

Extreme Abuse Survey

**Wanda Karriker:
Incest – The Ultimate Betrayal**

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Wanda Karriker
Bettina Overkamp
Carol Rutz

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Incest – The Ultimate Betrayal¹:
Findings from a series of international extreme abuse surveys.

Wanda Karriker, Ph.D.

LeAnn was thirteen, tall and slender, shaped like a Barbie Doll. She slumped over on the sofa, clutching her cramped stomach.

“I will not see him again. My daddy wants me to stay with him during Easter vacation. If I have to go, I will kill myself.”

When she learned that she was going to have to be with her father during Easter vacation, LeAnn had told her mother she needed to talk with a therapist.

As her new therapist, I believed this beautiful child. I believed she meant what she said about killing herself and went out to the waiting room to tell her mother that LeAnn needed to be admitted to a psychiatric unit immediately. Her mother said that ever since LeAnn was five years old, she had been saying her father was sexually abusing her. Social Services had been contacted many times but could never substantiate the abuse. (Her father had lots of money, I hear).

I called the local hospital and got her admitted. Then I then called Social Services and made a report to them. The social worker said they would look into it . . . again. In the hospital LeAnn was evaluated and the psychologist recommended that the father should not be allowed to see her under any circumstances. I never saw the report, but apparently it was powerful enough that after the father and his attorney read it, the father, rather than face a judge, gave up all custody and visitation rights.

After her stay in the hospital, LeAnn returned for several weekly sessions of therapy . . . I mostly just listened as she told her story. Her story of not being believed over and over and over.

1 **Karriker, Wanda. (2008, April 12).** *Incest – The ultimate betrayal: Findings from a series of international extreme abuse surveys.* Presented at the Fourteenth Annual Northern California Child Sexual Abuse Awareness Conference: Sacramento, CA.

Leann told me that once, when she was spending a weekend with her father, she had gone with her stepbrother to a youth meeting at her father's church. An opportunity arose for her to speak to the minister. She told him about the molestations hoping that he would believe her and help her. Instead, the minister called Leann's father and told him that his daughter was making accusations that he was sure were false.

So much for Leann's trust in the clergy.

She told me about being in a candle-lit basement. Laid out on a pool table. Her father and his buddies standing around. Drinking. Smoking. Laughing.

"What were they wearing?" I asked.

"Black biker shorts," she answered. She sat up on the edge of the sofa and asked softly, meekly. "Dr. K. Am I still a virgin?"

Perhaps if I, in my career as a psychologist in private practice, had never sat face to face with LeAnn and other survivors of incest, many of whom were also survivors of other extreme abuse such as ritual abuse, mind control programming, child porn and prostitution, I would be among the skeptics who tend to disbelieve that perpetrators, alone or in groups, are capable of deliberately torturing children for fun or profit or in the name of some belief system.

And I would never have gotten to the place in my life where I could devote full time to advocating for survivors and doing things like helping to develop and implement the survey research that Connie Valentine has asked me to talk about today.

Just so the stats related to incest don't get lost in the pile of findings I will present later, here they are:

Of 1122 survivors who responded to the related question on the Extreme Abuse Survey for Adult survivors, 70% (780) reported memories of incest.

Of 216 respondents on the survey for professionals who work with adult survivors, 91% (197) reported that they had worked with at least one client whose memories of extreme abuse included incest.

I don't know if those 780 survey respondents from around the world who reported incest believe that incest is the ultimate betrayal; however, I do know that the abused clients I worked with always seemed to have the most difficulty coming to terms with the knowledge that either a family member abused them or a family member did not prevent them from being abused.

In my presentation yesterday in Sacramento, I gave a detailed account of how I made the transition from trauma therapist to trauma researcher. Let me quickly summarize: In 1979, I opened a private psychological practice in a small town in North Carolina. Immediately I began noticing that a significant number of my clients reported histories of incest. And a few years later I began seeing clients who met criteria for the diagnosis of multiple personality disorder (now called dissociative identity disorder). All had significant trauma histories of incest, and some reported ritual abuse in destructive cults, both satanic and Christian.

