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Through a Glass, Darkly: Representation and Power in Research on Organized Abuse

Abstract   This paper draws on the author's experience undertaking life history research with adults with histories of organized child sexual abuse. Organized abuse has been a particular flashpoint for controversy in debates over child abuse and memory, but it is also a very harmful and traumatic form of sexual violence. Research participants described how, in childhood, threats and trauma kept them silent about their abuse, but in adulthood this silence was reinforced by the invalidation that accompanied their efforts to draw attention to the harms that have befallen themselves and others. This paper will examine the role of qualitative research in addressing a form of alterity whose defining characteristic is the silencing and dismissal of narrative.

Keywords   Sexual Abuse; Crime Victims; Life History; Sensitive Research; Coherence; Representation; Power

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I spent much of 2007 and 2008 travelling around Australia interviewing adults with histories of sexual abuse by groups or networks of people. Whilst most child sexual offences involve one offender and one victim, some children and adults with histories of sexual abuse have reported multi-perpetrator, multi-victim sexual abuse. Such experiences of abuse have been called "organized abuse" (La Fontaine 1993) and are asso-

ciated with a range of trauma-related mental illnesses amongst victims, as well as other poor life outcomes (Williams 1993; Leserman et al. 1997; Gold et al. 1999). Many of the interviewees for the project were too disabled by abuse-related mental health conditions to work and so they lived in rural and country towns, where their disability pension went further than in the city. Interviews were often preceded by hours spent on trains, planes, and buses, and followed by overnight stays in country motels. The liminal experiences of travel served as something of an allegory for the narratives I was gathering, which involved violence against children of a scale beyond what is commonly acknowledged to be real or possible. Mollon has suggested that narratives of organized abuse are, in many ways, external to "the dominant symbolic structure determining what we normally believe to be true, possible and within the nature of reality" (2008:108). As a result, allegations of such abuse have often been interpreted as myths or fantasies since the "possibility of their reality has no place" in the symbolic order constructed by "mainstream cultural and media discourse" (Mollon 2008:108).

The life histories of survivors of sexual abuse have long been the subject of heated and sometimes vitriolic debate. Over the last twenty years, much of this debate has been ostensibly concerned with experimental psychology and "memory science;" however, it has reflected a long-standing tradition of disbelief in relation to the testimony of women and children. As Habermas (1984) observed, questions of ethics and justice are increasingly reframed in the public sphere as "technocratic" issues dominated by scientific vocabulary. Behind the scientific rhetoric, the debate over women's

and children's testimony has been a deeply ideological one that has drawn on entrenched views of women's and children's memories as porous and highly susceptible to influence and contamination (Campbell 2003). This was particularly the case for victims of organized abuse, whose narratives of sadistic sexual abuse by groups and networks came under scrutiny in the 1980s and 1990s (Salter 2008). Despite the serious health needs of survivors of organized abuse, a range of academics, journalists, and activists have argued that their access to mental health care and the criminal or civil courts should be curtailed on the basis that disclosures of organized abuse do not reflect actual events but rather they are the product of "moral panics" and "false memories" (e.g., Loftus and Ketcham 1994; Guilliatt 1996; Ofshe and Watters 1996). These claims have proven so influential in the adjudication of criminal and child protection matters that, in some cases, child and adult complaints of organized abuse have been ignored by social services (South Australian Ombudsman 2004; Seenan 2005) and children have been returned to their parents despite ongoing complaints and evidence of such abuse (Rafferty 1997; Nelson 2008).

Like other researchers (Itzin 2001; Scott 2001), I sought to apply a qualitative methodology to the study of organized abuse in order to address what was absent in public debates about organized abuse: that is, the voices of the survivors themselves. The ways in which research methodologies create distances between researchers and research participants – in political and ethical, as well as spatial terms – has been a key factor in shaping the academic and media debate over organized abuse. Few researchers have directly

engaged survivors of organized abuse in the research enterprise through qualitative interviews, so there is little systematic analysis available regarding the content of survivor descriptions of their abuse. Survivors have rarely been afforded a presence in the research literature in their own right, and whilst some have represented their own histories through autobiographical writing, their contributions have largely been ignored or devalued by many academics and journalists writing on organized abuse. Many quantitative researchers have instead based their view of survivors upon pejorative mass media depictions, generalizing quantitative data drawn from surveys and case reviews in order to argue that such testimony is the product of "moral panic" and "false memories." By undertaking a qualitative project, I hoped to place survivors' perspectives at the centre of discussions on issues that most directly affect them.

