

WHEN GOOD PEOPLE DO BAD THINGS: MEDITATIONS ON THE “BACKLASH”

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We are potentially moral animals - which is more than any other animal can say - but we aren't naturally moral animals. To be moral animals, we must realize how thoroughly we aren't.

Robert Wright, *The Moral Animal*

There were evil thoughts in men, and they were revealed for this reason, that being brought into the open they might be destroyed, slain, put to death, and cease to be ... For while these thoughts were hidden and not brought into the open they could not be utterly done to death.

Origen, Third Century A.D.

BOOK WAR AND BACKLASH

A war is being waged, today, on my desk. It is a war of ideas, opinions, and in some cases - facts. Like so many wars, it began with the personal and has now expanded to the political (if the personal is *ever* separate from the political). It began with individuals throwing verbal rocks weighted with fear, hurt and misunderstanding, rapidly expanded into various sorties and skirmishes as more people were recruited on one side or another, and now major battles are in preparation with efforts afoot to include the entire nation in out and out warfare. On one side of my desk are stacked titles like *The Battle and the Backlash: The Child Sexual Abuse War* (Hechler, 1988), *Rocking the Cradle of*

Sexual Politics: What Happened When Women Said Incest (Armstrong, 1994), *Backlash: The Undeclared War Against American Women* (Faludi, 1991), *Denying the Holocaust: The Growing Assault on Truth and Memory* (Lipstadt, 1993), *The Collective Silence: German Identity and the Legacy of Shame* (Heimannsberg and Schmidt, 1993), *Red Hunting in the Promised Land: Anticommunism and the Making of America* (Kovel, 1994), *Race Matters* (West, 1994), *The Undeserving Poor: From the War on Poverty to the War on Welfare* (Katz, 1989), *The War Against The Greens: The "Wise-Use" Movement, the New Right, and Anti-Environmental Violence* (Helvarg, 1994), and four years of reports from the U.S. Advisory Board on Child Abuse and Neglect. All of these books represent a call to arms, the ringing of alarm bells, warning in various ways that those who challenge the status quo, the holders of power and money, are ever susceptible to attack, propaganda, lies, and betrayal and even violence. They warn that the social gains made in the last few decades in service of rights for women and children, efforts to protect the environment, and attempts to grapple with the true nature of man's inhumanity to man, are all being jeopardized by a backwards movement, a denial of reality, a *backlash*.

On the other side of my desk lie, *Making Monsters: False Memories, Psychotherapy, and Sexual Hysteria* (Ofshe & Watters, 1994), *Suggestions of Abuse: True and False Memories of Childhood Sexual Trauma* (Yapko, 1994), *The Myth of Repressed Memory: False Memories and Allegations of Sexual Abuse* (Loftus & Ketcham, 1994), *A Nation of Victims: The Decay of the American Character* (Sykes, 1992), *The Abuse Excuse: And Other Cop-Outs, Sob Stories, and Evasions of Responsibility* (Dershowitz, 1994), *The Bell Curve* (Herrnstein & Murray, 1994) and scores of newspaper and magazine articles declaring the presence of a "sexual hysteria", the cruel and inhumane persecution of innocent men accused of molesting children, usually their own. The authors of these books and articles warn against uncritical belief in the memories of others, they tell us that supposed victims are just looking for someone to blame for their problems, finding excuses where there are none, remembering things that never happened, themselves victims of the "therapeutic culture", and suggestions that, in any case, some of them are genetically inferior anyhow.

The war these books are fighting is, as perhaps all wars should be, within my head. Kept within the confines of my head, or anyone else's, this war provides no danger to health or safety, but is instead a challenge of synthesis, an intellectual stimulus to a higher level of mental integration. Unfortunately, however, this is not an intellectual war, but a war that is being fought in the media, in the courtrooms, and in legislative chambers. Even now, moves are afoot to propose legislation at the state and federal level that, if passed, would effectively eliminate the practice of psychotherapy entirely under the auspices of aiming to legislate out of existence something called "memory retrieval therapy" (Quirk and DePrince, 1994). That such material would even be

proposed is frightening enough. That it will surely capture the ear of a constituency eager to actively, and not necessarily democratically, suppress social and political change in any of its forms is an even more alarming possibility, particularly given other worrisome indicators in our political environment. Do not think for a minute that this is just an issue of backlash against accusations of sexual abuse. Although surely the voices come from different mouths, the tactics of various backlash groups are uncannily similar, perhaps springing from the same all-too-human resistance and fear of change to the status quo. All of these voices are filled with hatred and arrogance, attitudes which hide fear, shame, guilt and grief, all of which are denied on the inside and projected outside instead. This is not conservatism - it gives conservatism a bad name. Conservatives urge caution and balanced, careful change. When liberals urge us to "hurry up", conservatives do not say "don't go", they just say "slow down". The extremists, on either side of the political spectrum say "go backwards", and therein lies their inherent danger.

The Holocaust deniers urge us to forget the past, erase it, say it did not even happen, distort it in such a way that it no longer carries any meaning, and even if it happened it was the victims' fault (Lipstadt, 1992). The racists say that social welfare programs do not work, that there are plenty of jobs if people want to work, that black women have babies just to collect welfare money, that African-Americans are genetically inferior - anything that justifies blaming the poor for poverty (Freedman, 1993; Katz, 1989; New York Times, October 24, 1994). The anti-environmentalists say it's not as bad as it seems, the bad things really didn't happen and if they happened they really were not as bad as the environmentalists said they were, and anyhow the cost for solving the problems is too high and the future will take care of itself (Helvarg, 1994). The anti-feminists say that families are being destroyed by women, women are asking for too much, women have it all already, it wasn't (isn't) that bad for women anyhow, women are sick, crazy, weak, too strong, masochistic, sadistic, etc., etc., etc. (Armstrong, 1992; Faludi, 1991; Henry, 1994). Now women (what about all the male victims?) are falsely accusing innocent people of past deeds that never happened, although, since they are sick (weak? stupid?), it is not their fault but the fault of money-grubbing psychotherapists who are foolish enough, poorly trained enough, or greedy enough to actually believe what these sick (weak stupid) women say. Worse yet, there are apparently hundreds, maybe thousands of these psychotherapists who are deliberately implanting false ideas in the minds of these sick (weak, stupid) women's heads supposedly for financial reasons. All of these movements focus on denial (it did not really happen), projection (anything that did happen is your fault, not mine), distortion (it's not as bad as it seems; my data is scientific but yours is irrelevant; repression doesn't exist but forgetting does).

All of these movements take full advantage of the media as the best vehicle for the dissemination of propaganda. All of them use legitimate channels like journal and book publishing and scientific studies that can be distorted to suit their purposes. An example from the Holocaust deniers:

One of the tactics deniers use to achieve their ends is to camouflage their goals. In an attempt to hide the fact that they are fascists and anti-Semites with a specific ideological and political agenda - they state that their objective is to uncover historical falsehoods, all historical falsehoods. They publish a journal, Journal of Historical Review. which in format and tone mimics serious, legitimate social science journals (Lipstadt, 1992).

All of them manipulate language to choose words that are nebulous in meaning but inflammatory to public opinion in order to justify their position.