In conferences held in Chicago in the late eighties on Multiple Personality Disorder and Dissociation, I met other therapists from across North America who were hearing the same types of stories as I. Then, in 1989, an article came out in the journal, *Dissociation*, written by George Ganaway, a psychiatrist from Atlanta, who questioned the veracity of ritual abuse accounts, categorizing them as 'urban legends' and comparing them to stories of UFO abductions. He also questioned whether these memories were just fantasy and / or illusion "borrowing its core material from literature, movies, TV, other patients' accounts, or unintentional therapist suggestion?"

Intuitively, I knew that this article would reverberate through many groups. The cults would love it. Survivors would be crushed. I was not sure how other therapists would react.

Looking back, I consider this article to be the cannon that set off what came to be known as the "memory wars." The author, by the way, is a member of the False Memory Syndrome Foundation's Scientific and Professional Advisory Board.). . .

. . . An organization that, according to the annual budget reports in their newsletters,

has spent at least 5 million dollars promoting the idea that “false memories” implanted by therapists is why its members have been accused of molesting children. This tidbit of information was reported by investigative journalist Lynn Crook in her recent presentation during a panel at the United Nations’ 52nd Conference on the Status of Women.

I was fortunate to be in the audience of this panel titled, “The Exorbitant Cost of Child Sexual Abuse.” Moderated by noted anthropologist, Dana Raphael, the panel also included Pam and Randy Noblitt and Connie Valentine (here today) as well as Eileen King and Betsy Salkind. Lynn Crook, cautioned the standing-room only audience, many dressed in traditional garb from the countries they represented, to be skeptical of claims that false memories of sexual abuse were implanted by therapists. She said that we have to remember that many of the people who say that child sex abuse allegations are really just false memories have, themselves, been accused of molesting children. And that some of the false-memory proponents are the experts, hired to defend accused child molesters. (With her permission, I copied Lynn Crook’s UN hand-out to give to you today).

Some other things I learned from that UN panel, relevant to today’s conference:

That the junior version of FMS, false memory syndrome, is PAS, parental alienation syndrome, a non-scientific term often used by alleged pedophile fathers to gain custody of and silence their young victims in family court by countering their children's accusations with an accusation that the mother put the child victim up to it.

Eileen King, with Justice for Children, discussed how courts are legalizing incest, by their ongoing failure to take it seriously and protect child victims, if not by law, then by practice. She referred to kids being put with perpetrators as "child trafficking.”

Back to my timeline:

About the same time the 1989 article questioning the reality of ritual abuse came out, two women (one born in 1947; one in 1959) came to me for therapy. Not only did they have memories of incest and ritual abuse, they also remembered having been used in what appeared to be torture-based mind control programming and medical experimentation.

The younger one remembered her daddy (a retired military man) deliberately creating alters (or personality states) in her with coded numbers as names; the older one remembered brain probes and high-tech labs with babies in incubators. And being strapped on a table and spun around. And electroshock.

It was 1992 before I learned that other therapists were hearing clients tell about mind control experiments and that, indeed, such atrocities had been authorized in 1953 by CIA director, Allen Dulles, apparently conducted during the Cold War (and maybe even today), in what he called “the battle to win men’s minds.”

In 1995, three courageous victims of ritual abuse, radiation and also mind control experimentation stood before the President’s Advisory Committee on Human Radiation Experiments to tell the world about the horrors they endured in the name of National Security. Giving explanation and support for two of these young women was their therapist Valerie Wolfe. In preparation for her talk she had heard from nearly forty therapists from across the country who had worked with clients, who as human guinea pigs in government-sponsored mind control experiments, had remembered “mind control and pain induction techniques such as electric shock, use of drugs, sensory deprivation, hypnosis, dislocation of limbs and sexual abuse.

Often when I talked about my work with ritual abuse and mind control survivors with my skeptical colleagues, or with physicians of my clients they would inevitably look at me like I was a nut and ask, something like, “You don’t really believe that stuff goes on do you?” Later, when I got on an Internet list of other professionals who worked with persons with dissociative disorders, I noticed that when I, or others, tried to talk about our clients with ritual abuse histories, somebody would always try to silence us by asking the question, “Where’s the data?” or where’s the proof that those things really go on.

