

Seminar1

An Historical Perspective: Defending Against False Allegations of Sexual Molestation

Sexual abuse has been around since mankind first walked on this planet. It certainly is a scourge and we wish to rid ourselves of it, but we wish to do so with the proper respect for constitutional rights and appropriate adjudication. For this reason we're going to talk a little bit about the science and the history of sexual abuse allegations and defending against false allegations of sexual molestation. We're going to start by tracing some of it's history.

In order to properly defend against allegations of sexual molestation we need to understand the history surrounding the child protection movement. There are many things that contribute to false allegations. It all started with the Mondale Act. This law was passed by former Vice President Mondale, then Senator Mondale and was designed to help the prosecution of allegations of sexual molestation. The law was extremely well intended, however, it had adverse consequences because of some of his provisions. One of those provisions is that it established immunity for reporters. However, it did not establish a means for accountability which meant that if frivolous allegations were made and reported the person whose was damaged by these frivolous could not recover in a court of law. I've had doctors come and tell me that they were afraid that they were going to get criminally prosecuted if they didn't report and yet they didn't believe an allegation that they had heard. What happens is if you report you get civil immunity. If you don't report you can be criminally prosecuted and that put teachers, doctors, ministers under extreme pressure to report, but under no pressure not to report. Therefore, what happened following the Mondale Acts was that people started reporting everything, no matter how frivolous in order to protect themselves. The other problem with the Mondale Act which exists in every county in the United States, was that money was provided for prosecution of these cases, millions and hundreds and hundreds of millions of dollars. However, not one dime was provided for the public defenders. This led to a total imbalance of power between the people that were prosecuting these cases and the public defender, in charge of defending most of the people charged.

One of the things that we need to remember in the application of the Mondale Act is that although there have been mental health professionals involved in these cases for many, many years they were not really heard from until we began to see the outrageous kinds of cases that we saw in the late 1970's and the 1980's. The point Mr. Clancy makes is well taken - although there's penalty for not reporting, most courts look past the provision of the law that says that suspicions should be reasonable to be supported - and look past the science which requires only reasonable reports.

Mental health professionals have been involved with these cases for a long, long time. Unfortunately some of the things that have been done by mental health professionals, such as this early book on child sexual abuse were particularly misguided. This particular book was not based on good science and it was not based on good empirical evidence. In another example of junk science - the child psychiatrist Roland Summit - put

out an article entitled The Child Sexual Abuse Accommodation Syndrome. He explained that this article was designed to discuss some things that he was seeing in child sexual abuse treatment. Unfortunately, the article was fastened upon by the true believers, shall we say - the folks that say that children never lie about things of this nature - as a diagnostic tool – and “indicator list”. The child sexual abuse accommodation syndrome has been used in a number of courts as an explanatory tool when in fact it has no empirical basis.

One of the quotes from Dr. Summit which has become a maxim of child sexual abuse intervention counselors and investigators was that children never fabricate the kinds of explicit sexual manipulations they divulge in complaints or interrogations. This was simply stupid. Anyone that has children knows that that simply isn't true. Children can fabricate all sorts of things.

Roland Summit also went on to state that his method was “state of the art, highly evolved, intensely specific and largely unknown outside the fledgling specialty of child abuse diagnosis”. What was he quoting when he made that statement? - the interviews done by Key McFarland in the McMartin case - the most notoriously bad investigation that has occurred. He was also quoted as saying that “it was an amalgam of several roles, the knowledge of a child development specialist to understand and translate toddler language, a therapist to guide and interpret interactive play, a police interrogator to develop evidentiary confirmation and a child abuse specialist to recognize the distinct and pathetic patterns of sexual victimization.” These were the quotes from an article in which Roland Summit discussed the interviews of Key McFarland. In fact, there was no scientific basis for what they were doing.

What happened to scientific methodology?? There were no control groups. There were no validity studies - reliability was not even considered - error rates were simply overlooked. According to the child sexual abuse accommodation syndrome - if a child is sexualized they've been molested - if they are withdrawn they've been molested - if they have consistent stories they've been molested - if they have inconsistent stories they've been molested - if they retract they've been molested - if they don't retract they've been molested. In other words, all roads lead to ROME. All outcomes are that molestation occurred. No where in the wrtings about the child sexual abuse accommodation syndrome - do we see anything that could be interpreted as being a false allegation.

One of the biggest problems of the child sexual abuse accommodation syndrome and a lot of the work that the early mental health professionals were doing is that they forgot their scientific training. They forgot to look at the difference between diagnostic sensitivity and diagnostic specificity. Sometimes known as the logical error of affirming the consequent. Let me give you an example: All pregnant people are female. This person is a female, therefore, she is pregnant. Total illogical and yet that's exactly the premise upon which the early work was done and the child abuse accommodation syndrome in particular was founded!

