Feminist
critiques have long demonstrated how researchers have both reflected and
directed the biases of their theoretical and political beliefs (Shields, 1975;
Unger, 1983).

The recovered memories debate is no exception; societal, professional,
personal, and moral issues are enmeshed in the scientific process. The debate
began with intense beliefs on both sides of the issues, and these intense beliefs
fueled some of the initial studies. Carried into courts, ethics committees, and
legislatures, the debate has become infused with vast amounts of money.
These funds may influence the process, just as the federal government’s
decision to fund a certain research priority influences the kind of research
that is conducted. One must recognize the influence of one’s own values—
including power and authority—in the science one carries out and promotes.
These values are often shaped by one’s other roles, in which value-laden
tactics are more acceptable.

Consider, for example, the concept of objectivity. Courtroom tactics
include attempts to maintain an appearance of objectivity by applying
general findings from research studies to individual cases, sometimes in ways
that an objective scientist would consider absurd (e.g., arguing that an
individual’s experience of abuse did not happen because a participant in a
laboratory misremembered a computer keystroke). The increasing use of
expert witnesses in court cases compounds these problems. Unfortunately,
with the increasing crossover or slippage among the various roles psycholo-
gists fill (see, e.g., Loftus & Rosenwald, 1993), particularly between the
courtroom and research or practice, scientific journals are now being infil-
trated with failures to recognize different roles and uses of data acceptable
to each. One potential problem stems from the fact that psychologists serving
as expert witnesses are often paid an hourly rate that far exceeds payment
from other employment. Expert witnesses may find that they have a financial
interest in the outcome of the research that they conduct insofar as their
research findings influence their employability as expert witnesses. This
creates a potential conflict of interest for the researcher who is also an expert
witness. We advocate a standard disclosure statement for psychological
researchers who anticipate a financial gain, or an appearance of significant
financial gain, from the results they report.
“Scientists” or Scientific Data?

It is crucial to distinguish between the wisdom, tools, findings, and epistemological promise of science, on the one hand, and the very different issue of misuses of wisdom, tools, findings, and epistemology in the name of scientific authority, on the other hand. When anyone—especially a scientist—claims that science demonstrates X and that good scientists support his or her view, this is a claim of scientific authority. However, proclaiming scientific authority by virtue of specialized training in scientific methods is fundamentally different from the use of science to illuminate. What an authority claims may or may not in fact coincide with what science actually demonstrates or what scientists actually support.

Another outcome of the scientist-therapist version of the debate is a false belief that systematic data support those who take the false memory position, whereas only anecdote or intuitive impression support those who take the position that many recovered memories are essentially true. In reality, anecdotal evidence and intuition have played an essential role on both sides of this debate (see, e.g., the anecdotes that form the basis of the argument of Loftus & Ketcham, 1994, that repressed memories do not occur). Furthermore, qualitative reports are not always suspect, as is suggested by the science-anecdote distinction. Valuable data can be obtained from a presentation of case studies for which primary information is available to other researchers for scrutiny, whether offered by a person labeled as a “clinician” or as a “scientist.”

Perhaps some have mistakenly assumed that experimental methodology conducted in a laboratory-based setting is the only sort of systematic or scientific data that can inform about memory or any other phenomenon (in which case, what does one make of astronomy or paleontology?). Even though experimentation can be valuable and informative, especially in revealing causal relationships, systematic observation and documentation have in fact formed the bulk of the knowledge base in the world and can be just as informative here. After all, most psychologists have never questioned the notion of love, even though we suspect that no study could satisfactorily define it operationally within the context of an experiment, attempts to manipulate it would not be acceptable, and no one could adequately experimentally demonstrate its existence.