Initially, I envisaged that my role as an interviewer was to provide a context in which participants felt safe engaging in the exposition of these histories with me. As the project progressed, it became clear that, for many participants, the interview was a nodal point in a larger struggle for survival that had, at its heart, the right to self-authorship. I came to realize that the very currency that qualitative research trades in – words, signs, symbols – constituted, for these participants, a mode of exchange within which they had been pervasively disempowered. Plummer suggests that narratives of sexual abuse survival are one of the dominant "sexual stories" that has proliferated across the contemporary media landscape but he also notes that such stories have a role in "pulling people apart," as well as "holding people

together" (1995:5). Disclosures of organized abuse have gained considerable prominence in public discourse, but paradoxically, they have often been "storied" in ways that have silenced and discredited, rather than empowered, children and adults describing such abuse. As a result, they have found themselves distanced from vital supports, including health and welfare services and the police. The struggle for enunciation and recognition were fundamental aspects to their experiences of abuse, ill health, and discrimination. The research encounter was not simply an opportunity to communicate or uncover this struggle. By the very nature of qualitative research, it became implicated in the struggle itself, and this article aims to examine the interplay of power and representation within the interview encounter.

Methodology

Participants were recruited through counseling agencies and the newsletters and mailing lists of organizations in the fields of mental health, sexual assault, sexual abuse, and child protection. It was a prerequisite of participation that participants had or were accessing mental health care, and that they had a caring person in their life that knew about their history of abuse and could support them during or after the interview if they wanted. The interview was based on the "life history" method (see Plummer 1983; 1995), in which participants were invited to discuss their lives from childhood to the present day. The majority of literature on organized abuse consists of commentary and speculation rather than empirical analysis of organized abuse cases, although the available research reveals provocative linkages between organized abuse and other forms

of child abuse and violence against women (Gallagher, Hughes, and Parker 1996; Kelly 1998; Scott 2001). The life history method was applied in an exploratory fashion in order to examine these linkages further. Survivors of sexual abuse are rarely engaged in qualitative research, perhaps due to the concerns of researchers and ethics committees that they may experience distress in the interviews (DePrince and Freyd 2004; Becker-Blease and Freyd 2006). However, the proposition of Becker-Blease and Freyd (2006) that adult survivors of child sexual abuse are able to accurately predict and manage the potential risks of retraumatization in qualitative research found support in this study. As the article will discuss, no participant expressed regret for their participation and many indicated that they gained some benefit from participation.

Abuse, Representation, and Power

As a researcher, my focus was on the criminological dimensions of participants' accounts of their lives: the contexts in which they experienced organized abuse, the acts that were committed against them, and so on. However, what I discovered within the interviews was an environment charged by a range of pressures and expectations, spoken and unspoken. Flooding into the research encounter was participants' desire to speak and be heard, to be a speaking subject rather than an object of discourse. In the interviews, participants were highly sensitized to their social and political invisibility as victims of serious and life-threatening harm. There was an irreconcilable gap in their lives between the severity of the abuses they had witnessed and been subject to, and the ways in which these abuses were denied public rep-

resentation and acknowledgement. Child sexual abuse victims often grow up in contexts in which their efforts to articulate distress and seek care and support are systematically invalidated, disbelieved, and disavowed (Linehan 1993). Hence, the dynamics of the debate over the veracity of sexual abuse testimony reproduced and even intensified the characteristics of sexually abusive environments in ways that many victims found distressing and humiliating.

Such invalidating dynamics were reflected in the conduct of various professionals and workers that participants had approached as adults in times of crisis. In the interview, Darren described how one psychiatrist's effacement of his memories of organized abuse was "one of the worst things" that has ever happened to him.

> The psychiatrist I went to see, he summed me up within ten, fifteen minutes. He'd turned around and basically told me I was crazy, and I was a victim of "fraudulent memory syndrome" or something like that, "false memory syndrome." He'd likened me to some nutcase that thought he was a serial killer. Yeah, he really just said, out and out, "You are a crazy man."

> …It's just hard for me to even think about, it was one of the worst things that has ever – just, I'd wanted to, I'd been waiting to get enough money to see this guy, and I'd pinned a lot of hopes on being able to talk to this fellow. Because I'd actually talked to him before … and he'd seemed like basically a decent sort of guy. But then, he just nailed me. I walked out of that place so – I hadn't been that suicidal in years.

