Videotaped Discovery of a Reportedly Unrecallable Memory of Child Sexual Abuse: Comparison With a Childhood Interview Videotaped 11 Years Before

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This article presents the history, verbatim transcripts, and behavioral observations of a child’s disclosure of sexual abuse to Dr. David Corwin in 1984 and the spontaneous return of that reportedly unrecallable memory during an interview between the same individual, now a young adult, and Dr. Corwin 11 years later. Both interviews were videotape recorded. The significance, limitations, and clinical implications of this unique case study are discussed. Five commentaries by researchers from differing empirical perspectives who have reviewed these videotape-recorded interviews follow this article.

The rediscovery of childhood sexual abuse during the 1970s and 1980s in this country has been accompanied by a number of controversies. Experts have debated in both professional journals and the media about the reliability of children's statements, the suggestibility of children at different ages, and the prevalence of false allegations in various contexts.

More recently, concerns have been raised about adults who may not have been sexually abused during their childhood but somehow come to believe that they have been and then unjustly accuse parents or others for having sexually abused them. In addition to the dozens of articles and scholarly papers about this subject, the titles of several recent books reflect the polarized nature of this memory debate. In 1994, The Myth of Repressed Memory: False Memories and Allegations of Abuse, by Loftus and Ketcham, and Making Monsters: False Memories, Psychotherapy and Sexual Hysteria, by Ofshe and Watters, were published. Whitfield’s Memory and Abuse: Remembering and Healing the Effects of Trauma appeared in 1995. In 1996 The Recovered Memory/False Memory Debate, by Pezdek and Banks, and Recovered Memories of Abuse, Assessment, Therapy, Forensics, by Pope and Brown, were published. Books in press on this issue include Conway’s False and Recovered Memories and Read and Lindsay’s Recollections of Trauma: Scientific Research and Clinical Practices. The debate has divided clinicians and experimental psychologists, with clinicians arguing that recovered memories of past traumas are often factual and experimentalists arguing that they may be false memories derived from therapeutic suggestion (Schooler, Bendiksen, & Ambadar, in press). More recently, some have argued that dialogue should be fostered among the various disciplines exploring trauma and memory, so a common language can be developed. Schooler, Bendiksen, et al. (in press) and Schooler, Ambadar, and Bendiksen (in press) have proposed use of the term discovered rather than the term recovered for these types of memories, arguing that a more neutral terminology does not imply either high or low accuracy.

The clearest conclusion from this debate is that much remains to be learned about human memory, how both traumatic and nontraumatic memories are preserved, how they can become unavailable to the person who experienced them, how they are sometimes discovered, and how they can become contaminated mixtures of both accurate and inaccurate information. Many questions remain unanswered.

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concerning the false memory phenomenon as well. Who are the most susceptible to developing these false beliefs, and under what conditions are false memories most likely to occur? Once established, what is the stability of these false beliefs over time? Perhaps the most important question, and probably the most elusive to definitively answer, is whether differences can be observed between apparent recollections that have little grounding in reality and those that are more factual.

This article presents a single case involving the return of a reportedly unrecallable memory of early childhood sexual abuse. This case is unusual and perhaps unique in documentation; both the child’s disclosure at age 6 and the young woman’s sudden recall of the abuse at age 17 after several years of reported inability to recall the experience are preserved on videotape.

Transcripts of the interviews with the subject at ages 6 and 17, including descriptions of her nonverbal expressions and reactions, are presented here. The numbered and italicized descriptions enclosed in brackets were provided by Dr. Paul Ekman, who refers to his observations in his commentary. Commentaries by Dr. Frank Putnam, Dr. Judith Armstrong, Dr. Ulric Neisser, and Dr. Jonathan Schooler also follow this article.

Consent for publication of these transcripts was obtained from the young woman, who is referred to as Jane Doe. All names of persons and places have been changed except for David Corwin’s.

INITIAL FORENSIC EVALUATION

This case was originally referred to Corwin for a court-appointed evaluation of allegations of sexual abuse and physical abuse occurring in the context of separated parents. The father was accusing the mother of having sexually and physically abused Jane. Jane had told two prior psychological evaluators, one police investigator, and her therapist that her mother had physically and sexually abused her. All parties agreed on the choice of Dr. Corwin to perform the forensic evaluation of this situation. Because it involved separated parents, the legal forum was a domestic relations court, where the issues of custody and visitation were primary. However, the case ended in juvenile court, where child protection was paramount.

Jane was seen initially two times, once brought in by her father and stepmother and a week later brought in by her mother and grandmother after she had spent several days with them. On both occasions, the interviews were videotaped. Corwin’s initial report supported Jane’s sexual abuse allegation against her mother and recommended ongoing supervised visits between Jane and her mother while she remained in the physical and legal custody of her father. The week after this report was submitted, Jane appeared with her mother and maternal grandmother, who had been appointed to supervise her visitation with her mother, at a hospital emergency room and made a sexual abuse allegation against her father. During a social service investigation and inquiry the day after this allegation, with Jane out of the custody of the mother and maternal grandmother and out of the presence of her father, Jane described having been coerced by her mother and grandmother into making this allegation against her father. Jane said that her mother had threatened to beat her if she did not say that her father had played with her vagina. Jane told the social service investigator that her father had not sexually abused her.

Corwin conducted a subsequent brief interview with Jane on the day that he was to testify as to the earlier evaluation findings and to the subsequent allegation and recantation that occurred after the filing of his report. Because of its brevity, its consistency with the two earlier interviews, its inclusion of the alleged coerced false allegations against her father, and the fact that only Jane and Corwin were present without either parent in the interview room at any time during the interview, hence simplifying the consent for presentation and publication, this third interview is the one that has been previously presented and transcribed for this article.
In addition to the interviews, the records reviewed at the time of the original evaluation included protective services reports; court declarations by the parents; pleadings; court decisions; reports by prior evaluators and therapists; letters from Jane’s parents, friends, and relatives; and medical records of Jane. The case was also referred to a psychologist colleague of Corwin who conducted complete psychological batteries on both parents and submitted reports to Corwin. Those interviewed on videotape include Jane, her father, her stepmother, her mother, and her maternal grandmother.

A transcription of this part of Jane’s first interview with Corwin follows:

(Jane is asked to select a doll to be herself and one to be her mother. She states that the doll is her stepmother by naming the doll with her stepmother’s name.)

David Corwin: Why do you want her to be your stepmother?

Jane Doe: She’s nicer.

DC: How is she nicer?

JD: She’s nicer. She doesn’t do—rub her finger up my vagina and lets me take my own bath. (Affect changes here from joking and laughing to subdued, sad, and somber. Dr. Corwin asks Jane when this has happened, and she replies that it did not happen during her last visit. A few minutes later Corwin asks about the maternal grandmother.)

DC: Has Grandma ever done anything like that to you?

JD: No.

DC: Did you ever tell your grandmother about that?

JD: (Strongly) No, I’d get in trouble.

DC: You’d get in trouble. How would you get in trouble?

JD: She hurt me, but I think she’d get mad, bad trouble.

DC: Why would she get mad?

JD: Because she doesn’t like to hear that, and she thinks it’s not true.

DC: (Adjusts camera) So, she thinks it’s not true.

JD: She thinks it’s not true at all.
DC: Well, how is it that she would think it’s not true?

JD: I don’t know (playing with doll). Her hair is soft (referring to the doll).

DC: And you think if you were to tell your grandma that you would get in trouble?

JD: If I was by (my stepmother), I couldn’t.

DC: When she did this, did she ever say to you not to talk?

JD: (Nods yes)

DC: What did she say? What words did she use?

JD: If you don’t, if you tell your dad about this I’m going to do something to you.

DC: What do you think she was talking about, that she was going to do to you?

JD: I don’t know, I don’t know, I don’t know (looks sad and anxious).

DC: Were you scared?

JD: (Shakes head no) I knew she wouldn’t do nothing to me, if she did I would get—she would get in lots of trouble, lots of trouble!

DC: Um, do you remember how old you were, how big you were when your mom first did that with you?

JD: Three, three, three.