“Syndrome” is used simply to create an aura of scientific legitimacy. And false memory? Many adjectives - distorted, complex, layered, altered - could have been used to describe the potential vulnerability of memory, but with the choice of “false” the impression of a lie is subtly conveyed (Olio, 1993).

Although they are all addressing issues that are in some way vital for healthy human survival and that, therefore, are very complicated and extremely interconnected, none of them present a balanced view, nor do they make any attempt to synthesize the multiple levels of meaning that are implicit in these issues. Instead, they oversimplify the problems, create false dichotomies, and then use ridicule and contempt for anyone who disagrees with this process - argument through intimidation. The use of the threat of lawsuits has been a particularly virulent way to terminate open discussion. In many cases, not even facts impact on their position. As Denise Gelinas has pointed out: *“Perhaps this should be the primary criterion for the identification of a powerful Kuhnian external - the evidence makes no difference”* (Gelinas, in press).

Data didn't help. We could show that false allegations of sexual abuse were not more prevalent in custody and visitation cases than in any other cases. And that it is simply untrue that there is any explosion of false allegations of sexual abuse in custody and visitation cases. We could show that recent studies found that the vast majority of fathers were awarded sole or mandated joint custody where the custody was contested. And that where sole custody was sought and awarded, fathers won in most cases, including one quarter of all cases where they were either proven or alleged to have physically and sexually abused their children. We could elucidate the absolute lack of empirical evidence in the published claims of certain professionals trumpeting an epidemic of false accusations. ... But that didn't help. Evidence didn't help either... (Armstrong, 1994).

And all of them make free use of the destruction of memory, playing to the human need to forget the painful past and seek the most pleasure in the present, like mothers whose memories of the suffering of labor is supplanted by the joy of birth. This natal forgetfulness urges the continuation of the species. But the same persistent forgetfulness outside of the experience of the delivery room leads to callous disregard for the true victims, repetition of trauma and ultimately, self-destruction. If we cannot remember the past, we cannot learn from it.

I cannot coolly evaluate both sides of this war, this struggle for public opinion. I am too involved in the struggle. Like most of my colleagues, I have carefully listened to the “other side”, intellectually sophisticated enough to know that any apparently opposite position carries within it at least a kernel of truth - the yin-yang thing. I understand that we are just learning about the vagaries of memory processing. I understand that human beings can exert pressure on each other. I understand that we often exploit each other for our own purposes. I have spent a professional lifetime struggling to establish and maintain standards of professional excellence that include exposing patients to the “do no harm” mandate of my Hippocratic oath. I deplore practices that expose patients to the abuse of power or privilege in any way, particularly those that encourage the exploitation of psychiatric authority most importantly the power to sexually abuse patients (why has there not been a similar uproar about *that* behavior on the part of therapists?). There *are* bad therapy practices and there *are* incompetent or misguided therapists - just as there are incompetent lawyers, judges, congressmen, nuclear power plant workers, airplane pilots, bridge builders, etc. But the more I have listened, the more alarmed I have become because this is *not* a scientific debate, and it is *not* about cleaning up a profession, even though it is being framed as both of these. This is a battle for public opinion, particularly the legal and legislative public opinion.

Because science has largely replaced deity on the public throne, science is invoked before God. But the tone of godlike wrath, old Testament retribution, and righteous pomposity is certainly reminiscent of older, Cotton Mather-like diatribes. War is always terrifying, largely because people resort to their most primitive defenses and this war is no exception. Repeatedly the voices of the backlash appear to depend largely on projection, denial, and distortion to makes points that can presumably be made in no other way. Perhaps the most remarkable aspect of the backlash rhetoric, besides its fundamental irrationality, is its emotionality. Although allegedly protecting justice and the American way, the tone of the arguments are hostile, unbalanced, unscientific, and just plain mean, often because the ideas simply do not stand up under logical and analytical scrutiny. They convey the unmistakable insight of the Shakespearean “Me thinks thou doth protest too much”.

I am a psychiatrist. When I see before my eyes excessive emotional arousal, defense mechanisms like projection, denial, and distortion deployed at full-throttle, evasiveness, attack strategies that are far greater than circumstances call for, I become *very* curious. These are the tell-tale hints, known to all of us since childhood, of a secrets that are being vehemently protected. I have no doubt that in the case of the false memory backlash, many of the voices are, if not perpetrators themselves, then apologists for perpetrators, whether knowingly or unknowingly, and it is this defense of the secret that arouses such vituperative defense and counter-attack. After all, we know that given statistical and historical realities, there can be no family untouched by the phenomenon of childhood abuse in some way. And the phenomenon of “false memory”, although unsubstantiated scientifically as used towards survivors of sexual abuse, is a well-known fact among people who are convicted of criminal acts. Deception and self-deception are, after all, truly universal human traits. We have *all* been denying misbehavior at least since we were able to walk! But usually the motivation for deception is quite obvious - to escape punishment. In this regard, it is extremely puzzling to attribute a workable motive to child abuse survivors who accuse their perpetrators and are told that *they* are the liars since the response to their accusations does not help avoid punishment but rather, invites it. As for the “recanters” who have accused someone of sexual abuse and have then said “it wasn’t true” - each case must be evaluated separately and independently. The recantation of abuse accusations among those who have been abused is a well-documented phenomenon. And why is it more likely that the recanters recall of their therapy experiences is any more accurate than that of the sexual abuse - if the sword cuts, it cuts both ways. As Dr. Colin Ross has pointed out about an inherent contradiction in false memory claims:

They are based on a claim that the client is weak, suggestible, vulnerable, easily persuaded, swayed by secondary gain, and not responsible for her own memories. This is a demeaning characterization. But, if it is accurate, it means that the memories of therapy could be as false as the memories recovered during therapy (Gelinas, in press).

Whatever the case, the patients who went to a therapist in the first place went because they were suffering from symptoms, so we know something was definitely *wrong*, and a definition of mental health does not extend to someone who is able to be easily persuaded to betray the trust of a beloved family member on the suggestion of a therapist. Common sense would dictate that there is something most definitely wrong here *before* they get to a therapist, regardless of what a therapist is or is not doing. This would seem to be routine logic, but not if you read or watch the media presentations which have given instant and uncritical credibility to the reality of the “false memory syndrome” without any research validation, without even asking the simple

question, “What is *wrong* with these people in the first place?”. The false memory advocates have been known to throw around allusions to McCarthyism when referring to the allegations that victims have made. But given the behavior of the backlash representatives - the irrationality, claims of malfeasance without evidence, distortion, and the liberal use of the media and the legal system to promulgate what amounts to propaganda - this is yet another example of blatant projection.

McCarthy, in fact:

took the pervasive terror of the cold war, recognized a radical insight - that the national security state was embarked on a strategy of terror - then gave that insight a false name, and fed it into the circuits of witch hunting. It is remarkable how McCarthy’s mangling of the truth (for he never actually uncovered a single Communist traitor within the government) became accepted as both plausible and necessary (Kovel, 1994).

Armstrong, commenting in a similar vein on the backlash against mothers in custody hearings says:

“It does not seem implausible to suggest that, if unreason is loose in the land, if - in the language of the backlash - ‘witches’ are being hunted and hounded, the target of the witch-hunt is not men accused, but the women who have the audacity to do what they are everywhere told they must do: believe their children” (Armstrong, 1994).