For participants, the ways in which their recollections of organized abuse have been denied

representation and acknowledgement were intrinsically linked to their current experiences of illness and marginalization. With no legitimacy attached to their self-representations, they had no power to externalize their suffering and hence, find care and support for the mental health problems and distress associated with their history of abuse. The subsequent collapse in self-valuation, leading to thoughts of suicide and death, was reflective of their devaluation in the eyes of potential care-givers who refused to acknowledge the level of their need. Goodwin has observed the frequency of an incredulous response amongst physicians confronted with narratives of sadistic abuse, arguing that this response is an "intellectualized variant of derealization" that serves to "gain distance from terrifying realities" (1985:7). For Darren, there was a direct relationship between the effacement of his narrative of abuse and the effacement of him as a person; as he says, "I hadn't been that suicidal in years." The means through which the psychiatrist sought to understand and rationalize his violent experiences constituted him as a person beyond belief and hence, beyond hope.

Campbell (2003) suggests that, in Western societies, the valuation of a persons' testimony is linked to the valuation of the person themselves. Where memory and testimony are called into question then the bases of identity and personhood are fundamentally delegitimized. If subjectivity is socially constituted through engagement and interaction, then the persistently invalidating nature of participants' social encounters resulted in a sense of self that was experienced as diminished and subordinated. They often felt isolated, alone and powerless. Sky said:

I'd tell people little bits and pieces about my past because I'd worked something out and I'd be pleased to finally understand it. And they'd zone out, or they'd freak out worse than I do. So I want to tell people, but I don't want to incapacitate either. And people sometimes just think I'm insane. So I've ended up very isolated from people that could be helpful at this point.

Throughout their lives, participants had been denied the opportunity to speak in full about their most formative experiences, and where they had attempted to narrate their own histories they had often been confronted by shock, disbelief, and denial. They were therefore relegated to a constrained enunciative position in which they were restricted from accessing care and support or generating a sense of meaning and significance from their experiences of abuse. If culture is based upon the circulation of symbols and narratives, as Geertz (1973) proposes, then the fate of a population excluded from this symbolic exchange was starkly described by participants in this study. The opportunity to speak about their lives in the research encounter was therefore a powerfully symbolic one attended by anxiety and trepidation. This is well in evidence in the excerpt below from Isabelle, who discusses her response when her therapist handed her the advertisement for the research project.

I got handed the research ad and I just went [gasp] "Fuck, that makes this concrete. The fact that you've even handed this to me makes my history concrete."

Up until that point, it was kind of like, "Oh yeah, I think I'm talking to someone [a therapist] about it [organized abuse], but maybe it's not real. It's still over there, it's still just my imagination, and one day, she's [the therapist] just going to come in with a straight jacket and it'll be cool and I'm just crazy and it'll be all over. And it'll make sense because I'll just be mad."

Until she handed me that bit of paper, and I'm sitting there, looking at it. And she said, "Oh, I'm just handing it to you, you don't even have to participate. You can screw it up, and throw it in the bin." And I'm looking at it, thinking, "Hmmm … That makes things concrete … you are handing it to me because I'm one of them [a survivor of organized abuse]. Oh fuck." And I'm kind of … I just put it in my folder, and I didn't know whether I should screw it up.

Another part of me thought, "Nah, if you ignore it, that means all this is going to be for nothing. And that means they are going to keep winning, and you don't want that either. And you can't do what he's [the researcher] doing, because it's not safe to do that [run a project on organized abuse]. But maybe, it'll be OK to talk to him." So, then, that happens, and a couple of days go by with lots of anxiety, on a scale of 1 to 10 it was past that. And we[1] still thought, "Nah, it's cool, we are going to do this."

The life history format may be used by researchers to bring attention to the lives of the vulnerable (Plummer 1983:58); however, in this project, it was clear that research participants had sought out, identified, and acted upon the testimonial opportunity presented by the project. Armstrong (1994) has noted the ways in which women's testimony of sexual abuse has been devalued since

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[1] Some participants had a diagnosis of dissociative identity disorder, a mental illness associated with severe abuse in childhood and defined by the "presence of two or more distinct identities or personality states" that repeatedly take control of the person's behavior, as well as recurrent memory loss during such incidents (International Society for the Study of Trauma and Dissociation 2011:118). People with such a diagnosis may sporadically refer to themselves as "we."

the 1980s, stripped of its collective and political dimension and relegated to a private narrative of harm and loss. It was this devaluation that participants sought to redress through their participation. Public and political value are accorded to truth claims born from personal experience where the individual is valued as a participant in the public sphere, the place of civic engagement; an engagement not only traditionally denied to women (Pateman 1988) but particularly to women who speak out against men's sexual violence (Armstrong 1994; Scutt 1997). In Isabelle's account, qualitative research had the potential to breach the public-private divide and enable her to testify to her abuse in a public way and thus, disrupt the silence that allowed her abusers to "keep winning." This new testimonial position opened up new ways for Isabelle to view herself: as neither a crazy woman nor a woman in a crazy world but rather as a victim of a terrible harm that demands redress. The fact that she persevered with this decision despite a high level of fear and anxiety highlights the significance of this opportunity for her, and the symbolic potentials of qualitative research with people who have been pervasively denied other forms of public self-representation.