DC: How do you know that you were three?

JD: Because I felt it.

DC: What did you feel?

JD: It hurt! She puts powder on it and it hurts even more—it stings.

DC: Does she put anything else up there?

JD: No.

In the course of this interview, Jane also said that for her mother to wash her, all she had to do was wash the outside, and she showed how this could be done by stroking one hand on the other. She stated that her mother did not need to put her finger inside her to get her clean.

The following interchange took place between Corwin and Jane at the conclusion of this first interview, when Jane expressed anxiety about her mother coming along with her grandmother to the next interview.

DC: What I need to do is, I need to see you in the same room with your mother but I won’t ask you those questions. Is that okay?

JD: (Nods yes) Yah (whispers and looks anxious).

DC: Does that scare you?

JD: (Shakes head no) But then tell both of them to leave and don’t tell them what I said, they’ll get in big trouble.

DC: What do you think she’ll do?

JD: Hurt me. Start hurting me again.

DC: Okay, well, I don’t want that to happen.

In her second interview with Corwin, to which she was accompanied by her mother and grandmother, and after receiving reassurances that her mother and grandmother could not overhear them from the waiting room, Jane again stated that her mother rubbed her finger inside her vagina and denied that anyone had told her to make up this allegation. Asked to demonstrate, Jane inserted her left index finger far inside the fist of her right hand (representing her vagina), clarifying that her mother put her finger inside her and did not merely rub on the outside.

The following exchange took place during the second interview:

DC: Last week, you remember what we talked about?

JD: Not that much.

DC: Okay.

JD: A little bit.

DC: Tell me the little bit that you remember.
JD: Does that talk out to the waiting room? (pointing to the microphone and looking anxious)

DC: They can't hear us, okay, and they can't hear us out there and you are safe here and I'm not gonna, after you get done talking, I'm not going to tell them what you told me. Okay, it's just between you and me right now.

JD: Okay.

DC: Okay, so you're safe and all I want and what they want and what they told you is that they want you to tell the truth. Now just tell me the truth about what you remember about last week, us talking.

JD: Like, she burned my feet—if my dad comes and catches them spying on him, he could probably lift one up with one hand and the other with the other hand—they're easy to lift for him.

DC: And what else did we talk about?

JD: She rubs her finger up my vagina.

DC: Now, did anybody talk to you about these things this weekend?

JD: No.

DC: Have you remembered anything else about those things?

JD: (Shakes head no)

DC: Jane, listen closely, did those things actually happen?

JD: Yes.

DC: Is that the truth?

JD: Yes.

DC: Okay, now, you're real concerned about they're not being able to hear right?

JD: Uh uh (nods yes).

DC: And why is that again?

JD: Because I don't want to get hurt any more.

DC: You don't want to get hurt any more and you're afraid somebody might hurt you. Who are you afraid would hurt you?

JD: My mother.

DC: Why would she hurt you?

JD: Because she's rotten.

Jane's disclosures to Corwin during her third interview are presented in their entirety in the transcript that follows.

Jane had also made statements about her mother to prior evaluators, consistent with her statements to Corwin. In a psychologist's report written in 1983, when Jane was 4 years old, the evaluator wrote, "Jane is a child of superior intellect and verbal skills and was generally comfortable with me alone as well as in the presence of her father. She has verbalized and demonstrated in doll play and with her own body ways in which she feels her mother has hurt her or behaved inappropriately. This has involved striking her on several parts of her body, burning her feet on a hot stove, and invading and hurting her genitals and anus with her hands." This psychologist documented having seen photographs of bruises on Jane's body and the child's medical records. A police report from December 1983, not available in the Corwin records, was quoted in a report by social services to the juvenile court in early 1985. Jane reportedly told the police interviewer in December 1983 that when her mother bathes her, she "sticks her finger into my vagina" and then asks the child if that feels good. Jane also told the police interviewer that her mother puts powder in her vagina, causing pain and making her walk "not normal." In early 1984, a second psychologist interviewed Jane and each parent. Jane told this psychologist that "she did not want to visit her mother because her mother hits her, pulls her hair, and puts her finger up her vagina." She stated that when she tells her mother to stop, her mother says, "I can do whatever I want to your body." Jane also denied to this evaluator that her father or stepmother had ever done anything like that to her, and she "denied that anyone told her to tell this story about her mother." Later that spring, just before Corwin came into the case, a fourth professional, Jane's therapist, wrote that Jane had described her mother's behavior as follows: "She puts her finger up my vagina in the bathtub. I don't like that. She says she can do anything she wants to me. She puts cream on my vagina. It hurts." This therapist also observed
symptoms in Jane that the therapist believed to be consistent with posttraumatic stress disorder.

**Support for the Abuse Hypothesis:  
Coercion and Threats**

As evident in these transcripts, Jane also described to Corwin threats by her mother not to tell about the physical and sexual abuse. In her first interview with Corwin, she said that she did not tell her grandmother about her mother’s vaginal penetration of her because she would get in "bad trouble." She said that her mother had told her that if she told her dad about her mother rubbing her finger up her vagina, her mother would “do something” to her. Asked what her mother would do, Jane looked sad and repeated, “I don’t know” three times.

The week the Corwin report was made available, with his opinion supporting the sexual abuse allegation against the mother, Jane appeared at the emergency room with her mother and grandmother, alleging sexual abuse by her father. On Jane’s return to her father’s house the next day, she reportedly told him she had been threatened with a beating if she did not lie to the authorities. A social services investigator interviewed Jane the next day, not in the presence of her father. Jane told the investigator that her mother had threatened to beat her if she did not lie about her father. Jane told the investigator that her father had never touched her vagina. Jane stated that her mother threatened her with a beating if she told anyone that her mother had burned her feet and hand or if she told anyone her mother had inserted her finger into Jane’s vagina. In her interview with Corwin a few weeks later, which is transcribed below, Jane stated that her mother had threatened her that if she did not “lie to the CPS [child protective services] man,” her mother would “do something bad” to her. Jane also stated that her grandmother was “standing right there” when her mother threatened her and did nothing about it.

**Support for the Abuse Hypothesis: Jane’s Parents**

When accompanied to the evaluation by her father and stepmother, Jane appeared relaxed and comfortable, but she appeared stressed and guarded in the company of her mother and maternal grandmother, who brought her to the second interview. After they left the room, Jane needed reassurance that they could not overhear her from the waiting room before she again talked about what her mother had done to her.

In addition to the consistency of Jane’s statements over time and her affect when with her mother and father and when describing their behaviors, Corwin found that Jane’s father was a more reliable informant than Jane’s mother. Jane’s mother made a false allegation of tax fraud against the father, which the father was able to disprove by presenting the relevant documentation to Corwin. Jane’s mother gave information about her educational history that subsequent checking proved to be untrue. There were no similar misrepresentations found in Jane’s father’s statements. Finally, Jane’s mother was convicted and jailed for fraud shortly before Corwin entered this case.

Parental behavior during the interviews was also significant. At the outset of each interview, before the parent left the room, Corwin asked each one to tell Jane to tell him the truth about anything he asked her. The following sequence took place when the father was asked to do this:

**DC:** I would like them to tell you that they want you to tell me the truth, okay, want you to talk to me about anything that’s really happened, okay? Would you instruct Jane to that effect?

**Father:** You do what we’ve always told you, just tell the truth, that’s what the doctor wants to hear, the truth, just like sometimes you tell it to different people.

**DC:** The truth.

**Stepmother:** The truth will set you free.

However, when her mother was asked to do the same thing, the following sequence of questions and statements followed:

**DC:** What I’d like to do now is I’d like, um, both of you to tell Jane that you want her to tell me the truth about anything that I ask her.

**Grandmother:** She knows that. We’ve been talking to her about telling the truth. We’ve been trying to explain the meaning of the judicial oath and she, it, telling everyone that when we raise our hands—and then we trace her hands—and that her voice must say what her heart says inside, what she really knows—I think the confusion here, the explanation that (Jane’s mother) can give you of what the concept of it would be to certain people.

