

Aftereffects of Extreme Child Abuse and Resiliency of the Human Spirit

(Webinar for *Survivorship*, April 21, 2012)



Wanda Karriker, PhD

Good afternoon from North Carolina and thank you to everyone at *Survivorship* who asked me to conduct this webinar. Please note that some of the pictures and terms that I use may be triggering for survivors. You can take a break from or leave the webinar at any time. A recording of my talk and the Power Point file will be available at the *Survivorship* website for members.

The title chosen by the sponsors accurately reflects one of my life's missions: to share what I have learned personally and professionally about the aftereffects of extreme child abuse and the resiliency of the human spirit – a mission I chose in the early 80's when clients with histories of ritual abuse first began telling me their stories.

To that goal, I spent 12 years writing the novel, *Morning, Come Quickly*. Some of my colleagues criticized me for telling what I had learned through fiction but, to tell the truth (pun intended), there was no way I could attribute to specific clients, or friends, or family what I had learned about ritual abuse, mind control and similar forms of extreme abuse.

Today, I'll present selected findings from the Extreme Abuse Survey Series (the EAS) to validate that as extreme abuse survivors, or as their professional helpers or child caregivers . . .

You are NOT alone.

Webinar Outline

1. Give the rationale for development of the EAS Series.
2. Present survey findings related to survivor aftereffects and resiliency.
3. Tell how the researchers are giving voice to survivors.

In 2007, three surveys were conducted online in English and German by . . .

EAS Researchers

- **Carol Rutz:** Resilient survivor of clergy abuse, ritual abuse, and government-sponsored mind control from the United States. Author of *A Nation Betrayed* (2001).
- **Thorsten Becker:** German social worker and supervisor of professional helpers who work with survivors. Ritual abuse consultant for law enforcement in Europe and governmental agencies in Germany.
- **Bettina Overkamp, PhD:** German psychologist. Founding director of the European Society for Trauma and Dissociation (ESTD).
- **Wanda Karriker, PhD:** Retired psychologist from the United States. Author of *Morning, Come Quickly* (2003).

4

The surveys are the EAS for adult survivors, the P-EAS for professionals who work with survivors, and the C-EAS for caregivers of child victims of RA/MC. Combined, we received more than 2,000 survey submissions from at least 40 countries. Surveys and responses to each question are posted at our website (Google "Extreme Abuse Survey"). As of today, users have made almost 11,000 downloads of the pdf files from this site.

EAS Series

EAS: Extreme Abuse Survey for Adult Survivors

(An International Online Survey for Adult Survivors of Extreme Abuse)

January 1 – March 30, 2007

1471 Submissions

31 Named Countries

P-EAS: Professional – Extreme Abuse Survey

(An International Online Survey for Therapists, Counselors, Clergy, and Other Persons Who Have Worked Professionally with at Least One Adult Survivor of Extreme Abuse)

April 1 – June 30 2007

451 Submissions

20 Named Countries

C-EAS: Child – Extreme Abuse Survey

(An International Online Survey for Caregivers of Child Survivors of Ritual Abuse and Mind Control)

(July 8, 2007 – October 8, 2007)

264 Submissions

19 Named Countries

<http://extreme-abuse-survey.net>

5

There is no consensus in the literature and among survivors or professionals regarding the definitions of ritual abuse or mind control. For this reason, for the survivor and professional helper surveys, we asked respondents to define the terms within their own frames of reference. For the child caregiver survey, we used Becker's term and definition of "ideologically motivated crimes" to capture the essential elements of ritual abuse and mind control. (I'll describe IMC in a few minutes).

Terminology

- **EA** extreme abuse including, but not limited to, ritual abuse (RA) and mind control (MC)
- **RA** ritual abuse
 Satanic ritual abuse (**SRA**) is a subset of RA
- **MC** mind control
 Government-sponsored mind control (**GMC**) is a subset of MC
- **RA/MC** ritual abuse **and/or** mind control
- **IMC** ideologically motivated crimes

6

For those who don't know, I'll explain how the associations between RA and SRA and MC and GMC came to be known.

Anecdotal reports from RA survivors and from therapists who treat survivors suggest that GMC experimenters recruited their child subjects from parents active in satanic cults. Why would they do this? Supposedly because those children had already developed dissociative abilities in response to torture inherent in some ritualistic practices. This would have made the children highly receptive to mind control programming. For example Hammond (1992), in what has come to be called the Greenbaum speech, spoke about his and his colleagues' patients from across the United States and in other countries who appeared to have been exploited in both SRA and GMC experiments by Nazi doctors who were Satanists. He believes these scientists were brought to the United States after World War II to continue their mind control and medical experimentation in military institutions.

Associations between Different Forms of EA

- Not all victims of RA are victims of SRA.
- Not all victims of RA are victims of MC or GMC.
- Not all victims of torture-based mind control procedures are victims of RA or GMC.
- Ritually abusing cults, using trauma-related MC procedures, may deliberately create alter personalities in children and program them to perform specific functions for the cults.

7

So, why did we decide to conduct the surveys?

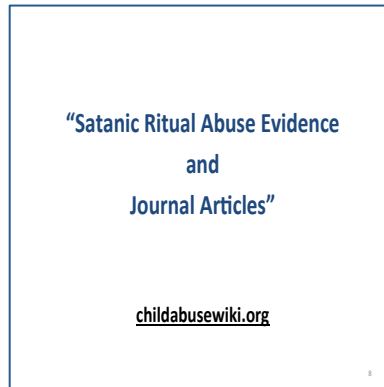
First, the short answer.

For three decades, the scientific community has failed to provide fundamental research investigating the phenomenon called ritual abuse. Ever since the early 1980's when stories about ritualistic abuse of children in daycare centers began to appear in the media, and therapists and law enforcement personnel began writing and speaking about their work with adults who remembered ritual abuse as children, skeptics have been calling for proof that it exists. They have repeatedly discounted existing empirical data, criminal convictions, and credible accounts by survivors confirming that RA/MC is a reality.