The Historiography of a Life History

In the debate over the credibility of sexual abuse disclosures, psychologists and psychiatrists have been at pains to emphasize the complexities and ambiguities of memory. They have accused adults with histories of organized abuse and those workers that support them of being hopelessly naïve about the vagaries of autobiographical memory. However, in this study participants indicated

that they were intimately familiar with the unreliability of personal memory, which they described as an elusive and sometimes assaultive force in their lives. They recounted periods of their lives in which they suffered from extensive amnesia for previous experiences, as well as periods in which they were disabled by the uncontrollable intrusions of recollections of violence and abuse. Participants were under no illusion that their life histories were naturalistic productions, since their histories were narratives that they had consciously worked to develop and construct, often over years of torturous reality-testing and corroboration.

Prior to undertaking this effort, participants often had no life history or self-narrative to call their own. They confronted prolonged gaps and blackouts in their recollections of childhood and irreconcilable contradictions between the story of their lives that they inherited from their parents and their own memories.

> [When I was a child] a neighbor had come to our house, and Mum said to her, "I don't hit my children." And I distinctly remembered being hit by her a few days earlier. So, again, this is what I mean about the way we were fed certain stories about our family, which was different to what was really happening. But, it wasn't until I was older, and I remembered that conversation, and I thought, "But, that's not true." But, we were all taught to bury the truth. (Anne)

Attempting to recreate their life histories was therefore an attempt to impose order upon internal disorder and craft a sense of self and history from the recollections of abuse that confronted them. The development of this new history was

slow, arduous work. Some participants brought an extraordinary high index of suspicion to their own recollections, refusing to introduce new recollections into their life history before they had rigorously tested them for accuracy. Where they encountered uncertainties in their recollections of abuse, they often identified this themselves. At times they refused to accept as necessarily true a recollection of abuse if they felt it was untrustworthy. In his discussions of his early childhood, Darren mentioned that his mothers' boyfriends would sometimes come to the house when she was absent, but he quickly broke off that discussion:

> All that really early stuff – I don't want to talk about that, it's like the mists of time, y'know. It's really early childhood memory, and I would say that, as a child – scared witless – and, as a child, in my mind, I don't really want to go back there.

Participants were, in a very real sense, the ethnographers of their own lives, with an unusual level of insight into the process by which they constructed their stories, their identities, and their understanding of organized abuse. The interview was therefore a site in which they could recount not only their life history but the history of this history; their own historiography.

In the interview, Renee described how, in her late twenties, she had a "breakdown" brought on by uncontrollable "flashes" and images of abuse that made her physically sick. A number of other participants also recalled periods of their lives in which they did not recall their experiences of childhood abuse; however, once these memories began they could not be stopped. They manifested as intrusive "flashbacks" that incapacitated

participants and severely disrupted their lives. In Renee's case, the emergence of these traumatic memories presaged a prolonged period of illness and disability that had continued to the time of the interview.

> I blocked out my memories, and didn't remember until I was twenty-seven. I had a breakdown, I guess. All of a sudden, one night, I was going over my life: "Oh, yeah, when we were six we lived in this town, and then we moved and we lived with Nanna and Pa and then we moved in with Mark [stepfather]" – and then, just, my heart's pounding, I felt sick, and these flashes of people, and – at the time I was seeing a counselor and I rang her that day. And it wasn't long after that I left the job that I'd been in for ten years, I just – fell to pieces.

Renee had been raised by her mother and stepfather, Mark, in a house characterized by violence, alcoholism, and drug abuse. She began to remember being sexually abused by Mark at home and by a group of Mark's extended family and friends. This abuse included a local photography studio where she remembered child abuse images being taken of her. In her adult life, the emergence of these recollections was profoundly disturbing to Renee and she was initially uncertain how to make sense of them. She confronted her mother and Mark about what she remembered and their ambivalent response only served to inflame her sense of distress and humiliation.

> [Mum said] "Oh, yes, he does remember going into your bedroom one night and getting into bed with you. He was drunk." My stepfather. Yeah. He said that to mum, he remembers. One night, accidentally. "But nothing happened!" Because he was drunk. But, they were always drunk.