Psychotherapy, if it works, is inherently subversive to the status quo. The goal of psychotherapy is *change*, not maintenance. Less than a hundred years old, it is still a young science and therefore, still finding an identity, still laboring after many false starts, to find its legitimate place. In many cases over the years these attempts have been failures due largely to failures of technique. There have also been significant failures in theory as when Freud turned away from his original startling insight about the role of trauma in the etiology of pathology (Herman, 1992). But it has not been the failures that have ever evoked a response that would effectively end the practice of psychotherapy. It is because of psychotherapeutic *success* that we have seen the birth of the backlash. Too many abused and exploited adults have found their voice and in seeking justice for themselves and the protection of others, they have threatened the seat of power - the right of a man to do anything he pleases in the privacy of his own family.

This backlash is not confined to some strange people on the fringe - although certainly they are included. Nor is it confined to the media. The general public has seized on this issue, and immediately has seemed to believe, with little if

any critical judgment, the claims of the false memory advocates, despite their obviously biased and self-serving motivations. The response from the therapeutic community has been muted, and experienced professionals have affiliated themselves with a shaky academic and ethical position, have allowed their research to be generalized to different populations than those that were tested - a highly questionable activity. I find myself talking to otherwise reasonable, sane, caring human beings who are listening to this stuff and repeating it as if it were straight from some gospel. I have even been tempted to defy my own logic, training, experience, and common sense to find justifications for some of these notions, some support in my own experience that would allow me to see "the other point of view".

WHY NOW?

Why now? Why have these secrets and the backlash towards them surfaced now? One of the charges repeatedly lodged by false memory advocates is that the increase in child abuse reports is socially induced, a form of mass hysteria. This of course, flies in the face of the epidemic nature of child abuse and neglect in children, well-documented regardless of how much we would all like to "say it isn't so". If anything, child abuse experts bemoan the conservative nature of the institutional response. A large percentage of reports - up to 60% in some states are declared unsubstantiated, which certainly does not indicate a naive credulity on the part of investigators. In fact, one study showed that investigators dismiss 82% of all day care operator accusations. One study of the criminal justice system found that only about 42% of serious and substantiated sexual abuse allegations are actually forwarded for prosecution. Although 75% of the prosecutions result in convictions, 90% of these result from guilty pleas or plea bargains. Only 19% of convicted child abusers serve longer than one year in jail and 32-46% of convicted child sexual abusers serve no jail time (Finkelhor, 1994). These figures do not bespeak a hysteria that is sweeping the nation and undermining our social system. As Finkelhor states, *"There is little evidence from court or child protection statistics to suggest that a pervasive climate of hysteria makes it impossible for accused offenders to receive a fair hearing"* (Finkelhor, 1994).

Armstrong has pointed out that *"one main trigger for the backlash that brought us into this morass was that well-known emotional catalyst, money"* (Armstrong, 1994). It was *not* child abuse that called forth the full fury of the backlash, nor was it therapists sexually abusing patients, or physicians overmedicating patients, or misdiagnosing patients - it was lawsuits that adult survivors started bringing against their perpetrators that started the ball rolling. *"Because whether the suits succeeded or failed in any particular instance, the net result was bound to trip outrage on the collective part of alleged perpetrators"* (Armstrong, 1994). And rage it has tripped. But *not* at the accusers. Even in our antagonistic cultural milieu, it would not be good public

relations to sue - or countersue - your own child. So the next best strategy to silence this movement and provide a sympathetic legal defense - sue the therapists. With this clever manipulation, it is no longer the adult patient who was raped, beaten, and betrayed as a child who is the victim seeking restitution. Now the *real* victim is the accused perpetrator. It is a brilliant legal strategy. Faced with insurmountable legal bills and all that goes into entanglement in the legal system, this pressure was sure to deter therapists from asking any further questions about child abuse. It is a brilliant act of legal terrorism - the modern form of Inquisition. It is now unseemly to pull out fingernails in public America - now we just put people on trial, bring in the paid hit-men, the experts, overwhelm the jury with contradiction and obfuscation, and may the best attorney win and walk off with a bundle. Meanwhile, professional lives - and personal lives - are ruined. And for what? Real malpractice or simply believing in the fundamental truth of our patients' pain and trying, to the best of our ability, to help heal those wounds. This massive overreaction, justified with exceedingly shaky science is making a substantial sum of money for the "experts" who are busy collecting large fees for their frequent courtroom appearances - but what about justice? And what about the collaborative search for truth?

Bok, in discussing the mechanism behind the emergence of a secret that has heretofore been ignored says:

It is when the combined forms of avoidance no longer merely filter but block needed information, when they are no longer temporary but permanent, and when they prevent people from doing something about a danger which could be averted or alleviated, that they do the greatest disservice. Far from protecting individuals, avoidance then leaves them defenseless against threats they could otherwise have tried to combat. To block out knowledge of the symptoms of a disease that is curable in its early stages is a common form of such avoidance. On a collective scale, the inability to think about the growing likelihood of a nuclear devastation exhibits it at its most irrational. For whereas all the forms of avoidance can be protective of self when they avert attention from an unlikely danger, or one about which nothing can be done, they have the opposite effect whenever there is something one could do if one responded in time.

Without a doubt, the various forms of avoidance and rejection I have mentioned do point to striking responses to threatening or unusable information. However supportive they may be on occasion, their cumulative burden is great. True, we could not survive if bombarded ceaselessly by information of a useless, threatening, or unduly burdening nature. But we struggle along with such thick layers of bias

and rationalization, compartmentalization and denial, that our choices suffer immeasurably (Bok, 1982).

This secret is emerging out of our group unconscious *now* because we desperately need a shift in perspective, in the way we view ourselves, each other, and the world around us. There are a chorus of voices out there warning, advising, and pleading with us to make that shift, but right now, as author, editor, and activist Jim Wallis has said:

The truth is that we are in a time of transition, an in-between period when the old is dying and the new has yet to be born. The values, assumptions, and structures that have governed us for so long have come to their logical end, and we now find ourselves at a dead end. But new values, patterns, and institutions have not yet emerged. We are caught in the middle, stranded between paradigms.....America today lacks any coherent or compelling social vision (Wallis, 1994).

WHAT IF IT IS TRUE?

