

EDITORIAL:

TWO JOBS WELL DONE

Richard P. Kluft, M.D.

All too often in recent years I have thought it necessary to use the editorial page of *DISSOCIATION* to point out difficulties, underline problems, and protest developments of less than a positive nature. The often rancorous debates that surround many controversial issues of concern to the study of dissociation and the dissociative disorders are probably the inevitable concomitant of mankind's frequently spastic and lurching attempts to advance knowledge and understanding. We can learn from thoughtful students of the nature of scientific process (e.g., Boring, 1963; Kuhn, 1970) that our wishes to see the pursuit of scientific understanding as rational, even-handed, disinterested, and idealistic are unrealistic. Instead, paradigms, pundits, and professors fight it out, often under rules of engagement that would scandalize the Marquis of Queensbury and outrage the framers of the Geneva Conventions. Elsewhere I have offered a dour observation:

It is unlikely that any arguments, however potent, will resolve the polarized debates and frequently impassioned controversies that continue to swirl about Dissociative Identity Disorder (Multiple Personality Disorder). Those currently writing on both sides of these disputes often appear too caught up in the fervor of the situation to achieve dispassion and objectivity.

To draw a Biblical analogy, perhaps the current major contributors to the field and their critics can be understood as a generation that, like Moses, has matured under the oppression of circumstances and events that preclude their ever reaching the promised land of clearer understanding, and that it will require the rising of a new generation untainted by those circumstances and the controversies that arose from them to allow the completion of this journey.

(Kluft, in press)

I see no reason to revise or apologize for this formulation. However, I take profound pleasure whenever I am able to supplement it with a sincere appreciation of the efforts of dedicated individuals and groups to summarize what is known, acknowledge what remains uncertain, contested, and obscure, and offer reasonable syntheses and guidelines expressed with conscientiousness and modesty. Two recent publications have won my respect and gratitude. The first is *Guidelines for Treating Dissociative Identity Disorder (Multiple*

Personality Disorder) Adults (1994), prepared by the Standards of Practice Committee of the International Society for the Study of Dissociation, under the Chairmanship of Peter M. Barach, Ph.D. The second is *Clinical Hypnosis & Memory: Guidelines for Clinicians & for Forensic Hypnosis*, authored by a Task Force on Hypnosis and Memory of the American Society of Clinical Hypnosis, chaired by D. Corydon Hammond, Ph.D. Each is an occasion for celebration. Both organizations and every one of the clinicians and scholars involved in these projects deserves a hearty "Well done!" I commend these publications to the attention of every reader of *DISSOCIATION*, and to every individual with a serious scholarly or clinical interest in dissociation and the dissociative disorders. They should be read and studied, and then re-read and re-studied.

Guidelines for Treating Dissociative Identity Disorder (Multiple Personality Disorder) Adults (1994) is a masterful synthesis of what is currently appreciated to represent "what thus far has seemed to be effective treatment of DID" (ISSD, 1994, p.1). It is clear, concise, and humble. It acknowledges that many divergent opinions exist, and represents different perspectives even-handedly and without prejudice. It openly states that its findings will require ongoing revision, and anticipates that subsequent editions will be published in the not-too-distant future. Considering the diversity of opinions that was represented on the Committee, the Committee's finding so much common ground speaks volumes for Dr. Barach's skill in bringing this project to its successful completion.

Guidelines is the fruit of four years of effort, many meetings, and the modification of several drafts in the light of feedback from ISSD members who responded to preliminary drafts published in the Society's *Newsletter* with critiques and commentaries. It is well-honed and thoughtful. This project owes much to the vision of Catherine G. Fine, Ph.D., who, while serving as President of the Society, foresaw the need for a concise compendium of what common ground had been established on the basis of research and accumulated clinical wisdom, and a frank acknowledgement of differences of opinion in an atmosphere of open candor. She established a Task Force for this purpose, which later became a Committee. Dr. Fine made an inspired choice in naming as Chair Peter M. Barach, Ph.D., who brought a keen intellect, a conscientious determination, a comprehensive knowledge of the literature, a skill with the management of difficult group interactions, and a self-effacing modesty to a difficult task. Gratitude is due to Dr. Fine's successors in the Presidency,

who continued to support this project and push it to its successful conclusion. Richard J. Loewenstein, M.D., Moshe Torem, M.D., and Colin Ross, M.D., deserve much credit for their efforts on behalf of this project.