> ...So it was played down, it was – "Big deal." It was played down. Mum was there and he said, "Well, as a matter of fact, one of my dad's mates used to play with my dick when I was a kid, and I quite liked it." So his attitude was, "What's the big deal?"

Her mother's and stepfather's responses were all the more upsetting for Renee because she struggled with her own doubts and bewilderment about what her memories represented. In an effort to resolve this confusion, and to reject Mark's imputation that her memories were the product of mental illness, she began to undertake significant investigatory work in an effort to verify her memories of abuse.

> I guess I did a lot of my own detective work. I knew where we lived as kids, I knew where the [photography] studio was. I went to libraries, and did all this research, found out who owned the place, found out who was leasing the place, a whole lot of stuff. And it all started to add up. It was years until all the memories were in sequence and it made sense … I wasn't backing down until I found out who owned that bloody place, their names, who leased it. Being stubborn can have its benefits.

She was later able to go into a local shop that she believed had been the site of the photography studio and verify that it had the same layout as she remembered. Having uncovered the name of the leasees at the time, she visited their private house only to find that it fit drawings she had made in hospital of the house that she had been driven to for abusive "parties."

> I had a drawing of the house from when I was in a psych unit. I actually went there to put a brick through their window – and there was the drawing. I went there during the day and said, "There's

that backyard where we had a party." It was just bizarre.

In the interview, Renee sometimes appeared trapped between her desire to affirm the validity of her recollections and the ambiguity of the images that confronted her in flashbacks and nightmares. She described her life history as a jigsaw puzzle that she was unsure if it will ever fit together, but she felt that she had been able to generate a general (if somewhat patchy) sense of order that explained the chronology of her abuse and the development of her disabling trauma symptoms.

> I've been told, and I don't know if it was true, but there was quite a lot of money to be made back in the seventies with that kind of stuff [child pornography]. And when I look at all: my stepfather, and money, and sex, and yeah, it all kind of doesn't really make … full sense. There are bits that do, where I can say, "Yeah, that definitely happened."

Interactionist approaches to qualitative research have emphasized the co-production of narrative between the interviewer and interviewee. In relation to organized abuse, skeptics have gone further, claiming that interviewers can "implant" or impress upon a vulnerable interviewee a false narrative. Whilst the narrative structure that emerged in the interview with Renee was undoubtedly shaped by the research encounter, she came to the interview with a sense of her history and identity that was not spontaneously reorganized to suit the particularities of an interview or an interviewer. Her self-narrative did not grant me, as the researcher, unmediated access to social realities or lived experience but nor was her narrative independent of these realities and experi-

ences – far from it. In the interview, she provided a detailed description of the strategies she had employed to construct the history of her life and the circumstances that shaped the evolution and development of her self-narrative. The forces and processes at play in the interview environment – representation, symbolization, recollection – were the very forces that Renee and other participants sought to describe and articulate.

"Sick with the Memories": The Limitations of the Interview

The effort to translate memory into verbal or written representation was an ongoing struggle that participants recounted in great detail. Cara spoke of being "sick with the memories" of organized abuse and described "big, big flashbacks" knocking her off her feet. Other participants talked of memories punching them in the stomach and making them vomit, or waking up at night feeling hands around their throat or on their shoulders, holding them down. The risk that participants' memories might manifest in uncontrollable or distressing ways in interview was one that had to be managed throughout the research encounter. It was clear that some recollections of abuse could be directly addressed in the interview whereas other memories needed to be approached obliquely or avoided altogether. Some horrifying experiences were mentioned in passing, but participants were unable to speak about them at length; accounts of abuse, violence, and losses that were, literally, unspeakable. These experiences were marked by silence rather than discourse, or else by the sudden termination of narrative, as in this example from Jane below:

> In absolute terror, uh, clutch- clutching a sibling, when the, when this monster who was someone that you normally loved and trusted would be parading around the bedroom saying, "Where are you? COME OUT!" And um, um, I'm just having a little bit of trouble divulging here, because I don't want to go too far...

The struggle to enunciate the subjective experience of trauma calls attention not to the revelatory power of disclosure but instead to the potentially destructive consequences of the inadequacies of language. Psychological trauma is presaged by the collapse of systems of meaning and representation in the face of overwhelming physical and emotional pain (Herman 1992). Kristeva (1976) has emphasized how language and representation organizes the energies, rhythms, and forces of corporeal experience, a relationship which imbues language with significance and meaning. However, the collapse or deformation of meaning, in the face of trauma, fundamentally disrupts this dialectic, leaving the unity of language imperiled by an overflow of fragmented and threatening psychic material.

