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Woodiwiss, Jo

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16 (Re)writing Memories: Childhood Sexual Abuse and Everyday Life

JO WOODIWISS

Everywhere we go, we are charged with telling stories and making meaning – giving sense to ourselves and the world around us. (Plummer, 1995: 20)

In telling and making sense of their lives women draw on the stories that are currently circulating but these are themselves both culturally and historically specific (Bauman, 2001; Lawler, 2002; Plummer, 1995, 2001). At the beginning of the 21st century the genre of story telling that has taken centre stage derives from a therapeutic culture, which, in competition with rival cultural claims, ‘provides a script through which individuals develop a distinct understanding of their selves and of their relationship with others’ (Furedi, 2004: 23). Women do not simply slot themselves into ready-made narratives, but they are constrained by the stories that can be told (Bauman, 2001; Plummer, 1995, 2001). One of the stories to emerge in the late 20th century portrays the experiences of women who had been sexually abused in childhood. This was a story of psychological damage, the ‘harm story’ (O’Dell, 2003) or ‘survivor discourse’ (Worrell, 2003) in which child sexual abuse was said to be so (inevitably) damaging that the effects, or symptoms, could be seen in adulthood. This was a story that could be told, not only by those who remembered their abuse, but also by those with no such memories.

This paper is based on a research project which looked at how and why women engage with the discourses of CSA, healing and recovery, whether or not they have memories or knowledge of having been sexually abused as children. The intention was not to question women’s memories or to look at their ‘truth’ or ‘falsity’. I contacted women through a survivor’s organisation called Cisters and the British false memory society (bfms). Women were asked if they would participate in a research project looking at their experiences of healing and recovery, not their experiences of abuse. Twenty-three women responded of whom 16 took part in the research. Of these, five had continuous memories, six had recovered memories and five believed they had recovered false memories. Following a short questionnaire, which provided a brief outline of their abuse (where known) together with some biographical material, I interviewed 11 women. The interviews lasted between two and six hours. A

further five women produced a written account based on the same structure as the interviews.

A central premise of the harm story is that traumatic memories such as those relating to childhood sexual abuse (CSA) are not encoded and stored in the same way as normal memories. Whether stored in the unconscious minds and bodies of victims or held by an inner child who split at the time of the abuse these memories are seen as unmediated versions of truth. Their emergence is seen as both spontaneous and ultimately inevitable. Those on the other side of the 'recovered memory wars' not only reject such an understanding of traumatic memories but go on to suggest that false memories of CSA are planted in the minds of weak and vulnerable victims.

Although the narratives women came to construct relied to varying degrees on the understandings promoted by the recovery literature, women did not use these as ready-made explanations or solutions. Nor did they adopt them as off the page scripts to be followed as a way to negotiate their lives. Rather they negotiated their own path through the literature and in doing so constructed, as an ongoing process, a narrative which made sense of their lives and an identity or sense of self which they were happy or at least satisfied with. Women were far more sophisticated in their use of the recovery literature than they are often credited with.

The sexual abuse recovery literature which draws on the 'harm story' and the 'healing discourse' promotes only one story and one answer to childhood sexual abuse (CSA). However, although all the participants engaged with this material this was not a view they shared.

The authors tend to write these books as if they are the answer to everybody's problems and as you read through them you realise they are not. There's bits in them that are useful for some people. (Fiona)

Not everything works for everyone, every way. We don't expect it in every other aspect of life so why do we expect it in this. Why should there be a bible that says oh this is right. (Jay)

Women who entered adulthood with continuous memories did not need to identify symptoms in order to know they were sexually abused. For those without memories the identification of symptoms might be the only way for them to 'know' they were the victims of sexual abuse. However, whether or not they had memories, women were able to make connections between adult difficulties and (perceived) childhood abuse which they found useful. It helped them to make sense of who they were, give meaning to their lives and construct a guide for living. For Angela a history of CSA explained and helped her feel better about the way she functioned in the world.

To actually identify that a lot of the things that were happening I could attribute to the abuse ... Even things like having trouble with bonding to children erm ... down to low self-esteem, not being able to settle and the fact that I dream greatly at night and used to sleep talk and sleep walk and still do ... And loads and loads of things have happened that I could pick up. Being able to know about it was a big step and being able to make the connection was a big step. (Angela)

Beccy had negotiated her way through a range of self-help material before being introduced to recovery literature by her therapist. Although benefiting from material such as that relating to diet she found the answer to her problems in the pages of a self-help text, *Secret Survivors* (Blume, 1990), that her therapist introduced.