The members of the Committee should be acknowledged for their many hours of effort and their dedication to the goals at hand. Many were individuals with strongly-held opinions, who nonetheless were able to subordinate their individual agendas in the interests of achieving the most balanced and representative guidelines. The members were Peter M. Barach, Ph.D. (Chair); Elizabeth Bowman, M.D.; Catherine Fine, Ph.D.; George Ganaway, M.D.; Jean Goodwin, M.D.; Sally Hill, Ph.D.; Richard P. Kluft, M.D.; Richard J. Loewenstein, M.D.; Rosalinda O'Neill, M.A.; Jean Olson, M.S.N.; Joanne Parks, M.D.; Gary Peterson, M.D.; and Moshe Torem, M.D.

Clinical Hypnosis and Memory is a towering achievement with a scope much broader than its title would indicate. As an organization, The American Society of Clinical Hypnosis has proven exemplary in taking responsible and constructive steps to address major problems and issues confronting its members both in their practices and in their attempts to respond to some of the broader societal issues that impinge upon and in turn are influenced by the field of hypnosis. Within the last two years the American Society of Clinical Hypnosis has established impressive new and more rigorous guidelines for the teaching of hypnosis, begun a highly-praised certification program that involves individualized consultations designed to enhance the clinical skills of those who apply for certification, developed a thoughtful brochure to explain hypnosis to health practitioners and concerned others, and mobilized a powerful group of experts to study and report upon the complex and controversial relationship between hypnosis and memory.

Clinical Hypnosis & Memory: Guidelines for Clinicians & for Forensic Hypnosis is the report of the latter group. It is a brilliant monograph that includes an attempt to define hypnosis (a perpetually impossible task), a review of current concepts about memory and the factors that influence it, and a scholarly summary of current research on hypnosis and memory (including synopses of relevant hypotheses). On these foundations it proposes guidelines for clinicians working with hypnosis and memory with patients who may have been abused. Appropriate and useful principles and cautions are articulated, and straightforward recommendations are offered. Also, guidelines for the conduct of forensic hypnosis are explicated. Each of these topics is approached with excellent scholarship and tempered with realistic insights from clinical experience. The bibliography alone is a treasure.

An editorial is not the proper format for a more detailed discussion of *Clinical Hypnosis & Memory*. The controversies that surround hypnosis and memory are very much in the news and the media, and this makes it tempting to offer further commentaries. However, hypnosis scholarship is an extremely complex and often recondite area of study. It is difficult to select and and/or emphasize particular points outside the context of the overall arguments that the monograph addresses. Suffice it to say that this monograph is the

most responsible and balanced study of these issues that I have encountered. It is especially valuable in that it demonstrates that many of the extremely negative opinions that have been voiced about the use of hypnosis in the treatment of trauma victims are egregious overstatements that far outstrip the data on which they are based. Likewise, it is very clear in showing that naive statements about the invariable accuracy of recovered memories are dangerously out of touch with established scientific findings. It is a welcome voice of reason in an area that is blessed with many brilliant contributors, but cursed by the fact that many of them have grossly overstated the implications of their research and/or clinical experience.

The chairperson or coordinator of the interdisciplinary panel that prepared this excellent document is D. Corydon Hammond, Ph.D., a distinguished and highly-published authority in the field of hypnosis. Dr. Hammond has been a driving force behind many of the American Society of Clinical Hypnosis projects noted above. The panel was convened at the behest of Dabney Ewin, M.D., during his Presidency of the American Society of Clinical Hypnosis. The project was brought to completion with the encouragement of his successor in the Presidency, William Wester, Ed.D. The distinguished panelists brought tremendous experience, knowledge, and wisdom to their task. They are Richard B. Garver, Ed.D.; Charles B. Mutter, M.D., Ed.D.; Harold B. Crasilneck, Ph.D.; Edward Frischholz, Ph.D.; Melvin A. Gravitz, Ph.D.; Neil Hibler, Ph.D.; Jean Olson, M.S.N., R.N.; Alan Schefflin, J.D., L.L.M.; Herbert Spiegel, M.D.; and William Wester, Ed.D. They have produced a landmark document that will be of use to the academic, clinical, and forensic communities.

It is easier to generate heat than light. *Guidelines for Treating Dissociative Identity Disorder (Multiple Personality Disorder) Adults (1994)* and *Clinical Hypnosis & Memory: Guidelines for Clinicians & for Forensic Hypnosis* are noteworthy beacons. Those involved in their inception and completion deserve our gratitude. The International Society for the Study of Dissociation and the American Society of Clinical Hypnosis are to be praised for their initiation and support of these projects, and for their organizational responsibility.

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