In the interviews, participants had to continually negotiate between the desire to articulate themselves and the maintenance of coherence and meaning that may be threatened when violence is brought to the threshold of language. In the interviews, participants sought to narrate a stable sense of self, albeit with recognition given to the fragmentation and ambiguities of self-hood(s) emerging from traumatic contexts. A self with a fragmented past is necessarily a fragmented self, a point made vividly by Isabelle when she said:

> I find it really hard to put things in language and context half the time. It's just this messy imagery, sensory … it's like my body is there, and if my body could tell you exactly how and when, there would be a context. But, everything is just so scattered in our mind. Sometimes it feels like there are twenty different events all connected in one. I just feel like … it's unraveling this messy … you know how cats play with balls of wool? And they get them all knotted up and messy? Sometimes you can't unmessy it, it's beyond repair. That's what it feels like in our head, sometimes.

Testimony of trauma, particularly where it involves intense personal suffering and grief, is necessarily incomplete because of what Scarry (1985) identified as the "inexpressibility of pain"; however, the possibilities of the interview encounter for survivors of violence are further narrowed by the limitations that systems of representation place upon the subject. The severity of the violence disclosed by victims of organized abuse is such that Cooper, Anaf, and Bowden (2006) and Sarson and MacDonald (2008) have questioned whether the terminologies of "child abuse" and "domestic violence" can adequately describe them. Whilst some recollections of abuse could be directly addressed in the interview, others were too "messy," as Isabelle suggests, to be put into words. Attempting to do so threatened to "unravel" the spool of self-hood and history that participants had spent many years untangling. As a result, there are necessary limits to the capacity of the research encounter to document and communicate fully the experiences of abuse and violence that had characterized participants' lives.

Evaluating the Research Encounter

Participants were drawn from an extremely traumatized population and they had a spectrum of mental health diagnoses, including dissociative identity disorder, schizophrenia, psychotic depression, manic depression, bipolar disorder, and "personality disorders." Nonetheless, participants' feedback was very positive about the experience of the project. In order to evaluate participants' experiences in the interview, all participants were sent a brief post-interview evaluation questionnaire a month after the interview. The questionnaire included three items that were selected to measure participants' experience of the research in terms of the potential benefits, psychological distress, and risk-benefit ratio. The items were drawn from Newman, Walker, and Gefland's (1999) study on the costs and benefits of participating in trauma-focused research, in which the constructs of benefit, expected upset, and regret were measured using the 5-point Likert items below:

1. I gained something positive from participating in the interview;

2. Participating in the interview upset me more than I expected;

3. Had I known in advance what the interview would have been like for me, I still would have agreed.

Of the 21 participants, 16 returned their questionnaires, which was approximately a 75% return rate. One participant only completed one of the questions and so was dropped from the analysis, leaving a total questionnaires sample of 15 (70% of the total sample). Table 1 shows the distribution of participants' responses to the three reaction questions.

Table 1. Likert scale responses to questions regarding participation in the interview.

	Strongly disagree		Disagree		Neutral		Agree		Strongly agree	
	N	%	N	%	N	%	N	%	N	%
Benefit[a]	0	0.0	0	0.0	1	6.7	4	26.7	10	66.7
Unexpected upset[b]	5	33.3	4	26.7	3	20.0	3	20.0	0	0.0
No regrets[c]		0.0		0.0		0.0	5	33.3	10	66.7

[a] "I gained something positive from participating in the interview"

[b] "Participating in the interview upset me more than I expected"

[c] "Had I known in advance what the interview would be like for me, I still would have agreed"

Source: self-elaboration.

All participants except one reported that they had experienced benefit from their participation, with two-thirds of the sample strongly agreeing with the benefit statement. The results of the unexpected upset measure were mixed. Over half the sample reported that they did not experience unexpected upset during the interviews, with 20% responding neutrally to the question and 20% reporting some experience of unexpected upset. Nonetheless, no participant reported regretting their participation, with two-thirds of the sample strongly agreeing with the statement that they would have participated in the interview if they had known what the experience would have been like.

Participants expressed few adverse reactions to the study and the majority indicated that they had derived benefit through their participation. This finding is particularly significant since often a month had elapsed before participants received the questionnaire, so their responses pertained not only to the interview experience but its aftermath. Although a minority of participants reported unexpected distress in the interviews, it seems that these experiences were tolerable since no participant expressed regret at their participation. The fact that 20% of participants reported unexpected distress in the interviews, yet, did not regret their participation, highlights their perseverance and, perhaps, the importance of the opportunity to participate in this research project for them.