Here's another example of the fallacies of this type of logic.

Let's assume that there's a head of surgery at a hospital and his orientation is that prostate cancer is the scourge of the world. He develops a new surgical protocol. The surgical protocol is that he will perform surgery on all men over 40 and remove their prostate. This is a very sensitive test for curing the perceived scourge. By simply removing the prostate the every man over 40 we eliminate 99% of all prostate cancer. Okay - would all men over 40 in the audience please stand up and go the waiting ambulances - - of course not! Why? - because most of us do not have and will not develop prostate problems. The problem is that this test or protocol is very sensitive, however, it is not specific. 95% of all males over 40 do not and never will develop prostate cancer. Can we operate on 100% of them? Should we operate on 100% of them? If we did that would be a 95% error rate because that test fails to look at the issue of specificity. Would you let a surgeon with this type of protocol work on you? Would this be good public policy with a 95% error rate? The test is sensitive but it's not specific and that is the problem with the child sexual abuse accommodation syndrome.

As we chart some more of the history of the child advocacy movement - in the early years of the child advocacy movement after the passage of the Mondale Act - we see the influence of child advocacy of mental health professionals spread. Let me show you what I mean. This text and its treatment protocol was by developed by the Giarretto Institute on the Peninsula in the San Francisco area. This text had a protocol for doing investigations. In fact, it became the protocol in the early days followed by police departments. Here's some quotes that show you what's wrong with this document. "We explained that there is help for parents united, the officer interrogates the victim, we want them to know that they are victims that haven't done anything wrong, the child may deny it to us at first, then we approach them with daddy may have a sickness, you would want him to get help for any of those things are wrong wouldn't you. We've been told that maybe daddy has a little sickness in his head so we finish in getting information about how the perpetrator touches her, whether he bribed her, etc."

Notice the writers start assuming that a molestation has occurred and are going to get the allegation out of the child no matter what. The writers go on:

"we want to get the family hooked into CSATP as soon as possible. A volunteer will pick up the mother and the victim, there is never any question that they will make a connection with CSATP, who let them know that this is part of the way they will cooperate with us."

How many of us have heard stories about CPS workers saying if you don't do it our way we'll inform the court you're not cooperating. As you can see, these folks begin with the assumption that every allegation is true. And there's more:

"Sometimes a man will come in, the department must use whatever it has available to get a confession. There are generally two kinds of fathers, the ones who confess everything and the ones who deny."

How many times have we heard oh he's in "denial". Nowhere in this text do the writers discuss the fact that a person may be innocent. And there's more: "the process of investigation and connecting the family to CSATP is compressed into a few hours. We get a confession from the father, he is persuaded to stay out of the home and to not have contact with his child. A connection to CSATP is made, the police go right to the district attorney with the evidence and a complaint is filed."

Wham, bam, that's the way it was set up to be. Nowhere does this protocol even contemplate an innocent person being pulled into this net. Through misguided mental health professionals - many of these mistaken ideas spread out across the country in programs which were referred to as "good touch/bad touch" programs or child assault prevention programs.

The CAP program is another example of misguided mental health material. The CAP program was written by a Minnesota woman who's work against rape was well known. If you examine the program - it contains a script. In the script you have an "uncle" and the writers talk about the uncle. They never get specific, it's like "well do you have yucky feelings about Uncle Harry?" or "when you sit next to him do you feel weird or upset" and then the script leads the listener around to "this is something you should report" without ever telling the child what a molestation is.

Research was done on this at a later time at the Department of Social Sciences at Berkeley and they found that these programs were highly suggestive and led to false allegations. That same year the governor of California stopped the funding for these programs.

The effect of these misguided mental health professionals and their protocols is seen most in the training of police officers. Training of police officers is done by POST, Police Officers Standard of Training. This is the POST manual from 1985. It had one sentence in the entire manual having to do with false allegations. It said "don't ask leading questions." It didn't bother to say what a leading question was and there are hundreds of different types of leading questions. When you think of it, it is the police officers who should be taking the lead in how to conduct these investigations. In fact, the child advocate mental health professionals took over and started writing the police manuals. This is the list of the people who contributed to the drafting of the post training manual, the training manual from police. Most of it is made up of MFCC's and psychologists. The same ones that were following the child sexual abuse accommodation syndrome and other misguided theories of the day. What happened is that the police officers looked to the mental health professionals to give them the answer and they abandoned their tried and true methods of police investigations. Much to our loss! In fact, they did not have to rely upon this misguided, unscientific - advocacy articles. There had been 85 to 90 years of research done on child suggestibility prior to the beginning of the child advocacy period. Dr. Lorandos.

