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Malignant trauma and the invisibility of ritual abuse

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Introduction

This paper draws on psychoanalytic understandings of malignant trauma to explain the invisibility of ritual abuse. Ritual abuse refers to the misuse of rituals in the organized sexual abuse of children (Salter, 2012). Ritual abuse is typically practiced in extended family networks and criminal groups that participate in the production and circulation of child exploitation material (CEM). Despite claims that ritual abuse is a hoax or a product of false memories, cases of ritual abuse have been substantiated in child sexual assault prosecutions since the 1980s, including major cases in Canada (Steed, 1995), Belgium and England (Kelly, 1998), the United States (Ellzey, 2007) and Wales (Morris, 2011). Invisibility is a consistent theme in the lives of victims and survivors of ritual abuse. While there is now a considerable literature on the therapeutic treatment of ritually abused children and adults (e.g. Badouk Epstein, Schwartz, & Wingfield Schwartz, 2011; Miller, 2012; Schwartz, 2013), ritual abuse is largely unrecognized outside of the trauma and dissociation field as a distinct form of exploitation. International efforts to develop a coordinated response to the ritual abuse of children in the 1990s in countries such as Australia, the UK and USA were halted or reversed in the face of a media-driven backlash (Salter, 2017). The invisibility of ritual abuse remains as a doubled trauma for survivors, who endure the effects of past or current abuse amidst the denial of that abuse (Matthew & Barron, 2015), and a vicarious trauma risk for therapists, who treat a profoundly vulnerable and needy client group against a backdrop of professional uncertainty and skepticism (Scott, 1998).

This paper uses qualitative data from interviews¹ with ritual abuse survivors and mental health practitioners to argue that the trauma of ritual abuse and its invisibility are co-

¹ The interview studies received ethical approval from the University of New South Wales and Western Sydney University, Australia. Interviews were transcribed and anonymised through the removal of identifying

constitutive. Cultural and familial environments shaped by an infantile dread of human vulnerability are the primary conditions of possibility for ritual abuse, as this dread prompts enactments of traumatized cruelty within contexts with scant capacity to acknowledge or address this form of violence. The mechanisms for the reproduction of ritual abuse are thus submerged within psychosocial structures of normalization, exploitation and dissociation. The article begins with an explanation of malignant trauma and its applicability to ritual abuse, before examining the social and psychological processes within which ritual abuse victimization is rendered undetectable. The article discusses the enforced disappearance of ritual abuse from public policy and how the provision of care to ritual abuse survivors has become contingent on its denial and erasure. The article closes by reflecting on the role of therapists and others in interrupting the malignancy of ritual abuse, and the possibilities of crafting cultural resources and moral frameworks to transform the dread at the core of ritual abuse.

Malignant trauma

While most trauma survivors do not become perpetrators of violence, perpetrators of violence are disproportionately likely to have been traumatized in childhood (Fox, Perez, Cass, Baglivio, & Epps, 2015). Interpersonal abuse and attachment trauma are especially pronounced in the backgrounds of sadistic and psychopathic offenders, whose violence often takes on sexualized and ritualistic elements (Stein, 2013). Object relations theory, attachment theory and relational psychoanalysis have been productively applied to understand the association between early childhood trauma and pathways to violent perpetration, mediated by familial and community context (Schimmenti et al., 2014; Schwartz, 2013; Stein, 2013). This paper is focused on Grand's (2000) notion of "malignant" trauma, and related scholarship by Alford (1997), which explicates the social contexts of traumatized and traumatizing cruelty. Their contributions examine the oft-observed relationship between sadism and disbelief, in which the facticity of violation is denied not only by the perpetrator, but also by bystanders, communities, and history itself. The dynamic of traumatized violence

and its erasure is labelled by Alford (1997) and Grand (2000) as “evil”, recognising its terrorizing and uncanny qualities.

The origins of this “evil” lie in the preverbal, presymbolic state that is the most primitive mode of psychological organization. Described by Ogden (1992) as the “autistic-contiguous” position, this state is operative from birth, and provides a “sensory floor” for the subsequent elaborations of meaning and self-other distinctions that have yet to develop. In this mode of experience, the child begins to create a sensible order from the physical sensations associated with skin contact and rhythmic movement. The autistic-contiguous mode is “precategorical”, meaning prior to subject-object, self-other distinctions, and characterized by an experience in which “everything is subjective, flowing in and through us” (Alford 1997 p 46). This experience can be activated as awe or dread: either wonder at the immensity of the world, or terror at our loneliness and vulnerability within it. The autistic-contiguous position exists, according to Ogden (1992), in a dialectic relationship with other modes of experience, namely the paranoid-schizoid and depressive positions defined by Melanie Klein. Each of these states has its specific functions and anxieties that are ameliorated through the interplay of the three positions. Mental wellbeing is characterized by a healthy tension between the three modes, whereas psychopathology ensues at “a collapse of the dialectic in the direction of one or the other of the modes of generating experience (Ogden, 1992 p 4).