What if it is true? What *if*, as many studies now support, at least 20% of American women and 5-10% of American men are sexually abused in childhood - without even mentioning physical abuse, emotional abuse, and neglect AND if the voluminous body of research data is correct, that child abuse is a fundamental etiologic cause of physical illness, mental illness, and crime. What *if*:

*Child abuse and neglect in the United States now represents a **national emergency**. .. in spite of the nation's avowed aim of protecting its children, each year hundreds of thousands of them are still being starved and abandoned, burned and severely beaten, raped and sodomized, berated and belittled..... The system the nation has devised to respond to child abuse and neglect is failing.... It is not a question of acute failure of a single element of the system but instead, the child protection system is plagued by **chronic and critical multiple organ failure**. No matter which element of the system that it examined - prevention, investigation, treatment, training, or research - it found a system in disarray, a societal response ill-suited in form or scope to respond to the profound problems facing it. It was forced to conclude that the child protection system is so inadequate and so poorly planned that **the safety of the nation's children cannot be assured**. (U.S. Advisory Board on Child Abuse and Neglect, 1990).*

What *if* we are in danger of destroying the fragile biosystem through pollution, wanton destruction of resources, overuse of chemicals, and the other dangers that the environmentalists warn of? What *if* the reports of sadistic abuse in a

ritual context are related to child pornography, child prostitution, drug trafficking, and organized crime? (Gould, 1994) What *if* the civil rights for women and minorities are being eroded, subtly manipulated, or just ignored? (Faludi, 1991; Katz, 1989) What *if* 40% of the people living below the poverty line are children?(Freedman, 1993) What *if* women are the fastest growing class of impoverished people, heading 24% of all poor households in 1960 and 48% of all poor households in 1984? (Katz, 1989) What *if* the penal system has increased in numbers of inmates by 170% over a decade? (Irwin and Austin, 1994). What *if* gun-related violence in one city alone has increased by 179% in the past four years? (Schwartz, 1994). What *if* a conservative estimate of firearms owned by U.S. citizens is over 200 million?

What *if*:

There is a great danger here. The catastrophe that has already descended on the urban young is bad enough, but there is worse ahead. We have prepared a breeding ground for levels of violence that most Americans have never imagined. Immersed in a culture of extreme violence are millions of young people who feel despised and who have little hope of ever finding meaningful work, and we have provided them with the means to heavily arm themselves. (Herbert, 1994)

What *if* 2 to 3 million women are assaulted by male partners each year and that from 21-34% of all women will be assaulted by an intimate male during adulthood? (Gelles and Strauss, 1990). What *if* workplace violence has tripled in the last decade so workplace murder is one of the fastest growing types of homicide? (Baron, 1993) What *if* 282,000 students are physically attacked in America's secondary schools each *month*? (Wheeler & Baron, 1994) What *if* 5,200 of the nation's secondary school teachers are physically attacked at school each month? (Wheeler & Baron, 1994) What *if* young people in universities are being exposed to Holocaust "revisionist" thinking as an alternative view of history (Lipstadt, 1992)? What *if* the increase in total salaries of people earning more than \$1,000,000.00 per annum went up by 2,184% (no, that's not a typo - the figure is two thousand, one hundred and eight-four per cent) during the 1980's while the total dollars in wages that went to the middle class increased only an average of 4% a year (Bartlett & Steele, 1992). What *if* the top 4% of the population earn as much as the bottom 51%?(Bartlett & Steele, 1992). What *if* the corporate share of taxes went zooming down, accounting for 39% in the 1950's and only 17% in the 1980's with individuals making up the difference? (Barlett & Steele, 1992). The list of infrastructural mismanagement, fraud, and downright burglary could go on and on as could the symptomatic toll in violence. What *if* these are ALL symptoms of what Ralph Nader has called "criminal capitalism"?

In unmasking sexual perpetration against women and children among members of the white, male, middle, upper-middle, and upper socioeconomic classes we are not just dealing with an isolated anomaly called “false memory syndrome”. The entire culture is caught in the grip of “false memory”, forgetting not only decade to decade, but day to day, the magnitude and implications of our daily headlines.

Taking responsibility means admitting wrongdoing and taking conscientious steps to overcome the wrong. It does not mean wallowing in feelings of guilt, although those with warped consciences such as the Puritan elites and their successors may see it this way - one reason the United States has proved so recalcitrant in the admission of wrongdoing (Kovel, 1994).

The secret here is a secret that informs and determines the very basis of our social structure, the nature of how we define reality. And if we can just keep fighting long enough, maybe we can avoid surfacing THAT secret, the really big one, the one that leads directly to the need for a systematic overhaul of all our institutions.

The real problem with our airing the issue of incest was not disbelief. It was (as it continues to be) the possibility that some damn fools might actually try to make a change. (And look at the mess you get into then, with upstanding men in high dudgeon over state intervention in their own private and personal business, or wives turning ex-wives and trying to take their kids away from them.) Incest’s continuity has both depended on and supported the dominance of men within their private realms and the devaluation of women and children. To actually do something to stop it, to prohibit it, to hold offenders accountable for it, would require breaching a tacit compact the state has always held with respectable men. Their homes, their castles; their families, their turf. Paternal prerogative; paternal privilege. Thus, when incest survivors spoke out and children now were encouraged to speak out - the backlash (Armstrong, 1994).

PAINFUL AWAKENING

It was clear that there was something deeper here, something more far-reaching and socially provocative than the issue of whether or not some female adults were falsely accusing their innocent fathers of rape. In search of an answer I found myself reviewing my own process of evolution with this issue, searching for clues that could reveal the secrets, some underlying meaning to me.

When I first came upon this trauma business, this child abuse stuff, I was taken unawares. I had no personal ax to grind, no public confession to make. I

learned about it all from my patients, not my closest friends. I found the history of acts perpetrated against children unbelievable, yet I found the people revealing the history of these acts believable. Their dramatic change in symptom picture was a testimony to the reality of their secrets, no different in substance from all the other patients over the years who had revealed secrets and experienced symptom relief, insight, and understanding. The patients who revealed secrets that were confirmed and validated presented no substantive difference in clinical presentation from those who lacked such substantiation. What differed was the correlation between the extent of reported past trauma and the severity of symptoms.

As a psychiatrist, I was accustomed to people guarding their secrets and only reluctantly revealing them, and these secrets from the past were no different in their presentation from all the other secrets I had heard throughout the years. The more shameful the secrets, the harder they always were to reveal. I had learned, as a psychotherapist, to have great respect for secrets - those that are revealed and those that are best left hidden. *"The concern with evil secrets arouses conflicting responses: the desire to leave them undisturbed and so avoid the suffering they might release, or on the contrary, to bring them into the open and drain them of their destructive power"* (Bok, 1982). My patients did not want to reveal their secrets and only made a confession when it might hold some clue to the resolution of their overwhelming distress, when it might "drain" them of their destructive power. It was up to me to decide how to respond to these confessions. The philosopher, Sissela Bok, has raised pertinent questions about the appropriate response to the revelation of secrets:

"What responsibilities do those who listen to confessions have? How do they justify their role vis-à-vis confessants, and in the institution they serve? How well-founded to they consider the institution's views of what is guilty or sinful, of the help it can hold forth, and of the dangers of holding back information? To what extent should they, as listeners, try to probe ever more deeply, or on the contrary, leave the amount and kind of disclosure up to the confessant? And if they wish to probe more deeply, what means do they feel justified in using? Does their role in the institution they serve offer special justifications for manipulative probing, finally, or for the use of pressure or deceit?" (Bok, 1982)

It was this aspect of the secrets that presented the challenge, not the secret-revealing patients. After all, they had always been there. It was *my* response that necessitated a thoughtful reply. I had the responsibility as the confessor, much as I would have liked to shift it back to a certified religious figure. The process of formulating a response was a long and arduous one, a process that continues to this day. My tortured and suffering adult patients, in the beginning

all women, and later also men, were making their confession to me in my role as psychiatrist and potential healer, but also to me in my role as representative of the institutions of psychiatry, medicine, and the larger social institutions from which these draw their authority.