Certainly it's easy to take pot shots at mental health professionals and a great deal of it is deserved. But there is a great deal of research that's been done concerning the issue of

suggestibility and the influence of questioning upon children. For example, as long ago as the early 1900's, in 1911 - the Belgian psychologist Varendonck examined the influence of suggestibility on children. He conducted some classroom experiments where children were asked specific questions about non-events and gave misleading and inappropriate answers. More recently we've seen that the mental health professionals who began to speak out about the McMartin case abuses and the Margaret Kelly Michaels case abuses - were attacked by the true believers. Who were they? Roland Summit, Kathleen Faller, Kee McFarland, the McMartin people, and the "children never lie about these things" folks.

For example, a Ph.D psychologist and former minister Ralph Underwager and his colleague Hollida Wakefield did a great deal of very important research in Minnesota concerning sexual abusers - and the manner in which one should go about questioning children about whom we believe sexual abuse has occurred. Underwager was in the Netherlands and gave an interview, as they often do, to a group of folks who misrepresented themselves. It turns out that the folks asking for the interview were from a journal called PADIKA - the man/boy love association and they proceeded to misquote and completely misconstrue the comments of Dr. Underwager. Soon, each time Dr. Underwager would come and testify as an expert in one of these cases, the prosecutors would whip out this journal article and confront him with it. The smear tactic that was used, we call it sliming, was used to try to get rid of Dr. Underwager and stop good empirical science from coming into court. We need to remember that sexual abuse is an event, it is not a diagnosis, it's something that happens to someone, it's not a diagnosis of an illness.

The early child advocates actually tried to make "sexual abuse" a diagnosis. David Corwin came up with the child sexual abuse syndrome, a list of symptoms that, if you found them to be true, you could then make a diagnosis of sexual molestation. The problem was that everybody in the world fit within the definition. It was totally unscientific. He tried to get it published in respected journals and was not able to. I found an article published in Nebraska law journal in which he talked about the problem of getting it published and that he had to form his own organization, which later became known as APSAC, in order to get it published. What happened next in the history of the child abuse movement, was that people, like David Corwin, who had unscientific theories, in order to get them published bypassed the regular scientific journals that had peer review and required scientific standards - and published it in their own little APSAC journal. It took quite a while for the real scientist to come to the forefront. As you see, when they did, they would be what we call slimed. This is basically a practice that continues to this day. I've seen investigations more in-depth on my experts that are coming to testify than on the prosecutions key witness, the child.

It's important to remember that when the early cases that made front page news across the country McMartin, Margaret Kelley Michaels, the various preschool cases came about, primarily empirically trained - psychologists, began asking themselves why the devil would children say these kinds of things if it had not occurred. The same question that we all ask, why do they say these things. The first national conference about this

sort of issue was held at Cornell University. It's accumulated papers was published by Ceci, Toglia, and Ross and entitled "Children's Eyewitness Memory" in 1987.

The next Cornell conference occurred in 1988 and again Ceci, Ross and Toglia published the results of this conclave of experts from around the world which described the newest research answering the question, "why would children say these things"

The researchers began to discover that the interviews, the preconceived bias on the part of the examiners, and a variety of other interviewing artifacts had extremely telling effects on children and their recollection of events. Thereafter they published yet another Cornell conference. John Doris edited this one and it was published by the American Psychological Association. It dealt specifically with the suggestibility of children's memories and recollections - and how they could be altered and skewed.

A very important early work in this regard was published by Steve Ceci of Cornell and Maggie Bruck of McGill in Toronto. They categorized nearly a hundred years of research, discussed it and then described some of their new research concerning suggestibility of children. In this important article, they gave a historical review and this in many ways was a precursor to a text they were later to publish with the American Psychological Association.

I would suggest to all of you that you get this article. If you can imagine basically 90 years of research put in one place it saves an enormous amount of time going out and trying to find it. I've never found a single piece of research prior to the time that this was published that was not mentioned and discussed in this article.

It's also important to remember that the same kind of slime tactic that happened to Underwager and to some extent Wakefield - began to happen to other empirically based scientists.

One of the researchers that's done important work in this area is Steve Ceci of Cornell. We're going to show you a little bit from an ABC 20/20 program that interviewed Dr. Ceci and his colleague Dr. Bruck and we will show you Steven Ceci's sense of what they discovered when they read the actual transcripts from the McMartin preschool investigation and the transcripts from the Margaret Kelley Michaels case investigation. We will also show you a little bit of the Sam Stone experiment.

In the Sam Stone experiment they were studying the effect of questioning upon children. This was a very benign circumstance where a gentleman named Sam Stone came to the school, walked around, looked at the kids and left, didn't do anything else. But the children were questioned by interviewers who had an idea about what had happened that was wrong. The researchers discovered that they were able to change the children's ideas about what had occurred and change their reports by merely questioning them with a misconception that something had happened, when in fact it hadn't. In addition to that, we going to show you just a little bit of some of the actual footage from the Margaret

Kelly Michaels examination and investigation where the investigators were putting ideas into the children's heads.

