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From Refusal to Reconciliation

Family Relationships After an Accusation Based on Recovered Memories

Paul R. McHugh, MD,* Harold I. Lief, MD,† Pamela P. Freyd, PhD,‡ and Janet M. Fetkewicz, MA,‡

Abstract: In following families who reported to the False Memory Foundation between 1992 and 2001 that a member had charged them with incest, a survey questionnaire (with a 42% return rate) was sent to some 4,400 families. These data demonstrate that 99% of these accusers were white, 93% were female, 77% were graduates, 86% were in psychotherapy, and 82% accused their father. Such accusations were rare events before 1985 but then grew exponentially in frequency, peaking in the 2-year period from 1991 to 1992, with 579 accusations. Thereafter, such accusations steadily declined so that in 1999 and 2000, only 36 accusations occurred. The accusers can be differentiated in the manner with which they reconciled with the situation: 56% refused all family contact, 36% returned but did not discuss the accusation, and 8% retracted completely. These data give evidence of a time-limited craze of therapy-induced incest accusations that has now dissipated.

Key Words: False memories, sex abuse, rehabilitation, psychotherapy, posttraumatic stress disorder.

(*J Nerv Ment Dis* 2004;192: 525–531)

How does a family torn asunder by false accusations of incest ever come together again? That question—along with reports that families were now reuniting in growing numbers—prompted the False Memory Syndrome Foundation (FMSF) in March 2001 to undertake a survey of families that reported that they had been subjects of false accusations and recriminations. The FMSF, a 501(c)(3), was founded in

1992 in response to a flood of requests for help from parents who said that they were being accused by their adult offspring of childhood sexual abuse. These accusations were based on claims of recovered repressed memories. In addition to studying the problem, the foundation also helped families who believed that they had been falsely accused. Members of the foundation often asked how a family torn asunder could come together again. A survey might disclose how many families had actually reconciled, what process they followed in recovering, and what facilitated or inhibited their reconciliations. Such information would illuminate the nature of the strange psychiatric phenomenon of false memories, now entering its terminal phase (McHugh, 2003), and provide ways to encourage family rehabilitation.

Alienated families are not new, even if the phenomenon of incest accusations based on recovered memories is. The parable of the prodigal son indicates that family ruptures have been with us as long as there have been families. Until the false memory syndrome (FMS) epidemic, however, no sizable body of families afflicted by the same disruption was available for study. In one of its initial activities, the FMSF surveyed families that made contact to determine their characteristics and patterns (Wakefield and Underwager, 1992). Later, the Foundation studied how accusers could develop false memories of abuse (Lief and Fetkewicz, 1995). With the current survey, FMSF entered a new phase in moving to help families recover and reunite by investigating the large group of families available to it to discern what has worked and what may interfere with recovery.

The FMSF already had some experience with movement toward recovery. This information emerged mostly from anecdotal reports of reunification that some families sent to the foundation as early as 1993.¹ From these reports, we noted that recovery characteristically follows a process or

*Department of Psychiatry, Johns Hopkins University School of Medicine, Baltimore, MD; †Department of Psychiatry, University of Pennsylvania, Philadelphia, PA; and ‡False Memory Syndrome Foundation, Philadelphia, PA.

Supported by a special gift to the FMSF from Chris and Marion Koranokas and by contributions from other FMSF supporters.

Send reprint requests to Paul R. McHugh, Department of Psychiatry, Johns Hopkins Hospital, Meyer Building, Room 127, 600 N. Wolfe Street, Baltimore, MD 21287.

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ISSN: 0022-3018/04/19208-0525

DOI: 10.1097/01.nmd.0000136301.18598.52

¹The FMSF has archived thousands of letters from families after removing personal identifying information. These are available for perusal at the Center for Inquiry Libraries in Amherst, NY. In addition, anecdotal reports have been published in FMSF newsletters, available at www.FMSFonline.org.nrsid4470664.

path that can be separated into distinct stages. We identified three different accuser groups by the stage they had reached in recovery: the refusers, the returners, and the retractors. *Refusers* are the accusing offspring who refuse to agree that their memories and accusations were false and who reject contact with those who challenge their opinions. *Returners* come back to the family circle but fail to apologize, acknowledge error, or in any way withdraw their accusations. They may refer to the accusation so as to lay it to one side, but most often approach the central issue in the family with a deafening silence that keeps it out of bounds for discussion. Finally, *retractors* return to the family, acknowledge that the accusations are false, and seek to re-establish meaningful family relationships.