**DC:** What’s that?
Mother: It's what I was told by her father, if you want to hear about it.

DC: No, what I, I just want you to sort of talk about the truth, about what's actually happened, do you understand that, Jane—you know what the truth is?

Mother: Can you repeat what we were talking about this morning to Dr. Corwin? We've been saying what truth is and what they want.

JD: (Monotone) We've been saying what truth is and what we want.

DC: Uh huh, the truth is what's actually happened, what's real, right?

(JD shows with questioning by DC that she can distinguish truth from lying.)

DC: What I'd like you to tell her is to tell the truth, you know, tell what's actually happened.

Mother: (To Jane) Do you feel comfortable with that? Do you remember what we talked about? What'd you tell Mommy?

DC: No, (Jane's mother), what I want you to tell her is to tell me the truth, is just to tell me the truth about anything that's happened, and then I'll ask the questions, that that's what you want her to do.

Grandmother: That's a general question; I'm afraid she doesn't know how to identify (inaudible word).

Mother: Mom!

DC: Just to tell me the truth, okay? Would you just tell her that much?

Mother: Do you think you can do that, just the truth? It's pretty important, okay?

DC: Okay, um, fine.

Grandmother: She does make a blanket statement, I wondered if you were interested as a starting point.

DC: No, all I want right now is just for that, that much.

In short, instead of telling Jane to tell the truth, her mother asked her to repeat what they had been talking about that morning, asked Jane if she remem-

bered it, and then did not tell her to tell the truth but asked her if she thought she could do it. The grandmother then tried to introduce Jane's "blanket statement" and suggested that Corwin start with that. Jane's monotonic repetition of her mother's statement, "We've been saying what truth is and what we want" (with her mother's "they" changed to "we"), the mother's and grandmother's resistance to instructing Jane to tell the truth, and the mother's change of instructions to, "Can you repeat what we were talking about this morning to Dr. Corwin?" suggest they may have rehearsed or coached the child to make certain statements. This is consistent with Jane's statements that her mother had told her threateningly not to talk about what she did to her and Jane's expressed fear that her mother would hurt her if she did so. A few weeks after this interview, the mother and grandmother took the child to the authorities with an allegation against the father, which the child subsequently stated was a lie that had been coerced from her by her mother under threat of punishment.

Additional support for the hypothesis of maternal abuse included a childhood history that included having experienced invasive and abusive practices. The maternal grandmother told Corwin that she had administered repeated "slow enemas" to her daughter when she was very young and had "saved her life" by doing so. When Jane's mother was about 3 years old, the maternal grandmother reported that she heard her tell her father (Jane's maternal grandfather) to lay down on her. The maternal grandmother also stated that when Jane's mother was between 3 and 5 years old, Jane's maternal grandfather would "pretend" to molest his daughter to terrify and taunt his wife. Psychological testing on the mother suggested the presence of a dissociative disorder. Some of Jane's descriptions at ages 6 and 17 about her mother's changing behavior are consistent with the mother having a dissociative disorder. In addition to these suggestions of dissociation, psychological testing on Jane's mother also indicated impulsivity, inadequate judgment, and problems with perception and thinking. Psychological testing on Jane's father indicated emotional constraint but adequate judgment, impulse control, and concern for others, as well as adequate reality testing. The mother, with a history of three previous marriages, had a more extensive history of marital instability than the father, who had had a long-term marriage prior to marrying Jane's mother.

**Subsequent Case History**

The first transcript that appears here is an interview (the third) that took place between Corwin and
Jane, then age 6, on the date that Corwin was scheduled to testify in the domestic relations court. In this interview, Jane describes both the abuse by her mother and the coercion that subsequently led to her false allegation against her father.

The second interview presented here occurred at the request of Jane, when she was a young woman, 11 years after the initial interview. Over the years following this litigation, Corwin used the videotape recording of the earlier interview with Jane for professional training, having received consent from her father, who had custody, and assent from Jane herself. Corwin recontacted the father and Jane on several occasions to reaffirm the father’s consent and Jane’s assent. The consent and assent had been reaffirmed at each point of recontact, the most recent of which had occurred when Jane was 16 years old. At that time, when Jane’s father was contacted, it was discovered that he was being cared for in a convalescent hospital following a stroke. After reaffirming his consent, Jane’s father gave Corwin permission to recontact Jane, who now lived in a foster home. When Jane was contacted by phone, she stated that she remembered Corwin and reaffirmed her assent for the ongoing use of her earlier videotape-recorded interviews for professional education. She then stated that she would like to see the videotapes herself because she had been unable for some time to recall the actual events that occurred to her during her early childhood.

About a year later such an opportunity arose. Upon recontact, Jane informed Corwin that her father had died the previous year and that she continued to live with the foster family, although she technically had no legal guardian. According to the foster mother, Jane was attending school regularly and receiving straight A’s in her senior year of high school. When asked if she still wanted to review the earlier videotapes, Jane responded that she did.

During the meeting to view the tapes, the foster mother and a local therapist were present along with Corwin and Jane. After several minutes of discussing the risks and benefits of going ahead with the viewing, Dr. Corwin proceeded to elicit some baseline information from Jane. Before discussing any of the facts or looking at any of the videotapes of Jane’s previous interviews, Dr. Corwin asked Jane what she could recall from that time. Because this process was unprecedented in his experience and to his knowledge, Dr. Corwin sought and received Jane’s permission to videotape record the informed consent, the baseline interview, and the feedback following her review of the earlier videotapes.

What follows are verbatim transcripts of the earlier brief interview of Jane by Corwin that occurred around 4 months after the two initial forensic evaluation interviews and the follow-up interview with Jane at age 17. The follow-up interview includes the informed consent; Jane’s discussion of what she could recall of her early childhood, during which the spontaneous return of the reportedly unrecallable memory occurred; and the debriefing interview with Jane after she viewed the 2½ hours of interviews from 11 years before.

TRANSCRIPT OF JANE DOE INTERVIEW (AGE 6), 10/18/84, WITH DR. CORWIN (DR. EKMAN’S OBSERVATIONS IN ITALICS)

DC: How’s it going? Have you gotten something drawn, colored? Okay. Why don’t you sit back down,
Jane, I'd like to talk to you for a little bit. All right, that's good.

JD: (Looks at herself on the monitor) I like that.

DC: Right there?

JD: Yeah.

DC: That's good.

JD: When's my dad going to be back?

DC: I don't know.

JD: He's in court.

DC: I guess. What's he in court about?

JD: My mother.

DC: What about your mother? Do you know?

JD: That she threatened me. [1. Slight evidence of anger in face and voice]

DC: That she what? Threatened you? How's that?

JD: Threatened me that if I didn't lie to the CPS that she would do something bad to me. [2. Slight pout]

DC: If you didn't do what?

JD: Lie to the CPS man.

DC: If you didn't lie to the CPS man?

JD: (Nods yes)

DC: That she would do something bad?

JD: (Nods yes) To me.

DC: Well, when did she say that?

JD: Last time I visited her. I don't visit her any more.

DC: No? Hm, did she say what the bad thing would be that she would do to you?

JD: (Shakes head no)

DC: No? Did anybody else know about that?

JD: (Shakes head no) Grandma did, but she didn't do anything about it.

DC: She knew that your mom was threatening you?

JD: Yeah, of course.

DC: I've got to do something to this Jane, it's echoing a bit (Dr. Corwin points to the TV).

JD: Echo?

DC: Yeah.

JD: What does that mean?

DC: A little bit of feedback, right there see (monitor squeaks). Now it's okay.

JD: It's supposed to squeak.

DC: Yeah. Yeah, that's fine. How do you know that Grandma knew about that?

JD: Because she was there.

DC: She was where?

JD: Standing right there when she did it. [3. Slight anger]

DC: Well, where did that happen?

JD: Where Mother used to live, and Grandma lives now.

DC: So whose house was it in?

JD: Grandma's house.

DC: And we're talking about when your mom threatened you?

JD: Where!

DC: Oh, where? Okay. And what room in that house was it?

JD: The kitchen.

DC: The kitchen? Who else was there?