The problem is that from a research standpoint we are now discovering that if you put kids who were not abused through the same kind of highly leading repetitive interview some of those children will also disclose events that seem credible but in fact are not borne in actuality.

Now here's a little bit from the Sam Stone experiments.

Do you remember when Sam Stone came to the school and he broke that toy, did he do it on purpose or was it an accident. Well he didn't break a toy so it's highly suggestive, erroneously suggestive questioning.

Watch closely to the kids and their reaction.

I wasn't there that day and I want to know everything that happened that day that Sam Stone came to visit, can you tell me what happened.

He was doing it so fast that he ripped one of the pages.

Really.

Uh huh.

Well when your teacher saw that he was throwing things in the air what did she say.

That he'll need to go.

Need to go.

Yeah _____ looking at stuff.

What we do is a pale version of what happens in real cases. It doesn't come close for example to what was done in the Kelly Michaels case.

Do you remember that time when Mr. _____ stick his penis in your mouth. Okay.

Your pressing your peepee against _____. It feels good when you do that.

_____ butt.

Is that what they did too.

They say to the child we want you to tell us what Kelly did, the kid says I don't remember, oh yes you do you remember, no I don't remember, you do so, we know you remember. At this point the child is crying, I want to get out of here, you're going anywhere until you tell us what we know you know.

These are actual vignettes from the research tapes. Ceci is recounting and paraphrasing there - from the interview transcripts in an actual case. This is not contrived, this stuff actually happens and that's the way that they built their original research paradigm, to test their hypothesis about whether their questioning would have an impact on the kids. It's important to remember that these researchers did a great deal of additional research concerning the effects of questioning on kids. In fact, while interacting with kids with

very benign questioning about events that didn't occur the researchers found surprising results.

In the mousetrap experiments they simply came to kids and asked them week after week if they ever caught their finger in a mousetrap.

Okay Derrick this one says have you ever seen a baby alligator eating apples on an airplane.

No.

No. Have you ever had your finger caught in a mousetrap and had to go to the hospital.

No.

No.

All the kids were screened to determine in fact – that none of them had any experience with a mousetrap. Just watch the effect of repeated questioning.

Did it hurt.

Yeah.

Yeah. Who took you to the hospital.

Hmm, my daddy, my mommy, my brother.

So where in your house is the mousetrap.

It's up at our, down in the basement.

Down in the basement. What is it next to in the basement.

It's next to the firewood.

Anyway, what you see here is a child who has given you a lot of perceptual detail. He's telling you where the mousetrap was, it was next to a wood pile in the basement. He had gone down there because he wanted to tell his dad who was down there collecting firewood that he was ready for lunch. He gets in an argument with his brother Colin which he later goes on to describe they were fighting over some action figure. Colin pushes him next to the wood pile, he doesn't see where his hand's going and it gets caught in a mousetrap. I think it's fair to say that my colleagues and I were absolutely shocked that by the tenth week not only were they assenting to some of these things that didn't occur but they were giving very coherent narratives, highly elaborated narratives that are I think quite persuadable.

John Stossel and the ABC news crew were shocked as well and so they found one of the children who like all of the children had been debriefed by the experimenters and their parents, debriefed and told that no mousetrap thing ever happened - no it was all just a game - none of this ever happened – and they were shocked to discover that after specifically debriefing the children, on the follow up visit the children still had very strong memories of events that never occurred. Listen to this little boy after Stossel debriefed him.

My mom and my dad and my brother Colin, but not my baby, he was in my mom's tummy. _____ a story, it really happened.

This really happened, you really got your finger caught, this really happened.
Yeah.

I think they've come to believe it, it is part of their belief system.

Well, it wasn't a story, it really happened. This is an example of source monitoring. The children - just by being repeatedly questioned - forget the source of their memory. For example, will that little boy, remember where he got the idea about an alligator eating an apple. Will these little children ever remember the source of the memory for the mousetrap, probably not. They will have numerous source monitoring errors of the experiments. It's important that you also try to get copies of this reported research by Ceci - Cottreau - Smith & Loftus - It's available to you. At the end of this presentation we'll give you some website information for where you can get some of these. Now we would like to show you a bit of research by Maggie Bruck. She was studying the impact of anatomical dolls on children. Dr. Bruck had the idea that anatomically detailed dolls, these are the ones that have little vaginas and breasts and penises, which is of course much different than the dolls you'll find at Toys R Us - would in and of themselves be suggestive and sexualizing to the children. She carried out some research where she tried to use these anatomical dolls and determine if they had an influence on children's reports of about a visit to a pediatrician. She discovered very shocking things about the influence of the dolls on the children's recollection of the visit to the pediatrician.