The survey, initiated in March 2001, used these proposed categories of accusers to develop our understanding of the reconciliation process. Did retractors, the ultimate reconcilers, always go through the returner phase? Was the process always unidirectional, or did returners ever change back into refusers or retractors into refusers? Was it crucial to reach the retractor phase for other forms of family life to proceed, or did the elephant in the living room aspect of the returner status interfere significantly with family harmony? What actions of the accused encouraged the accusers to move to returner or retractor status? We hoped to illuminate such matters and others by systematically surveying our families. In this article, we provide answers to some of these questions.

METHODS

Procedure

In March 2001, 4,400 survey questionnaires were mailed to past and present FMSF newsletter subscribers. We limited the survey mailing to subscriber families who reported they were dealing with an accusation by a family member 16 years or older. Scientists, psychologists, psychiatrists, clergy, students, and others who subscribed to the newsletter for educational or professional reasons did not receive the survey.

Survey

Each family received a survey and a cover letter.² To illuminate all features tied to return and reconciliation, the questions in the survey ranged broadly. We were interested in identifying the characteristics of this population and the particular events and experiences that might relate both to the original accusations and to recovery. The survey questions included the following: basic demographic information of the accused and the accuser; therapy issues and the nature and characteristics of the accusations; details about and qualities of the family's relationship with the accuser at the time of the

accusation; and finally, questions addressing how the accused came to deal with the separation and accusation over time.

To maintain privacy, the identifying information (name, address) of the respondent was removed from returned surveys and replaced with a coded ID number.

Below are the specific definitions of the refuser, returner, and retractor characteristics the survey asked the respondents to use in identifying the accusers' contemporary status.

Would you classify your accusing family member at this time as a: Refuser_Returner_Retractor_ given the descriptions of the 3 different types of people who made false allegations?

"Refusers" refuse to have contact with anyone who challenges their opinion

"Returners" in contact with family but do not retract; usually do not talk about accusation

"Retractors" acknowledge that accusations were false and seek meaningful family relationships

The families were also asked whether a mental disorder afflicted the accuser. Those who responded affirmatively to the question were asked to describe or name the mental illness or reason for treatment of the accuser. On receipt of the survey by FMSF, two raters coded these descriptive responses into more specific subgroups: DSM-IV Axis I and Axis II. If unable to be fitted into these first two categories, they were placed into either "disturbances in living" or "unable to categorize."

Survey respondents were given an opportunity to add written comments or clarification of their responses and frequently did so.

We made only one attempt to follow up on families who did not return the surveys: we sent a reminder letter (along with another survey form) 3 months after the first mailing to those nonresponders who were still active subscribers to the FMSF newsletter. We tried nothing further to enhance our response rate, because the FMS Foundation has maintained an unobtrusive role with the families who make contact.³

RESULTS

Returns and Return Rates

A total of 1,847 surveys were returned, for an overall return rate of 42%. The return rate from families who were current subscribers to the FMSF newsletter was considerably higher, at 68%. Of the 1,847 returns, 113 could not be used.

²Copies of the survey are available at the FMS Foundation, 1955 Locust St., Philadelphia, PA 19103.

³When families stop subscribing to the newsletter, there is usually one of three explanations: families have suffered illness or death, they have experienced reconciliation or the wish to put this awful period of their lives behind them, or they have given up hope and do not want to think about the situation any more.

In sum, we were left with 1,734 (39.4%) completed surveys to study and analyze.

Categorization of Accusers

By using the selective criteria described, the informant families categorized 56% of accusers as refusers, 36% as returners, and 8% as retractors.

Characteristics of Accusers

Accusers were overwhelmingly white (99%), female (93%), and daughters (88%). Seventy-seven percent of the accusers were college graduates, and 32% additionally completed some form of postgraduate education. The occupations of 77% of the accusers fell into the professional and white-collar categories of employment as described in the Hollingshead scale (Hollingshead and Redlich, 1958).