JD: John (her brother). And me. Of course, me.
DC: John was there too?

JD: (Nods yes)

DC: Do you think John would tell the truth about that, if he was asked? Do you think he would say that you were threatened?

JD: I don’t think so. (Yawns and shakes head no)

DC: No? Hm. Jane, now are you telling me the truth about that?

JD: (Nods yes)

DC: You promise you’re telling me the truth?

JD: (Nods yes)

DC: Are you a Girl Scout or a Brownie or anything like that?

JD: I’m a Brownie.

DC: Do you know the Brownie’s oath? What’s the Brownie’s oath?

JD: Don’t lie and don’t steal.

DC: Is that the oath of a Brownie?

JD: (Nods yes)

DC: Do you have a Brownie—do you have a pledge? Do you have a way of—show me your pledge.

JD: (Jane makes Brownie symbol with the three middle fingers of her right hand and crossing her pinky and thumb across the palm) On my honor, I will try to serve God and my country, mankind and to live by the Girl Scout law.

DC: Okay. So what you just told me, do you promise on your oath as a Brownie, do you promise God that you’re telling me the truth?

JD: (Nods yes)

DC: You’re not lying about that?

JD: (Shakes head no.)

DC: Did anybody tell you to say that, Jane?

JD: No, I haven’t been with my mother for a long time, I haven’t even been visiting.

DC: Did your father tell you to say that, Jane?

JD: Of course not. (indignant)

DC: Did he?

JD: Of course not! He wouldn’t do a thing like that! [4. Disgust, seems directed at Dr. Corwin for asking such a question]

DC: Okay, has your father ever told you to make up things about your mother?

JD: (Shakes head no) Mm-mm.

DC: Do you remember when you came and talked to me before, Jane?

JD: (Nods yes)

DC: Do you? Do you remember that?

JD: It was a long time ago.

DC: A long time ago, yeah. Do you remember what we talked about?

JD: (Nods yes)

DC: Were you telling me the truth about that?

JD: (Nods yes)

DC: Were you? What did you tell me about that was the truth?

JD: That Mother was rubbing her finger up my vagina, pulling my hair.

DC: When did she put her finger up your vagina?

JD: When I was living with her.

DC: Uh huh, and where did that happen?

JD: Where she used to live.

DC: In what room of the house did that happen in?

JD: Bathroom, when I was taking a bath.
DC: What did she say to you when she did that?

JD: “That feel good?” [5. From this point until #6, she shows embarrassment, avoiding eye contact with Dr. Corwin]

DC: Is that what she said? What did you say to her?

JD: No.

DC: You said no?

JD: (Nods yes)

DC: Did you try to stop her from doing that?

JD: (Nods yes)

DC: What did she do when you tried to stop her?

JD: Nothing.

DC: She did nothing?

JD: (Shakes head no)

DC: How many times did she do that? [6. Embarrassment stops]

JD: Ever since I was living with her, I don’t remember, though.

DC: Did it happen more than once?

JD: (Emphatically nods yes). Much more than once!

DC: Did it happen more—do you know how many 10 is? Do you know how many fingers you have? How many is 10? You show me 10.

JD: (Nods yes)

DC: Did it happen more than 10 times?

JD: (Nods yes)

DC: Do you know how many 100 is?

JD: (No response)

DC: Do you know how many 20 is? How many is 20?

JD: Twenty (laughs). Twenty is 20.

DC: Okay. Is it more than 10, or less than 10?
JD: More than 20 times. Probably—probably (pause) uhhhh, probably 99 times.

DC: That many times?

JD: (Nods head vigorously yes)

DC: Did that always happen when you took a bath?

JD: (Nods yes)

DC: Did it?

JD: (Nods yes) How much do you have to add to 10 for 99?

DC: You have to add 89. Eighty-nine plus 10 is 99. Did you know the answer to that before I said it?

JD: No.

DC: No, okay. Now let’s see, Jane. Is there anything that ever happened to you that you haven’t told me about that you didn’t like, anything bad, that your dad did to you or that your mom did to you, that you didn’t like?

JD: Gave me some black eyes.

DC: Who did that?

JD: (Mother) did.

DC: When did she do that?

JD: A long time ago when she was rubbing her finger up my vagina. [7. Shows embarrassment, avoids eye contact]

DC: She gave you black eyes then?

JD: (Nods yes)

DC: At the same time, or at a different time?

JD: After I took my bath one night she bumped into me.

DC: She bumped into you?

JD: Yeah.

DC: Did she mean to hit you like that, or was that an accident?

JD: No, she was walking wibbly-wobblly.

DC: She was walking wibbly-wobblly?

JD: (Nods yes) On purpose.

DC: On purpose? Was she different at those times that she would hurt you, and the times that she put her finger in your vagina, than she is most of the time? Was she acting differently at those times?

JD: Well, acted a little bit, but not much.

DC: Was her voice different?

JD: (Nods yes)

DC: In what way was her voice different?

JD: At that time her voice sounded younger, and now it’s older, it sounds like it’s just uhhhhh.

DC: Hm. Was her voice different at the time that she would put her finger up your vagina than like at other times during the day when she would be taking care of you during that same period, do you remember that?

JD: (Shakes head no and yawns).

DC: No, okay, that’s a tough question, that’s a tough question. And did you tell me the truth here today?

JD: (Nods yes)

DC: Do you promise?

JD: (Nods yes)

DC: What would happen to you if you made an oath like that, as a Brownie, and you promised God to tell the truth, and then you didn’t tell the truth, what would happen?

JD: You’d get in trouble by God.

DC: What would God do?

JD: (Shrugs) I don’t know.

DC: God wouldn’t be very happy, though, would he?

JD: (Shakes head no)

DC: Do you believe in God?
JD: (Nods yes)

DC: Is God good?

JD: (Nods yes)

DC: Is he good?

JD: (Nods yes) I don't like devil.

DC: You don't like the devil?

JD: I believe in angels.

DC: You do? Okay. And you're in first grade now?

JD: (Nods yes)

DC: And you like first grade?

JD: (Nods yes) I'll be right back, okay, Corwin?

DC: Where are you going?

JD: I gotta go to the bathroom.

DC: Oh, all right, we can stop. Thank you. Bye bye. You know where the bathroom is?

JD: Yeah.

DC: Okay.

JD: It's right here. It's right here, Corwin.

DC: Okay. (Interview ends)

TRANSCRIPT OF JANE DOE'S INTERVIEW (AGE 17), 10/15/95, WITH DR. CORWIN

DC: Okay, that little red light means it's recording, okay, so it's now running. The microphone's on it, so you'll have to speak up, it can't hear you if you whisper.

JD: Okay.

DC: Let me just kind of review what we're here for today, okay? In a sense, it started 11 years ago when I was asked to evaluate you, but more recently, well, no, let me back up. At the time I evaluated you, your mother and father both signed consents that allow me to use the videotape of your interview for professional education. And about a year ago, because you were then at that time near 16 years old, I felt like I should recontact you to see if you've changed your mind, because you were old enough at that point to change your mind, you know, and so I contacted your father, and at that point he was in a nursing home, and I told him what I was interested in doing, that I was still interested in using the videotape of my interview with you from when you were 6 for educational purposes, but I felt like I needed to reaffirm that both with him and with you. Okay? And he agreed at that point that it was still okay and agreed that I could contact you, at which point he gave me your phone number; and I called you. Do you remember that when we talked, it was the summer?

JD: (Nods yes)

DC: My recollection of our phone call, and please speak up and disagree and tell me your recollection, because you probably remember it a little differently, because we're different people, my recollection is that I explained what I was interested in doing, after saying hello, and that you gave your wholehearted support to that, that you believed in trying to help professionals learn about interviewing and about the topic, but you also expressed to me that you were having trouble remembering what I had seen you about so many years before.

JD: And I wanted to see the videotapes.

DC: Exactly, you got it. We'll just do this as a tag team thing, I'll say a few words—

JD: Okay.