She took me through the checklist and I'm saying yes, no, yes, no, yes, no, yes, no and she said ok. Well this is the book and you've got most of the answers correct so maybe have a read and see how you feel about it. So that was the first one really that I read. When I read it I still didn't have any memories then but I went yes, I mean if that's what happened that would explain it so much. That would really completely make sense but I still didn't have any memories then. (Beccy)

Beccy identified difficulties with sex as 'the main problem' but she was able to explain a range of other problems by drawing on CSA as a causal narrative:

I used to be scared of the dark ... if I go into a restaurant I always put myself with my back on the wall. (Laughs) I never used to trust anyone, very suspicious of anyone. I always think that men fancy me, I always think that they want to have sex with me ... lack of confidence, feeling bad about myself a lot, feeling that I am not good enough, that I can't do anything ... You know the main problem with intimacy and sex, that's the main problem ... always wanting to be in control. I'm a complete control freak, always feeling that I had to be in control. On top of everything, not being very spontaneous ... I always make sure that everything is planned, controlled and that I know everything ... problems with having fun and just relaxing. Not being able to relax, not being able to have fun, not being able to play ever. Always, always having to do things that were productive. (Laughs) ... having problems with people in general, being a bit of a social freak, not being able to chitchat not being able to just do light talking. (Beccy)

Beccy entered adulthood with no knowledge of having been sexually abused in childhood but nonetheless unhappy with her life and circumstances. When she identified herself as a victim of CSA she had been in therapy with her latest therapist for 18 months and invested heavily in a therapeutic solution to her problems. Through her reading of other self-help and self-improvement literature Beccy already accepted that both the cause and solution to her difficulties might lie within. Coming to believe that this might relate to CSA

may have been made easier for Beccy by the broad understanding held by her therapist.

She said it doesn't mean that you, that it was necessarily you, it could have been that you witnessed something ... it might not have been you. It could be anything. It could be that you've witnessed your parents doing something to someone else, or someone in the family or even it could have been someone not in the family, all sorts ... It could be anything it doesn't necessarily mean that it's you I thought ok, well it would be better if it was someone else. (Laughs) (Beccy)

Beccy's therapist was informed by an understanding of CSA that enabled the identification of sexual abuse in the lives of women who may otherwise or initially be resistant to such an explanation. Beccy ultimately rejected this indirect claim to abuse, believing instead that she had been sexually abused by her father. However, it may have helped her initially to accept that she was a victim of some form of sexual abuse as it provided a theory which explained her difficulties without the need to identify herself as a survivor or her father as a perpetrator of sexual abuse.

The majority of women in this study were able to draw on CSA as a causal narrative and, using this framework, construct a history in which sexual abuse was seen as the cause of present unhappiness. This in turn enabled them to look to the future to a time when, having healed, they would no longer be hampered by what they perceived to be the effects of having been sexually abused in childhood. However, not all women believed they had benefited from being identified as a victim of childhood sexual abuse or from constructing a narrative in which sexual abuse featured prominently. As demonstrated below, for Emma CSA as a causal narrative went too far and could be employed by others to negate her own thoughts and feelings whereas for Anne it did not go far enough.

Emma had continuous memories of having been sexually abused as a child and had visited a therapist to deal with those experiences. Whilst she found this period of counselling helpful in dealing with the sexual abuse a later period of counselling was a very negative experience for Emma. Following a miscarriage Emma had been upset and emotional which her GP suggested was due to the sexual abuse and referred her for counselling.

The counsellor was a nice enough woman, I just didn't think it was necessary for me to have counselling so I resented it slightly. I think it was because I had real problems (ie. I had just had a miscarriage) and I was understandably upset but I don't feel it had any relation to the abuse. So I found the fact that this woman kept wanting me to talk about the abuse, as if it was a problem, difficult to deal with, because I had other things going on that I needed to come to terms with. (Emma)

In this second period of counselling Emma felt her counsellor was:

Trying to tell me that I was abnormal and always would be because of my childhood. (Emma)

Emma's counsellor and GP, drawing on the recovery literature, had employed CSA as a causal narrative and in doing so had dismissed external factors and positioned Emma within a therapeutic framework in which her reaction to events rather than the events themselves were seen as problematic. However this use of a CSA narrative was not one which Emma chose or accepted. As an adolescent she had been able to draw on the recovery literature to help construct a narrative in which she identified a sense of self as both positive and normal but she rejected the continued use of such a narrative to explain her reaction to events in later life. In her youth a sexual abuse recovery narrative helped Emma face the future with a positive and optimistic outlook but in adulthood, rather than helping her deal with current events in her life, this narrative she believed hindered her ability to deal with these events and could be used to negative effect by others.

