

When Psychiatry Battled the Devil

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When Psychiatry Battled the Devil

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As our medical schools and graduate programs fill with students who were born after 1989, we meet young mental health professionals-in-training who have no knowledge or living memory of the Satanic ritual abuse (SRA) moral panic of the 1980s and early 1990s. To those of us who are old enough to have been there, that era already seems like a curious relic of the past, bracketed in our memory palaces behind a door we are loathe to open again.

Source:

Some mass cultural phenomena are so emotionally-charged, so febrile, and in retrospect so causally incomprehensible, that we feel compelled to move on silently and feign forgetfulness.

Historian Alfred Crosby noted these "peculiarities of human memory" in the 1976 first edition of his book, *America's Forgotten Pandemic: The Influenza of 1918.* "Why have (Americans) so thoroughly forgotten it since?" he asked. (10319) Until Crosby's book appeared, even historians had avoided the painful subject for 50 years. Without resorting to psychiatric or psychoanalytic explanations, Crosby speculated that any mass event that had "enormous influence" but that "utterly evades logical analysis" might justify our ignorance of it "because the alternative would be to sink into the quicksand of speculation without any limits."

Just 25 years ago, American psychiatry was infected by a psychic pandemic that originated outside the profession. In 1983 it broke out of a reservoir of religious, legal, psychotherapeutic, and mass media mixing bowls. Children in US day care centers and adults in psychotherapy told 2 distinct versions of their malady. By 1988 some elite members of the American Psychiatric Association (APA) were making it worse. They had become its vectors. Then other elite psychiatrists stepped in to quarantine the profession. Eventually, just like the last wave of the influenza pandemic, after 1994 it ended as suddenly and incomprehensibly as it had started.

As our medical schools and graduate programs fill with students who were born after 1989, we meet young mental health professionals-in-training who have no knowledge or living memory of the Satanic ritual abuse (SRA) moral panic of the 1980s and early 1990s. But perhaps they should. Cautionary tales may prevent the recurrence of pyrogenic cultural fantasies and the devastating clinical mistakes they inspire.

But who should tell this tale? To those of us who are old enough to have been there, that era already seems like a curious relic of the past, bracketed in our memory palaces behind a door we are loathe to open again.

In the 1980s thousands of patients insisted that they were recovering childhood memories of physical and sexual abuse during Satanic cult rituals. In addition to the red or black robes of the abusers and other paraphernalia of devil worship familiar to any horror film devotee, these memories often included the ritual sacrificial murder of children, blood-drinking, cannibalism, bestiality, and incest. Famous believers in SRA ranged from Gloria Steinem to Pat Robertson. A prominent historian of religion has argued that "the emergence of SRA motifs" served as "a kind of feminist and evangelical Christian pornography." $^{2(p208)}$

Clinicians who then believed in the factual basis of the claims (and there were many) have probably spent the last 30 years asking themselves, "How could I have been so?" (fill in the blank). Or perhaps they are still saying to themselves, as the authors of one book suggest in their title, Mistakes Were Made (But Not By Me).³

Their silence is understandable. But even many of the most pivotal of the skeptical psychiatrists of that era have not shared their personal memories in a public forum. Why were they so immune and how did they decide that such clinical narratives had no basis in historical truth?

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Might historians of psychiatry offer us something here? Unfortunately, like those generations of historians following the 1918 pandemic, they too have repeated the compulsion to dissociate themselves from an ugly cultural and medical disaster. Revulsion is a human reaction we can certainly all understand.

Despite the discomfort it brings, we owe it to the current generation of clinicians to remember that an elite minority within the American psychiatric profession played a small but ultimately decisive role in the cultural validation, and then reduction, of the Satanism moral panic between 1988 and 1994. Indeed, what can we all learn from American psychiatry's involvement in the moral panic?