DC: And what I said at the time was that I thought that it was your right to see them, I felt that that was your right, but because I had never done that with any child who is now almost an adult, I was uncertain of how to proceed, and I urged you to consider waiting until a time when I could be in the area, and I could sit down with you, and we could talk about it and we could do it in a careful manner, because I would certainly want this to be a helpful thing, and not a hurtful thing.

JD: Yeah, I think I was pretty much asking you to send me the videotapes, and you told me no, let's sit down and watch it together.

DC: Right, I resisted sending it. And so then what happened is, when I was invited to come out and give some talks at this meeting that's happening right now in (this city), I tried to reach you, and I had no luck
at the first phone number I had, and so I sent a letter to you. And when I didn’t get any response to that, I waited several weeks, but then as the time was growing short for me coming out here, I finally decided well, you might have moved, that letter might not have been forwarded, and so I called the high school, thinking that most seniors like to stay in the high school they’ve been in, and I was betting you were probably still in (town), and also I had contacted (a friend of your father’s) and he didn’t have your current address or phone number, or at least didn’t feel comfortable in giving it to me, didn’t give it to me, and gave me your mother’s name instead and her number, I knew her name, but he gave me her phone number, and I didn’t feel comfortable in calling your mother, at that point. So what I did is I contacted the high school, and I explained that I was trying to reach you, I didn’t say anything about what the nature of our contact was, I just said who I was, that I was trying to reach you, and I talked to your counselor, and then she told you, and then you folks called, and then, we’re here.

What I said in my letter is that I don’t know the effect, because it’s never been done to my knowledge, that this will have on you, okay? That I can imagine, from my experience as a psychiatrist and a therapist, that it could have value to you in helping you put the pieces of your life together in a way that is real, that is consistent with the facts of your life. And that as a therapist it is my belief that we are healthier when we deal with reality the way it is than when we try to change it to make it to what we would like it to be, perhaps, because that affects our judgment, and our perception also. I can also see where it could be very stressful for you, okay, because of the content, because of what it’s about. So—and that’s why I wanted to be here, and I wanted you to have support, and I think from my couple of discussions with your foster mother (camera shifts to foster mother)—

Foster mother: (Laughing) You had to do that, didn’t you? (regarding putting the camera on her)

DC: (Foster mother), your last name is—

Foster mother: (Foster mother’s last name given)

DC: (Foster mother), okay. From my discussions with her, she seems very supportive of you. She agreed with my impression that you were a very intelligent and successful student, a mature person, okay, and I told (your foster mother) that in my view at this stage, you’re 17 years old, you’re not yet 18, but in my view you are what is called a mature minor.

JD: (Nods yes)

DC: What that means is that I am treating you as if you were an adult. I’m not deferring to (your foster mother) or someone else to make decisions for you. I’m asking you. And so, what I’m doing is, I’m doing this informed consent directly with you. I’m saying, here are the issues as I understand them, and then it’s up to you, what you wish to do. Does that all make sense to you?

JD: Makes sense.

DC: Okay. Let me say that it is possible that if you review the tapes, although I sense you probably have some sense of what you said when you were little, even if you can’t remember exactly, so I would be surprised if you were greatly surprised at what you said when you were 6.

JD: I remember what I said.

DC: Okay, it’s other things.

JD: It’s the memory of if what I said was true that I’m having a problem with.

DC: That’s the question in your mind.

JD: That’s the question.

DC: Okay. And then the hope is I guess that in some-how reviewing these things might help give you some additional insight into the basis of what was going on.

JD: (Nods yes)

DC: All right. Are there any other points? If this is upsetting, what I was going to say is that you might consider seeing a therapist for some time or for a few sessions or something, if talking with (your foster mother) and support from the family isn’t sufficient. So, in my view, that’s sort of on the negative end, or it could turn out to be positive. In trying to present what’s called informed consent, you’re supposed to talk about both the risks and the possible benefits.

Foster mother: And we would definitely have her see a therapist if we felt that there was, you know, something just continually troubling her and everything wasn’t just the way it’s been going real nice, that would not be something that we would hold back.

DC: So would you like to proceed, then?
JD: Yes, please.

DC: Okay. Why don’t we start with if you could just tell me what you can recall of that time, from age 6. Just tell me what you can remember, of your meetings with me, things you may have said. [1. Before her reply, she shows microexpression of contempt]

JD: Do you want little things, or—

DC: Everything. Everything you can remember.

JD: Okay. I remember visually [2. Microcontempt on face], I remember wooden, like the walls, it was like a wooden paneling [3. Closes one eye, see explanation in Ekman’s comments] and I remember, in one of the interviews I was wearing a sweatshirt that was striped, this way, okay (indicates horizontal stripes). I don’t know why, when I think of these interviews, that’s the first thing I think of. I remember going in, before one of the interviews, I believe, with my dad. I don’t ever remember [4. One eye closure and eye flutter] (my stepmother) being there. I don’t remember [5. flutter] my grandma or my mom [6. One eye closure] ever taking me to one. I thought it was always my dad [7. Microexpression of fear] that took me. But, um—I remember I told, I knew I was answering questions, that I was preparing to testify against my mom, as far as I know, and I told you, I guess, I told the court, [8. One eye flutter] that my mom abused me, that she burned my feet on a stove, I don’t, that’s really the most serious accusation against her that I remember, I don’t know what else I said. I’ve since seen pictures of my feet, and how they looked, and I still don’t remember if that’s in fact how I was burnt. That’s what I’m having a problem remembering [9. One eye closure]. And should I tell him about why we, why I have— (looks at foster mother)

Foster mother: Absolutely, anything and everything.

JD: I’ve since come in contact with my real mom, and she doubts, or she doubts [10. Long closure], she denies the fact that she ever did anything to hurt me, and it’s not like I can go back and say, “Hey Dad, did you lie, did you make this all up to get me, because you loved me [11. Flutter] so much you didn’t want to see me go to her?” and so all I have is her telling me, “I never hurt you [12. Eyes widen], I never hurt you, I never hurt you,” and I want her to be my mom, I want her, I don’t want to deny her a part of my life, so I’ve chosen to say, well, if my dad did lie, it was just because he wanted me so badly, [13. Long eyelid closure] he loved me so much that’s why he did it. And I’ve chosen to believe that my real mom didn’t do anything, even though I don’t really remember if she did or not. And we’re having, I guess—(looks at foster mother)—we’ve seen her a couple times change her personality, come in one time (snaps fingers) just as sweet as can be, just as whatever you want, as can be, and then again, when you cross her, something doesn’t go her way, “I’m not talking to you, I won’t talk to you about it, you can’t have my permission, you can’t have my opinion, you can’t have, no.” And I mean, we’ve seen her argumentative, we’ve seen her—so there’s come to be some doubt in my mind as to, dare I say, multiple personalities—

Foster mother: If that’s what you’re thinking.

JD: So, yeah.

DC: Where did you get that idea?

JD: Well, to tell you the truth, I was told by my dad once upon a time when I was younger, I asked him, “Why can’t I see my mom?” He told me that, I believe, I don’t know who it was, he told me that she was diagnosed with multiple personalities. But that came into play after, I mean, that memory came into my mind after, I think, my foster mother and I talked.

DC: After you kind of thought about that on your own?

Foster mother: We’d already discussed it.

JD: We had discussed the possibility, and then I remembered, hey, my dad told me that once, that she was diagnosed with having multiple personalities [14. One eye closure]. Anyway, I’ve come in here trying not to say, I’ve come in here trying not to determine already that she’s done it, or that she’s guilty, and I’ve come here trying not to say well, she’s innocent, she didn’t do anything, and I refuse to believe she’s done anything. I really want to know.

DC: Okay. Do you remember anything about the concerns about possible sexual abuse?

JD: No. (Eye closure) I mean, I remember that was part of the accusation, but I don’t remember anything—(inhales audibly and closes eyes) wait a minute, yeah, I do.

DC: What do you remember?

JD: (Pauses) Oh my gosh, that’s really, [15. Close eyes and holds eyes] really weird. (Looks at foster mother) I
accused her of taking pictures (starts to cry and foster mother puts hand on Jane's shoulder) of me and my brother and selling them and I accused her of—when she was bathing me or whatever, hurting me, and that's—

DC: As you're saying that to me, you remember having said those things or you remember having experienced those things?

