False Memory

A false memory is a memory which is a distortion of an actual experience, or a conflation of an imagined one. Many false memories involve confusing or mixing fragments of memory events, some of which may have happened at different times but which are remembered as occurring together. Many false memories involve an error in source memory. Some involve treating dreams as if they were playbacks of real experiences. Still other false memories are believed to be the result of the prodding, leading, and suggestions of therapists and counselors. Finally, Dr. Elizabeth Loftus has shown not only that it is possible to implant false memories, but that it is relatively easy to do so.

A memory of your mother throwing a glass of milk on your father when in fact it was your father who threw the milk is a false memory based upon an actual experience. You may remember the event vividly and be able to "see" the action clearly, but only corroboration by those present can determine whether your memory of the event is accurate. Distortions such as switching the roles of people in one's memory are quite common. Some distortions are quite dramatic, such as the following examples of false memories due to confusion about the source of the memory.

A woman accused memory expert Dr. Donald Thompson of having raped her. Thompson was doing a live interview for a television program just before the rape occurred. The woman had seen the program and "apparently confused her memory of him from the television screen with her memory of the rapist".

Jean Piaget, the great child psychologist, claimed that his earliest memory was of nearly being kidnapped at the age of 2. He remembered details such as sitting in his baby carriage, watching the nurse defend herself against the kidnapper, scratches on the nurse's face, and a police officer with a short cloak and a white baton chasing the kidnapper away. The story was reinforced by the nurse and the family and others who had heard the story. Piaget was convinced that he remembered the event. However, it never happened. Thirteen years after the alleged kidnapping attempt, Piaget's former nurse wrote to his parents to confess that she had made up the entire story. Piaget later wrote: "I therefore must have heard, as a child, the account of this story...and projected it into the past in the form of a visual memory, which was a memory of a memory, but false".

Remembering being kidnapped when you were an infant (under the age of three) is a false memory, almost by definition. The left inferior prefrontal lobe is undeveloped in infants, but is required for long-term memory. The elaborate encoding required for classifying and remembering such an event cannot occur in the infant's brain.

The brains of infants and very young children are capable of storing fragmented memories, however. Fragmented memories can be disturbing in adults. Schacter notes the case of a rape victim who could not remember the rape, which took place on a brick pathway. The words brick and path kept popping into her mind, but she did not connect them to the rape. She became very upset when taken back to the scene of the rape, though she didn't remember what had happened there. Whether a fragmented memory of infant abuse can cause significant psychological damage in the adult has not been
scientifically established, though it seems to be widely believed by many psychotherapists.

What is also widely believed by many psychotherapists is that many psychological disorders and problems are due to the repression of memories of childhood sexual abuse. On the other hand, many psychologists maintain that their colleagues doing repressed memory therapy (RMT) are encouraging, prodding, and suggesting false memories of abuse to their patients. Many of the recovered memories are of being sexually abused by parents, grandparents, and ministers. Many of those accused claim the memories are false and have sued therapists for their alleged role in creating false memories.

It is as unlikely that all recovered memories of childhood sexual abuse are false as that they are all true. What is known about memory makes it especially difficult to sort out true from distorted or false recollections. However, some consideration should be given to the fact that certain brain processes are necessary for any memories to occur. Thus, memories of infant abuse or of abuse that took place while one was unconscious are unlikely to be accurate. Memories that have been directed by dreams or hypnosis are notoriously unreliable. Dreams are not usually direct playbacks of experience. Furthermore, the data of dreams is generally ambiguous. Hypnosis and other techniques that ply upon a person's suggestibility must be used with great caution lest one create memories by suggestion rather than pry them loose by careful questioning.

Furthermore, memories are often mixed; some parts are accurate and some are not. Separating the two can be a chore under ordinary circumstances. A woman might have consciously repressed childhood sexual abuse by a neighbor or relative. Some experience in adulthood may serve as a retrieval cue and she remembers the abuse. This disturbs her and disturbs her dreams. She has nightmares, but now it is her father or grandfather or priest who is abusing her. She enters RMT and within a few months she recalls vividly how her father, mother, grandfather, grandmother, priest, etc., not only sexually abused her but engaged in horrific satanic rituals involving human sacrifices and cannibalism. Where does the truth lie? The patient's memories are real and horrible, even if false. The patient's suffering is real whether the memories are true or false. And families are destroyed whether the memories are true or false.

Should such memories be taken at face value and accepted as true without any attempt to prove otherwise? Obviously it would be unconscionable to ignore accusations of sexual abuse. Likewise, it is unconscionable to be willing to see lives and families destroyed without at least trying to find out if any part of the memories of sexual abuse are false. It also seems inhumane to encourage patients to recall memories of sexual abuse (or of being abducted by aliens) unless one has a very good reason for doing so. Assuming all or most emotional problems are due to repressed memories of childhood sexual abuse is not a good enough reason to risk harming a patient by encouraging delusional beliefs and damaging familial relationships. Assuming that if you can't disprove that a patient was abducted by aliens, then he probably was, is not a good enough reason. A responsible therapist has a duty to help a patient sort out delusion from reality, dreams and confabulations from truth, and real abuse from imagined abuse. If good therapy means the encouragement of delusion as standard procedure, then good therapy may not always be worth it.
Finally, those who find that it is their duty to determine whether a person has been sexually abused or whether a memory of such abuse is a false memory, should be well versed in the current scientific literature regarding memory. They should know that all of us are pliable and suggestible to some degree, but that children are especially vulnerable to suggestive and leading questioning. They should also remember that children are highly imaginative and that just because a child says he or she remembers something does not mean that he or she does. However, when children say they do not remember something, to keep questioning them until they do remember it, is not good interrogation.

Investigators, counselors, and therapists should also remind themselves that many charges and memories are heavily influenced by media coverage. People charged with or convicted of crimes have noticed that their chances of gaining sympathy increase if others believe they were abused as children. People with grudges have also noticed that nothing can destroy another person so quickly as being charged with sexual abuse, while at the same time providing the accuser with sympathy and comfort. Emotionally disturbed people are also influenced by what they read, see, or hear in the mass media, including stories of repressed abuse as the cause of emotional problems. An emotionally disturbed adult may accuse another adult of abusing a child, not because there is good evidence of abuse, but because the disturbed person imagines or fears abuse. In short, investigators should not rush to judgment.