

common catastrophic fears of choking or suffocating. The cognitive management of worries was also poorly explained and the emphasised strategy was 'positive thinking' which is not necessarily the same as the rational thinking which is stressed by cognitive therapists. I fear that the message that a person can positively think her or himself out of a panic attack would set up many clients for disappointment.

Thus, I cannot recommend this video and have serious reservations about certain aspects of it.

Tape details

Production: Gwent Community Health Trust
 Distribution: Production House, PO Box 9,
 Cwmbran, Gwent NP44 6YB
 Details: Video; 55 mins; 1995; £23.38
 Rating: 0
 Audience: M, UG

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False memories of child sexual abuse

False memory syndrome, the induction in patients by the suggestions of their therapists of false memories of sexual abuse during childhood, is a real clinical problem which may have a devastating impact on patients and their families. Its ramifications pose a significant threat to psychological therapy services, and thereby to those patients who really did experience sexual abuse during childhood.

This short American video, although unfortunately acknowledging only in its conclusion that child sexual abuse is a real problem, addresses false memory syndrome without sensationalism or sentimentality. Drawing on the testimony of patients and the expertise of three prominent academics, the nature of the syndrome is elucidated as a product of the therapist's attribution of the patient's symptoms to childhood sexual abuse, then reinforced by the therapist's subsequent induction in the patient of false memories of abuse which never happened. The therapist may identify the abuser with conviction, and often will encourage the patient to confront the abuser personally or through legal action. In some cases the spectre of ritual satanic abuse has been seeded in the patient's mind, or her (the majority of victims are women) problems may be explained by the suggestion of multiple personalities.

Therapists who inculcate in their patients a belief that their problems are the result of childhood sexual abuse draw on the published evidence of the long-term psychiatric effects of

abuse, but in a manner which imposes on the vulnerable patient the therapists' own suppositions and prejudices. In North America this development has led to increasingly widespread litigation against the practitioners of psychological therapies, and this now threatens the future of such treatment services.

The therapists' techniques for 'recovering' memories, particularly suggestion and guided imagery, are known to be capable of inducing false beliefs. Memories are constructed; they are not simply action-replays of earlier experiences, but complex psychological representations which incorporate elements derived from other sources, including what is read, seen or heard. Despite the assertions of some therapists to the contrary, it is not possible to distinguish genuine from false memories. Whatever their profession or theoretical model, therapists work with patients who disclose spontaneously their memories of sexual abuse. The art of psychotherapy is to accept and address the patient's narrative account of their experience, but without making suggestions about its cause or embellishing the patient's memory in any way, particularly when the patient is looking desperately for answers to dispel anxiety and uncertainty.

This video was produced by the False Memory Society Foundation, which has researched the subject and aims to support both accused families and those patients who retract their accusations in an attempt at reconciliation. The video is useful as a means of raising awareness and promoting discussion of false memory syndrome among mental health practitioners. More attention might have been devoted usefully to the psychology of memory, and to a more detailed review of the means by which misguided or malevolent therapists may induce or elaborate false memories. Unfortunately, though perhaps wisely, the video does not even begin to examine the nature of repression. A more serious omission, which limits the value of the video for mental health practitioners, is the absence of any systematic examination of the implications for clinical practice.

Tape details

Production: False Memory Syndrome Foundation, Philadelphia, Pennsylvania
 Distributor: British False Memory Society,
 Belcombe Croft, Bradford on Avon,
 Wiltshire BA15 1NA
 Details: Video; 15 mins; £10
 Rating: *
 Audience: M

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