

# Scientists and Practitioners Don't See Eye to Eye on Repressed Memory

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Skepticism about repressed traumatic memories has increased over time, but new research shows that psychology researchers and practitioners still tend to hold different beliefs about whether such memories occur and whether they can be accurately retrieved.

The findings are published in [\*Psychological Science\*](#), a journal of the [Association for Psychological Science](#).

“Whether repressed memories are accurate or not, and whether they should be pursued by therapists, or not, is probably the single most practically important topic in clinical psychology since the days of Freud and the hypnotists who came before him,” says researcher Lawrence Patihis of the University of California, Irvine.

According to Patihis, the new findings suggest that there remains a “serious split in the field of psychology in beliefs about how memory works.”

Controversy surrounding repressed memory – sometimes referred to as the “memory wars” – came to a head in the 1990s. While some believed that traumatic memories could be repressed for years only to be recovered later in therapy, others questioned the concept, noting that lack of scientific evidence in support of repressed memory.

Spurred by impressions that both researchers and clinicians believed the debate had been resolved, Patihis and colleagues wanted to investigate whether and how beliefs about memory may have changed since the 1990s.

To find out, the researchers recruited practicing clinicians and psychotherapists, research psychologists, and alternative therapists to complete an online survey.

The data revealed that mainstream psychotherapists and clinical psychologists are more skeptical about recovered memories and more cautious about trying to recover repressed memories than they were 20 years ago.

But, there was still a clear gap between clinicians and researchers: Roughly 60-80% of clinicians, psychoanalysts, and therapists surveyed agreed to some extent that traumatic memories are often repressed and can be retrieved in therapy, compared to less than 30% of research-oriented psychologists.

Additional data revealed that belief in repressed memory is still prevalent among the general public.

This marked divide, with researchers on the one hand and clinicians and the public on the other, is

worrying because of the implications it has for clinical practice and for the judicial system:

“Therapists who believe that traumatic memories can be repressed may develop treatment plans that differ dramatically from those developed by practitioners who do not hold this belief. In the courtroom, beliefs about memory often determine whether repressed-memory testimony is admitted into evidence,” the researchers write.

Patihis and colleagues propose that tailoring the education of the next generation of researchers and practitioners may be an effective way to narrow the gap.

“Broader dissemination of basic and applied memory research within graduate programs in clinical psychology and training programs in other mental-health professions may be a helpful step, although research will be needed to determine the effectiveness of this approach for narrowing the research-practice gap,” the researchers conclude.