Why the controversy? Thorsten Becker, who uses the term "ideologically motivated crimes" (IMC) to describe RA/MC writes: "Torture, murder, and trauma-based mind control procedures are common practices in groups – large or small, international or local – who justify these horrific acts in allegiance to an ideology. Crimes committed in the name of some 'greater good or evil' or 'some greater god or devil' are a threat to the view of a safe world. Perhaps this is the primary reason that the reality of ritual abuse is a controversial topic in the mental health and law enforcement fields." (2008, p. 256)

However, despite what Wikipedia says calling reports about RA a "moral panic" -- there is ample evidence to prove that RA/MC exists.

An online bibliography at childabusewiki.org, offers extensive up-to-date documentation for the existence of SRA and other forms of RA/MC. It is called . . .



And of course there's *Survivorship's* website and Jeannie Riseman's, and Ellen Lacter's, and Neil Brick's websites with the wealth of information they contain, as well as other websites run by survivors and advocacy organizations.

Here are a couple things I consider to be irrefutable evidence for the existence of ritual abuse. First, are some photographs of ritual crime scenes in Perlmutter's book..

Investigating Religious Terrorism and Ritualistic Crimes
Dawn Perlmutter (2004)

Includes photographs of . . .

- altars and satanic graffiti
- animals that were tortured, mutilated and eviscerated
- a goat's head and other ritual items
- human bones and skulls
- sacrificial foods left in cemeteries, woods and along the beach
- satanic pentagrams cut into a victim's body
- pictures of the autopsy of a 10-month-old female infant who was ritually murdered in a satanic sacrifice

9

And second, the case of a young African boy, whom police named Adam, whose dismembered, decapitated ritually-abused body was recovered from the Thames River in London in 2001. I'll show the opening from a 2002 article in the UK *Guardian's* magazine about the police investigation of this case

Adam

[The Observer](#), Saturday 1 June 2002

Thames torso boy was sacrificed

Police suspect the victim was a West African child slave, after forensic evidence points to a ritual killing, report **Martin Bright** and **Paul Harris**.

A young boy whose mutilated torso was discovered floating in the River Thames last September was the victim of a gruesome West African 'religious' sacrifice intended to bring good luck, and was trafficked into the country expressly for the killing.

10

To my knowledge, Adam's murderers have never been found.

Yes, my friends out there in Webinar land, we have ample evidence that RA is a reality.

Government – Sponsored Mind Control

11

What about the evidence for GMC? Although it is well known and documented that the government experimented on adults during the Cold War, little evidence exists supporting that children were tortured in these horrendous crimes. Why not? Mainly because the records of most of these atrocities were destroyed in 1973.

Fortunately, Carol Rutz (2001), in her search of declassified government documents, found one showing that data used in one of the experiments (Subproject 136 of MKULTRA) were proposed to be obtained from “special groups such as psychotics, children, and mediums using drugs, electroshock, and psychological tricks,” and another describing experiments in which two “girls” were used as subjects. Using deep hypnosis, the experimenters attempted to train the girls to commit espionage, which involved carrying and activating bombs.

And there are lots of other resilient survivors who have spoken about and published credible stories about their experiences as human guinea pigs in the government-sponsored mind control labs. For example, Lynn Schirmer and Carol Rutz, who have never met each other in person, have published similar sketches depicting their memories of having been tortured in mind control experiments as children.

Lynn Schirmer's Drawing

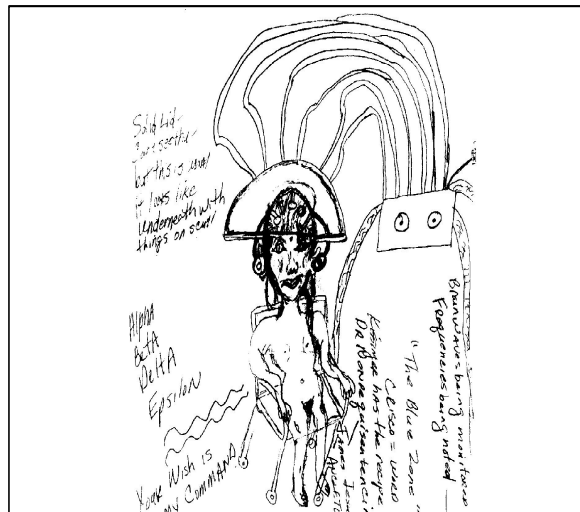
© L. Schirmer www.lynnsart.net



12

Carol Rutz' Drawing

© C. Rutz (2001) *A Nation Betrayed*, p. 51.



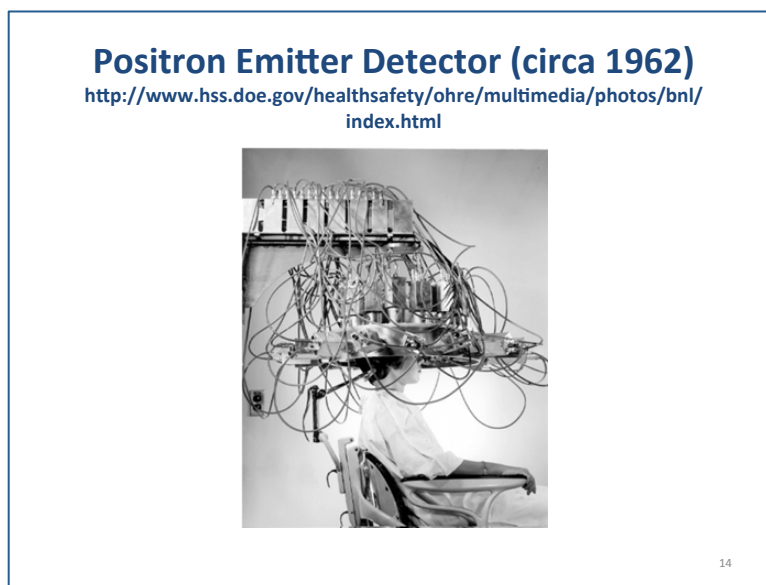
13

Lynn explains her sketch of a lab programming session on her website. She writes:

The intention is to associate the vortex image with the memory of a cult torture experience (the image in the cloud) to create a trigger effect. The trigger can then be used to limit the mobility of the alter, blocking access inside the system. It also can produce a general state of fear. In this scene are some standard fixtures for early training sessions: an electrified Skinner box to the left, portable E.C.T. machine for compliance, Positron Emitter Detector or later E.E.G. for monitoring brain activity (keeps track of which alter is being trained), intravenous for drugs, and a viewing window.