Dr. Bruck also discovered that just merely questioning children about their visit to the pediatrician caused them to have rather skewed sense of things. In this experiment, the confederate physician, did nothing more with the children than measure their wrist with a ribbon, put a sticker on their tummy and tickled their foot with a stick, but listen to the reports that the experimenters got from the children.

Can you show me on the doll how Dr. _____ touched your vagina.
No, he didn't _____ my vagina.
He didn't.

With direct questioning usually able to say no he didn't touch me. But after repeated questioning watch what happens.

He did this.
He put, you put that around your wrist.
_____ tight, so tight.

Watch what she does with the stick.

So what did he do.
He put his stick in my vagina.
He put a stick in your vagina.
Yeah.

Just like that he did that.
On my hiney.
He did look in your hiney.

All this doctor did was measure the child's wrist with a ribbon, put a little sticker on her tummy and tickle her foot with a stick. But just the questioning of the child with anatomically detailed dolls – and this child had radical stories about what the doctor had actually done to her, none of which were true.

We want to give you an overview today of the kind of quality research that's gone into debunking some of the myths about children and lying and their memories and the effect of interviewers in these cases. Much of this work can be found in Ceci and Bruck's book for the American Psychological Association, "Jeopardy in the Courtroom". It's a scientific examination of children as witnesses. But there is a great deal of additional research that's available to you published by reputable journals, not APSAC or the journals that Corwin publishes or those newsletters, but reputable journals concerning the effects on children of the kinds of questioning that you've seen today. We'll talk more about this in our specialized seminar on suggestibility.

Some of the greatest research in this area on both children and adults has been done by our friend Elizabeth Loftus. Professor Loftus is a distinguished professor of psychology at the University of California at Irvine. Professor Loftus has carried on research with adults and with children and demonstrated that the role of source monitoring and misattribution, just like you saw in the vignette with the child and the eating an apple and alligator and so on, has a tremendous role to play in children's confabulation or mistaken memory of events.

Loftus as well as Ceci and Bruck and their numerous colleagues have carried on this kind of research for many years. Lindsey from the National Institute of Mental Health and his colleague Debra Poole of Central Michigan University have carried on a great deal of research into how to question children to get accurate reports of what has occurred.

Poole and Lindsey publish some of this early work in the mid 1990's and went on to publish a book with the American Psychological Association detailing how to conduct appropriate interviews with children. Some of this material has been developed into protocols used by a number of states which at the absolute minimum requires video taping and appropriate questioning of children.

Debra Poole has also, unfortunately, been the victim of some of the kinds of slime when she's been asked to testify, therefore, she's quite reluctant to do so.

Dr. Campbell whose written an authoritative text called Smoke and Mirrors about false sexual abuse claims is another researcher whose work has found it's way into the courtroom.

We had the child advocacy mental health professionals who brought in unscientific materials. We then have to take the scientific materials to counter the unscientific materials and start transitioning them into the courtroom. One of the other researchers WAS Dr. Richard Gardner. He came up with what would be the flip side of the concept of the child sexual abuse accommodation syndrome and that is the parental alienation syndrome. It's a syndrome describing how children can be influenced in high conflict divorce cases and all of the different factors that can go into alienating a child from one parent to favor the other. The whole concept is - to in essence - destroy the bond between the one parent and the child. This leads to false allegations. His work is well known and is accepted in many of the courts in the country. He wrote "True and False Allegations of Child Sexual Abuse". It's has come out in several editions. I would recommend it for those who are handling cases of false allegations, in particular, cases which arise out of a family where there is a high conflict situation.

Most people believe that false allegation comes from one of the parents telling the child to falsely accuse the other parent. In fact, his research showed that that's probably one of the least likely ways. The most common technique has to do with a campaign of denigration, of breaking the bonds of the child with the other parent, and in essence of teaching them to hate. As you teach them to hate they become fertile ground for false allegations.

The prosecution also has their favorite researcher and her name is Gail Goodman. They will quote her in almost all cases. What is interesting in looking at her work - you can't look at an isolated piece of it. What you'll find is that the prosecution will bring in one isolated piece, one line, one statistic, "you know only 2% of the children. . ." are led to make false allegations with leading questions.

Her methods were so mild that they created very, very low numbers. But as she increased the severity of the suggestions in her experiments - the numbers rose higher and higher it was found that when you use multiple methods of suggestion in combination, which is what usually happens in a case of false allegations, the number of children who will pick up on a false allegations can get up in the 80 and 90 percentiles. So if Gail Goodman is quoted you need to be prepared to look at her entire body of work. What's interesting is when her work has the same ecological validity as the work of Elizabeth Loftus in terms of the severity of the suggestion - her numbers start coming out the same as Elizabeth Loftus, so you need to look at the complete body of work.