Dissociation: The celebrity metaphor of the 1980s

The creation of a new category of dissociative disorders in DSM-III (1980) resurrected "dissociation" as a double-duty metaphor for both a causal (defense) mechanism and a descriptive term for the splitting apart of consciousness, complexes within memory systems, and the subjective sense of a unitary self. Disoriented by the loss of a formal Freudian paradigm and the newly energized discourse of biological psychiatry, psychoanalytic clinicians found asylum among the dissociative disorders and their presumed reactive, trauma-induced origins. Within a few short years multiple personality disorder (MPD) would emerge as the most frequently diagnosed entity in this group and would be the subject of several large clinical studies that seemed to validate its existence. The research of 3 psychiatrists in particular caught the profession's attention: Richard P. Kluft of the Institute of the Pennsylvania Hospital in Philadelphia; Frank W. Putnam of the National Institute of Mental Health; and Bennett G. Braun of Chicago's Rush Medical College.

These 3 men were then asked by Robert Spitzer to be new members of the Advisory Committee for Dissociative Disorders for the forthcoming DSM-III-R, which finally appeared in 1987. Other new members were psychiatrists Philip M. Coons and Marlene Steinberg and social worker Janet B.W. Williams. Spitzer was the only holdover from DSM-III.

The DSM-III-R revisions for the dissociative disorders were extensive. The sequence of the disorders in the chapter was changed, with MPD placed first because it "is in many ways both the paradigm and the most pervasive expression of the spectrum of dissociative phenomenology." Severe physical, sexual, and emotional abuse in childhood were its predisposing factors. Described as "apparently extremely rare" in DSM-III, in the years 1984 to 1987 large numbers of cases were reported in the literature by Kluft (200 cases), Putnam (100), Coons (20), and Braun and co-authors (355). (40)

In order to further study the epidemic which they did so much to create, in 1983 they founded the International Society for the Study of Multiple Personality and Dissociation (ISSMP&D). By 1990 there were approximately 2000 members. The ISSMP&D's annual conferences were carnivals of workshops by and for many varieties of mental health professionals. The first, in December 1983, drew more than 300 participants. Beginning in 1986 some taught tales of cults and childhood Satanic ritual abuse. In March 1988 the first issue of the peer-reviewed journal *Dissociation* appeared, with Kluft as the chief editor, Braun as associate editor, and 2 additional assistant editors.

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The DSM-III-R Advisory Committee on Dissociative Disorders was conscious of the historical implications of the MPD diagnosis, noting that MPD "and its attenuated forms are, historically, the secularized descendants of the Judeo-Christian possession syndrome." In other words, they knew they were expanding the jurisdictional boundary of "scientific" psychiatry and colonizing the supernatural. Treatment rationally follows from diagnosis. Psychiatrists soon claimed for themselves superior therapeutic expertise for techniques that had formerly been the province of magico-religious practitioners (exorcists). ⁶⁻⁸ What they did not anticipate was that the blurring of this boundary would backfire, pulling many of them off into the rip tide of Satanic panic.

Bennett Braun was the first and most fervent DSM-III-R Advisory Committee member to join the crusade against Satan. His public expression of interest in cults and MPD dates at least to 1986. But at an ISSMP&D conference in Chicago in 1988, Braun presented a workshop in which he directly

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linked the MPD epidemic to the abuse committed against children by devil-worshipping cults. He argued that these Satanic cults were everywhere in the US, internationally organized with a structure similar to communist cells, with local regional, district, national, and international councils. ^{9(p395-396),14(p46-47,232-233)} Braun also argued that Satanic cults were transgenerational family traditions that had been going on in secret for at least 2000 years.

At that same conference, Sally Hill, a social worker in private practice in Chicago, and Jean Goodwin, a psychiatrist and professor of medicine at the Medical College of Wisconsin in Milwaukee, presented a paper which attempted to validate Braun's claims by citing historical accounts of allegations of "the Satanic black mass" and other obscene cult behaviors going back to at least A.D. 100. Reproducing these accounts without regard to context, these clinicians read them as fundamentally true reports of actual events. Professional historians who specialize in those eras tend to interpret such material as a discourse of propaganda aimed at undesirable minority groups, whether real or imagined.