In her book, Carol shows this picture that she drew after remembering programming experiments performed on her by Ewen Cameron in Montreal (Rutz, 2001, p. 51). Like Lynn's sketch, it shows a Positron Emitter Detector. It shows how each alter was being programmed. Detectable energy flashes were being picked up and a recording was made assuring the doctors that they indeed were working with different parts of her personality, separate and apart from the one that they would eventually reawaken.

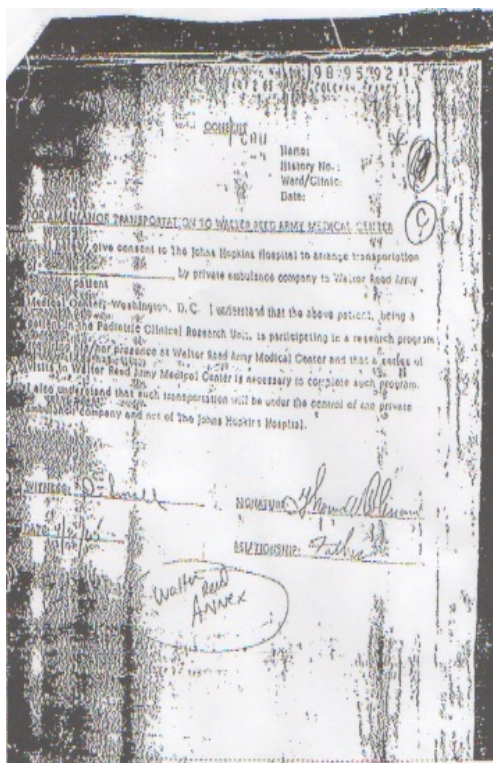
More than a year after Carol drew this picture, she found this photograph of a Positron Emitter Detector (circa 1962) at the Department of Energy's website.



Two adults who remember the Positron Emitter Detector being used in their torture-based programming as children. Is that evidence of GMC? You make the call.

Now for the "smoking gun."

Karen Coleman Wiltshire's Permission for Research at Johns Hopkins



15

Karen Coleman Wiltshire obtained medical files from Johns Hopkins Hospital proving that, as a child, she was used in research at Walter Reed Army Hospital. Carol writes in her book, *A Nation Betrayed*:

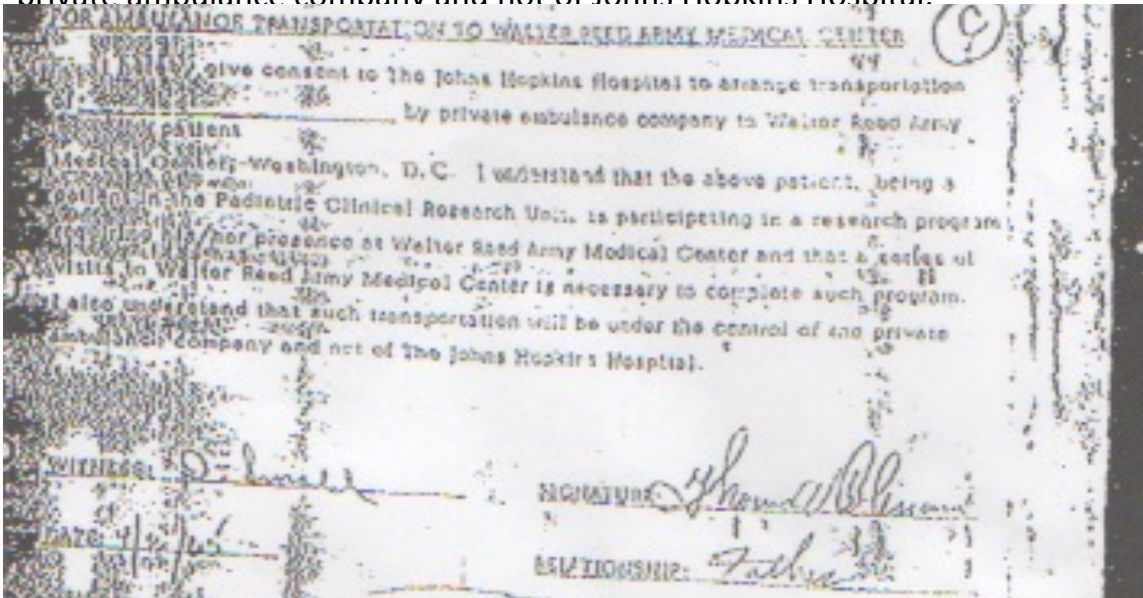
Karen's father worked for the Applied Physics Lab at Johns Hopkins. She obtained her files [including the medical document shown here] through sheer persistence, help from the almighty, and a mistake by a clerk who was not supposed to give out the information. Karen said they transported her to Washington, Maryland and Virginia, to military and government labs by private ambulances, military cars, and yellow school buses. She alleged her experiments took place from 1961 through 1970. Karen related to me that she was kept in the Harriet Lane Home for Invalid Children at Johns Hopkins where there were wards of children. Her parents had been told she was being treated for a heart defect. She said when they would come to visit, she would be put in a private room with her belongings in order for it to appear as though she had been there

all along. When her parents left, they returned her to the ward where she said they did LSD, ECT, and other strange experiments.