As a physician, it is my *job*, my sacred trust, to help release the secrets of the body and the mind if I am requested to help do that. What is revealed is up to the patient, not me. The means used were straightforward - the establishment of a relationship of safety that encourages the release of secrets. Pressure to get the secrets was not an issue - I was not particularly eager to hear any of this material. But there it was - once the permission was given to speak, and the respect given to listen, the patients did not stop talking, probing, exploring; validating, proving, confirming. It is Bok's last question that was more of a dilemma - now that I knew what the secrets were, now that I knew that terrible things had happened to my patients at the hands of other people who were significant figures in their lives, what was I to do with that information? Should I deny its importance? Should I pretend they hadn't said it? Should I encourage them to believe it was a fantasy? Should I tell them it didn't matter or that it was irrelevant? Should I lead them to believe it was their own fault?

I had a choice to make. I could remain silent and like so many of my colleagues before me, pretend that my patients' revealed secrets were the product of an overactive and neurotic imagination. This would enforce their continuing silence, thus preserving the external and my own internal peace. After all, there was plenty of precedent:

Psychiatry has, from the start, been power-aligned and power-protective: It has traditionally aimed its diagnostic machinery at the powerless, finding defect in them by setting a health standard determined by the prosperous dominant class and the dominant gender. Benjamin Rush, the father of psychiatry, named as a disease (drapetomania) the peculiar desire of slaves to escape. Most of psychiatry's most celebrated diagnoses have been directed toward the deficits of women, most particularly of women as mothers, who have been said to cause, in their children, everything from autism to poor homework skills to - interesting in light of the subject at hand - incest (Armstrong, 1994).

Alternatively, I could bear witness to the reality of the crimes perpetrated against them, crimes supported and silently endorsed by the social institutions of which we all are a part. I had spent many years not hearing the stories, not recognizing the signs of abuse in childhood. Once my patients broke through my wall of denial, I could no longer pretend that I didn't see what made only too much sense - these adults, so impaired and in such pain had been hurt as

children and for all these years their bodies and their behavior had carried the burdensome memories of their secret lives. When they released their secrets they set out on the road that also released their bodies and their behavior. By retrieving their own past they were able to see where and why they had gone down a wrong and cruelly self-destructive path and then they could start again. They could stop living a life of traumatic reenactment. The results were undeniable.

This was good news and bad news. It was gratifying to find out that our new approach to treatment was far more effective than anything we had tried in the past. The most startling results came from the patients who had always been the most difficult to treat, the most self-destructive, the most puzzling in the persistency of their symptoms. But their response to *our* new attitudes and approaches indicated that perhaps, it was not that *they* who had previously been so impossible to treat but instead, that it was *our* ignorance and denial that had often been the treatment resistance. This is an experience that is bound to provoke shame, humiliation, and guilt in *any* therapist, any helper or caretaker. None of us likes to think that we could have been arrogant, insensitive, and callous in our indifference to suffering - that seems much too much like *perpetrator* behavior. Bad guys are like that, not us - (It couldn't happen in *my* family).

As if this wasn't bad enough, it got worse. When we first began to come to grips with the reality of family violence, it was easy to divide the world into good guys - the victims and us, and bad guys - the perpetrators and disbelievers. Time tends to season strong opinions in a thinking, rational being and maturity brings with it a recognition of the utter grayness of reality, the absurdity of the repetitious dichotomies which usually frame our thought processes. Meeting a perpetrator in real life, finding one among your friends or relatives, hearing someone you love defend one, recognizing your own capability for inflicting pain and suffering on others, all tend to be humbling experiences, a necessary corrective for the hubris of believing the world so simple that good and evil can be easily and arbitrarily defined. I believe that many of the voices of the backlash are, if not perpetrators themselves, then apologists for perpetrators, whether knowingly or unknowingly, and it is this defense of the status quo and protection against the revelation of this secret that arouses such vituperative defense and counter-attack. Their maneuvers are far more reminiscent of several hundred years of criminal distortion, defense, and denial than a manifestation of innocence. The problem was that the dividing line between being a victim and being a perpetrator kept getting blurred. Perpetrators were giving hair-raising and true accounts of their own past victimizations. Victims began confessing to their shameful experiences with perpetration. Nobody was either a victim or a perpetrator all the time. Additionally, we were understanding how cruel and inhumane we too had been - and still were, at times. How incredibly *easy* it is to hurt other people,

particularly children, and believe that you are somehow right in doing so, justified, or just blind.

These were not comfortable or comforting insights. This is why it is just silly to believe the rhetoric that would try to convince us that therapists are motivated to find sexual abuse as an effort to make money. We were making plenty of money before all this started and frankly, it was far easier to make it when we were still convinced that the patients were basically at fault for creating their own difficulties. Back then, psychiatric problems were the individual problems of dysfunctional individuals and perhaps their families and if they had to stay in therapy for twenty five years to correct their own problems, the better for us. Better yet, as a psychiatrist I could turn to a burgeoning literature that assured me that I did not even need to *listen* to this gore, that I could just give people drugs. None of that had to bother one's conscience at all. We could go along, quite self-righteously believing in the good we were doing for these poor, inadequate, impaired, and stubborn people and the impossibility of doing anything to help the truly bad ones.

The revelations of past trauma put a whole new burden on us. These were people who had been hurt at the hands of someone else. They had been innocent children; it wasn't their fault; bad things do happen to good people. A response to this required compassion not condescension. Rather than talking about how much we were helping people, we actually had to figure out ways to really help while trying not do more harm than good. If they were injured, not impaired, then they could possibly heal *if* the environment provided the proper atmosphere within which healing could occur. And we had to provide that environment. We had to figure out how to do it their way instead of insisting that they fit into what was comfortable for us. We had to give over some of the control and authority to them. We had to give up power in order for them to become empowered to take back control of their minds and bodies. If we truly believed that people could get better, then we had to be willing to act on our beliefs. This contradicted virtually every major tenet of our training, particularly if our training was medical training.

We were in the middle of a paradigm shift. I felt it but I didn't know what it was until I read about Thomas Kuhn's ideas in a book entitled "The Structure of Scientific Revolutions" which was first published in 1962. More psychotherapists have probably read this dry treatise on the evolution of scientific thought in the past five years than in the last thirty years put together. Kuhn proposed a way of understanding how scientific change occurs. As he understood it, a revolution constitutes a shift in the underlying assumptions upon which knowledge is based. According to Kuhn the change begins when certain anomalies are noted, but are used as the exceptions that "prove the rule". Anomalies are not enough to change a paradigm. There must be a growing state of crisis, a period characterized by pronounced professional

insecurity. Something happens and the old rules just do not work anymore and many workers in the field begin questioning the old rules and begin searching for new rules that work.

