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Woodiwiss, Jo

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13 Alternative Memories: Searching for Knowledge, Telling a Story

JO WOODIWISS

Drawing on a research project looking at women's engagement with the sexual abuse recovery literature this paper explores the role of 'alternative memories' (body memories, feeling memories, acting-out memories, imagistic memories, symptoms of abuse in adulthood) in women coming to 'know' they were sexually abused in childhood. Particularly for women who enter adulthood with no memories or knowledge of such abuse, these alternative memories often represent the only evidence women have for a sexual abuse history and occupy a central position in the sexual abuse recovery literature. I look at these memories as a source of knowledge on which women base their narratives and sense of self. I go on to explore the extent to which this knowledge comes from 'within', as argued in the recovery literature, or whether it is more related to the cultural conditions of our time, and what difference this has had on the women whose narratives are based on such memories.

Introduction

The recovered memory movement appears to be about uncovering buried memories but memory is 'not needed for survivors to begin the acknowledgement process' (Dinsmore, 1991:56) or the healing process as 'one does not need memory to heal from abuse' (Dinsmore, 1991:65):

> Many women don't have memories, and some never get memories. This doesn't mean they weren't abused. (Bass and Davis, 1988:81)

Healing from childhood sexual abuse, particularly for those without memories, is not so much about recovering memories as it is about coming to 'know' you were abused and recognising the damage.

A pervasive theme running through the recovered memories debates is the belief, held by those on both sides, that childhood sexual abuse (CSA) is a devastating experience that inevitably has devastating long-term effects. This allows for 'knowledge' or 'memories' to be uncovered from the minds and bodies of victims. A central premise of this literature is that traumatic

memories are not encoded and stored in the same way as normal memories. These 'alternative' memories take the form of body, feeling, acting-out and imagistic memories or symptoms, and may be experienced as dreams, flashbacks, bodily experiences such as pain and nausea, and feelings such as sadness, depression, anxiety or fear. Seen as unmediated versions of the truth (for example Bass and Davis, 1988; Blume, 1990; Courtois, 1992; Fredrickson, 1992; Herman, 1992; Olio, 1989; Whitfield, 1995) their emergence is said to be spontaneous and ultimately inevitable.

These alternative memories provide knowledge and enable victims to 'validate concretely what they know intuitively' (Dinsmore, 1991:65). For those whose mind 'chooses to forget' the 'body remembers' and the memories are stored in our bodies, so it is 'possible to physically re-experience the terror of the abuse' (Bass and Davis, 1988:74-5). Victims are told, 'everyone has a child within her' (Hall and Lloyd, 1989) and 'within all of us there is an inner voice telling us how we feel' (Bass and Davis, 1988:117). This voice may be experienced in a variety of ways - dreams, headaches, exhaustion, obsessive cleaning, 'the important thing is not what you experience, but that you recognise it as a message' (Bass and Davis, 1988:117). For those who might not have conscious knowledge it is said that their unconscious:

> Had for years been speaking to them in a variety of languages - bodily symptoms, emotions, sexual problems, compulsive self-abuse, and strange dreams and fantasies. (Cameron, 2000:158)

Validation of this knowledge is said to take the form of 'sense memories, childhood coping skills, childhood and adult behaviour patterns and acquired survival skills' (Dinsmore, 1991:64). Knowledge of abuse is believed to be ever present in the minds and bodies of victims. It can be held by an inner child or stored in a damaged and therefore childlike part of the adult victim.

A central belief amongst recovered memory advocates is that the expression of this knowledge is not a conscious act but rather a spontaneous and inevitable display of the effects of past trauma. These 'implicit memories of trauma have a life of their own' (Hovdestad and Kristiansen, 1996:43) and neither therapist nor victim are thought to be responsible for their emergence but rather 'reality had broken through' (Cameron, 2000:178). According to Dinsmore (1991) flashbacks, which include bodily sensations and feelings as well as visual images, 'occur because the survivor is ready to deal with the memories of her abuse' (Dinsmore, 1991:66). The accuracy of these memories and the view of the inner child as an 'objective observer' or recorder of events is reinforced by the idea that for her 'time was frozen' or 'stopped at the moment of trauma' (Dinsmore, 1991:59). By contacting their inner child survivors gain access to knowledge which they either 'see' or 'experience':

> Startle reactions, flashbacks, and sleep disorders, such as nightmares, occur, replicating the experience as if it were happening at that moment.
>
> (Dinsmore, 1991:59)

The victim is said to 're-experience the original abuse (Bass and Davis, 1988:73), seen 'through the child's eyes' (Cameron, 2000:195). Flashbacks are involuntary and spontaneous but victims can also 'record and use the flashback as a way of going deeper into childhood memory' or later 'relive the flashback with congruent effect and gain access to further events of her childhood' (Dinsmore, 1991:66).