The next organizations that weighed in on issues of false allegations actually turned out to be government entities. The one that you're seeing here was a research article put out by the department of social welfare, University of California, Berkeley. They looked at the good touch/bad touch programs and found that the good touch/bad touch programs were so suggestive that they were leading children to say things that had never occurred.

The follow up article was actually done as a book, the one I just showed you - you can't find anymore it's not in print. However, with "The Best of Intentions" is a book which talks about the fact that the child protection movement set up these good touch programs

with the best of intentions. The problem was that the programs led to false allegations. Children were being taught that they had been victimized when they had not. You should read this book if you have any case in which good touch/bad touch programs are used.

The next group that weighed in, of all people, having to do with false allegations were prosecutors and police agencies. The report on the Scotts County investigation in Minnesota is interesting. This became known as the Minnesota Seventeen. There was a large group of people who had been falsely accused. The investigation later discovered that a prosecutor was giving favors to felons to get reports of sexual molestation. The entire thing turned out to be false and caused by an overzealous prosecutor. They did a research project or wrote a report on it and the person who wrote the report is the son of Hubert Humphrey.

One of the other government reports of value, is San Diego Grand Jury report #8. This was an investigation by the San Diego grand jury of false allegations. Again, it had to do with the preconceived idea that a child had been molested when in fact they had not - and repeated questioning and the refusal to accept denials that a molestation had occurred.

In Kern County we had a series of what were called "sex rings". People were getting sentenced to 400 years and up. Most of those convictions have now been overturned. Again, at the bottom of this mess was an overzealous prosecution and no critical examination of the people who were making accusations. Basically the investigation was an out of control witch hunt and the report we're showing you, covers that.

The next big issue that we want to talk about are medical investigations. Like the mental health issues we discussed earlier, the early work in the medical field after the Mondale Act was of poor quality and very unscientific. Child advocates again went into these areas and everybody was rushing to jump on the band wagon to prosecute people for child molestation. Millions of cases were being reported because of the Mondale Act and they needed assistance in the prosecutions so they turned to the medical professionals.

One of the key articles was "Sexual Misuse, Rape, Molestation and Incest" by Woodling and Kossoris. What was interesting about that article was that it concerned a pediatrician who had children who were brought to him, where there were suspicions of abuse. The co-author was a deputy district attorney. The article came out with various ideas such as: an indentation on the hymen is a sign of sexual molestation - if the anus winks it's a sign of molestation - if there's bumps on the hymen, it's a sign of molestation. This article came out, spread across the country and doctors and nurses were coming in and testifying and sending people to prison based upon this work. The problem was there was no controlled study. No real empirical data! They didn't know what a normal anus and a normal hymen looked like. Can you imagine somebody saying I found the cure for cancer and then after they do that, when you ask well where are your controlled studies, they say I don't have any. They would be laughed out of town. But when it was to prosecute people accused of molestation, oh it was just accepted.

The types of things the report covered was ecchymoses, which is a discoloration; erythema which is a redness; healed lacerations at six o'clock; a hymen with rounded edges. They thought the edge of a hymen should be like a blade and that if a finger or penis passed the hymen, it was as if the edge was sand papered off and made it rounded. They also discussed irregularities of the hymen, hymenal remnants, mounds, bumps and again the infamous anal wink and they talked about vaginal tone. These were all said to be proof of molestation. Without controlled studies they were accepted and doctors and nurses testified that these findings were signs of molestation. It was accepted dogma.

Finally, empirical scientists from the medical field weighed in. The first one was a Dr. Jean Emons from Harvard, she wrote *Genital Findings in Sexually Abused Symptomatic and Asymptomatic Girls*. She did the study where they looked at what normal non-abused girls' hymens looked like. They also looked at girls who had not been molested, but who had had vaginal infections and then they looked at girls who had been molested. There was also a group of non-molested girls in the study. What they found is that the findings in the children that had been molested were roughly the same as the children who had had other medical problems and the children that had never been molested. This was a small study but it was one of the first scientific studies. Dr. Emons is still working in the field.

Next - one of the leading research articles in the field. It exposed the earlier work as being unscientific and just plain wrong. It was the first large study done to determine what non-abused hymens looked like. There were hundreds of subjects involved in the study. It was done by Dr. McCann who at the time was working in Fresno, he's now at Sacramento.