A few months later, in March 1989, this conference paper was published in Kluft and Braun's journal, *Dissociation*. ¹⁰ It quickly became a citation success in the SRA literature as evidence in favor of the historical continuity of Satanic cults and their rituals. ^{9(p393),19 (p177)} The message to the public and the mental health professions was clear: elite members of the American psychiatric profession seemed to be sanctioning the SRA moral panic. Satanic cults were probably real, had probably been around for almost 2 millennia, and were abusing children and creating the MPD epidemic.

As for the other members of the DSM-III-R Advisory Committee and the leadership of the ISSMP&D, there was only one response: public silence.

But shouldn't somebody say something?

That's what I asked myself after I read Hill and Goodwin's article and heard audiotapes of Braun's public lectures. As a 29-year old newly minted clinical psychologist in private practice, with no academic or clinical institutional affiliation, I was in no position to have anyone listen to me if I spoke up. I knew I was not alone in my skepticism and horror. But the resounding silence of the elite psychiatrists could only be interpreted in three ways by those of us "in the trenches" who looked up to them for guidance: these Satanic cults were real (despite the lack of corroborating physical or forensic evidence); the experts did not know if they were real and were afraid of insulting the patients; or there was an abject failure of ethical leadership.

The December 1989 issue of *Dissociation* brought the first public statements of SRA skepticism to appear in a peer-reviewed psychiatric journal. Psychiatrist George Ganaway wrote a rather convoluted article on "historical truth versus narrative truth," avoiding any direct rejection of SRA claims while doing his best to raise significant doubts. ¹¹ In a "letter to the editor" I contributed a short critique of the historical sources and methods used by Hill and Goodwin, and—with the brashness of youth—declared that most SRA claims were nothing more than "a modern version of (a) paranoid mass delusion—and one in which all too many clinicians and law enforcement officials also share." ^{12(p252)}

Richard Kluft opened the same issue of *Dissociation* with an impassioned editorial in which he cited the Hill and Goodwin article with approval as a foundational contribution that scientific investigators could use to study clinical material. ^{13(p193)} While careful not to explicitly advocate or reject it himself, Kluft also invoked the specter of a possible "hidden holocaust" perpetuated by Satanic cults. ^{13(p192)} Kluft's editorial, rightly or wrongly, may have been interpreted by many as his public defense of Braun's international conspiracy fantasies. To the many SRA believers who read Kluft's remarks, their biased cognitive filter could reasonably lead them to conclude there were now two members of the DSM-III-R Advisory Committee on Dissociative Disorders deeply involved in granting legitimacy to the Satanic moral panic through the linkage of MPD to SRA claims.

Another year of silence, then alternatives

Throughout most of 1990 no American psychiatrist, and certainly no other member of the DSM-III-R Advisory Committee for the Dissociative Disorders, made any formal public or published statement

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explicitly rejecting Braun's Satanic cult conspiracy. No one objected to Kluft's "hidden holocaust" analogy. These were the true plague years as the moral panic continued to rage in day care centers and the courts, destroying reputations and lives. 14,15

But by the autumn of 1990, Frank Putnam of NIMH decided to break his skeptical silence. In preparation for the 7th annual ISSMP&D conference to be held in Chicago in November, Putnam arranged to open the event with a special plenary panel of 4 presentations of "alternative" views of the interpretation of SRA claims. The plenary session was held in a large hotel ballroom filled with most of the more than 700 conference attendees. Television crews were on hand to witness the event. So was Gloria Steinem. So was I.

