sexual events, and selective self-reporting of one’s sexual history may be used to maintain a certain social image. This tendency toward sexual dishonesty not only poses certain public health threats, but it also creates a number of challenges for scientists who study sexual relationships.

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See Also: Bragging and Grandiosity; Clinton, Bill; Courtship, Deception in; Deception Detection Accuracy; Discovered Deception, Reactions to; Edwards, John; Infidelity; Internet: Online Dating; Men; Relationships: Romantic; Women.

Further Readings

Repressed Memories

Among the most interesting ways individuals can deceive themselves is through memory. Though there are countless undisputed ways in which memory fails or becomes distorted, the concept of “repression” has been among the most controversial in modern psychology. On one hand, proponents believe that repression is a mental mechanism that helps individuals deny the reality of true traumatic experiences. On the other hand, critics of the concept of repression argue that efforts to “recover” repressed memories can lead to very rich, seemingly real, false memories for events that never happened. What these opposing views have in common is that both implicate repression in the self-deceptive functions of memory.

The concept of repression gained widespread attention from the writings of Sigmund Freud at the end of the 19th century. Freud argued that memories of traumatic, threatening, or otherwise unacceptable experiences can be repressed into the unconscious, where they are effectively walled off and inaccessible to the conscious mind, in effect, deceiving the repressor to falsely assume that things that did happen actually did not. Nevertheless, Freud argued, the repressed content remains accurately represented in the unconscious mind, and may leak from the unconscious into dreams and into waking life in the form of problematic clinical symptoms. Among the goals of therapy, as envisioned by Freud, was the reintroduction of the repressed content into conscious awareness, where it could be addressed and facilitate improvement of the symptoms.

Freud’s theories have been highly influential in the therapeutic community, in which they formed the basis of three widespread assumptions: (1) that memories of traumatic experiences are particularly likely to be repressed; (2) that, while repressed, the memories do not fade but remain unchanged and undistorted for as long as decades; and (3) that they may be recovered unchanged through a variety of common therapeutic techniques. Each of these assumptions has been vigorously contested in a controversy that has come to be known among psychologists as the “memory wars.”

Repressed Memories of Sexual Abuse

This sharp division, largely between practicing therapists versus memory and clinical scientists, emerged in earnest in the late 1980s and early 1990s in response to increasingly frequent reports of memories of sexual abuse that had allegedly been repressed, sometimes for as long as decades, and later recovered by patients in therapy. In part,
these reports were fueled by the publication of several popular books arguing for the widespread prevalence of sexual abuse and of repression of memories of abuse, such as The Courage to Heal: A Guide for Women Survivors of Child Sexual Abuse (1988) and Secret Survivors: Uncovering Incest and Its Aftereffects in Women (1990). These and similar books listed a large number of clinical symptoms alleged to reflect buried memories of sexual abuse and recommended various personal procedures to "recover" these memories and begin to heal the trauma of the abuse.

Along with increasing cultural awareness of the real prevalence of child sexual abuse, these publications encouraged many distressed people to attribute their symptoms to sexual abuse they couldn't remember and to take action to recover their repressed memories of the abuse they assumed must have occurred. Similarly, many therapists were encouraged to attribute their patients' symptoms to unremembered abuse and, as a result, actively encouraged their patients to believe they had been abused and to undergo a number of therapeutic procedures with the goal of recovering the (presumed) repressed memories.

Concurrently, during the late 1980s and early 1990s some states relaxed their statutes of limitation, allowing criminal or civil actions to be filed based on testimony of those who claimed they had only recently recovered their memories of abuse or other crimes, sometimes many decades after the crime had allegedly occurred. The amended statutes began at the time the memories were allegedly recovered, rather than at the time of the alleged original events. This allowed alleged victims to file legal actions against parents, neighbors, priests, and others for abuse or other crimes based on alleged actions decades in the past, memories for which had been recovered in therapy.

In response to these events and to pleas for help from those claiming to have been falsely accused, some clinical and memory scientists began to contest such claims in earnest and to investigate the potential for many therapeutic techniques to plant false memories in those who undergo them. During the memory wars that followed, each side offered evidence favoring their positions that was largely discounted by the other.

The Memory Wars

Proponents of repression have primarily focused on attempts to document real-life instances of repression of traumatic memories that were later recovered either spontaneously or during therapy or other memory recovery procedures. Two types of such studies have been reported. Retrospective memory studies have asked adults who report that they had been abused whether there had ever been a time when they forgot their abuse (referred to as the "do you remember whether you ever forgot" method). If they do report times when they did not or could not remember, their forgetting is considered to reflect repression.

Prospective memory studies identify apparently verified victims of abuse and follow up with them...
later, inquiring about whether they had ever been abused. Those who do not report a memory of being abused are considered to have repressed the abuse. Though such studies purport to provide evidence of repression, they have been widely criticized for failing to establish one of the following necessary elements to establish repression and memory recovery: (1) that the original event did occur, (2) that the event was traumatic (otherwise repression should not occur), (3) that the person was unable to remember the event for a period of time, (4) that the person actually did not remember the abuse during the alleged interval of repression, (5) that the cause of the failure to remember was repression rather than normal failures of memory, and (6) that the "recovered" memories correspond to the verified instance(s) of abuse.