Look at what they found. Erythema exist in 56% of non-abused girls. Remember, earlier they were saying erythema was proof of molestation. Periurethral bands in 50.6%, again previously thought to be a sign of molestation. Labial adhesions 38.5% of normal non-abused girls have them. Posterior forchette midline avascular area was at 25.6%. What does that mean? The posterior forchette is probably the easiest place to cause damage with a penile insertion or penetration and it could create a tear. When the tear heals it leaves like a white line or a scar. What they found out, is that in 25.6% of non-abused girls that there is a blanching or white line. As the medical staff spread the majora labia minora you will get a blanching or a white line that looks identical to that of what would be caused by a tear. This is genetic and it is not caused by molestation. They found projections in 33.3%, midline tags 18.5%, vaginal ridges were extremely high numbers at 90.2%. What had previously been reported as a proof of molestation was in fact normal anatomy.

Now I'd like to show you some actual slides from actual cases so that some of these terms can be illustrated. These are graphic slides.

This is what is referred to as an irregular edge. At one time it was believed that the hymen was perfectly crescent shaped. What they found out is the edge of normal hymen's are highly irregular.

The other thing the research described was the narrow hymenal material. Sometimes the introital diameter is very small, other times very large, depending upon the width of the hymenal material or membrane. They now have statistics that will show you for each amount of width, what percentage of the population fits in that category.

This is the quote that I read over several times and never noticed. It was on page 437. It is the quote where they are talking about finding the midline avascular area that blanches. That is what I'm referring to when I refer to the white line, the white line caused by genetics, not by trauma. It's also at the same location where one would expect to find a white line caused by trauma or a healing scar. That quote is probably the most important quote for you to know in the study. Here is an example of the white line that we were referring to. The vagina is on the top of the photo and the anus on the bottom. When this research articles came out, this finding was completely the opposite of what was accepted dogma at the time.

There was editorial article accompanying the publication of McCann's study called, Predictive, Accuracy and the Diagnosis of Sexual Abuse, A Big Issue About A Little Tissue, and they admitted that they had made a mistake and were wrong and were trying to become more scientific about the issue of medical examinations in child molestation cases.

This slide is from an actual case, a SART nurse who had approximately 20 hours of training had said that this was proof of molestation. I went and talked to an expert researcher in the field and without hesitating she reached into her desk pulled out this photo of a non-abused girl which has almost the exact same shape. So do not accept what you have been told by the prosecutor expert examining these children. There are now CD's out with photographs of hundreds non-abused hymens to use for comparison when you're doing trials.

Researchers are now coming out with more recent articles of what changes you would expect to find if there had been a molestation. Berrinson did a control study of what changes they saw when there was actual documented sexual abuse. There are only around ten research centers in the entire world that have done research in this field. This is one from Perth, Australia. Basically what has happened is that the researchers are all coming up with the exact same results because they are finally following scientific standards of methodology in their testing. As they have done so you'll find there are fewer and fewer cases in which anyone is making a claim of physical evidence of sexual molestation.

There are also longitudinal studies. The question became, if there was physical damage caused by trauma would it go away to where you couldn't see it. Those are called longitudinal studies. This is one that was done by McCann. They are basically coming to the conclusion even if there was penetration, even if there was trauma in the not too distant future after that there is healing and it does not show. You need to remember that when this field first started, they were claims of finding physical injuries of alleged

molestation that had happened three, four, five years ago. Now they are claiming that in three, four, five weeks the signs of molestation would be gone and healed.

The other area of the human body that is being studied is the anus. The first major study with a large population was again done by Dr. McCann when he was in Fresno. It is entitled *Perianal Findings in Prepubescent Children, Selected for Non-Abuse*. It is not the most recent research, but it is the beginning of the actual scientific basis in this area and there is the cite for you.

Now, let's talk about an actual case. This is a case that I had in Nevada, it was rather an interesting one. If you look at the bottom of the photo, there is a line at the area of the posterior forchette, this was described as being a tear and you can see the glove on the right hand of the physician. The SART nurse claimed that this was a trans-section and strong erythema. The individual was facing life in prison. However, what you should always do is order all the photographs. They had only turned over one or two of the photographs to me. When I got all the photographs, here's another picture of the same area and there is no such line. I flew over to Nevada and as I was flying over the mountains and looking down you would notice you would see shadows created by mountains and what I believe we were looking at in these photographs is that there was a wrinkle of the skin caused by an uneven pulling by the doctor as he was spreading the lips, thereby creating a wrinkle, thereby creating a shadow, thereby creating the illusion of a trans-section.

But it got worse than that. As I said you should subpoena all of the records. Again, there is no trans-section here. There was tampering with evidence, can you see it, it's right there staring you in the face. If you look closely in the top left hand corner you will see a curved line. There is nothing in the human anatomy that is curved like that.

Here you can see it again it's on the left hand side and on the right hand side. See the curved line. There is the one you can see it in the most. On the left hand the lip you can see two different colors and it's a perfectly concentric line. What is it, well the photographs have been tampered. What you have is a round filter that has been placed over to make it look redder than it actually was. This was pointed out to the prosecution along with the no trans-section.