One of these, she explained, was to be trained to eliminate emotions and feelings by using assorted torture and other techniques. This sounds very much like the mind-control techniques used on me by the CIA and other branches of the government. Karen was responsible for spurring me on to obtain information through FOIA [Freedom of Information Act] requests that would help me validate my memories. She was always banging on doors, persistent to get the truth out, especially when she found out there were so many other kids who were used as human guinea pigs. The Department of Energy had told her she was the only one, but she said that Pentagon sources had personally told her they 'didn't want our stories out at any cost. The plan was to pay off a few token victims and blow the rest off.' Karen did not live to see any of us receive validation or vindication." (pp. 144-145)

Here's a close-up of the permission. It says:

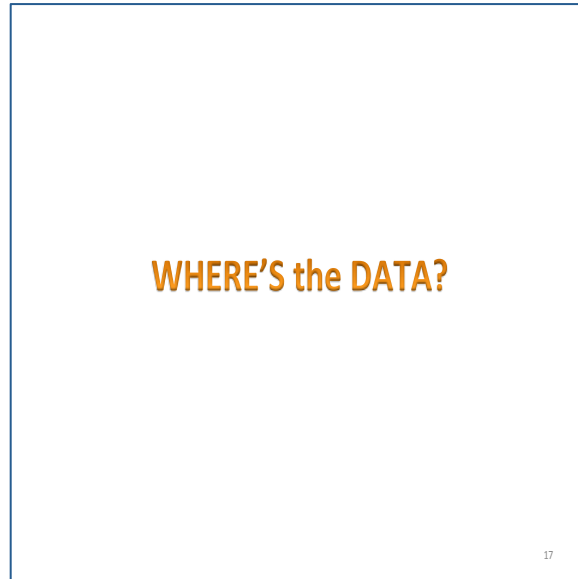
I understand that the above patient being a patient in the Pediatric Clinical Research Unit is participating in a research program requiring his/her presence at Walter Reed Army Medical Center and that a series of visits to Walter Reed Army Medical Center is necessary to complete such program. I also understand that such transportation will be under the control of the private ambulance company and not of Johns Hopkins Hospital.



Carol continues in her book: “The date is April 1965. There is a witness signature using her father's name, but Karen wrote at the bottom of the file that she believed the signature was forged.”

There it is folks – in black and white -- that’s the “smoking gun.”

But all the evidence out there (and all the evidence held within survivors’ minds) has not been enough to satisfy the skeptics who scream:



. . . when the topics of ritual abuse and mind control come up -- even in groups of professionals who work with persons with dissociative disorders.

Hence, the need for research.

Now for a longer, more personal answer as to why I felt a need to develop the surveys. In preparing this webinar, I relayed in mind how the seeds for a survey of survivors began to germinate.

“Where’s the data?” Every time I heard that question on an Internet group of professionals discussing dissociation, I got angry, and one morning I woke up thinking loud and clear: “I am data.”

And I posted that to the list!

And I realized . . . so are other victims from around the world who experienced RA/MC and similar forms of abuse. Some survived; some didn’t. We are **all** data.

In the spring of 2005, Carol Rutz and I (with the help of Lynn Schirmer) developed an Advocacy Packet titled, “Government-funded Mind Control/Medical Experimentation (Quotes to Ponder.)” We (and other advocates) sent it to about 60 United States Congresspersons along with copies of Carol’s book and letters calling for further declassification of all government files related to these torture-based experiments.

Most of the lawmakers didn’t even acknowledge they’d received our packet. Not one offered to hold hearings. (Yes, that’s the same Congress who recently held hearings on drug use by professional baseball players).

In 2005, Neil invited me to speak at his SMART conference, providing me my first opportunity to speak publically about my mission “to tell the world” about RA/MC. I closed the speech by saying,

“It’s a difficult task, isn’t it? Getting people to hear our stories about ritual abuse and mind control. Nevertheless, my friends, I stand in front of you today as a hopeless optimist [a term I learned from one of my clients, herself, a resilient survivor of RA/MC] sharing my hope that if not in mine, that in your lifetime the World Will Know!”

In May 2006, I had the opportunity to tell a couple million people about the existence of ritual abuse. To make the story short, I’ll read my letter to the editor that was published in the Toledo Blade on May 16, 2006.

Wanda’s Letter to Editor

(Toledo Blade, May 16, 2006)



18

(Well I guess I was a little too optimistic that time. As far as I know, that image did not shut up any of the naysayers.)

After my Court TV appearance, Carol and I discussed what else we could do to make the world more aware of RA/MC and its aftereffects. We talked about a brief semi-structured survey that we could conduct with survivors to obtain data that we could try to publish or present in an academic venue. I mentioned our proposal to Thorsten. He suggested we do an Internet survey.

We asked Bettina to join our effort. So four of us were on board. Our agenda was simple:

“To cast stones in the water and see what the ripples might be.”

Well, we got more than ripples; we got a tsunami: more than a half-million answers from survivors, helpers, and caregivers. We got words of appreciation from survivors for giving them voices and from helpers and caregivers for doing the surveys.

Along with that we were hit by a flood of criticism from skeptics in the dissociative disorders field.

I began to wonder . . . which is more controversial to these guys? the reality of RA/MC or the EAS itself? And why were we scorned for our efforts?

Without benefit of seeing the assumptions and limitations that we had acknowledged in our research plan, self-appointed critics on at least six professional lists accused us of being both unethical and unscientific. They judged our methodology as flawed, even before the majority of participants had entered their answers into our database. And they expressed concern that:

Critics' Concerns

- Survey would implant false memories into respondents minds.
- Exposure to the items might provoke intense anxiety in fragile, unhealed clients and cause them to decompensate.
- Persons who were not therapists who forwarded the survey could not discern which survivors could tolerate the survey.

19

Sounds a little like that “me doctor; you poor patient mentality,” doesn’t it?

Hey people. All you survivors out there. You’re resilient, right? Otherwise you wouldn’t be taking part in this webinar.

Anyway, recent studies had shown that trauma victims recognize the importance of research about trauma and that avoidance of trauma assessment and research furthers the belief that a trauma is something that should be stigmatized and silenced.