The Research

This paper draws on data from a research project looking at women's engagement with sexual abuse narratives - whether they had, by their own definition, continuous, recovered or false memories of CSA. Of the 16 women who participated five had continuous memories, six had recovered memories and five had false memories (although three of these five did not reject entirely the idea that they had been sexually abused).

Symptoms as Knowledge

The most obvious form of knowledge participants were able to identify took the form of symptoms in their adult lives, seen as the influence of an inner child or a damaged psychology. Whether through reading self-help manuals, articles in magazines and newspapers or through listening/watching radio and television programmes women were presented with a vast array of potential symptoms from which to choose. An example of these symptoms can be found in 'The Courage to Heal' which lists over 70:

- Do you feel powerless like a victim?
- Do you have a hard time nurturing and taking care of yourself?
- Are you able to enjoy feeling good?
- Do you feel unable to protect yourself in dangerous situations?
- Have you ever experienced repeated victimization (rape, assault, battery) as an adult?
- Can you accomplish things you set out to achieve?
- Do you feel you have to be perfect?
- Are you comfortable with anger? Sadness? Happiness? Calm?
- Do you have a hard time loving and accepting your body? Do you feel at home in it?

- Do you often feel taken advantage of?
- Do you find your relationships just don't work out?
- Can you say no?
- Do you often have sex because you want to, or only because your partner wants it? (Bass and Davis, 1988: 35-38)

Elsewhere Blume in her survivors' after-effects checklist lists 'Denial: no awareness at all' (Blume, 1990) and Fredrickson suggests that 'profound disbelief is an indication that memories are real' (Fredrickson, 1992:171).

Identifying symptoms was for many their first indication of childhood abuse:

> When I read 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)

Knowledge and Supporting Evidence

All the participants were able to identify symptoms in their adult lives but some felt they needed more concrete knowledge. The understandings of CSA and alternative memories promoted within the recovered memory literature offered a way to gain such knowledge. It could be held by an inner child or could be stored in the unconscious mind or body of the adult victim. It might surface spontaneously or they might need to contact that part of their child or adult selves thought to hold it. Women did not feel constrained to adhere to only one but drew on different conceptions at different times.

Fiona relied on an inner child to access otherwise unknown knowledge and at times felt overwhelmed by it 'breaking through':

> It was as if I wasn't able to keep the lid on it anymore and the memories just popped out, just came out … I wasn't able to control them anymore and out they came. (Fiona)

For Beccy accessing knowledge could be hard work. At times she actively sought out her inner child 'to help me get the memories back' (Beccy). Elsewhere in her account she refers to the surfacing of a different form of knowledge over which she had no control:

> I get emotional flashbacks, I'm not reacting to what's happening. (Beccy)

Knowledge which surfaced in the form of emotions and feelings was important to a number of women and, they believed, connected them directly to their abuse:

> I don't know what age I began to be abused at but that seems to be the age that now - if I get really upset, that seems to be the age that emotions regress back to. And where I can't talk about what's going on, I'm not able to verbally express or tell anyone or ask for help and I feel really upset because I can't do that at that age. All I can do is express how I feel … in emotions, in crying or shouting or rage, whatever physical way I can - I'm expressing these strong feelings. I'm too young to be able to talk about them and that wee person wants listening to. (Fiona)

Anne, who believes knowledge of her abuse is held by hundreds of inner children, sometimes accessed this knowledge by putting herself in a trance, 'that's what you have to do to let the little ones talk' (Anne).

This knowledge might not provide detailed information but, where it was thought to be an inner child re-experiencing the abuse, it was seen as an accurate reflection of feelings and emotions and was enough for women to 'know' they had been abused. It was a form of knowledge, they believed, that did not lie. Angela and Jenny both found connecting with their child's emotions to be a powerful experience:

> It's much more intense than just writing to your inner child if you like, because it's feeling what she's feeling. (Angela)

> What we are doing is feeling the pain that we couldn't feel as a child. (Jenny)

At times Fiona felt her inner child took over her life. It was her inner child who held the knowledge of abuse and who chose when to bring it to the attention of the adult Fiona. Attributing memories to an inner child enabled women to distance themselves from the process by which they surfaced.