At this point, scientists struggle to fit all the anomalies into the existing paradigm. It is clear, according to Kuhn, that scientists only give up one paradigm when there is an alternative. *"The decision to accept one paradigm is always simultaneously the decision to accept another.... to reject one paradigm without simultaneously substituting another is to reject science itself"* (Kuhn, 1970). However, before this switch occurs, scientists will attempt, sometimes going to extreme lengths, to fit the new material into the old paradigm and make it fit, something like Cinderella's stepsisters trying to jam their big feet into the tiny glass slipper. When an anomaly, or many anomalies, come to seem more than just another puzzle of normal science, the transition to crisis and to extraordinary science has begun. The anomaly itself now comes to be more generally recognized as such by the profession. More and more attention is paid to it by increasingly imminent scholars. For them, the field will no longer look quite the same as it had earlier. More and more anomalies will be noted, the rules of normal science become increasingly blurred, few practitioners agree about what exactly is going on but they know something is. *"All crises begin with the blurring of a paradigm and the consequent loosening of the rules for normal research"* (Kuhn, 1970).

At this point there are three possible courses. Sometimes normal science proves able to handle the crisis and the established paradigm reasserts itself. On other occasions, the crisis is recognized as unsolvable and set aside for future generations to solve. OR - and this most concerns us - a crisis ends with the emergence of a new paradigm and with the ensuing battle over its acceptance. A new paradigm is not an extension of an old paradigm. *"Rather it is a reconstruction of the field from new fundamentals, a reconstruction that changes some of the field's most elementary theoretical generalizations as well as many of its paradigm methods and applications"* (Kuhn, 1970). No one has explained the experience that so many of us have had so far, as well as Kuhn:

"When the transition is complete the profession will have changed its view of the field, its methods, and its goals... The resulting transition to a new paradigm is scientific revolution.... Confronted with anomaly or with crisis, scientists take a different attitude toward existing paradigms, and the nature of their research changes accordingly. The proliferation of competing articulations, the willingness to try anything, the expression of explicit content, the recourse to philosophy and to debate over fundamentals, all these are symptoms of a transition from normal to extraordinary research" (Kuhn, 1970).

Kuhn points out the relationship between scientific and political revolution and notes that the choice between competing paradigms proves to be a choice

between incompatible modes of community life. As is typical of human nature, and maybe of the process of creation itself, competition between two rival paradigms vie for the allegiance of the scientific community. But representatives of the two paradigms essentially live in different worlds; they see different things when they look from the same point in the same direction. The switch from one paradigm to another is often made as a conversion, as a change in a gestalt, all at once. But it is a switch that cannot be forced and sometimes will be absolutely refused, particularly by those whose productive careers have committed them to an older tradition. This "old guard" in their resistance to a change in paradigm, guarantee that scientists of the new paradigm will do their homework and do it thoroughly. *"The very fact that a significant scientific novelty so often emerges simultaneously from several laboratories is an index both to the strongly traditional nature of normal science and to the completeness with which that traditional pursuit prepares the way for its own change"* (Kuhn, 1970)

Making this transition, a transition I think of as shifting from identifying with the perpetrator to identifying with the victim, has been an exceedingly difficult and painful choice. I made my choice almost a decade ago as have thousands of other psychiatrists, psychologists, social workers, pastoral counselors, schools counselors, child welfare workers, pediatricians, gynecologists, and other health care providers. But I have made it virtually every day ever since, and each day, as the backlash grows, that choice carries with it increasing danger and risk. In the beginning it was a purely personal and intellectual choice based on the internal logic of the situation and the evidence before my eyes. Only now do I recognize that the choice was - and continues to be - a deeply political choice with vastly far-reaching implications.

THE TRAUMA MODEL

To fully understand this regressive backlash that is manifesting itself in every arena of progressive social change it is necessary to look at the basic assumptions that are being shaken, what Braudel has called the "underlying structures":

A civilization generally refuses to accept a cultural innovation that calls in question one of its own structural elements. Such refusals or unspoken enmities are relatively rare: but they always point to the heart of a civilization (Braudel, 1994; Gelinas, in press).

The first change that the trauma model makes is to upset the traditional mind-body dichotomy. The biological research and the theoretical basis of the study of post-traumatic syndromes indicate many points of convergence between the internal events of the physical constitution and physiology of the body, as

designed for specific evolutionary purposes and the external environment to which this body must adapt. With the study of trauma, we begin to understand nature's evolved defensive system and how this finely tuned system goes awry under the impact of repeated and overwhelming stress. We also see the link between stress and the immune system, another complex interaction between the body and the environment. The biological supporting data that is likely to have the largest social impact is the research done on attachment, disordered attachment, and development showing the vital importance - on a profoundly biological level - of other human beings in "tuning" the affect system of the developing child at a basic neurotransmitter level and attenuating the impact of overwhelming stress. The medical model is based on a firm mind-body split that dates back to Descartes and the overturning of this model is very disorienting.

The second change is related to the first and focuses on changing the basic definitions of deviance, sickness, health, and injury, goodness & badness. Traditionally, deviance is seen as the violation of social norms that leads to social sanctions (Scheff, 1984). In allying ourselves with one type of the traditional deviants - the mentally "ill" - and redefining them as *injured*, we are violating the very definition of deviance, a norm that is probably one of Braudel's deep structures. Sickness frees the sick person from responsibility for his or her illness but also defines the problem as residing within the sick person. Injury, on the other hand, is social. Other than unfortunate acts of nature, injury is often *caused* by someone else and therefore someone is at fault. This leads in a direct line, to the legal system and the redefinition of social responsibility. It was easier when we could point to concrete acts of behavior that led to easily ascertainable injury. But the traumatic injuries in the cases of childhood abuse are profound yet subtle, occurring as they do, in a developmental context, at a level of biological function that is only now being gradually understood. To complicate the issue further, we are also saying that those the society has labeled deviant as mentally ill, are in fact part of a normative continuum of hurt people while saying that many of those the society has labeled normal or supernormal are, in fact, deviant in that they deliberately caused the injury, frequently denying that they even have injured anyone, assuming no responsibility for how their behavior impacts on other people.

To make matters worse, we are redefining deviance itself, Traditionally deviant behavior has been labeled either "sick" - mentally ill, or "bad" - the criminals. If the mentally ill are sometimes both "sick" and "bad" and sometimes neither, and if the criminals are often "sick" as well as "bad", then what do we do? And if the exploitation and oppression of the weak causes traumatic injury leading to "sickness" and "badness" then must we not enlarge our entire definition of

social deviance to include deviant leaders who perpetrate disastrous frauds on the entire economy (the savings and loan debacle), who fail to protect their citizenry from harm (legislation that supports the anti-environmentalists, the NRA, the health insurance lobby)?

This entire concept of sickness vs. badness vs. injury leads to another upsetting change in position: the retributive impulse. If a person injures another person because trauma is like an infectious disease, spreading down and through the generations, then where does the fault really lie? And if much of the result of trauma is biologically determined based on deep-seated evolutionary adaptation, then who do we blame? If we cannot place a clear and certain fault, then how do we punish? If we cannot punish how do we achieve justice? And what do we do when our punishment turns us into perpetrators? Is our perpetration less reprehensible just because the person has been convicted by a court? This is a real mess, as witnessed by the current state of our criminal justice system. Understanding the entire mechanism of trauma on the body and mind of the individual leads to a rethinking of the concepts of justice and turns one's mind down more utilitarian paths:

If utilitarians ran the world, messy words like "volition" would never enter the picture. The courts would ask two questions: (a) Did the defendant commit the crime? and (b) What is the practical effect of punishment - on the criminal's own future behavior, and on the behavior of other would-be criminals? (Wright, 1994).