Kathy Downing, a therapist from California, responded to these criticisms. She said that because she had been cautioned by her colleagues that the questions were horrendous and that survivors might destabilize if they read the questions, she had tried to dissuade a client from taking the survey. When she told her client that other therapists were afraid to tell their clients about the survey, the client shouted: “A survey? They’re worried about a friggin’ survey? After what we’ve been through?”

But it was the appreciation from many survivors that made us know that conducting the surveys was worth the time and effort and money it took. For example two survivors wrote:

Appreciation from Survivors

- I had to have help from my counselor to answer some of these questions, but I wanted a voice in this. It is good to know that . . .

you are not alone.

- “The truth must be told, documented, and published for the world to see. We continue to suffer. . .

the world needs to know.

20

(Just kidding about the money . . . we figure we got three surveys that would have costs hundreds of thousands of dollars if we would have had to pay for all the time and expertise we received from our survey consultants, and Thorsten’s techie teams from Germany who took over tasks of programming the questionnaires and collecting the data, and hosting the website, and his friends who donated software licenses, and my dear son-in-law (an electrical engineer) who spent hundreds of hours sorting the data for analyses.

How much **did** it cost, you might wonder? Answer: Approximately 120 Euros to buy three used computers on eBay. Not one single person received any money for helping to give survivors voice through the EAS project.

On March 1, 2007, a month before the first survey was taken down, at the invitation of Dr. Dana Raphael, I had the opportunity to present some early results of the EAS at her panel for the United Nations' 51st Session of the Committee on the Status of Women. I told the audience: "As of February 7, with seven weeks left in the survey period, approximately 900 survivors from 24 countries had punched their stories onto the World Wide Web. We have received responses from 6 continents. All but Antarctica. Apparently penguins aren't into ritual abuse. Or as my husband said, "Maybe they don't have email."

Before I present some findings related to possible aftereffects of extreme abuse and resiliency, I want to show you how survivors categorized their experiences.

EAS respondents were asked to choose which category best described their experiences as a survivor.

Categories of Abuse (EAS)

Of 987 respondents who chose the category that best describes their experience as a survivor . . .

RA:	19%
MC:	07%
RA and MC:	52%
Other EA:	22%

Comparison of EAS results with Riseman's 2003 survey

In 2003, 25 members of *Survivorship* responded to a survey for ritual abuse survivors (Riseman, 2003). Twenty respondents (80%) were female; 5 (20%) were male.

To compare with gender choices of 1440 respondents on the EAS, 18% were male, 81% female, and 1% transgendered.

On the *Survivorship* survey, eating disorders were endorsed by 68% of the survivors. On the EAS, 68% of EAS respondents from the U.S. reported an eating disorder.

Now for the possible aftereffects of EA (I use the adjective "possible" because in most instances there's no way to prove that EA caused a specific aftereffect). On all three surveys we assessed possible aftereffects with a list of conditions that we have heard survivors report. We used the same 34 aftereffects on both the survivor and helper surveys (and a very similar list on the child survey).

The next three slides show the list of aftereffects for the EAS and P-EAS. The percentages are in descending order of frequencies as reported by survivors on the EAS.

EAS Possible Aftereffects
(in decreasing order of frequency)

- 90% Sleep problems**
- 89% PTSD**
- 87% Painful body memories**
- 85% Unusual fears**
- 77% Beliefs indoctrinated by perpetrators**
- 76% Other**
- 73% Survivor guilt**
- 71% Suicidal thoughts around special holidays**
- 70% Dealing with installed programs**
- 70% Eating disorder**

22

(con't) EAS Possible Aftereffects

- 68% Suicidal thoughts immediately before trauma memories surface**
- 68% Dissociative flashbacks with satanic themes**
- 65% Sexual urges triggered by feelings of threat, fear, shame, guilt, etc.**
- 65% Self-mutilating behaviors**
- 62% Migraine headaches**
- 60% Mysterious ailments for which a diagnosis cannot be made**
- 59% Unexplained bruises and wounds**
- 54% Hospitalization in a psychiatric unit**
- 52% Art productions with abuse/torture themes**

23

(con't) EAS Possible Aftereffects

48%	Infliction of sexual pain on self
48%	Substance abuse
45%	Unexplained external scarring
42%	Auto-immune disorder
37%	Soft, brittle teeth
33%	Unexplained internal scarring
30%	Thyroid problems
28%	Foreign objects in body
27%	Fibromyalgia
25%	Seizures with no organic basis
21%	Sexually transmitted diseases
19%	Infliction of sexual pain on others
16%	Infertility
08%	Cancer
02%	Multiple sclerosis

24

Do any of you notice a prominent aftereffect of extreme abuse that is not listed here?

Eh? (holding my hand to my ear). Do I hear the answer "DID" coming across cyberspace? We didn't list it in the aftereffects section – I wish we had – but the item addressing this is in the personal experiences section, I'll talk about in a few minutes.

But first I want to share what I think is one of the most important findings regarding possible aftereffects.

On 27 out of 34 items, the group of survivors who classified themselves as RA and MC showed significant differences in frequencies of responses with the group who classified themselves as EA. There were no significant differences on the following 7 items:

No Significant Differences between RA and MC Group and EA Group

- Cancer
- Infertility
- Migraine headaches
- Seizures with no organic basis
- Self-mutilating behaviors
- Thyroid problems
- Multiple sclerosis

25

Here are some statistics on the 5 most frequently reported aftereffects reported on all surveys.

5 Most Frequently Reported Possible Aftereffects for Each Survey

Item	EAS Rank	P-EAS Rank	C-EAS Rank
Sleep problems	1	2	1
PTSD	2	1	2
Painful body memories	3	3	
Unusual fears	4	4	3
Beliefs indoctrinated by perpetrators	5		4
Self-mutilating behaviors		5	
Eating disorder			5

26

The first four are the same on both the EAS and P-EAS. (Thorsten’s viewpoint about ideologically motivated crimes is supported by EAS data showing that “beliefs indoctrinated by perpetrator(s)” is one of the top ranked aftereffects reported by survivors.)

The “painful body memories” question was not on the C-EAS.