Now when we return to the first slide, we can see what caused that appearance of a trans-section. In the lower left hand corner you'll see a little bit of the glove. Again we're having an uneven spreading of the lips creating the wrinkle in the membrane.

One thing I think that everyone needs to think about, think about seriously, child molestation is a terrible thing, but is it in the best interests of children to find and vote that a child molestation actually occurred when it did not. I think a judge showed a lot of insight in the case of *People v. Kaplan* when he said "we presume the best interests of the child covers more than the mere allegation of wrongdoing against a particular person, seeking the truth of these allegations would appear to be in the best interests of the child

for appropriate treatment.” He was pointing out that it’s important to find if a molestation occurred, it’s also important to find out if no molest occurred.

There is another area where false allegations have been a major problem and that’s within what was called the recovered memory movement. Dr. Lorandos will talk to you about that.

One of the difficulties with recovered memories is that the people that believe that one can be badly sexually molested and then simply forget about it - have no scientific underpinnings to their theoretical approach. It’s really sensationalism – and it appears in the popular press. For example, you’ll remember that there were movies made about Sybill and a national campaign of marketing for the book about Sybill. The research demonstrated many years later that it was an entirely false - hoax.

In addition to the Sybill hoax - we find books like Michelle Remembers, where Michelle was satanically and ritually abused and so on. Also, no empirical evidence whatsoever about Michelle – only contrived memory developed through psychotherapy. In addition we find folks who have been abducted by aliens and , so called professionals, who believe that these things in fact occurred.

In addition to alien abductions and why are those pesky aliens always looking up people’s rear ends anyway, we have an interesting text that really started the whole repressed memory and psychotherapy discovered memories movement. This was a text by Ellen Bass and Laura Davis who were not scientists. They encouraged woman to actively imagine that they had been abused and actively imagine what they were going to do to their abuser and actively imagine a variety of responses to these difficult imagined events.

Too many people have taken this approach to court and used “recovered memories” of abuse to attempt to suggest that people have committed murder, have committed violent sexual acts and unfortunately, there is a great gulf between the research in this area and the popular press.

Fortunately, the scientific research in this area is fairly well described by Loftus and Ketchum in this important book. If you face any repressed memory case in addition to looking to the false memory syndrome foundation for information about these kinds of claims you should certainly get a copy of Professor Loftus’s and Dr. Ketchum’s book the Myth of Repressed Memory, because in fact memory just doesn’t work like that.

Remember that in repressed memory claims the idea is that the patient has been badly violated and that the trauma has been so significant that they have simply forced the idea out of their awareness. They use energy to keep it from their awareness and only in psychotherapy is the energy lock on the door removed so that the memory can flood back into the consciousness. Well (a) memory doesn’t work that way and (b) there is a great deal of psychological research data that demonstrates how memory actually does work and it’s chronicled in this important text by Loftus and Ketchum.

The difficult insidiousness of this claim was outlined by Loftus in one her of peer reviewed publications. What she suggested is that often these are patients who have a very difficult time coping with day to day living. And the idea that they've been abused and they've just forgotten it - is an orienting idea around which they can explain to themselves why they can't balance their checkbook, can't keep a job, can't stay in a relationship, etc, etc. All because of this event that supposedly occurred. That's the seductiveness of this false claim. It's important to remember that peer reviewed scientific journal articles such as these give you the best basis to counter claims such as "repressed memory". It's important to remember that when looking at repressed memory claims or suggestibility claims the resort to scientific literature as opposed to popular press articles is your best tactic for case planning.

We'd like to close by telling you that researchers have found while investigating claims of ritual satanic abuse - that they seem to only occur in the minds of therapists and their patients. Many of us are reminded about what occurred in Bakersfield and what occurred in New Jersey and what occurred in a variety of communities with claims of ritual satanic abuse. We'd like to close by leaving you with the study conducted by the FBI. Mr. Lanning an FBI agent, of some repute, investigated claims of ritual satanic abuse for many years and his report indicated that he simply couldn't find any valuable data supporting any of these claims other than the fact that the people making the claims all had therapists that attended seminars and training promoting this idea. That was the common factor, not satanic cults. This prompted Professor Ofshe and his co-author Ethan Waters to write a text called Making Monsters which is another resource. It describes the way in which psychotherapy, false memories and the hysteria that Professor Gardner talked about in his early work - lead to creating monsters among us.

Thank you very much, we've enjoyed presenting this for you and we hope that the resources that we've developed have been valuable for you.

This was an overview. This was an historic overview of the child protection movement and some of the problems that it has created. In further presentations and seminars we're going to take each of these issues and break them down in detail. Thank you.

At the end of this production you'll see some website information that will give you more resource data on these important concerns. Thanks very much.