The 4 members of the plenary session panel were Putnam, George Ganaway, anthropologist Sherrill Mulhern, and me. Putnam had read my *Dissociation* critique and wanted me to present my argument in person. Putnam and Ganaway presented carefully balanced arguments that did not directly reject the reality of SRA. Instead they expressed concerns about the linkage of MPD to such controversial claims, noting it would hurt future research on child abuse and trauma.

Mulhern and I were strident in our outright rejection of the veracity of SRA claims. She cited anthropological and sociological research while I hammered home the view of historians that ancient accounts of bizarre cult practices had to be read in context. Along with my fellow panelists, I too mentioned the October 1989 preliminary report of an investigation by Supervisory Special Agent Ken Lanning from the FBI Behavioral Science Unit at Quantico which found no corroborating evidence of the existence of Satanic cults engaged in any criminal activity, let alone kidnapping and ritually sacrificing thousands of American babies. Lanning's findings had emboldened Putnam to organize the special plenary session and go public with his private skepticism. The full FBI report appeared 3 years later.¹⁷

Gloria Steinem approached me after my talk and suggested materials to read which she felt would help me change my opinion of SRA accounts. During the conference I attended one of Bennett Braun's legendary SRA workshops ("See the Satanism!" he screamed as he pointed to a patient's red crayon scratching on a sketch pad. "There it is!"). Several persons—all licensed mental health professionals—approached me and let me know I wasn't fooling them. They knew I was a witch or a member of a Satanic cult who was there to spread disinformation. But apparently the panel presentations had a different effect on others. As one conference attendee, an SRA believer, later wrote, "Mulhern and Noll cut a line through the therapeutic community. A minority joined them in refusing to believe sacrificial murder was going on; the majority still believed their patients' accounts." ^{18 (p17)}

The fade out into forgetfulness

In 1991 Putnam and Ganaway continued to distance themselves from SRA.^{19,20} Braun and others who shared his beliefs continued to exploit the medical literature to bolster the construct validity of SRA.²¹ Kluft continued his editorship of *Dissociation*. In the years that followed, the pages of *Dissociation* kept possession and exorcism alive as relevant psychiatric issues in diagnosis and treatment.²² Psychiatry could not abandon its jurisdictional claim on the supernatural.

New APA work groups for the preparation of DSM-IV were formed. Not surprisingly, none of the former members of the DSM-III-R Advisory Committee on Dissociate Disorders was invited to be on the work group for the dissociative disorders. When the new diagnostic manual finally appeared in 1994, MPD had vanished. Renamed and revised as dissociative identity disorder (DID), it also had been dethroned from first place in the sequence of dissociative disorders. "I don't want it to be seen as some sort of circus sideshow," said the chair of the new DSM-IV work group. DSM-IV reinstated the order of DSM-III. The new guards at the APA were doing their best to quarantine the profession from not only the men who had enabled the MPD epidemic but also from any lingering connection to the moral panic.

In May 1994 the ISSMP&D dropped "Multiple Personality" from its name. In December 1997 *Dissociation* produced its 39th and last issue. The journal's demise reduced the volume of MPD/DID contributions to the medical literature. But by then the "multiple movement," as philosopher Ian

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Hacking termed it, had already begun to wane.²³

The False Memory Syndrome Foundation was formed in Philadelphia in March 1992. It became a clearinghouse of legal and scientific information that countered false claims of "recovered memories" of child abuse (Satanic or otherwise). Noted scientists such as Elizabeth Loftus and Carl Sagan became its advocates. Ganaway eventually joined its board of scientific advisors. Its newsletters vilified clinicians such as Bennett Braun and others who had done so much to legitimize the paranoid mass delusion of Satanic cults. 15

After 1993 the day care ritual abuse panic subsided. By 1994 even the mass media had become critical of SRA. Everyone just wanted to move on.

Are we ready now to reopen a discussion on this moral panic? Will both clinicians and historians of psychiatry be willing to be on record? Shall we continue to silence memory, or allow it to speak?

DISCLOSURES:

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