In reaction to those who argue that most or all claims of ritual abuse and / or mind control programming are fabricated, Hal Pepinsky (2005), a professor of criminal justice, counters:

If these narratives are essentially fabricated, they must have been fabricated in many different ways at once. It would require a more elaborate “conspiracy” to account for

how similar narratives could be falsely implanted in so many survivors' minds in so many different ways (e.g., "memories" that arise before therapy in some cases and after therapy in others, in childhood in some cases and only long afterward in adulthood in others) than to account for how so many cults and mind control programmers could operate essentially in secret, with impunity. (p. 1371)

And what about the **children** who tell stories about being abused in ritualistic ways? (Later when I share the results of the recent surveys on extreme abuse, you'll hear about some of those horrors).

For most people, it would be easy to disbelieve a child who talks about ritual abuse. Not so for my German colleague and fellow survey developer, Thorsten Becker. He once worked with a child who told him a bizarre story about the devil showing up at some sort of ceremony in a cemetery and performing all sorts of abusive rituals on her. When she later explained: "I know it was not really the devil because he had a zipper on the back of his suit," Thorsten realized that the child had been telling the truth.

Tate found similarities among child cases of ritual abuse reported in Britain, North America, and the Netherlands. He concluded that "either there exists a worldwide conspiracy by toddlers or the children are speaking truth."

In 1989, in the same edition of the journal *Dissociation* that contained the article comparing alleged ritual abuse survivors to alleged UFO abductees, the editor, Dr. Richard Kluft, a premier clinician and researcher in the dissociative disorders field wrote about the difficulties of studying and researching ritual abuse. In fact, as far as I could find, there is only one study in the peer-reviewed psychological literature (as of June 2007) in which a group of ritual abuse survivors were interviewed by the researchers. It was a small group of only 20 and if the interviews were structured, they were not described as such in the article.

In this study, published in 1992, the researchers, Shaffer and Cozolino, interviewed 19 women and one man. All subjects reported witnessing the murder of animals, infants, children and / or adults. All reported suicidal ideation and half reported suicide attempts. The majority reported severe and sadistic forms of abuse by multiple perpetrators. Some reported continued recontact / revictimization into their adult years. Fifty-five percent reported repeated psychiatric hospitalizations during the

initial and middle stages of psychotherapy. Several survivors experienced religious / spiritual conflicts stating that “the most destructive aspect of the ritualistic abuse had been the negative effects that it had on their spiritual selves.”

The majority said they believed in a higher power, but only half of that subgroup was involved in an organized religion. The majority considered participation in support groups as a necessary adjunct to psychotherapy. All considered the uncovering of memories as the primary focus in therapy and felt that “their therapists’ beliefs both in the reality of the abuse they reported and in their capacity to recover were necessary preconditions to their ability to deal with these very difficult therapeutic issues.”

Yes, Kluft was right in 1989 when he wrote about the difficulties of studying and researching ritual abuse. But that was in the days before the Internet which made it possible (and even practical) to reach a population, many of whom had been threatened with death if they ever told about the abuse.

In 2006, I got tired of people asking “Where’s the data?” when I talked about ritual abuse.

Agreeing with Professor Pepinsky’s observation that hearing directly from RA / MC survivors shapes our “understanding a lot more than talk or literature about them,” a couple years ago I teamed up with some people I met on Internet lists, to develop an instrument to explore commonalities reported by adult survivors of extreme abuse including, but not limited to, ritual abuse and / or mind control.

Two Germans and two Americans pooled our various contacts skills, knowledge, and experiences to develop a means to bring the existence of extreme abuse, including ritual abuse and mind control, to the attention not only of mental health professionals, but also to the media and to individuals and organizations from around the world who are in positions to expose this “hidden holocaust.”

The survey team’s names and bios are on the hand-out. (You gotta remember to be careful about meeting up with people on the Internet. You don’t know what it might lead to).

Connie had originally invited me to talk about the results of the first survey, the one

for adult survivors; however, she said it is all right if I talk about the preliminary results of our series of extreme abuse surveys. So I will also be presenting some of the findings from the survey for professionals who work with survivors, and some findings from the third survey, the one for caregivers of child survivors of ritual abuse and mind control.