Overgeneralizations From Laboratory Data

Perhaps most serious among the misapplications of science in this debate are the overgeneralizations from laboratory studies to clinical cases of trauma (see DePrince & Freyd, 1999; Freyd, 1996; Gleaves, 1996; Gleaves
& Freyd, 1997; and Pope, 1996, 1997). For example, Roediger and McDermott (1995) used a standard laboratory recall task to demonstrate that participants sometimes inaccurately insert associated but never-presented words as part of a long list. Yet they began their report of these data in the *Journal of Experimental Psychology: Learning, Memory, and Cognition* with these words: “False memories—either remembering events that never happened, or remembering them quite differently from the way they happened—have recently captured the attention of both psychologists and the public at large” (Roediger & McDermott, 1995, p. 803). The phenomenon of errors in recall of information exceeding the typical short-term memory store has been known for decades (Bransford & Franks, 1971) and is sometimes attributed to probability guessing in response to information beyond the short-term memory capacity (Holland, 1975). Similarly, it is old news that people make errors in recall of information from long-term memory. Whereas the gist of memories are maintained (as in Roediger & McDermott’s findings), Deese (1959) demonstrated the intrusion of related words and Posner and Keele’s (1968) classic experiments show that a never-present stimulus is considered presented so long as it is prototypical for a category in which members were presented, and Freyd (1987) demonstrated that object position may be misremembered in the direction of implied motion (and many additional similar findings). Yet Roediger and McDermott (1995) presented their laboratory results as “dramatic evidence of false memories” (p. 812) in such a way that some readers might well understand this to mean dramatic evidence for the concept of false memories of abuse. (For specific critiques of generalizations based on methods and stimuli, see the response commentary by Freyd & Gleaves, 1996.)

The laboratory definition of false memory also does not apply to most cases of contested memories, where one side argues that the memories are not just false in detail but also false in essence. Thus, if someone who was exposed as a child to anal rape and was forced to watch pornography of vaginal rape later incorrectly remembered she was vaginally raped, would one argue that her memory was false (analogous to the false memories in the Roediger and McDermott, 1995, experimental paradigm) or essentially true with false aspects?

Also in many laboratory studies of false memory such as Roediger and McDermott’s (1995) experiment involving list learning, participants do not apparently experience their memories as recovered. Instead, the participants apparently experience their so-called false memories as continuously available. The results from these sorts of studies are thus arguably most applicable to memories experienced by people as continuous, not to memories that are experienced by people as newly recovered. A complication in this domain is that people may be incorrect in their assessments of how inaccessible or
accessible given memories have been; that is, one may forget having previously remembered something, or one may believe that a new memory has been remembered before. This potential for metacognitive error is true in the laboratory and in real life. It is interesting and disturbing that a false memory in a study not apparently involving “recovered” memory may be readily applied to recovered memories for abuse. The equating of memory errors (or memory accuracy) with memory recovery (or memory persistence) is a persistent problem in the memory debate (Freyd, 1998).

Problems of application are also common when results of laboratory research are applied to individual cases of contested memories, such as the infamous Ingram case. In 1988, Ingram, a deputy sheriff in Olympia, Washington, confessed to sexually abusing his two daughters. Later, after extended and repeated questioning, Ingram claimed to remember committing increasingly bizarre and horrific crimes. Charges based on these later confessions (which have been criticized widely for being inappropriately obtained) were eventually dropped. Ingram pled guilty to the original charges and was sentenced to prison. He later recanted all of his confessions; the appeals courts then ruled that the initial confession of sexual abuse was properly obtained.

In a newspaper article about the Ingram case (Shannon, 1996), psychologist Elizabeth Loftus was quoted as saying “it is entirely possible to take individuals and create wholly false memories in their minds.” The article reports that “Loftus said a scholarly journal this month reported on an experiment in which 90 percent of subjects would confess if you tell them someone else saw them do it.” Loftus was apparently referring to the article by Kassin and Kiechel in the May 1996 issue of Psychological Science. Kassin and Kiechel reported a single experiment in which participants were accused of damaging a computer by pressing the wrong key during a typing task. Although all participants were innocent, some participants came to confess to this “crime” after they were given false incriminating information by a confederate. Reporting this finding in an article about Paul Ingram would seem to equate accidentally and fleetingly hitting the wrong key while typing (something all typists have done) with a father repeatedly and intentionally raping his daughter over several years. Making such a leap in a presumably scientific journal is particularly egregious (Gleaves & Freyd, 1997).

Even when a study does appear to demonstrate a real-life memory fallibility, there are problems with overgeneralization. Loftus (Loftus & Ketcham, 1994) demonstrated that a minority of participants could be convinced by a close family member (or an experimenter who had talked with their parent) that they had, as a child, once been temporarily lost in a shopping mall. These results have been used in several scientifically unjustified ways:
(a) generalizing from a mildly stressful but not uncommon experience (being lost in a large store) to a highly stressful and uncommon experience (being raped), despite evidence to suggest that more traumatic memories are resistant to implanting (Pezdek et al., 1997)

(b) assuming that the influence of a close family member who insists that they witnessed an event is equivalent to the influence of a therapist suggesting that unwitnessed events might have occurred

(c) presuming that influence only happens in one direction (remembering things that did not occur), even though it is just as plausible to assume that a similar application of pressure from a family member insisting that abuse never happened could lead to an equal level of influence

(d) using the parents as the informants on what did or did not happen during the childhood of a college student participant, which assumes that the parent is an objective authority on the reality of that person's childhood experiences, even though there is no evidence that parents' memories are any more accurate than their adult children's.