Although many understood their emotions and feelings to be an inner child reliving the abuse they did not need an inner child to access this knowledge. Even those who recognised an inner child as a source of information did not rely solely on her for knowledge. Fiona, for example, identified strongly with the idea of a child self, but was also able to access other memories:

> Not visual memories, more memories of touch and smell and sound because this happened at night. (Fiona)

Informed by the recovery literature, she believed 'my other senses have got memories' (Fiona).

Sarah, who recovered one 're-call memory', was the only participant without continuous memories who did not rely on 'alternative memories' to know she was abused. She talked of when her memories 'came through' and believed additional memories would surface if they needed to. She had also used different concepts to explain, and access, hidden knowledge which she

believed lay waiting to be uncovered. Whilst she believed this might be brought to the surface by her unconscious, she had also considered taking a more proactive approach:

> Because if my conscious or whatever needs to bring it out, it will bring it out … if I go to hypnosis it might bring it up then. (Sarah)

Whilst some recognised an inner child as separate, others saw her as more fluid and the degree to which they saw her as separate varied over time. Angela's inner child often came when she was finding life difficult, which she believed was:

> Normally a clue to me that there's something deeper going on that I need to deal with. (Angela)

Fiona's inner child became more separate after she read *Rescuing the Inner Child* (Parks, 1990). She was not sure if that was a 'positive thing or not' but said that since reading the book:

> It feels to me now that that part of me is a very separate part of me now whereas I'd never before had that idea in my head. That part was more integrated into all of me but since I've been into that idea of starting to think about it more there seems to be more of a distance between me and myself when I was wee. (Fiona)

Beccy was much clearer about her child self. She acknowledged a childlike part who held knowledge, but did not see her as a separate personality. This child she believed:

> Has the memories that me as a child who was abused … Obviously it's myself telling myself but it's that part of my mind that's been shut out. I think I don't want to listen to it. I want to, consciously I want to but obviously subconsciously I don't, otherwise I would know. (Beccy)

Although clear that her child self is not a separate personality Beccy did credit her with a degree of control over her adult self and the process of healing. Having considered a variety of techniques to recover knowledge, Beccy attributed her failure to engage with them to the child like part of her mind:

> I haven't done much of it because I'm quite resistant to it. I want to but my mind's resistant to it so it's not quite worked so far. (Beccy)

Not all the participants recognised or developed a relationship with an inner child. For those without memories who did not, the idea that memories were stored in the unconscious mind or body was something that made sense and

provided an explanation for hidden memories. Even those whose memories were held by an inner child did not rule out the possibility of additional memories.

Most participants without memories relied on hidden knowledge which they thought surfaced spontaneously and inevitably. Many also reported actively seeking out additional knowledge, or supporting evidence. The literature suggested a number of techniques for this and although many involved contacting an inner child some, such as guided flashbacks need not. For some women, the desire for additional knowledge related to the extent to which they felt their lives had improved. At one point Fiona claims that 'there's enough in my memory that I know what happened, I know who did it (Fiona), but at other times felt the need to try and contact her two-year old self for more information.

Fiona thought about accessing knowledge she did not yet have and it was her understanding of CSA which enabled her to identify the existence of this knowledge. At the same time her investment in recovered memories and healing may have encouraged her to look for knowledge whilst she was still unhappy with her life.

For others, contact with an inner child was seen as more spontaneous and less under the control of their adult selves. Beccy believed information provided by her child was an accurate reflection of past events. However, she also used photographs of her self as a child, particularly where she looked unhappy to access memories, and would:

> Look at them before I go to bed at night and to try to communicate. Ask that little girl that I was, what happened, just to help remind me. (Beccy)

Whatever the source, women's newfound knowledge was often partial and not easily understood. Often it came in the form of dreams and whilst they might be sure it related to sexual abuse, women did not always know what the dreams were telling them. As Anne says,

> We maybe have been having dreams … the best pattern is that I go with my dreams and often it's just a fragment when I wake up. It's just a sentence and the whole thing comes out of that. In the therapy session we just work on the fragment.
>
> (Anne)

Not The First Author

Five of those who entered adulthood without memories, although able to identify 'symptoms' in their adult lives, were introduced to the idea that they had been sexually abused by a therapist and did not gain access to 'alternative

memories' without assistance. Ultimately all five rejected the memories they recovered during therapy but their explanations for this varied.