The accusers were mostly adult women, with a mean age at the time of the accusation of 32 years, with a range from 16 to 61 years. Of interest is the fact that retractors were significantly younger at the time of the accusation (mean age = 28.98) than either refusers or returners, whose mean age was 32 years ($p < .001$, one-way analysis of variance).

The informants reported that 86% of the accusers were in therapy at the time of the accusation. Ten percent of the families said that they did not know, and only 4% said that the accusers were not in therapy at the time of the accusation. According to survey informants, 48% of accusers suffered from or were treated for a mental illness before the accusation. (The majority of them were considered Axis I conditions when separated independently by two of us. Interrater reliability was 80%.) There were no significant differences in reports of mental illness before accusations among retractors, returners, and refusers.

Characteristics of Accused

Fathers were most often the accused people (82.03%). Because 37% of accusers accused more than one person (some as many as six), we distinguished between the person primarily accused and the persons secondarily accused (Table 1).

Eighty-seven percent of the fathers had occupations in the professional and white collar categories as described in the Hollingshead scale. The mean year of birth of the person primarily accused was 1930, with a range from 1888 to 1971.

Accusations and Their Characteristics

Families were asked to indicate the year that they first learned about the accusations. These ranged from 1970 to 2001, with a mean of 1991. Of great interest is the pattern of accusations, which underwent exponential growth after 1985 to peak in the 2-year period of 1991 to 1992, with a total of 579 (34%) accusations in those years. The number of accusations steadily declined after 1992, and only 36 (.02%) families learned of accusations in the 2-year period 1999 through 2000 (Fig. 1).

TABLE 1. Individuals accused as percent of total accused

	Primarily accused (N = 1731)	Secondarily accused (N = 985)
Father	82.03%	54.49%
Mother	9.65%	21.35%
Grandparents	2.48%	8.17%
Brother	1.91%	5.63%
Other	1.33%	5.67%
Uncle	1.50%	2.65%
Stepfather	0.87%	0.81%
Cousin	0.12%	0.37%
Sister	0.12%	0.85%

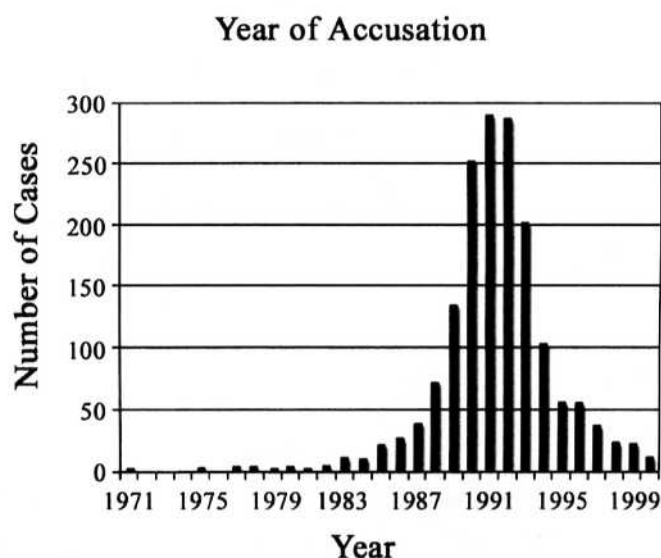


FIGURE 1. Number of cases according to the year each family learned of the accusation against them by a member.

In 92% of the cases, the accusations involved repressed memories, and in 19% of the cases, the accusations included claims of satanic ritual abuse.

The informants reported that the accusers claimed the alleged abuse began when the accusers were very young children, with a mean age of 4 years and a range from 0 to 18 years. The mean age of the accuser when the alleged abuse ended was 13 years, with a range of 1 to 50 years. However, many informant families were unable to define either when the alleged abuse began (37%) or ended (46%), because the details of the accusations against them were too vague.

Twenty-four percent of the accused were subjected to a confrontation by their accusers during a therapy session. Confrontations occurred significantly less often in families of refusers ($\chi^2 [2] = 25.819; p < .001$). On the other hand, refusers