In contrast to the proponents of repression, memory and clinical scientists have widely argued that traumatic experiences are actually more likely to be remembered, that there is virtually no credible scientific support for the concept of repression, and that many suggestive influences within and outside therapy can cause the development of rich, false memories of events that never happened. Moreover, they have pointed out that highly implausible memories have been recovered in some therapies, memories such as past lives, in utero experiences, birth, memories before the age of 2, alien abduction, and satanic ritualistic abuse. Though many patients believe their memories are real and experience them as highly vivid and emotional, as is true for real traumatic memories, even such false memories as these can be generated through suggestive procedures.

Many laboratory studies have demonstrated that false autobiographical memories can indeed be created by common suggestive and therapeutic procedures, including suggestive questioning, hypnosis, guided imagery, dream interpretation, and others. Proponents of repression, on the other hand, have criticized such studies, suggesting while these influences may lead to false memories of relatively unimportant events, they are unlikely to do so for events as serious as sexual abuse and other traumatic events.

Repression and Deception

Though the controversy over the reality of repression is unlikely to be fully resolved in the near future, it is clear that there are many levels at which repression is implicated in deception of oneself and of others. Repression itself, if real, is a form of self-deception facilitating the denial of real, but unacceptable, experiences. Even if repression were to exist, efforts to recover the purported repressed memories can at least distort memories of real events, or worse, create rich, false memories for events that never happened. Either, in effect, can make the person an "honest liar" who believes in the reality of the memories, yet who is deceiving both him or herself and those who are told about the memories, with potentially devastating consequences for those implicated in criminal activities and for the families, relationships, careers, and lives destroyed by the allegations based on the memories.

Moreover, claims for the reality of repression and recovery of memories for crimes such as sexual abuse present opportunities for those who would deliberately deceive. Where there is potential for lucrative monetary awards, for revenge or punishment of a disliked foe, or for other practical gains, there can be temptation for accusers to knowingly lie, citing repression as a mechanism to explain why they had not previously reported the events in question. Some have argued that false claims of repression have been deliberately brought forth to help accusers negate the effects of a statute of limitations that would otherwise prevent a criminal or civil action after a specific period of time has passed.

Moreover, the self-deception and self-justification processes can affect the memories of those who begin with a knowing lie regarding repression. The knowing perpetration of a lie with devastating impact for the target can pose a significant threat to self-esteem. This can be averted if the person comes to believe the lie is actually the truth. Moreover, if the person needs to give the appearance of truth by entering therapy and otherwise behaving as if trying to recover a real memory, such activities can themselves create a false memory that seems real to the accuser. Thus, the liar might come to sincerely believe he or she was telling the truth all along.

Even the position one takes with respect to the reality of repression and recovery of traumatic memories is subject to processes of self-deception and self-justification. The monetary interests of
“recovered memory therapists,” for example, could motivate belief in the concept of repression and motivate denial that they could be promoting a false concept to distressed clients.

Altogether, given the entanglement of the issue of repression with the legal system, claims of repression have offered a fertile field for deception, whether deliberate deception for gain, or unintended self-deception and “honest lying.”

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See Also: Denial; False Confession; False Memories; Memory; Reality Monitoring; Self-Deception; Self-Justification.

Further Readings


Reputation

A person’s reputation—that is, the kind of person he or she is reputed to be—has been used through the centuries as a mechanism integrating individuals into larger social units, serving as a tool to punish those who do not adhere to a particular group’s social norms and values, and even uniting or dividing societies. Because of the importance of reputation in starting or continuing a personal relationship or business deal, or in gaining employment, individuals and groups engage in various efforts to control, shape, and protect their reputations. These efforts might include lying and deception or resorting to violence as means to protect or promote a reputation.

Psychologists such as Sigmund Freud, Carl Rogers, and Alfred Adler discussed various forms of lying and deception as psychological defense mechanisms that individuals might utilize in order to manufacture and protect their image in front of themselves and others. Such defense mechanisms, if overutilized, can contribute to various psychological symptoms. Some psychologists argue that keeping and creating one’s reputation in the form of a life narrative is a major human motive. Research on reputation has focused on the biological and evolutionary bases of reputation, types of reputation, the role of reputation in personal relationships and friendships, and the role of reputation in business. Recently, research has considered the consequences of the new Internet, technological, and communication advancements on reputation, especially among youth, and the mental and physical health consequences of reputation construction or damage.

Deception can be seen as part of nature. Camouflaging is a known natural mechanism in which an animal evolves to have physical characteristics that make it not salient in its background. In addition, some animals engage in deception in order to survive or project strength. For example, a tiger might hide before it jumps on its prey. Studies of both vertebrates and invertebrates have shown that social animals use reputation as a source of information about members of the group and their fighting abilities. Reputations can form by direct encounters or witnessing encounters with others. Once formed, a reputation can serve in survival and determine social hierarchy and strategies utilized in future conflicts. Moreover, the formation of a particular reputation can contribute to social order and a reduction in the frequency of conflicts. Misperceiving the abilities of another animal can result in dangerous consequences. From an evolutionary point of view, lying and deception in regard to reputation are not favored, because they interfere with the process of natural selection.