For Hazel, Rae and Pat, memories surfaced during a hypnosis or scientology session. Hazel and Rae were trying unsuccessfully to lose weight whilst Pat wanted to address ME type symptoms. The idea that their concerns resulted from being unhappy made sense to them. When a therapist suggested they needed to discover the cause of their unhappiness he tapped into ideas that resonated to some extent with the women's own belief systems. As Rae commented:

> I've always been like that and I used to wonder what I was pushing to the back. (Rae)

Hazel's attempts at weight loss involved hypnosis. She did not recognise an inner child but relied instead on regression and the interpretation of dreams by her hypnotist as a way of accessing knowledge of past abuse. She would either take dreams to be interpreted or, whilst hypnotised, regress to recover other memories which also needed interpretation:

> He would analyse them. It could be like I said about a house and a red box and I would be the house and dad would be the red box and it had been squashed ... Things like that. (Hazel)

Hazel had believed these interpretations but began to recognise that her dreams could be read in different ways:

> I mean sometimes a dream makes sense. Yeh sometimes they do don't they, they do make sense sometimes. But those dreams, I don't know he just made things out of them. (Hazel)

Although Hazel came to question the interpretation of her dreams, like Pat and Rae, she did not reject the idea that hypnosis could uncover hidden knowledge. It was this belief which may have made it difficult for them to reject entirely the idea that they had been sexually abused:

> I've always believed that anything that comes out in hypnosis is the truth. And I couldn't get away from that, I kept saying well it must be true because it's hypnosis it must be true. (Rae)
> I believed everything, I believed everything. (Hazel)

A belief in knowledge stored in the unconscious had contributed to their acceptance, albeit short lived, that they were victims of sexual abuse. When they came to doubt these memories it was this same belief that enabled them to construct an alternative explanation, in which they could reject the specifics of

their memories but not the underlying theme. Pat and Rae used the idea of past lives to maintain a belief in hypnosis whilst also rejecting the idea that it was their fathers who had abused them:

> I had to say well look if I haven't been abused in this life I must have been abused in a previous life. That has to be the answer. Whether or not it is I'll never know but I had to believe that that was the answer because I had to cling on to something. (Rae)

Pat also saw past lives as a credible and acceptable explanation but was aware of alternatives:

> This could have been in a past life or it could have been something I'd seen on television or something. (Pat)

Hazel did not share a belief in past lives, but she too found an explanation which did not challenge her abuse narrative only that her father was the perpetrator:

> I just think it's real, that I really do think it's real … I'm sure something happened but not with my dad. Absolutely positive something happened. (Hazel)

All three acknowledged that their own wishes and motivations influenced their explanations. In ruling out her father, Rae acknowledged that her reasoning was based to some extent on the outcome she wanted. She wanted to protect her image of her father and maintain a belief in hypnosis:

> I couldn't rule out the possibility that I'd been abused, I could only rule out dad's part of it. But whether I have ruled that out in my head because I loved him so much and protected his image I don't know, I honestly don't know and I'll never know will I. (Rae)

Their own understandings of buried knowledge enabled all three to explain hidden knowledge and 'false' memories. However, as they did not challenge the idea that knowledge could have been buried, they were able to construct new narratives based on 'false memories' but they could not do so with certainty. As Hazel said:

> When I think about my dad and I look at his photo in the dining room, yeh I always wonder; did you or didn't you? (Hazel)

Conclusion

This research is not about the veracity of women's stories but an attempt to look at how and why they tell the stories they do. All the women in this study had drawn on one of a number of currently circulating narrative frameworks and in doing so had been able to tell a story of their lives which made sense to them and which helped them to make sense of those lives. For some their stories drew on already remembered sexual abuse whilst others relied on piecing together clues - clues which they (re)interpreted as alternative memories and therefore evidence of abuse. The current orthodoxy on childhood sexual abuse constructs victims as inevitably damaged and in need of healing and it is this which enables women's unhappiness and dissatisfaction to be reinterpreted as evidence of sexual abuse. Whether they have continuous or recovered memories women are encouraged to reinterpret their lives within a therapeutic framework that serves to construct them as psychologically damaged and to blame for their own unhappiness and dissatisfaction.

The stories of those who participated in this study are based on a particular understanding of CSA and its consequences without which they would have told very different stories. This is not to suggest that their stories are untrue or that they slotted themselves into ready-made narratives but to argue that their stories were informed and constrained by the narrative frameworks currently in circulation. One such framework is the 'harm story' (O'Dell, 1997, 2003), which has become so firmly established that the voices of those who do not conform are silenced whilst those which conform are celebrated. There are other stories which could be told. Stories in which women identify the social, material, economic and political constraints which restrict their possibilities. These are stories in which women do not have to construct themselves as psychologically damaged and ultimately responsible for their own unhappiness, whether or not they have been sexually abused. In order to write such stories women must look to the outside world and not focus their gaze exclusively within.

We can after all be imprisoned as well as liberated by the stories we tell (Tavris, 1992).

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