But first, to humanize the results I'll be presenting, I'd like to tell you about a 7-year-old girl I once saw in my private clinic. Now, 25 years later I am still haunted by my memories of ... I'll call her Katie. Her parents had brought her for a psychological evaluation, on her teacher's referral, because she was acting strangely in school. Inconsistence performances on tests. Sometimes sucking her thumb and acting like a baby. Sometimes off in a world of her own.

In the parent interview her mother said,

“She's got, like two extremes. Nothing else. I'm telling you, sometimes she's passive; sometimes violent. Moody, she is. I think she's trying to hurt someone and I don't know if it's me or her daddy. And another thing, since about the age of three, maybe almost four, there've been times when she's so sensuous that I—”

After listening to a litany of Katie's emotional, academic, and behavioral problems both in school and at home, I asked,

“In either of your opinions, has she ever been hurt in any way?”

“You could say so,” the father glanced spitefully at his wife, “if her mother trying to abort my little sweet pea in the third trimester would count.”

I glanced at the mother for verification or denial.

“Yes. I did. I was having a hard time. Real depressed. Didn't think I could take care of a child . . . so I drank some quinine. Made me awful sick with a lot of bleeding. . . . but it didn't hurt the baby, she got born okay.”

“It's hard to tell the possible effects of prenatal injury,” I commented.

The following week during my observation and examination, Katie obtained IQ scores in the borderline range, but appeared much brighter. Achievement scores were at grade level, suggesting that the IQ scores did not give a valid estimate of her academic potential. There were many inconsistencies in test responses, very much as the teacher had reported. Sometimes the little girl would miss questions, then be correct on items at a higher level.

After the testing was completed, Katie eyed the dry-erase board in the corner. “Can I draw something?”

“Sure.”

“Tell me what to draw.”

“How ’bout a picture of your family?”

Katie drew three ghostlike figures on the board and captioned them “Dad,” “Mom,” and “Lucy.” In the family was a child named Lucy — but not herself.

“You know what,” the little girl looked under her shirt, “I can push my belly button and make Lucy come out.”

“What does she look like?” I asked.

“She’s cute and has short blond hair and blue eyes.”

Katie had long brown hair and dark eyes.

“Lucy’s happy. I like her. You know what, she always tells me math answers.”

“Would Lucy talk with me?”

Again the child looked under her shirt; this time pushing on her belly button calling, “Lucy, come here.”

Her facial expression changed to a more mature-looking child. Body language shifted

to a childlike representation of a sensuous adult. “Hi. I’m Lucy.”

“Where’s Katie now?”

“Up there.” The little girl pointed to a corner of the ceiling. “Can’t you see her up there?”

The child was apparently experiencing depersonalization, a phenomenon in which a person feels detached from his or her body.

Eyeing the camera on a tripod, Katie picked up a microphone, stood up, and like a tiny actress pretended to sing and dance. Without warning, she threw herself down on the floor, kicking her legs in the air, moaning, “No. No. Don’t make me.” Putting her hands over her mouth, she curled into a fetal position.

I wondered what types of mistreatment Katie could have experienced that would cause her to be dissociative or —as Katie’s teacher had aptly described— to escape into a ‘world of her own.’

When I met with the parents to discuss my findings, I told them about Lucy and Katie’s changing behavior in front of the camera and her curling up like an infant. I added, “I don’t have to make a formal diagnosis, but I believe your daughter has created at least one imaginary friend, perhaps a different personality state, to help her cope with something she couldn’t tolerate.”

“Why would that be?” they asked.

And I told them that although I had never recognized MPD (Multiple Personality Disorder) in a child before, from what I had read, when children face unbearable trauma, they may unconsciously create different states of mind to help them mentally and emotionally separate from the pain.

I never got to say good-bye to Katie.

A few weeks later, the mother called to tell me that Katie had been diagnosed as having an STD and that the pediatrician had recommended a psychiatrist for her to

see.

Sometime later, the father's attorney had called saying that I would be receiving a subpoena. Katie had told the psychiatrist that her daddy had made her do bad things.

Incest, the Ultimate Betrayal!!!

The doctor had reported the accusation to Social Services.

In a three-hour deposition taken in the presence of the prosecuting and defense attorneys and the guardian *ad litem* for Katie, I made it clear that the child had made no verbal disclosures of abuse and had been taken out of therapy when the possibility of trauma as a cause for her dissociative behaviors was suggested.