Perhaps most disturbing to the scientific community should be the giant misstep made when a finding that some false memories can be created is used to impeach a particular memory.

Finally, there are problems in overgeneralizations from data on one topic, namely, the distortion of memory content, to conclusions about a conceptually and empirically different topic, the recovery of memories once forgotten. Although fabricated memories and recovered memories are both real phenomena, many people tend to tangle the two sets of issues into a hopeless snarl, so that evidence in support of memory distortions and errors is used to invalidate a particular recovered memory, whereas evidence in support of memory tenacity is used to validate a particular recovered memory. Because we know that an essentially true recovered memory is possible and that an essentially false memory is also possible, then logically individually contested memories can only be adjudicated on an individual basis.

WHAT CAN FEMINIST ETHICAL SCIENCE OFFER BEYOND A SCIENTIFIC CRITIQUE?

Beyond the basic concerns that any scientist should have about the specific uses of data and their interpretations, there are several actions
mandated by feminist ethics that could and should be applied here and to any similar situation.

1. *Demand logical and carefully crafted science*. Because the controversy involves disagreement about a complex reality, it is essential to attempt to separate the questions one is attempting to ask and answer. If one takes care to pose separate questions, one can find out which questions one in fact can already answer, which questions one cannot answer, and which questions carefully constructed research may allow one to answer. Do not attempt to decide whether a memory is true if deciding is not absolutely necessary. So instead of beginning from the question, *Is this recovered memory true? or even Are most of these recovered memories true?*, it would be a better investment for scientists to attempt to understand basic features of response to trauma, memory for trauma, and human vulnerability to memory distortion.

2. *Expose the gendered nature of this debate*. Gender is not at all incidental to the contesting of memories of abuse. It has been known for the better part of the past century that memory of a trauma can be unavailable to the male traumatized war or disaster survivor. McFarlane and van der Kolk (1996) noted that only after delayed memories were identified among female sexual abuse survivors (Herman & Schatzow, 1987) did the political forces muster to deny their existence.

   Throughout this debate, there are strong threads of antifeminism and sexism from those who assume those most vulnerable to implanting of memories are women, those who accuse feminists of creating a "child sexual abuse witchhunt," and those who regularly monitor and ridicule posts on feminist psychology email lists and their authors.

3. *Attend to power differentials*. Researchers need to be asking themselves over and over again the following question: What is the role of power and authority in what is being said and what is being believed? It is an ethical imperative, not just scientifically useful, to promote free discussion of these issues in any research. Attending to power differentials seems particularly important for researchers in this controversy. Laboratory scientists must attend to their power to define reality for others. It is the nature of child sexual abuse that those who allege abuse, even adult survivors, are invariably on average significantly less financially and socially powerful. Those who support them are often less powerful within the profession.
Free discussion must also include the freedom to criticize claims made by proponents—no matter how famous, influential, and powerful those proponents are in academic psychology. Abusive treatment of opponents, including such tactics as disruptive picketing, harassing legal actions, and ad hominem—hominum smears (Calof, 1998; Salter, 1998), must be challenged. As Pope (1996) stated, “that which tends to disallow doubt and discredit anyone who disagrees is unlikely to foster the specific venture or promote public policies and clinical practices based on scientific principles” (p. 971).

4. **Demand accountability in uses of one's own and others' research.** Researchers must make an effort to untangle the appropriate from inappropriate applications of research results to this debate. Disturbingly, many scientists have failed to meet the obvious overgeneralizations of laboratory research by false memory proponents with timely discussion of “good” and “bad” scientific ethics. Experimental psychology has much to offer in the current debate about memories for childhood abuse. However, with their enormous cognitive authority to define reality for the rest of the population, laboratory scientists must be especially conservative when arguing that laboratory results on memory generalize to contested memories of abuse.

Misleading the lay public with this sort of generalization without challenge has serious consequences for the justice system, suggesting that confessions to felonies are easily coerced and that memories of being criminally victimized are easily suggested. Thus, not only are the goals of psychological science best served by accuracy and caution in generalizing from laboratory to real-life situations (which may differ on fundamental dimensions), such accuracy and caution may also affect real people and events in current society.