Although Anne had entered adulthood with no memories of sexual or ritual abuse she did have access to a traumatic history which others might have found provided an adequate explanation for unhappiness or dissatisfaction in their adult lives. She had witnessed the death of her younger brother and shortly after, whilst still feeling responsible, had been sent off to boarding school. Early on in her healing journey Anne had come to believe she was the victim of sexual abuse as a child. However, whilst this had at first helped her to make sense of her life and the difficulties she experienced, after a number of years she had not identified sufficient improvements in her life and was still experiencing difficulties. Anne had invested heavily not only in a therapeutic solution to her unhappiness and the difficulties she was facing but also in the idea that her problems stemmed from childhood trauma, and more specifically from sexual abuse.

Central to the sexual abuse recovery literature is the idea of an inner child, or damaged and therefore child like part of the adult self. It is this inner child who was not only damaged by the abuse and therefore in need of healing, but who is also said to hold the knowledge of that abuse – particularly significant for those who have no memories. A number of women identified the idea of the inner child as problematic – particularly where she was seen as separate – but for Anne this concept offered access to additional knowledge through which she may be able to make sense of and improve her life. Anne identified herself as having multiple personalities and 'existed as part of a group'. The inner children with whom she had come to share her life (of whom she had so far been in contact with over 20) also provided her with a way to negotiate her way through the adult world and to mediate against those aspects of everyday life that, as an adult, she found difficult.

A history of CSA had at one time provided Anne with an adequate explanation for her unhappiness but over time it was no longer enough. The narrative she told of her life drew on increasingly traumatic experiences, which she found in the ritual abuse literature.

I do find a difference between incest survivors and ritual abuse survivors. In the ritual abuse world there is a hell of a lot of toughness and humour, that you're really up against the wall and people don't survive unless they're very tough and have got a terrific sense of humour and people can't work in the area unless they are very tough. Whereas ... incest is milder. (Anne)

Anne did not simply follow a script set out in the literature but we can see in her adult life a 'progression' from childhood trauma through incest to ritual abuse, which to some extent mirrors developments found in the literature. Initially believing herself to be the victim of sexual abuse she had, by the time of the interview come to believe that she was the victim of ritual abuse and shared her life with hundreds of alters, some of whom had alters of their own.

So you see it's a completely different set up. I've been reading this book about it, I photocopied some of it and you know all the time I'm reading it people are screaming and screaming inside. So I know there's a lot to learn from. They were talking about children who took the abuse would also fragment into sub-personalities and I now realise because three of them who took the worst of the abuse have surfaced and they have sub-personalities I think now. I may be wrong but I think they're sub personalities of Minuet, the dear little girl who took most of the abuse. (Anne)

Like the other women in this study, Anne has not simply followed a ready-made script. She has drawn on the explanations and narrative frameworks provided in this literature to construct a history which not only makes sense to her but which also provided her with others tools (such as the inner child) which contributed to her ability to function in the adult world. Drawing on a discourse of Multiple Personality Syndrome (MPS – a term preferred to Dissociative Identity Disorder by participants) has enabled Anne to construct a different narrative to that of 'mere incest'. This new story also provides her with the opportunity to contact hundreds of 'alters' or inner children with whom she has come to share her life.

We live in a world of story telling but the stories we tell change with the societies in which they are told (Plummer, 1995). In the feminist moment of sexual abuse story telling of the 1970s connections were made between the personal and the political and women could tell of power and resistance, of survival and 'the other side of being a victim' (Kelly, 1988). However in the cacophony that is the contemporary telling of recovery stories 'children's voices, women's voices, are once more not, in any purposeful sense, being

heard' (Armstrong, 1994: 7-8) and women are removed to the now very public world of (private) therapy and recovery. Whilst some women may speak from a position of autobiographical certainty others may be condemned 'to a tormenting state of autobiographical limbo' (Tietjens-Meyers, 1997: 246) in which they may never be sure of the foundations on which their stories are based, certain only in the knowledge that they have in some way been damaged and are responsible for putting that right.

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