

June 3, 2005

Honorable Ronald M. George, Chief Justice
and Associate Justices of the California Supreme Court
350 McAllister Street
San Francisco, CA 94102-4797

RE: Nicole Taus vs. Elizabeth Loftus et al.
(1st D.C.A. Civ No. A104689, Solano County Superior Court
No. FCS02A557)

Dear Chief Justice George and Associate Justices:

I am Professor and Director of Clinical Training in the Department of Psychology at Harvard University. I have 250 publications, many in the field of traumatic stress and memory, including the book *Remembering Trauma* (2003, Harvard University Press). My research, funded by the National Institute of Mental Health, includes laboratory studies on cognitive functioning in adults who report having been sexually abused as children. I served on the American Psychiatric Association's committee for revising the diagnostic criteria for posttraumatic stress disorder (PTSD), and I am among the approximately 260 psychologists and psychiatrists identified by the Institute for Scientific Information as "highly cited" (i.e., top one half of one percent of all published psychologists and psychiatrists worldwide in terms of citation impact). Accordingly, I am deeply familiar with the scientific issues involved in the Taus vs. Loftus et al. case. I respectfully request that you accept the Petition for Review in the above-cited case.

Statement of Interest

How victims remember trauma is the most controversial issue confronting psychology and psychiatry today. Clinical researchers capable of understanding the relevant science realize that traumatic events -- those experienced as overwhelmingly terrifying and life-threatening -- are remembered all too well. Informed clinicians and scientists realize that emotional arousal enhances memory for trauma; it does not result in blocked memory for trauma. Indeed, people who develop PTSD are haunted by intrusive memories of horrors that they cannot forget.

Yet some clinicians claim that the mind protects itself by banishing memories of trauma, making it difficult for victims to recall their most terrifying experiences until safe to do so years later. These clinicians believe that a significant minority of victims, perhaps as many as 30%, are incapable of remembering their most terrifying experiences. They believe that

victims repress, dissociate, or block out these memories precisely because the memories are so upsetting.

As I and others have shown, there is no convincing evidence for the claim that victims repress and recover memories of traumatic events. To be sure, some victims may not think about disturbing events for many years, if the events were not experienced as traumatic -- terrifying and life-threatening -- at the time of their occurrence. But not thinking about something for a long time is not the same thing as being unable to remember it, and it is inability to remember that lies at the heart of repression theory.

For example, a child exposed to an episode of nonviolent sexual abuse (e.g., being inappropriately touched by a stepfather) and who fails to understand the experience as abuse, may experience confusion, anxiety, and disgust, but not traumatizing terror. Such a child may not think about the event, only to be reminded of it years later. But this would not constitute repression, nor would it constitute a recovered traumatic memory because the event was neither understood as abuse nor experienced as terrifying at the time of its occurrence.

The notion that traumatic events can be repressed and later recovered is the most pernicious bit of folklore ever to infect psychology and psychiatry. It has provided the theoretical basis for "recovered memory therapy" -- the worst catastrophe to befall the mental health field since the lobotomy era.

The case of Jane Doe has assumed extraordinary significance in the fierce debate over the reality of repressed and recovered memories of trauma. Videotapes of Dr. Corwin's interviews have been shown at professional conferences, and the case has routinely been cited as proof that horrific memories can be blocked and then recovered. Accordingly, the investigation done by Loftus and Guyer has profound scientific, clinical, legal, and public significance because it reveals that this case is far more complicated than repression theorists have led us to believe. More specifically, it is not at all clear that Jane Doe was ever actually abused, and the second videotape may depict her recollection of the accusation of abuse, not of any abuse itself. Needless to say, repression advocates have vigorously attempted to frighten clinical scientists from discovering the truth about cases regarding alleged repressed and recovered memories of trauma. Legal action against Loftus et al. appears to be little more than an attempt to squelch inquiry into matters of profound social significance. Accordingly, I urge the Court to grant the defendants' Petition for Review and to reverse the Appellate Court's decision.

Sincerely,

Richard J. McNally, Ph.D.
Professor

Director of Clinical Training

Tel.: (617) 495-3853

FAX: (617) 495-3728

e-mail: rjm@wjh.harvard.edu
