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Frontiers in the Psychotherapy of Trauma & Dissociation

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**Truth and Neutrality in the
Treatment of Extreme Abuse**
Michael Salter

Frontiers in the Psychotherapy of Trauma & Dissociation

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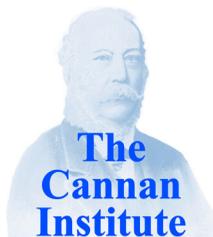
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COMMENTARY

Truth and Neutrality in the Treatment of Extreme Abuse

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Over the last century, the treatment and science of psychological trauma has unfolded according to three related but distinct areas of inquiry. The first is the therapeutic: What helps traumatized people get better? The second is the empirical or scientific: What do we know about trauma, especially complex trauma, including its social causes and symptoms? The third area is the political, and it addresses the social implications of the first and second areas of inquiry, namely: What does the study and treatment of trauma tell us about our society, including our past and our future? The successful integration of these three areas has produced striking work that has wrought profound changes in public understanding and clinical practice. Herman's (1992) *Trauma and Recovery* and Van der Kolk's (2015) *The Body Keeps the Score* come to mind.

However, complex trauma and dissociation are necessarily hidden phenomena, since they are most often caused by violations of trust that are typically secret. This secrecy introduces inevitable uncertainties into our efforts to study the dissociative disorders and the abuse from which several of them arise. In the trauma field, there is no clearer example of the potentially fraught relationship between these three areas than the issues of ritual abuse, mind control and organized abuse (RAMCOA). Since the modern phase of trauma and dissociation treatment began in the 1970s, the pressing needs and frightening disclosures of RAMCOA clients have not only challenged existing treatment paradigms; they have called into question what we really know about the extent of abuse in our communities, and indeed the very nature of our societies (Schwartz, 2000; Scott, 2001).

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Contradicting optimistic narratives of modernity and progress, severely traumatized children and adults describe their sexual exploitation within terrorizing families and black markets in full view of uncaring institutions and punitive bureaucracies. It is not uncommon that their disclosures suggest the active collusion or corruption of authority figures and agencies that are otherwise tasked with our protection and safety. While the majority of mental health professionals find RAMCOA clients are credible (Bottoms, Shaver, & Goodman, 1996; Ost, Wright, Easton, Hope, & French, 2013; Schmuttmaier & Veno, 1999), they are frequently not in a position to substantiate such claims. In the 1990s, when some clinicians went public with wide-ranging assertions about RAMCOA, the absence of definitive evidence provided an opportunity for sceptics to attack the entire project of trauma treatment (Brown, Schefflin, & Hammond, 1998).

While the intensity of the so-called “memory wars” has since faded, the therapeutic treatment of RAMCOA still has a troubled relationship with the empirical (“is this true?”) and the political (“what does this mean?”). Mental health professionals have sought to resolve this tension in a variety of ways. Some have chosen to focus on the therapeutic, and to defer unresolved empirical and political questions. On the face of it, this seems like a reasonable position. After all, treatment and recovery should be the first priority of trauma therapists. This position has been widely endorsed since the mid-to-late 1990s by clinicians who agreed that, despite encountering evocative evidence of extreme abuse in the course of treatment, the veracity of RAMCOA disclosures was unclear (e.g., Fraser, 1997; Ross, 1995).

The problem is that questions about the existence of RAMCOA persistently intrude into treatment, since many clients describe ongoing organised abuse (Miller, 2012). The framing of “ritual abuse” as merely a matter of “recovered memories” has been shattered by the significant proportion of clients who describe a lifetime of sadistic abuse continuing at the time of treatment. In their guidelines on the treatment of Dissociative Identity Disorder (DID), the International Society for the Study of Trauma and Dissociation (ISSTD) (2011) acknowledges that it is “not unusual” for adult clients disclosing organised abuse to reveal that “they are still being exploited by one or more primary perpetrators” (p. 168). Therapists are thus forced to address memories of past abuse along with potentially related abuse experienced in current reality. Is this client physically safe or not? If the therapist concludes that the client is disclosing current RAMCOA victimization, then she or he may have to grapple with the political dimensions of health and legal systems that are often unresponsive or retraumatizing for survivors of extreme abuse (Salter, 2017).

Some therapists have extrapolated what they have learned in therapeutic contexts about RAMCOA in order to understand its empirical and political aspects. This process has produced work of tremendous compassion and insight. For instance, Harvey Schwartz’s (2013) book *The Alchemy of Wolves*

and Sheep is a remarkable discussion of the social and moral implications of RAMCOA. However, efforts to grasp the “big picture” of RAMCOA are diverse and can introduce contradictory and heavily disputed assumptions. The ISSTD has often struggled to contain the many different views about the social and political implications of RAMCOA disclosures. As the Chair of the ISSTD RAMCOA Special Interest Group in 2018, my most difficult task was to try to hold a space for the therapeutic and scientific discussion of RAMCOA that was not overwhelmed by strongly-held spiritual beliefs or unproven historical claims.

Unlike the majority of my fellow ISSTD members, my focus as a criminologist is on the empirical and political, rather than the therapeutic, aspects of complex trauma. I participate in academic and law enforcement discussions about organized crime and child sexual exploitation while also taking seriously the descriptions of RAMCOA provided by survivors. The good news is that we know considerably more now about subcultures of sadistic paedophilia and the plight of sexually-exploited children than we did when the “memory wars” first broke out. We know today that the disclosures of ritually-abused children and adults in the 1980s and 1990s heralded the findings of current investigations into sadistic abuse, cover-ups and networks of abusers online and offline. The accounts of RAMCOA clients in therapy are not incongruous with the contemporary study of child sexual exploitation. To the contrary, the developing evidence base has increased, not decreased, the credibility of RAMCOA disclosures.

We should not remain trapped within the strictures of the “memory wars” of the 1990s, which were accelerated, to a significant degree, by a lack of scientific knowledge about child sexual abuse as a whole. It is useful to consider just how little was known at the time about organized abuse or child exploitation. Therapists working with RAMCOA clients would benefit from current research on organized crime and sexual exploitation, which resonates so strongly with the experiences of their clients (e.g. Canadian Center for Child Protection, 2017; Salter, 2013; Schröder, Nick, Richter-Appelt, & Briken, 2018).

Each domain of inquiry into trauma—therapeutic, empirical and political—is interlinked but also distinct. They can inform and shape each other in productive ways. In light of current evidence, we should be willing to revise previous assumptions and scepticisms about RAMCOA, and to recognize the partiality of our respective experiences and expertise. It is apparent that psychotherapy is one of the few spaces in which victims and survivors of RAMCOA can find solace and pursue their rights to health, safety and self-determination. The insights gained by trauma therapists have made invaluable contributions to our understanding of child sexual exploitation as a form of organized crime, which in turn shapes policy responses. The significant improvements in public attitudes and services

for trauma survivors over the last century has been wrought, to a significant degree, by the public and political activities of trauma clinicians, often in partnership with survivors of abuse and violence (Fassin & Rechtman, 2009; Whittier, 2009). In this way, the relationship between the therapeutic, empirical and political can be mutually enriching and productive.

Rather than insisting on unproductive dichotomies of “belief” or “scepticism,” contemporary awareness of extreme abuse compels us, especially the therapists among us, to “immerse ourselves in the contradictions of narration and history,” as Grand (2000, p. 43) puts it in her reflections on clinical encounters with evil. These contradictions are manifestly evident in the maelstrom of dissociated recollections and disabling pain that accompanies the emergence of RAMCOA narratives. As expert bystanders, then, with much humility and reflection, we must maintain our critical faculties alongside our openness to the unknown.

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