Thus, preventing the criminally deviant person from hurting other people would be far more important than "punishing" the offender. In some cases this could mean treating the offender, in other cases this could mean keeping them in a confined situation for the rest of their lives, but whatever it meant, the safety of the victims or potential victims would be seen as the most important determinant in any case. It means shifting our perspective from degrees of criminal behavior or "badness" to that of ascending levels of maturity. In a society that sought to protect all its citizens, causing danger to or risking the safety of others would be considered infantile, unsocialized behavior and would apply alike to rapists, murderers, and executives who endanger their workers. As emotional infants, they would not have the rights that would give them the power to hurt other others. All of these concepts and questions are very disturbing to the legal community and law enforcement and, to some extent, to the rest of us since we are all innately and biologically equipped with a desire for retribution, to "get even" (Wright, 1994).

A thorough understanding of the effects of trauma also calls into question our fundamental definitions of "rational" and "irrational". We now understand that behavior that appears irrational if not immoral is actually highly adaptive under circumstances of extreme stress. Dissociation, splitting of the personality, self-mutilation, attachment to abusers, all forms of addiction, aggression,

masochism, sadism - all make sense under circumstances that are adverse to healthy human adjustment. They are, in fact, "normal reactions to abnormal stress" or as Victor Frankl has so plainly put it, "Abnormal reactions to abnormal situations is normal behavior". Likewise, people that appear highly rational can do horrible things to other people. In several studies, college males were asked to indicate how likely they might be to commit a rape if they were assured of not being caught - 30-35% indicated that there was some likelihood they would rape. In a study of rape tolerance the highest level - higher than for sexual offenders, non-sexual offenders and community control subjects - was in university undergraduates (Stermac, Segal & Gillis, 1990). According to Williams and Finkelhor (1990) who did a review of incestuous fathers, "*We can conclude that a substantial proportion of incestuous fathers (one-quarter to one-third) seem quite normal. This seems to be an important conclusion for forensic purposes, since it means that the absence of psychiatric problems as measured in an evaluation is not necessarily evidence that no offense was committed.*" The Holocaust was a model of rational planning - as long as rationality includes murdering millions of people. And, of course, our own weapons policy, from handguns to nuclear weapons, has sufficient rational justification to prevent or overturn adequate gun control legislation, but can we actually believe that 200,000,000+ guns are ever *rational*?

Since the trauma model is inherently developmental, there is an implicit emphasis on the relationship between adult pathology and childhood experience. Children are not little adults but biologically viable developing organisms whose brains are not physically finished until age 20. Overwhelming, excessive, repetitive stress - as experienced through the eyes, mind, and spirit of the child - can lead to chronic and *permanent* damage to key brain structures. Although medical and psychological treatment can bring later relief to adult symptoms, the underlying causes cannot necessarily be reversed since they amount to developmental insults. Additionally, we have long maintained the delusion that we can do anything we want to children because "they won't remember". Research studies continue to support that traumatic memory is processed entirely differently from normal memory and that traumatic memory may be stored in different ways as well, as nonverbal images, memories of the body, that are not forgotten but are also not articulated in linguistic form. There are also strong indications that such memories can, and do, influence behavior, even when the individual has no ready recall of the early experiences (Van der Kolk, 1994). We are only beginning to understand the full breadth of this data but it *does* contradict many of the "false memory" claims, although this is rarely mentioned in the media accounts of the topic. The social consequences of the reality of the relationship between adult treatment of children and the children's later adult behavior is *enormous*. It will take a massive social will, commitment, and investment to create and maintain communities for children that are not traumatogenic. Shifting our social

priorities from the acquisition of individual wealth to the psychological and social safety of *all* American children is a major threat to the present capitalist structure.

The new model also forces us to redefine our sense of self. The backlash would like to jettison us back to preliterate days. If there are no “repressed” memories, then there is no “motivated forgetting”, then we are conscious of everything we do all the time. Someone is going to have to inform the artistic, literary, dramatic, and historical circles that all unconscious motivations and memories are on their way to being abolished. All joking aside, the trauma model poses some real difficulties for our understanding of what we mean by the “self”. The phenomenon of multiple personality disorder is so actively rejected because its reality poses the greatest threat to this established paradigm - that we are a unitary self (Tinnin, 1990). We know a great deal more than we did fifteen years ago about the phenomenon called “dissociation” but we are only beginning to understand the implications this has for the nature of the mind and the nature of reality. Western civilization is built on the foundation of individuality and we are calling into question the reality of that individualism as anything more than a socially constructed illusion. The study of trauma illuminates the ways in which our sense of self is comprised of the interaction between us and other people. We are truly a social species and attach to others from “cradle to grave”, in the words of John Bowlby. Human beings can and do survive overwhelming traumatic experiences, sometimes even benefitting from their close brushes with death. We know now that the reaction of other people to one’s pain, helplessness, and terror is critical in determining the outcome for the individual. Through complex biochemical mechanisms we actually impact on each other’s brain and body function. Most people in our rigidly individualistic society like to think that they know who they are, that they are conscious of everything, and that they control their every movement and that their need of other people is a choice not a necessity. The idea that none of these assumptions may be entirely true is threatening and destabilizing for *everyone*.

The trauma model also brings into question the entire issue of individual rights divorced from social responsibility. Free speech and denying the Holocaust? Child pornography? Violence on television? Gun ownership? Again, we do not give children rights until they have shown they can handle those same privileges. Yet, adults have relatively few social expectations regardless of the evidence of their immaturity. Perhaps social norms used to simply maintain the relationship between rights and responsibilities, but the norms have changed without sufficient evidence that adults can handle the social responsibilities without those fixed norms. But this does pose problems for the liberals as much as for the conservatives - freedom of sexual expression, freedom of speech, freedom of the press, - how are these to be balanced against the ability of these freedoms to create traumatogenic situations for millions of people?

How do we elevate the need for safety to place it on par with the need for food and drink without resorting to fascistic, dictatorial means to achieve it? The hallmark of our system of justice is “innocent until proven - beyond a reasonable doubt - guilty”. But what about the safety needs of the social body when one perpetrator - not adequately proven guilty - turns and causes injury to dozens, hundreds, thousands of people? How do we learn the wisdom of balance?

And values. Science has traditionally declared itself to be value-free, another convenient little dichotomy. This is, of course, nonsense. It is impossible to construct and use a weapon of mass destruction and say that no value decisions were made. Trauma theory grounds values in the behavior - and memories - of the body. The value focuses on a simple human life. It is impossible to listen to the stories of childhood trauma and not share in the torment, anguish, and guilt of that child, the child-that-was. It is impossible similarly, not to feel anger, indignation, a sense of justice wronged, innocence betrayed. But the values of the new model are not the same as the old. Understanding trauma leads to a devaluation of traditional authority which leads to dominance and the abuse of power and towards a model of authority that represents protection of the weak and containment of the strong. The capacity for compassion expands because it becomes possible to witness close-up and repeatedly, the “tragic sense of life”, the enormity of the terrible sadness of the human condition. The recognition of the interconnectedness of all being carries with it a powerful sense of responsibility that accompanies the attempt to “do no harm”. The recognition of the magnitude of human trauma weighs heavily on one’s conscience and demands a response of action and commitment. It is all very, very hard and is yet another reason why all this material is so resisted.