Amazing how consistent those top 5 rankings across surveys are, isn’t it? Means therapists and caregivers are observing the same rankings of aftereffects that survivors are experiencing.

And even more amazing are the data on the next 10 slides. I will briefly display the 5 top-ranked aftereffects reported by the total sample of survivors and show how they compare across countries and genders.

To compare differences in proportions of responses across countries, we created 8 country groups: US, Germany, UK, Canada, Australia/New Zealand, Other European, countries in Asia, Africa, S. America along with Mexico, and Unknown countries (where respondents did not name a country).

Notice all groups who answered “yes” to sleep problems being a possible aftereffect are above 83% with the highest in the UK at 99%.

Sleep Problems -- Countries		
Country/country group	Number who answered	% who answered “yes”
United States	639	91%
Germany	171	84%
United Kingdom	70	99%
Canada	62	92%
Australia/New Zealand	40	90%
Other European	44	89%
Asia/Africa/S. America, Mexico	18	89%
Unknown	74	84%
All	1118	90%

There does not appear to be much difference among gender groups regarding sleep problems.

Sleep Problems – Genders

Gender	Number who answered	% who answered “yes”
Female	933	91%
Male	155	84%
Transgendered	13	92%

28

PTSD is common among all country groups.

PTSD – Countries

Country/country group	Number who answered	% who answered “yes”
US	632	91%
Germany	174	81%
UK	69	93%
Canada	65	94%
Australia/N. Zealand	41	83%
Other European	43	79%
Asia/Africa/S. America, Mexico	17	88%
Unknown	73	85%
All	1114	89%

29

Compare this 89% prevalence of PTSD in the EAS group to a recent study by the National Institute of Mental Health showing that 30% of men and women who have spent time in war zones experience PTSD. And the lifetime prevalence in the US general population at approximately 8 to 10%.

The male group reports less frequency of PTSD than females and transgendered groups.

PTSD – Genders

Gender	Number who answered	% who answered “yes”
Female	933	91%
Male	152	75%
Transgendered	13	85%

30

The German group was lowest on proportions of painful body memories reported.

Painful Body Memories – Countries

Country/country group	Number who answered	% who answered “yes”
United States	632	88%
Germany	168	79%
United Kingdom	68	93%
Canada	63	92%
Australia/N. Zealand	39	87%
Other European	43	88%
Asia/Africa/S. America, Mexico	17	94%
Unknown	71	85%
All	1101	87%

31

As a group, males report less frequent painful body memories than females or transgendered.

Painful Body Memories -- Genders

Gender	Number who answered	% who answered "yes"
Female	925	90%
Male	148	70%
Transgendered	13	92%

32

Frequencies of unusual fears among country groups are similar.

Unusual Fears – Countries

Country/country group	Number who answered	% who answered "yes"
US	632	85%
Germany	173	84%
United Kingdom	69	91%
Canada	62	87%
Australia/New Zealand	41	90%
Other European	43	77%
Asia/Africa/S. America, Mexico	17	88%
Unknown	73	88%
All	1110	85%

33

As with country groups, frequencies of unusual fears are similar among gender groups.

Unusual Fears – Genders

Gender	Number who answered	% who answered “yes”
Female	928	87%
Male	153	83%
Transgendered	13	92%

34

There were fewer reports of indoctrinated beliefs by the German and other European groups than by other country groups.

Beliefs Indoctrinated by Perpetrator(s) -- Countries

Country/country group	Number who answered	% who answered “yes”
United States	627	80%
Germany	174	66%
United Kingdom	67	84%
Canada	62	79%
Australia/New Zealand	38	84%
Other European	42	67%
Asia/Africa/S. America, Mexico	17	82%
Unknown	72	75%
All	1099	77%

35

The male group reported a lower proportion of indoctrinated beliefs than the female and transgendered groups.

Beliefs Indoctrinated by Perpetrator(s) – Genders

Gender	Number who answered	% who answered “yes”
Female	918	80%
Male	152	60%
Transgendered	13	85%

36

Notice how consistently different country groups rank the top five aftereffects.

Rank Order of Possible Aftereffects -- Countries

	US	Ger	UK	CA	Au/NZ	Other Eur.
Sleep problems	1,2	1,2	1	2,3	1,2	1
PTSD	1,2	3	2,3	1	5	3
Painful body memories	3	4	2,3	2,3	3	2
Unusual fears	4	1,2	4	4	1,2	
Indoctrinated Beliefs	5			5	4	4
Eating disorder		5				
Suicidal thoughts before memories surface			5			5

37

For gender groups in this table, I'm using only female and male. Because of the small number of transgendered persons who answered the aftereffects items, ranking their frequencies of responses might not be representative of the general transgendered population. Note: this shows total agreement among males and females for the top ranked aftereffects.

Rank Order for Possible Aftereffects -- Genders

	Female	Male
Sleep problems	1,2	1
PTSD	1,2	2
Painful body memories	3	4
Unusual fears	4	3
Indoctrinated beliefs	5	5

38

Here are some of our findings about dissociative identity disorder across surveys.

DID on All Surveys

EAS:

84% of survivors who have ever been diagnosed with DID chose RA and MC as their primary category of abuse.

P-EAS:

85% of helpers said that the majority of adult RA/MC survivors with whom they have worked have been diagnosed with DID.

C-EAS:

84% of caregivers have taken care of a child who dissociates when talking or questioned about RA/MC.

39

Germany and other European countries have fewer DID reporters than the other country groups.

Dissociative Identity Disorder (DID) – Countries

Country/country group	Number who answered	% who answered “yes”
United States	596	68%
Germany	142	55%
United Kingdom	66	74%
Canada	59	71%
Australia/New Zealand	35	60%
Other European	32	47%
Asia/Africa/S. America, Mexico	16	75%
Unknown	61	51%
All	1007	65%

40

Males have fewer DID reporters than females. 91% of the small sample of transgendered responders reported a diagnosis of DID.