JD: I remember saying about the pictures, I remember it happening, that she hurt me.

DC: Hurt you, where? How?

JD: She hurt me. She—

Therapist: There's tissues right to your right.

JD: You see, I don't know if it was an intentional hurt—she was bathing me, and I only remember one instance, and she hurt me, she put her fingers too far where she shouldn't have, and she hurt me. But I don't know if it was intentional, or if it was just accidental.

DC: Can you be more specific because I—?

JD: I know what was said on the tape. On the tape it was said that she put her fingers in my vagina. And she hurt me.

DC: Okay. Is that what you recall or—

JD: That's what I recall. I recall saying it, and I recall it happening.

DC: You recall it happening?

JD: I recall. I didn't—that's the first time I've remembered that since saying that when I was 6 years old, but I remember.

DC: You remember being—

JD: Beyond, yeah I remember it happening.

DC: Okay. Tell me about your memory of it happening, just whatever you remember of that.

JD: We were in the bathtub, and I don't have any memory, except for, I mean, it was just, I was getting a bath, and I don't remember anything specific until I felt that pain. And then I remember [16. Long eyelid expiration], you know. And then it's like I took a picture, like a few seconds long, a picture of the pain, and what was inflicting the pain and then—you know, that's all the memory consists of, so I don't remember if it was just, that's what I mean, I don't know if it was accidental if she just accidentally hurt me, or if, you know what I mean, because I don't see her face, but I know it was her.

DC: Do you remember anything else from around that time, or later, anything that happened?

JD: Yeah, I remember, I mean, I remember the house, do you mean just like little memories, like little clips of memories, I have a lot of those. I remember the house, I remember it was a condominium, it was on Green Street or whatever, in Anytown, it was a green house, it had a tree out front. I lived with my brother, and my grandmother, and my mom. I remember I was visiting my dad, I believe it was every other weekend, I remember driving back and forth in the car to see him and the specific incidents where I didn't want to go see her for reasons [17. Microcontempt] I don't remember. I don't remember why I didn't want to see her, I know that, I mean, I don't know, I have memories of like, after my feet were burned, she put medicine on them, like when I was with her I remember she had to put some kind of cream on them, and she did, and I also remember my dad doing it so—. I remember my grandma, she was real skinny, I always remembered that about her, and I remember my brother.

DC: What was his name?

JD: John, and we played and had fun together, I don't know what else to say.

DC: Do you remember ever being taken to a hospital or to talk to social workers about anything regarding this?

JD: (Pauses) See, that's the confusing thing, because I read a report a social worker made concerning my feet being burned, but I don't remember going to see a social worker.

DC: Do you remember either of your parents or anyone ever trying to get you to say something had happened to you that hadn't?

JD: Concerning my real mom and my real dad?

DC: Yeah.
JD: I do—no, I don’t remember either of them ever convincing me to say something. I do know that I made an accusation against my mom, that she threatened me not to tell my dad what I did to—what she did to me, but I don’t remember that actually happening.

DC: All right. Do you think that you’ve told us pretty much what you can remember of that time, and the things that you had said or things you can actually remember?

JD: Yeah. I mean, I have little memories, like my grandma falling down an escalator, things that really wouldn’t have anything to do with this, but—

DC: Other memories.

JD: Yeah, other memories.

DC: Can you remember as far back as the time when your mother and father were still together?

JD: No. I don’t remember them ever being together, I always remember my dad living in Dadstown and my mom living in Momstown. Or wherever he lived.

DC: Well, I think we’ve accomplished, then, asking you about your memories from before. We can turn this off, and if you like we can start with a brief tape which may be enough, I don’t know. We can go one step at a time, and you just tell us, okay?

JD: Okay.

DC: And of course, if you need a break, just say you need a break, if you need to go take a walk, that’s fine. This is for you.

JD: Okay.

DC: So whatever you want, have any questions, ask them. All right.

Dr. Corwin shows Jane the videotapes of his interviews with her when she was 6 years old. The following is from 2½ hours later, after viewing the videotapes and a brief break.

DC: (Foster mother), if you could just tell us your sense of Jane’s life before she came to live with you and then since she has come to live with you, how it’s gone, how she has dealt with the various challenges she’s faced, and also what you have seen in terms of her reunion with her mother.

Foster mother: When Jane first approached our family to come and live with us she had been in several group homes, foster homes, her dad had become ill and she had to be placed somewhere. This was real traumatic for Jane, because they were not the type of children that Jane was, they were very bad children, and she was faced to not only try to deal with what happened in her young childhood, and try to figure out, but she had just lost her father, he was in a convalescent hospital, and then she was placed with peers in an everyday living situation that just, you know, were so messed up themselves, she couldn’t think and by the time Jane came to live with us and found out that there were several other children in the home, she definitely didn’t think that was going to be a plus, but we talked for a long time, and I had given her a commitment that we could work through a lot of the problems, so she chose to move in with us. When she first moved in, she was tragically headstrong. She had come to a point where you could not tell her anything. She didn’t have rules or regulations and wouldn’t succumb to any. Jane had just basically decided to do everything all by herself, and no one was going to tell her what, why, or anything anymore, and after about a year of working very hard, and Jane, several occasions, just wanting to give up, she just wanted to, she said, “I’m too chicken to commit suicide, but I just want out, I just, I want out. I can’t take any more, because I don’t know what happened to me when I was a little girl. I’ve got this memory, and I’ve got that memory, and I’ve been told this and I’ve been told that.” So we started by step one, in what she could remember, and we started walking through her life, daily, and then I said now we’ve come to a point, Jane, where I feel that, you really should talk to your mother and at least hear her side of the story. And if this is comfortable enough, I think you’re old enough, at 16 years old, to do this. And if not, then we’ll wait. But she felt that she could, and so we set up a meeting and she got together with her mother. Mother cried, and Jane cried, and Jane said, “It felt so good to have her hug me. I could tell that was my mom,” and this had been 10 years, and she said, “I could just tell that that was my mother.” She said there was something there. So I had asked (her mother) to be very cautious and very careful, I stayed in every meeting for a long time, about a year, and we just met together in the house, we invited her to Thanksgiving dinner, and on different occasions, and the relationship grew, and it grew very, very nicely, where they felt very comfortable to
go out on a Saturday and go shopping, or be picked up after school and go to her swim meets, and (her mother) became part of her life. Jane was very, very happy with that, but still Dad would say one thing, and Mom was now saying a completely opposite story. So those pieces still couldn't be put back together. And so this has been something that has been haunting Jane because there's no piece to the puzzle that's missing, and there's two sides to every story, and then Jane's daddy died and so she couldn't go back and say, "Now, this is what Mama said, what do you say about that?" He was gone. So that was left on Jane's shoulders to kind of carry that too.

DC: And he died last March?

JD: November.

Foster mother: November.

DC: Oh, November.

Foster mother: Yes.

JD: November 2nd.

DC: So, 11 months ago.

JD: Yeah.

Foster mother: Yes. So after the death, I could see that (Jane's mother) was a lot more relaxed and more able to say whatever she felt like saying when she felt. So at times I would slow her down, just slow the relationship down. Jane experienced a few things that really upset her, and for no reason the mother would get really irate at her, and then just walk out of her life, and not call, and not come back. And Jane felt like a failure again, like something she had done, so Jane needed to know that there was nothing she had done. And maybe she would never put the puzzle together, so at that point I asked her to just start building her own life, 'cause maybe that's a book that's never going to be completed, and then with your showing her the tapes, I think this has been a beautiful closure, to, in Jane's mind, to actually see herself as a child, saying what she said, and you can ask Jane now what she's feeling, but I think that this has been tremendous for Jane today, to be able to come back and see what she said as a little girl because I think now it's answered a lot of questions. I am in hopes that she will continue the relationship with her mother, because I think that's very important, but at what degree, that will be up to Jane.

DC: Okay. Thank you, Jane, what would you want to change, or is there anything you disagree with, in terms of what (your foster mother) just said, this process you've been going through?