5. **Explore the role of culturally instituted oppressions.** It is difficult to keep private traumas that generally affect oppressed individuals (women and children) in the public light. The silencing that occurs can be insidious, including not only overt attack, failure to respond, and so on but also internalized silencing of the private horrors. This can lead researchers in this area to pathologize victims. A feminist stance requires vigilance to protect against such destructive forces as infantilizing victims (also see Armstrong, 1994). We also think it will become increasingly essential to conduct research on abuse perpetrators, not just victims, but this remains challenging for many reasons.
6. Integrate a rational and scientific perspective with a moral and compassionate approach. Researchers have long held that the claim to objectivity frees them of any responsibility to individuals, other than not harming them while in the research setting (e.g., see Fisher, chap. 6, this volume). Thus, when data from a laboratory study are applied in a courtroom to ridicule a survivor, for example, the detached researcher can shrug his or her shoulders and claim value freedom. However, a feminist ethical stance looks beyond the individual participants in a study and explores the uses of data by society (or by oneself). This does not mean that one should only publish “positive” work or that one should ignore contradictory data. Instead, it means that one should consider on whom and how one’s data will have an impact. Extraordinary claims about the meaning or implications of one’s data should never be made, and any speculation should be reviewed for its potential uses and impact.

7. Accept responsibility for improving the lives of individuals and society through social action. Data can be used for positive social change. Feminist ethics demand that one not remain isolated from one’s roots as humans—women in society; instead, one should work in whatever role one chooses to improve the situation of all women. As a scientist, one has a particular kind of voice that can be heard in an influential way. One must put one’s skills and training as a scientist—and the credibility that comes with being a responsible scientist—to good use. One must be the voice for those without a voice, whether through poverty, education, socioeconomic or social status, or victimization. One must create opportunities to share data and critiques with others in a scholarly, accurate, and responsible way. When harmful claims about an individual or group are made, every effort should be undertaken to respond and correct the misrepresentation. In addition, where possible, one should carry out good science oneself to explore the questions faced in the contested memory and other significant debates.

8. Make self-care a priority. When so much is at stake, it is hard for some researchers to balance personal lives and privacy needs with demands to research, reply, and react. For some, activism and empowering others is energizing; for others, it is essential to avoid these issues. One needs to recognize and appreciate these variations and respect one’s own and others’ styles while demanding only the highest standards from all.
CONCLUSIONS

We conclude with some guidelines for researchers and consumers of research that arise frequently in the contested memories debate. We believe these ethical guidelines need to be considered whenever one conducts or disseminates scientific research.

1. Examine individual cases individually versus posing scientific questions to ask about the issues in general.
2. Sort out the appropriate roles of objectivity, power, and authority in the laboratory, therapy room, popular media, courtroom, conference, and archival journal pages and disclose overlaps and potential gain from research published in the scientific literature.
3. Examine the research and the uses of the research for social and cultural context.
4. Embrace the extraordinary importance of doing careful, open-minded, thoughtful, and ethical science by:
   ▪ posing scientific questions rationally, ethically, and clearly
   ▪ avoiding exaggerations and overgeneralizations while retaining commitment, passion, and motivation for one's work
   ▪ striving to be aware of biases and identifying them openly in one's work
   ▪ striving to be aware of power and authority (and use it responsibly)
   ▪ attending to the social context and the social implications of one's research, including who is framing the debate and the reasons for doing so
   ▪ attending to the language and terms used
   ▪ not using stigmatizing and terrorizing tactics in disagreements
   ▪ trying not to succumb to efforts to stigmatize and terrorize
   ▪ when possible, shining a light on stigmatizing and terrorizing tactics in an ethical and constructive way
   ▪ challenging authoritarian claims to scientific truth when such claims are not actually supported by the scientific evidence
   ▪ not colluding by replaying abusive power dynamics
   ▪ taking responsibility to keep the research grounded in human experience (listening to people's diverse and unique testimony, making the research accessible)
   ▪ helping create a political and cultural context for others to also do ethical, competent science
   ▪ keeping an open heart and mind.
Freyd’s (1996) conclusion sums up the hopefulness we share.

Survivors of childhood abuse and betrayal traumas have learned to be disconnected internally, so as to manage a minimal kind of external connection. But with adult freedom and responsibility comes the potential to break silence, to use voice and language to promote internal integration, deeper external connection, and social transformation.

(p. 196)

REFERENCES