Dissociative Identity Disorder (DID) – Genders

Gender	Number who answered	% who answered “yes”
Female	846	69%
Male	135	39%
Transgendered	11	91%

41

In the EAS survey we didn't ask direct questions about how resilient survivors are. But the data from the demographics section show that . . .

Resiliency (EAS)

Education

56% of 1446 survivors who answered the question have a college education.
27% of those have a graduate degree.

Compare with general population:

28% have a college education.
10% of those have a graduate degree.

Survivor/Therapists

10% of 964 (95) survivors who answered "I am a therapist/counselor/clergy for RA/MC survivors," answered "yes."

Disability from Employment

29% of 755 US survivors reported that they are disabled from employment.

Compare with report from 2000 US census:

11% reported that they are disabled from employment.

42

SHARING THE DATA

43

In announcing the EAS, Carol promised that, “The results of the survey will be widely disseminated.”

She wrote, “We can show a skeptical public that our numbers are beyond their wildest imaginations and that regardless of their belief or non-belief we need recognition and respect for having survived the most atrocious events known to humankind, hidden behind a mask of secrecy and disbelief. Numbers do count. Your voice does count and can make a difference.”

Yes, we promised to share the data with the world.

I naively thought those in the dissociative disorders field who had been calling for data about RA/MC would be delighted to learn of the success of the surveys. For heaven’s sake, we got more than 2,000 surveys submitted from at least 40 countries.

WRONG!

When we started talking about results of all three surveys, we went through a more devastating flood of criticism than happened when we announced the early results. (I’ll talk more about that later when I tell you about our submission of an article to the Journal of Trauma and Dissociation.)

But first I’ll show you some places where survivors’ voices have been heard in the last five years through presentations and publications by the researchers and in citations by other writers.

Publications

- Becker, T. (2008). Re-searching for new perspectives: Ritual abuse/ritual violence as ideologically motivated crime. In R. Noblitt & P. Noblitt.(Eds.), *Ritual abuse in the twenty-first century*. (pp. 237-260). Bandon, OR: Robert D. Reed.
- Becker, Th. (2009). Ritual violence and gender specific issues. In T. Rode & Wildwasser Marburg (Eds.) *Dissociation as surviving strategy in the context of gender*. Cologne: DonnaVita/Mebes & Noack.
- Becker, T., Karriker, W., Overkamp, B., & Rutz, C. (2008). The Extreme Abuse Survey: Preliminary findings regarding dissociative identity disorder. In A. Sachs & G. Galton (Eds.), *Forensic aspects of dissociative identity disorder*. London: Karnac.
- Becker, T., Karriker, W., Overkamp, B., & Rutz, C. (2008). *Media packet: Torture-based, government-sponsored mind control experimentation on children*. Online at <http://extreme-abuse-survey.net>.
- Karriker, W. (2010). Understanding ritual trauma. *Survivorship*, 16 (1), 21-23.
- Karriker, W. (2011). The ritual abuse controversy. *Interact*, 11 (1) , 28-32.
- Rutz, C., Becker, T., Overkamp, B., & Karriker, W. (2008). Exploring commonalities reported by adult survivors of extreme abuse: Preliminary empirical findings. (pp. 31-84). In R. Noblitt & P. Noblitt. (Eds.), *Ritual abuse in the twenty-first century*. Bandon, OR: Robert D. Reed.

This lists 4 academic books where we've written invited chapters. Published in three countries: US, Germany, and England. I published my 2008 ISSTD presentation in *Survivorship* and wrote an invited article for *Interact*, the journal of the British Trauma and Abuse Group (TAG).

When searching the term "Extreme Abuse Survey" in Psychinfo, the Karnac chapter came up. So the EAS information has even made its way into this prestigious database holding about 3 million references in the mental health field. Quoting from the abstract:

"All of our respondents – adult survivors, their helpers/healers who hold their pain, the child caregivers – have been touched, tormented, and terrorized by crimes so unimaginable that professionals cannot even agree on a name for them."

Presentations

- Becker (2007) Conference speaker in Witten/Ruhr, Germany
- (2008) Conference speaker in Marburg an der Lahn, Germany
- (2008) SMART, Windsor Locks, CT.
- Karriker (2007) Panel at UN Women's Conference, NY.
- Paper at ISSTD, Philadelphia.
- Karriker (2008) Paper at CSA Awareness Conference, Sacramento, CA
- Paper at CSA Awareness Conference, Davis, CA
- SMART
- Panel at Conf. on Violence, Abuse, Trauma, San Diego CA
- Paper at ISSTD, Chicago, Ill.
- Poster at ISSTD, Chicago, Ill.
- Graduate Seminar at U. of Michigan. School of Social Work.
- Karriker (2010) SMART
- Rutz (2007) SMART
- Rutz & Karriker (2008) Panelists at U. of Michigan School of Social Work.

We've made at least 15 presentations about the EAS at various venues. 2 in Germany; 4 at SMART conferences, 3 at ISSTD conferences, 2 at the University of Michigan School of Social Work, 3 at conferences in California, and mine at the United Nations' Women's Conference.

And EAS results have been cited by other writers in their works.

The German study is a 300 page government document on child abuse where the EAS was cited several times.

The Rhoades article shows survivors they have a voice, even in an encyclopedia. Citing from the chapter by the EAS team in *Ritual Abuse in the 21st Century*, he mentioned the EAS three times.

Citations

Abschlussbericht der Unabhängigen Beauftragten, 24.05.2011 (Gov't document on child abuse in Germany) <http://beauftragter-missbrauch.de/mod/resource/view.php?id=301>

Bryant, N. (2009). *The Franklin scandal. A story of powerbrokers, child abuse and betrayal*. Waterville, OR: Trine Day.

Currim, S. (2011). Ritual abuse and mind control: A transpersonal perspective. In Broadus, J. & G. Stewart (Eds.), *Conversations in psychosynthesis* (pp. 25-37). Bethany, OK: Cowan Printing Co.