JD: (Shrugs) I agree.

DC: Could you tell me a little bit about your sense at this time of what it means to you to have looked at these videos of your talking to me when you were younger?

JD: The little girl that I see in those videotapes I don't see as made up those things, and it doesn't make sense to me that knowing the truth I would out-and-out lie like that. And I have to believe that to some extent my mom did hurt me [18. Flutters, but briefer than before]. If it's that she doesn't remember that she hurt me, or that she just didn't see what she did as hurting me, on top of that I made it worse, as I told the story, as I made it seem worse and she said no I never did that or that she did it and she never [19. Flutters, but briefer than before] remembered. She did it and, later on, you know, if the memory was erased, she was in a different part of herself [20. Long eyelid closure] and she doesn't remember any more, and I've never been able to convince myself and I'm glad now that I don't have to keep trying to convince myself that my dad ever lied to me, because for a while after he died, I was convinced that I was going to have to convince myself that he lied and told me those things about my mom [21. Vocal distress from there to #22] that weren't really true. And that puts that to rest in my mind that, you know, I don't have to go on thinking that about my dad, I can put my dad's memory to rest in my mind (near tears), as the man that loved me all my life and never did anything to hurt me. My mom, I always—I grew up thinking that she hurt me, I understand now why, I guess, I understand that it's not her fault and it's by no means my fault and I do plan on continuing my relationship with my mom, because she is my mom, and I don't want to cut (my foster mother) out of my life, but I don't want to feel the same way as—(begins to cry) I don't want to have the regret that I somewhat felt with my dad for not allowing him to be a part of my life, I don't want to not allow her to be a part of my life and then feel bad when she's gone. If I put myself in her place I have to [22. Vocal distress ends] say that if I was ever going to do that to my child, I would, my life would depend on the fact that they would give me another chance. So I have to give her another chance. Watching the videos—I'm the kind of person that I don't react to stuff until a little bit afterwards. I mean, my emotion right now, I'm a little bit sad [23. CHILD MALTREATMENT / MAY 1997]
With the word sad, the distress in the voice becomes stronger), you know, but I'm glad that I can at least put my dad's memory to rest. I'm not sure if I'm going to get angry at my mom later, I'll have to deal with that when it comes. But it does explain a lot of her behavior, a lot of the things that we've seen in her (looks at foster mother). (24. Contempt)

DC: So, despite its painfulness, do you think that this was a constructive thing at this point in time?

JD: Yes. There are some questions that might never be answered. And that's fine, you know, I can live with that. My biggest question has been answered and that's fine. I mean, I'll never know, did she burn my feet, did she pull my hair, whatever, because I don't have those memories back. But I do have an explanation in my mind as to why I don't live with my mom and dad as a normal mom and dad should. And I can now realize that it's not my fault, and I can put that chapter behind me and I can go on. And yeah, I do think it's a very healthy thing to not run from something. You know, just the fact that I turned around and I faced it, and that's the strength enough to go on, and put it to bed (near tears).

DC: Well, I wish you the best of luck, and if you have any further questions, you can contact me. I'll give you one of my cards so you can have my phone number; you also probably have it other places. And if you find that there's some aspect of dealing with this experience that you need to talk about with a therapist, I really encourage you to do that. I hope that it will be helpful to you, as you feel at this moment, and perhaps (your foster mother) feels that it is. And I would like to contact you again in the future, and see how you feel, in a year, or 2 years, or 3 years, from that perspective.

JD: And next you're going to ask me if you can use this for educational purposes, right? Yes (laughs), you can. Yeah, I think it's—I mean, I'm prepared to give my life, devote my life, to helping other kids who have gone through what I've gone through, well not necessarily what I've gone through, that have gone through traumatic [25. One eye closure] experiences, by becoming a psychologist or psychiatrist, whichever I decide but, and I by no means want to stand in your way.

DC: Well, if at any time you change your mind, you just contact me and tell me so, okay, and I'll respect your wishes on that, and it won't alter in any way your ability to ask me questions or to call me up for other reasons related to this or my previous contact with you, okay?

JD: Okay.

DC: All right. I think we're done. And it's dark outside.

JD: Yeah.

Therapist: I'm going to give each of you my card too just in case (inaudible). (Therapist hands cards to foster mother and Jane)

End of Interview

Discussion

How accurate were Jane's recollections both before and after her delayed recall of sexual abuse? Because her interviews at age 6 and extensive documentation of evaluations and treatment before the age of 6 are available, it is possible to compare what she recalled at age 17 with what she disclosed when 5 and 6 years old. Case records show allegations by Jane at ages 5 and 6 that her mother had beaten her, pulled her hair, burned her feet, verbally abused her, and inserted her finger into Jane's vagina. Jane states at age 17 that she cannot recall these events, although she knows that she made allegations. Before her memory discovery, there are inaccuracies and omissions in what she describes about her prior visits with Corwin. She recalls being brought to interviews by her father but does not recall her stepmother's presence, and she states that she does not remember that her mother and grandmother also brought her to an interview. She does not refer to her mother threatening and coercing her into making a false allegation against her father or threatening her to say nothing about her mother's abuse of her.

When Corwin asks directly regarding concerns about possible sexual abuse, Jane initially states that she does not recall that experience, although she knows it was part of the allegations and then abruptly recalls the experience. As her demeanor changes and she begins to weep, she tells first of her mother photographing her with her older brother and selling the pictures. Then Jane describes her mother putting her fingers into Jane's vagina, thus hurting Jane while she was in the bathtub. She then states that she recalls "saying it" about the pictures, and both saying it and it actually happening about the vaginal penetration.

Where does the story about the pictures come from? In the records made available to Corwin at the time of his original evaluation and in his interviews,
Jane had not told her father or the evaluators that her mother had taken pictures of Jane and her brother and sold them. Is this account accurate but not previously disclosed, disclosed in records not made available, or is it something else? Does this detail perhaps intrude initially as a defensive screen to protect Jane from accessing the painful recollection of her mother’s abuse of her?

Jane then describes her mother penetrating her vagina while she was in the bathtub, states that she does not know if it was intentional or accidental and adds that she only remembers one instance. This memory returns as a somatosensory fragment: “I don’t remember anything specific until I felt that pain. And then I remember, you know, and then it’s like I took a picture, like a few seconds long, a picture of the pain, and what was inflicting the pain.”

The core recollection, then, is true to her earlier disclosures, although Jane described multiple incidents of vaginal penetration during her childhood interviews and recalls only one as a young adult. She seemed clear as a child that the penetration was deliberate, describing her mother asking her if it felt good and threatening her not to tell anyone about it, whereas as an adult, she expresses uncertainty about whether it was accidental or intentional. She recalls the pain she described as a child and that the molestation occurred while she was in the bathtub. However, the memory returns with a detail not contained in the earlier record, that she had accused her mother of taking pictures of her and her brother and selling them, although she states she does not recall that happening. Otherwise, this sudden memory discovery appears to be accurate when compared to Jane’s descriptions at age 6 of her mother’s vaginal penetration of her.

Significance and Limitations

For obvious ethical reasons, traumatic amnesia cannot be produced in controlled studies with human beings. We cannot experiment on humans by raping, torturing, or bombarding them to verify in a laboratory setting that some percentage of these human subjects will or will not develop amnesia for life-threatening and painful experiences. If this form of nonrecall occurs only as a sequel to severe trauma, it is not possible to imagine how one could obtain the “controlled laboratory evidence for repression” (Holmes, 1990) that would convince researchers that this phenomenon exists, whether it is called repression, traumatic amnesia, or some other name. We have instead about 100 years of clinical reports that memories for severe trauma can be forgotten and sometimes recovered (van der Kolk, McFarlane, & Weisaeth, 1996).

These clinical reports document the sequelae of exposure to various forms of trauma, such as serious accidents and wartime experiences, and there are some indications in this long clinical literature that amnesia is more likely when trauma is more severe and terrifying.