I could only surmise what happened to Katie by reading the release-of-information forms sent to me by her treaters. Apparently, abuse claims had been substantiated. Katie was in the custody of DSS and had been placed in a long-term residential treatment center.

Once, her therapist had called me to obtain copies of her test protocols. "Katie is an enigma. We don't seem to be making much progress with her. She's always getting into trouble and then denying she's done anything wrong. Sometimes she whines and pouts like a baby. She has a lot of temper tantrums, but sometime gets unresponsive. By the way she refuses to see either her mother or father when they come for supervised visits.

I couldn't resist asking, "Has she been treated for her multiple personality disorder?"

"But Dr. Karriker," he said. "She doesn't show any symptoms of being multiple."

Looking back at Katie's degree of dissociation, and the way she acted when I turned on the camera, I suspect that had I been able to work with her longer, she might have revealed more abuses. Based on her behavior in front of the camera, I've always wondered if her daddy (maybe mother, too) was using her in child pornography – and heaven forbid – perhaps some of the other horrors that you'll see reported on our series of surveys.

Discussion of Survey Results

Comments Made By Survey Participants

From a police officer in the UK:

Two sisters (I dealt with it as one case) were extremely consistent in their disclosures. Gave very accurate details of locations, descriptions of person present and as far as I was concerned could not have made up the circumstances they described. . .

The MC male I observed, I had never come across anything like it. He had computer programmes, access codes, and alters including a nine-year-old female. He also had body memories appear in my presence.

From a Mother:

Myself, children discredited despite corroboration of another child abused by my ex-husband's group. Children returned to father. I had threats of never seeing children again by authorities, mental illness, etc. Later police investigation took all three children seriously. Squashed by social services.

From a Therapist

There is a disturbing quality I've noticed about the way the social service professionals have handled any of the sexual abuse disclosures that the children have occasionally made that have reached the Child Protection System. The interviews that are done with these dissociated children are handled very poorly, and it's clear that they don't know what to do with this type of case. Inevitably they treat it as malingering because the child's statements tend to be limited and halting with very little ability to respond spontaneously to questions by a complete stranger in the first few minutes of one

interview. The County Prosecuting Attorney and / or Social Services Department probably have a whole cabinet full of videotaped interviews of dissociated children who had disclosed sexual abuse but whose interviews were judged to have not yielded prosecutable evidence and, therefore, the child's disclosures were ruled "unfounded" (making the child feel like s/he was called a liar by the judge).

Most of these tapes are not available to the public but if they could be subpoenaed, I believe there would be shocking evidence of incompetent interviewing of these children because I had the opportunity to see a couple of them in certain cases or to read transcripts of them and I was dumbfounded by their failures to put the child at ease, to ask follow-up questions, to ask the child for clarification and to even accurately describe the child's answers in the report. In every case, the interviewer intentionally gathered as little evidence as possible, almost to doom the case from the start to ensure that that the Social Services Department wouldn't have to proceed with any of the messy work of actually protecting the child from real abuse.

Some professionals, including the mental health and legal experts, seem to want to dismiss the possibility of the more extreme claims the child might make because they don't want to endorse any intrusion into other people's affairs that the investigation would require without more substantial evidence. Mine is an extremely conservative state with a "live and let live" attitude, which really boils down to, "don't pry into my business and I won't pry into yours." It takes a lot in my state to justify letting the government intrude into someone's private business, like how they raise their children or how they practice their religion, etc. Sometimes I got the feeling that the lawyers and judges and even other psychologists thought someone would be coming after them and accusing them of abusing their children if they didn't hold the line.

My daughter is now a well adjusted and happy twelve-year-old. The abuse took place when she was 2.5 years – 4 years. Two years later I had another baby. Having a baby sister helped her enormously and they have a very strong loving relationship. She learned to trust and love again. The worst aspect of her disclosures was her belief that all mummies sent their children to the nursery and knew what was happening to the children. (This belief was fed by perpetrators). Seeing me love and care for her sister helped her trust me again. She started to write at a very young age and her experiences helped her to write stories and poetry. She was first published at 10 years and has had a good deal of success as a poet.