Conclusion

Plummer questions "the current, almost obsessive, concern of much analysis which reduces dense, empirical *human* life to *texts*" (1995:16).

Beyond words and discourse, "a real world and real lives do exist, howsoever we interpret, construct and recycle accounts of these by a variety of symbolic means" (Stanley 1993:214). Adult accounts of organized abuse have been pervasively reduced to "just words" by academic and media commentators, characterized as textual productions with little or no relation to social reality. In the interviews, participants described how these discursive maneuvers left them unable to access treatment for disabling psychological symptoms or to protect themselves from sexual and physical violence. Consigned to a liminal space in which their words, feelings, and needs were assigned no value, some participants called into question the viability of a life characterized by ongoing suffering without hope of intervention. Hence, words are not "just words": they have a political and social force of their own.

In this study, this was a force that participants identified within qualitative research and sought to mobilize to their own ends. The urgency that victims of violence can bring to the research encounter, and their power to determine the shape and form of the interview, is evidence of the very agency that can be denied to them by overly cautious formulations of the "vulnerable research participant." That is not to deny the vulnerabilities of victims of violence in their struggle to enunciate experiences of abuse and powerlessness but rather to situate qualitative research within the politics of representation. Marginalized populations are the bearers of narratives and self-histories that are delegitimized by powerful institutions and individuals (including academics) because they disturb the authorized accounts of social life that mystify and legitimize power inequalities.

Underlying this is the semiotics of disadvantage, whereby prevailing systems of representation lack the symbolic resources for the articulation of experiences that trouble the structures of power that generate, legitimize, and maintain the hegemony of such systems.

In the face of the hegemonic silencing of alternative accounts, qualitative research offers a space for discursive excavation and reconstruction. Scarry argued that experiences of violence can "magnify the way in which pain destroys a person's world, self and voice" so "acts that restore the voice become not only a denunciation of the pain but almost a diminution of the pain, a partial reversal of the process of torture itself" (1985:5). In this light, qualitative research not only becomes a site of resistance and protest for subordinated groups but also a place in which the deconstructive force of abuse and violence can be challenged and perhaps even reversed. This is a political rather than therapeutic contestation (although the two are not mutually exclusive) and, as this project showed, victims of violence may seek out qualitative research precisely for its public, testimonial qualities.

Marginality and testimonial illegitimacy exist in a spiraling relation that effects measurable changes upon bodies and lives. One of the main tools that social researchers have used to uncover and highlight disadvantage – the research encounter – is not divorced from the materiality of testimony and discourse. It proffers a site in which narratives of harm and disadvantage can overcome the obstacles embedded in hegemonic constructions of credibility and authority. The interview cannot capture the totality of suffering and indeed may add to it when symbolic representations prove unable to hold or contain intolerable affect. Despite these limitations, within the interaction between interviewer and participant, a reconfiguration of the semiotics of disadvantage can be produced, whereby symbolic resources are mobilized in ways that reveal, rather than obscure, processes of subordination. With the legitimization of suppressed narratives comes the possibility of the development of new, authorized subject positions for people whose testimonial experiences have otherwise been marked by invalidation, disbelief, and marginalization.

References

Armstrong, Louise. 1994. *Rocking the cradle of sexual politics: What happened when women said incest*. Reading, MA: Addison-Wesley.

Becker-Blease, Kathryn A. and Jennifer F. Freyd. 2006. "Research participants telling the truth about their lives: The ethics of asking and not asking about abuse." *American Psychologist* 61(3):218-226.

Campbell, Sue. 2003. *Relational remembering: Rethinking the memory wars*. Oxford: Rowman and Littlefield Publishers.

Cooper, Lesley, Julia Anaf, and Margaret Bowden. 2006. "Contested concepts in violence against women: 'Intimate', 'domestic' or 'torture.'" *Australian Social Work* 59(3):314-327.

DePrince, Anne P. and Jennifer J. Freyd. 2004. "Costs and benefits of being asked about trauma history." *Journal of Trauma Practice* 3(4):23-35.

Gallagher, Bernard, Bill Hughes, and Howard Parker. 1996. "The nature and extent of known cases of organised child sexual abuse in England and Wales." Pp. 215-230 in *Organised abuse: The current debate*, edited by Peter Bibby. London: Arena.

Geertz, Clifford. 1973. *The interpretation of cultures*. New York: Basic Books.

Gold, Steven N. et al. 1999. "Relationship between childhood sexual abuse characteristics and dissociation among women in therapy." *Journal of Family Violence* 14(2):157-171.

Goodwin, Jean. 1985. "Credibility problems in multiple personality disorder patients and abused children." Pp. 1-20 in *Childhood antecedents of multiple personality*, edited by Richard Kluft. Washington: American Psychiatric Press.