Lacter, E. (2011). Torture-based mind control: Psychological mechanisms and psychotherapeutic approaches to overcoming mind control. In J. Schwartz (Ed.), *Ritual abuse and mind control: The manipulation of attachment needs* (pp. 57-141). London: Karnac.

Miller, A. (2011). *Healing the unimaginable. Treating ritual abuse and mind control*. London: Karnac.

Rhoades, G. F. (2010). Satanic ritual abuse. In I. G. Weiner & W.E. Craighead (Eds.), *The Corsini encyclopedia of psychology* (Vol. 4, pp. 1494-1497). Hoboken, NJ: Wiley.

Even with research findings and other evidence to the contrary and with eyewitness testimonies by survivors, there are still forces who seek to negate the reality of RA/MC. For example, the self-appointed editors of Wikipedia's SRA article do not allow a balanced view of the phenomenon. On October 14, 2008, one of the editors wrote on the discussion page, "Just because everybody can edit Wikipedia doesn't mean every single position is treated sympathetically. SRA is not, because it's considered a bullshit moral panic."

Further demonstrating that they don't want the existence of ritual abuse to be accepted as truth, in July 2009, the editors of Wikipedia's SRA article saw to it that four websites were blacklisted, meaning that no one can cite them as sources in any Wikipedia article. They are:

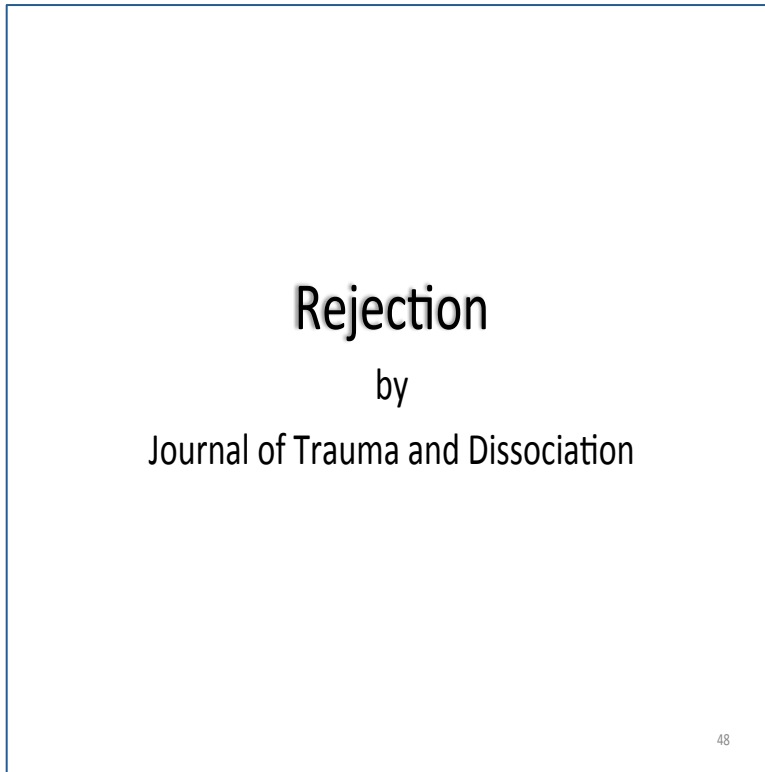
Black-listed Websites on Wikipedia

- abusearticles.wordpress.com
- ritualabuse.us (Neil's website)
- endritualabuse.org (Ellen Lacter's website)
- <http://extreme-abuse-survey.net>

47

What is it those guys don't want the world to know?

In 2009, colleagues in the dissociative disorders field who specialize in working with RA/MC survivors encouraged us to submit an article describing our study to a peer-reviewed journal. Given that we had found only one study in which researchers directly interviewed a group of ritually abused adults (19 women and one man from the southern California area) about the nature of their abuse (Shaffer & Cozolino, 1992, p. 188); and given that a majority of our respondents who reported RA/MC also reported that they had been diagnosed with dissociative identity disorder; and given that we thought that members of The International Society for the Study of Trauma and Dissociation (ISSTD) would likely be interested in the results of the EAS Series, we submitted an overview of the EAS project to their official journal, *The Journal of Trauma and Dissociation*.



This first article was rejected with the most serious concern being that the paper was not an empirical report. The editor invited us to consider submitting an empirical report on the study. This we did. Unfortunately this paper was also rejected for publication primarily because, as we were told, we couldn't be sure who our respondents were (hey, it was an anonymous survey).

Incidentally, the rejection of our submissions generated a heated discussion among our colleagues. Many praised our preliminary efforts and called for further research using our study as a pilot project; some harshly criticized our efforts and called the study fatally flawed.

To that, Dr. Tom Ball, a professor of survey research and a pastoral counselor who works with RA/MC survivors, came to our defense. With his permission I am sharing some of what he said on the list.

The first EAS study is not flawed. It does what it was intended to do. It is only seen as flawed if people attempt to ask the EAS study to do something it was not designed to do. That's a misunderstanding of the purpose and design of this kind of initial, exploratory, snowball sampling, survey research to discover if a here-to-fore unidentified population even exists.

Perhaps it is the unsupported criticism that is "fatally flawed."

Ironically, we consider it fortunate that our submission was rejected; otherwise, we would have not made the effort to produce a book full of our findings.

To assure that the EAS data is preserved in perpetuity, we decided to publish our results in book form in both English and German and place the books in the United States Library of Congress and its German equivalent, the *Deutsche Zentralbibliothek*.

In closing, sometimes I wonder what would happen if I could turn back my life to the time before I knew of the existence of evil glorified in Satanism and other forms of deviant religions; before clients came to me who not only had ritual abuse memories, but also remembered having been victims of trauma-based programming deliberately designed to create multiple personalities in children; before I learned about MKULTRA and other tax-funded torture of children in behavioral and medical experimentation programs.

But then I would never have had the privilege to serve as a guide on their healing journeys or as an advocate for some of the most resilient, remarkable persons who have ever lived. I am grateful to survivors from six continents who trusted us enough to speak the unspeakable. Because of your courage –

The World Will Know

49

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50