These are but a few of the underlying assumptions that are being shaken and, in some cases, shattered, by the new paradigm. But there is one more, one that we have played with for years, remembering and then forgetting, facing and then denying.

THE SECRET

We are in grave peril as a society. We are like a frightened patient with a growing swelling in his belly who is losing weight, vomiting blood, and refusing to go to a doctor, denying that there is anything seriously wrong that a good vacation or physic cannot fix. As time goes by, our choices narrow dangerously. The cities are armed and waiting to explode, a course that is bound to elicit the overwhelming right-wing armed response that the NRA has apparently been

delighting in, eagerly anticipating, and arming everyone for. If we don't snap out of our torpor and get involved - every individual in this country - it will not be just America's children who are physically and sexually abused, captive in their own homes.

Sadistic abuse represents the convergence of power, sex, need, and attachment - forces our society does not yet have adequate ways of considering or handling.... the deep structure that MPD and many of the other interpersonal violence paradigms are calling attention to is this sexual abuse children. This has implications for our treatment of children and other powerless segments of the society, for the functioning of the family, and for the intersection of power and gender. Our society neither wants to know nor change in regard to these issues. (Gelinis, in press).

Only half a century ago, another very civilized country took on the role of the World's Greatest Perpetrator. The secret that we are refusing to look at is America - the - Perpetrator. From our annihilation of the Native American population - the first Reds (Kovel, 1994), through slavery, from our refusal to take in the victims of the Holocaust before and during W.W.II to welcoming Nazi perpetrators after the war, from Dresden, Hiroshima and Nagasaki to the deceit and betrayal of the McCarthy era, from Vietnam to Nicaragua and Guatemala - we are paralyzed by our incapacity to look at the fact that our society takes innocent, sensitive, rambunctious little boys and carefully molds them into perpetrators who spread violence around their families and around the world.

The thinking of our defense intellectuals - which is the foundation of our nation's nuclear policy - lives up to the highest standards of the masculine mystique. It is tough-minded, "sober", "rational", untouched by any feelings of empathy or moral concerns. It is also based on the most extreme psychological avoidance, which is justified by the erroneous idea that rationality requires absence of emotion and moral concerns (Miedzian, 1991).

Likewise, our society takes innocent, sensitive, and curious little girls and carefully molds them to submit to male authority and male violence.

Florence Rush, as early as 1971 set out the terms of this molding:

'That the sexual molestation and abuse of female children is not regarded seriously by society, is winked at, rationalized and allowed to continue through a complex of customs and mores which applauds the male's sexual aggression and denies the female's pain, humiliation, and outrage.

'That sexual abuse of children is permitted because it is an unspoken but prominent factor in socializing and preparing the female to accept a subordinate role; to feel guilty, ashamed, and to tolerate, through fear, the power exercised over her by men.

'That the female's early sexual experiences prepare her to submit in later life to the adult forms of sexual abuse heaped on her by her boy friend, her lover, and her husband. In short, the sexual abuse of female children is a process of education which prepares them to become the wives and mothers of America" (Armstrong, 1994).

All of our institutions from our traditional childrearing techniques to our schools, religious institutions, medical systems and legal systems, sporting establishments and entertainment industries are overtly AND subtly geared to produce men who can be manipulated to sacrifice life in service to the state and women who will continue to produce sons to do precisely that. We remain organized around war, organized around trauma in an age that demands peace. The essential paradox which we must resolve is that the evolutionary development of male aggression and male perpetration is still seen as the only way we can survive while, at the same time, our evolution has guaranteed that the same aggression guarantees our end.

Our fundamental, dirty little secret is male violence, male dominance, and male oppression - by men and *of* men. The evolutionary development of protectiveness of hearth and home has become perverted to the goals of men of wealth and power. Men must be held accountable for behavior that does harm to other people, regardless whether the people involved are wives, children, colleagues, employees, students, patients, or the citizens of another country. And they must be held accountable not just by women but by other men.

Why, for instances, does an ostensibly "honorable" man do something that betrays? Why does an apparently "honest" man do something deceitful? Why does a generally "kind" man do something that wounds? Why does a reputedly "caring" and "decent" man commit an act so steeped in contempt that it is as if someone else had done it, for he himself could not possibly? Those of us raised to be men must ask such questions of ourselves if we are to be at all honest with ourselves. And all of us must ask such questions about the men we observe and the men we know - perhaps especially the men whom we believe we know most intimately ... Why, I have wondered, are "good" men sometimes so completely unreliably morally? Why do we sometimes act as if we have lost our values moorings, lost sight of our beacon, convictions, lost hold of our sense of self? What is going on in us? Why do we evidence such wanton behavioral swings - such unpredictable splits in who we are? (Stoltenberg, 1993).

And women must see with what complicity we help to maintain that system just the way it is. After all:

Why have women not "gotten together" to forge the life they say they want and need?... The reason ... is a dismaying lack of assertiveness of group identity... Women have the ability... Not only do they constitute a majority of the population, women are a majority of all voters - in 1992, over seven million more women went to the polls than men. If they all got together on the same day, in the same state of mind, they could radically alter life in America simply by pulling voting levers. (Henry, 1994).

These tales of abuse of women and children and the land at the hands of men are true. These tales have *always* been true throughout history. Raping, pillaging, and killing is what we carefully and methodically train our men to do. For millennia this has been a fact of human survival, part of our evolutionary heritage. Men so trained, left without an enemy to rape and pillage, turn their aggression on their own. Why should this come as such a surprise? What can anyone expect from men trained for violence, except violence?

It is time for peace. It is time to bring the warriors home. The voices of the backlash - whether it is a backlash against women, children, the poor, African-Americans, the environment, Holocaust survivors, Vietnam vets - all attack the victims with the usual blaming-the-victim tactic. In doing so they try again to deny history, blind themselves to our joint participation in perpetration, and guarantee the reenactment of that same traumatic history.

The refusal to take responsibility means a forgetting, a loss of the sense of history itself... Historical amnesia is part of the American way. The aggravated desire to believe in national goodness and innocence entails the need to forget (Kovel, 1994)

We are not *bad* people, not even the voices of the backlash. We are just people, trying as best we can to survive, handicapped with bodies adapted to an evolutionary landscape that looks nothing like the one we live in today. We carry with us a legacy of traumatic experience, traumatic adjustment, and traumatic reenactment that has been passed down from father to son, from mother to daughter for millennia. Some of us come through the grinding down of life shorn of all compassion, all hope, all conscience and all humanity and with an arrogance that surpasses all understanding. Some of us are luckier than that. All of us do bad things sometimes. At present we are trapped in a dichotomized good-bad, you-did-it-no-you-did-it, infantile argument which has seized the whole country. It is old fashioned, old paradigm, out-of-date, boring, and leads nowhere anybody really wants to go. The new model presents an opportunity to heal splits - in the self, in the family, in the community, and in the society. The theory is there, now if we can only figure out how to do it...

We can find common ground only by moving to higher ground.

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