Guilliatt, Richard. 1996. *Talk of the devil: Repressed memory & the ritual abuse witch-hunt*. Melbourne: Text Publishing Company.

Habermas, Jürgen (1984) *The theory of communicative action*. London: Heinemann Educational.

Herman, Judith. 1992. *Trauma and recovery*. New York: Basic Books.

International Society for the Study of Trauma and Dissociation. 2011. "Guidelines for treating dissociative identity disorder in adults, third revision." *Journal of Trauma & Dissociation* 12(2):115-187.

Itzin, Catherine. 2001. "Incest, paedophilia, pornography and prostitution: Making familial abusers more visible as the abusers." *Child Abuse Review* 10(1):35-48.

Kelly, Liz. 1998. "Confronting an atrocity: The Dutroux case." *Trouble and Strife* 36:16-22.

Kristeva, Julia. 1976. "Signifying practice and mode of production." *Edinburgh Review* 1:64-77.

La Fontaine, Jean S. 1993. "Defining organized sexual abuse." *Child Abuse Review* 2(4):223-231.

Leserman, Jane et al. 1997. "Impact of sexual and physical abuse dimensions on health status: Development of an abuse severity measure." *Psychosomatic Medicine* 59(2):152-160.

Linehan, Marsha. 1993. *Cognitive behavioral treatment of borderline personality disorder*. New York: Guilford Press.

Loftus, Elizabeth F. and Katherine Ketcham. 1994. *The myth of repressed memory: False memories and allegations of sexual abuse*. New York: St Martin's Griffin.

Mollon, Phil. 2008. "When the Imaginary becomes the Real." Pp. 108-115 in *Forensic aspects of dissociative identity disorder*, edited by Adah Sachs and Graeme Galton. London: Karnac.

Nelson, Sarah. 2008. "The Orkney 'satanic abuse case': Who cared about the children?" Pp. 337-354 in *Ritual abuse in the twenty first century: Psychological, forensic, social and political considerations*, edited by Randy Noblitt and Pamela Perskin. Bandon: Robert D. Reed Publishers.

Newman, Elana, Edward A. Walker, and Anne Gefland. 1999. "Assessing the ethical costs and benefits of trauma-focused research." *General Hospital Psychiatry* 21(3):187-196.

Ofshe, Richard and Ethan Watters. 1996. *Making monsters: False memories, psychotherapy, and sexual hysteria*. California: University of California Press.

Pateman, Carole. 1988. *The sexual contract*. Oxford: Polity Press.

Plummer, Kenneth. 1983. *Documents of life: An introduction to the problems and literature of a humanistic method*. London, Boston: Allen & Unwin.

Plummer, Kenneth. 1995. *Telling sexual stories: Power, change and social worlds*. London, New York: Routledge.

Rafferty, Jean. 1997. "Ritual denial." *The Guardian*, March 22, p. 26.

Salter, Michael. 2008. "Out of the shadows: Re-envisioning the debate on ritual abuse." Pp. 155-176 in *Ritual abuse in the twenty-first century: Psychological, forensic, social and political considerations*, edited by Randy Noblitt and Pamela Perskin. Bandon: Robert D. Reed Publishers.

Sarson, Jeanne and Linda MacDonald. 2008. "Ritual abuse-torture within families/groups." *Journal of Aggression, Maltreatment and Trauma* 16(4):419-438.

Scarry, Elaine. 1985. *The body in pain: The making and unmaking of the world*. Stanford: Stanford University Press.

Scott, Sara. 2001. *Beyond disbelief: The politics and experience of ritual abuse*. Buckingham: Open University Press.

Scutt, Jocelynne. 1997. *The incredible woman: Power and sexual politics (Vol. 1)*. Melbourne: Artemis Publishing.

Seenan, Gerard. 2005. "Social workers blamed for continued abuse of three daughters in remote island community." *The Guardian*, October 8, p. 4.

South Australian Ombudsman. 2004. *Annual Report 2003-2004: Report of the Ombudsman concerning an alleged failure by the Department for Human Services (Family and Youth Services) to acknowledge and deal with a conflict of interest arising from the placement of a child into foster care*. Adeladaide: South Australian Ombudsman.

Stanley, Liz. 1993. "The knowing because experiencing subject: narratives, lives and autobiography." *Women's Studies International Forum* 16(3):205-215.

Williams, Mary B. 1993. "Assessing the traumatic impact of child sexual abuse." *Journal of Child Sexual Abuse* 2(2):41-59.