A number of recent studies has indicated that periods of nonrecall of child sexual abuse are reported by many adult survivors (Briere & Conte, 1993; Feldman-Summers & Pope, 1994; Herman & Schatzow, 1987; Loftus, Polonsky, & Fullilove, 1994). Williams’s study (1994) of 129 women who had child sexual abuse experiences documented in hospital records shows that when directly questioned in lengthy follow-up interviews about child sexual abuse histories, 38% of the women did not describe the target event contained in the hospital records from 17 years before these interviews. Another 16% of subjects in the Williams sample, who stated that they had had periods of amnesia for the child sexual abuse, were as accurate in describing the sexual abuse experience contained in the medical records as those who claimed never to have forgotten the abuse. The Williams questionnaire contains a number of direct questions about childhood sexual abuse, including one that asks whether there was any sexual contact with an uncle, brother, father, grandfather, sister, mother, or other male or female relative, and, in another question, whether there had been sexual contact with someone who had authority or power over them, such as a doctor, teacher, employer, minister, therapist, or police officer.

Jane, when directly asked in one question during this interview, “Do you remember anything about the concerns about possible sexual abuse?” accesses the memory almost immediately, unlike the 38% of the Williams sample who did not describe the target event when asked a number of direct questions about unwanted or threatening childhood sexual experiences. However, unlike the women questioned in the Williams study, Jane knows that she is about to view a videotape of what she actually said as a child. She also states that she has always known that there had been sexual abuse allegations against her mother, although she could not remember what had actually happened. At this time, was Jane perhaps motivated to remember before being confronted with the videotaped statements she made as a child? Although Jane states that she was always aware that sexual abuse had been part of the earlier allegations, we do not know whether she tried to recall the sexual abuse during the years that she said she could not recall what her mother did to her. Was Jane’s memory truly unavailable, or was it just that she had never specifically tried to recall sexual
abuse? If direct questioning sufficed to trigger recall for Jane, then why did more than one third of the women in the Williams study, when directly asked about sexual abuse experiences, appear not to recall the target event?

One possible answer to this question is that it was because Corwin, and not someone else, asked her about sexual abuse that Jane suddenly recalled it, whereas the women in the Williams sample were not questioned by the same individuals who had interviewed them during childhood. But the fact that it may have been Corwin's voice, demeanor, and presence that helped trigger her recall does not answer the question of whether we need to invoke a special mechanism to explain forgetting and recall of traumatic events. Trauma theorists could hypothesize that Corwin's presence acted as a "trauma-specific trigger," without which Jane might not have recalled the vaginal penetration. However, in standard cognitive theory, encoding specificity could also explain her recall, without the need to invoke a special mechanism. As Schooler, Bendiksien, et al. (in press) explain, "The encoding specificity principle states that the probability of retrieving a memory is maximized when the retrieval conditions correspond to the encoding conditions" (p. 280). Jane had not seen Corwin since she was 6 years old, when she made her last documented allegations against her mother. (Schooler elaborates the theory of encoding specificity with respect to Jane's recall in his commentary in this issue.)

Jane recalls against self-interest because she wishes to continue a newly established relationship with her mother, who has denied ever abusing her. Freyd's (1996) theory of betrayal trauma theorizes that children abused by trusted caregivers may suppress memories of parental abuse to preserve attachment and necessary caregiving. Although Jane experienced 10 years of no contact with her mother before their reunion, she does express a sense of connection with her mother in this interview at age 17. After recalling her mother's abuse and viewing the tapes, she states that she wishes to continue seeing her mother and adds that she does not yet know what her feelings are about what she has remembered.

Also relevant to the issue of a hypothesized special mechanism for encoding traumatic experiences and retrieving them distinct from ordinary memory processes has to do with the sensory component in what Jane recalled (van der Kolk et al., 1996). Van der Kolk et al. write that a recollection of such an event often returns as a sensory fragment, and Jane's recall of "the pain and what was inflicting the pain" and of "taking a picture of the pain" seems consistent with this interpretation. However, the record shows that at ages 5 and 6, Jane had encoded this abuse as part of her ordinary narrative memory and was able to recall it. As a child, Jane gave coherent and detailed narratives about the abuse, not only in interviews separated by several months conducted by Dr. Corwin, but also in prior documented statements dating back to almost a year before the first Corwin interview.

However, this forgetting and recollection differs from ordinary forgetting and sudden recall in important ways. Much was at stake for Jane: an important piece of her personal history as well as information about her significant relationships and attitudes toward her deceased father and her living mother. The tears and evident strong feeling this memory discovery caused Jane were not similar, say, to suddenly remembering where one has put the car keys.

Finally, at the moment Jane started to recollect, the first story she told was of pictures her mother had taken of her with her brother, which her mother had sold. A search of the available records located no allegations by Jane that her mother took pictures of her and her brother. It is remotely possible that the unavailable police report may contain it, that Jane told prior evaluators and they simply did not include this detail in their reports, or that Jane never told anyone about the picture taking that occurred. It is also possible that the picture taking never occurred, and that this possible memory contaminant attached itself to an otherwise accurate recollection. It would be enlightening to interview Jane's brother, who is now an adult, to determine what his childhood recollections of their mother may be.

When Jane recalls the vaginal penetration, she is unsure of whether it was intentional or accidental. If
this vaginal penetration was part of a bathing ritual in which her mother informed Jane that she was cleaning her, as the subsequent powder and cream she applied to the area suggest, this might have contributed to Jane’s uncertainty about her mother’s intention with which her memory returned. However, if this case was only about vaginal penetration as part of invasive genital hygiene, it does not explain the mother’s reported query when she was penetrating her, “Does that feel good?” or the threats Jane says her mother made not to tell anyone about her inserting her finger into her vagina.

**Clinical Issues**

From a clinical perspective, this case study raises many questions. What will be the ultimate impact on those interviewed about abuse in early childhood of seeing their interviews years later? After concluding her review of the videotapes from the earlier forensic evaluation, Jane speaks positively about the meaning of this experience for her. This remains so as of December 1996. Jane’s eventual view and feelings about this experience and its effect on her life and relationships are important concerns that may be addressed by future inquiry. What can therapists do to increase the likelihood of a positive therapeutic effect? What are the indications and contraindications for this procedure?

As videotape recording of forensic interviews becomes increasingly widespread, the numbers of adults who may one day wish to review these recordings will correspondingly increase. Indeed, there are probably hundreds or perhaps even thousands of possible candidates who are already adults. If reviewing past interviews has positive effects for some people, what does that mean for the many institutions and agencies who retain custody of these recordings? Routine destruction of these tape recordings is standard procedure in many places. Do children who are the subjects of videotape-recorded forensic and investigative interviews have a moral and perhaps even a legal right to have these tapes preserved until they can make an informed decision as an adult to authorize their destruction? If adults who are the subjects of such childhood interviews should demand a copy of them, what are the possible adverse impacts, complications, and misuses about which they should be cautioned? Only future careful study and experience will help answer these and the other questions surrounding this procedure. Until we have explored these issues and addressed some of these questions, researchers and clinicians should proceed with appropriate caution to protect the well-being of these children and the adults they become.

**REFERENCES**


David L. Corwin, M.D., Director, Program on Childhood Victimization and the Law and Child Forensic Psychiatry, and Erna Olofson, Ph.D., Psy.D., Co-director, Program on Childhood Victimization and the Law, the Childhood Trust, Children’s Hospital Medical Center, and the University of Cincinnati College of Medicine. The authors thank Michael Grogan, Ph.D., for his assistance and support in completing this study and secretaries Julie Schuster and Carolyn Hawn for preparing the transcripts and manuscript. Thanks are also given to Drs. Ekman, Putnam, Amstrong, and Schooler for their scholarship and alacrity in reviewing the videotape-recorded interviews, completing their commentaries, and for their guidance, enthusiasm, and support of our publishing this case study. We also thank Dr. Neisser for becoming interested in this project after seeing the videotapes during a visit to Dr. Schooler’s laboratory and then volunteering to complete his commentary in time for publication. Most importantly, the authors commend Jane and her late father for their courage and contribution to increasing professional knowledge and skill by allowing the use of these videotapes for professional education and study.