Exposure to betrayal and violation, particularly in infancy and early childhood, exacerbates autistic-contiguous anxiety, giving rise to a “nameless” or “formless” dread (Ogden 1992, p 39). “Malignant” trauma refers to the use of violence by traumatized perpetrators to evade and evacuate this dread into others (Grand, 2000). In this malevolent enactment of autistic-contiguous anxiety, the violation of the bodies of other serves multiple purposes: the pursuit of sensation to create a sense of containment and domination, the warding off of primitive anxieties of powerlessness and disintegration, and the generation of momentary connection between the disavowed, traumatized “no-self” of the perpetrator and the victim in whom they have elicited the same loneliness and fear (Grand, 2000). Alford (1997) explains that “[w]hat

distinguishes sadism from aggression is not the sexualization of domination and destruction but the sadist's intense identification with his victim" (p 27). Sadism is the "joy of having taken control of the experience of victimhood by inflicting it upon another" (p 28).

Emanating from a wordless but primal fear, this evil is enacted dissociatively and thoughtlessly, as the perpetrator embodies what he cannot conceptualise or articulate.

Grand (2000) describes malignant trauma more fully as a "malignant dissociative contagion" because the dissociative embodiment of evil is so often attended by its disavowal and forgetting. She observes that the violence that seeks vitality through the evacuation of dread into and upon others brings about disorientation and confusion in those who are exposed to it, whether victim, perpetrator or bystander. In her account, collective failures to enforce accountability for evil originate within an "elaborate interpersonal and intrapsychic collusion between perpetrators and bystanders" (Grand, 2000 p 11) located in a shared intolerance of autistic-contiguous anxiety. Thus, the same "catastrophic loneliness" and "formless dread" of human vulnerability and finitude that prompts evil also results in its denial. Within this relational matrix, the perpetrator's insistent and often outraged denial of their own perpetration takes on an extraordinary salience. The victim, treated as a vessel for the intolerable dread of the offender, can find herself the target of the evacuative dread of bystanders and society as a whole, which seeks to disappear the existential threat posed by the awareness of evil by scapegoating and attacking the victim. Her attempts to publicly register her victimization becomes instead the occasion for the renewal of processes and structures of humiliation and degradation. The circularity of traumatized violence, its denial and re-enactment is the "reproduction of evil" (Grand, 2000).

The malignant trauma of ritual abuse

The theorization of malignant trauma offers important insights into the dynamics of ritually abusive families, in which children are compulsively abused from birth, frequently by relatives who were themselves subject to similar maltreatment (Schwartz, 2000). This malignancy is illustrated by the following excerpt from an email by Lily, a middle-aged

Anglo-Australian woman who recounted ritual abuse by her parents and extended family. Lily had received comprehensive mental health treatment for dissociative identity disorder at the time of her research participation and was comfortable discussing most aspects of her life to date. In my ten years of research with ritual abuse survivors, Lily is one of few interviewees to discuss her own perpetration in any detail. She focuses in this email on how her own victimization in “programming” (a word commonly used by survivors to refer to the use of torture to reshape personality and behavior in ritual abuse) created the circumstances in which dissociated parts of her became an active participant in the victimization of others. She wrote:

“Programming is about total control of mind, body, spirit/soul, development and dissociation. Yet it not just about control, not even mainly about control. It is about power. It is about destruction. And I wonder if it is also an act of worship or a systematic way of destroying the “fruits of the spirit” (peace, joy, tolerance, love etc.) and instilling new ones (fear, hatred, insecurity, anger etc.) Programming seeks to destroy love, hope, trust, belief in the world, belief in God, belief in self. It seeks to destroy any sense of core goodness and of God/love/light being within us.

For me my core programming was that I was poisonous. That thick, black, vile, putrid poison oozed through my veins and through my spirit. Anyone who loved/cared/touched me or me them would be poisoned, polluted and die.

Of course this is effective for control and keeping me in the cult but I think more than that was the enjoyment of the power of completely shattering anything that could be viewed as good or positive.

Programming must shatter the life force of a person, their sense of volition, autonomy and self respect. It must shatter hope. The victim must know they are absolutely nothing.

It is also a sophisticated form of mind fuck. It takes what a person knows or intuitively to be good/true/real and proves them wrong. Good is bad. God is bad. Family is bad when it is good and good when it is bad and evil and abuse is love, etc.

I wonder too if the power that comes from being a programmer is 1. sexual 2. a defence against their own powerlessness. As I read the things I have written from some of my perpetrator personalities [in therapy journals] I can feel the seduction of it. It is erotic, sadistic, omnipotent. It is a surge of energy that pulsates throughout my body that is strongly sexual and I feel indomitable and full of contempt for all who are weaker than me. Truly, I can understand why people would choose to go with that energy and its illusions.

[...] In summary I think programming may well be more for the perpetrator of it than the victim in terms of control, gratification and a sense of omnipotence. I wonder if there is a theology that accompanies it and if it is a form of worship and/or initiation.”

Lily’s account is highly evocative of the transition from autistic-contiguous anxiety to the perpetration of “evil” through the evacuation of dread, and the associated experiences of narcissistic omnipotence. Ritual abuse survivors describe, with remarkable consistency, a self-conception of themselves and their bodies in terms of decay and foul fluids; in Lily’s case, a “thick, black, vile, putrid poison” that “oozed” through her body and mind. This self-conception is grounded in autistic-contiguous fears of an uncontained, degrading body, marked by “terrifying feelings that one is rotting ... that one’s saliva, tears, urine, feces, blood, menstrual fluids, and so forth are leaking” (Ogden 1992, p 68). Such embodied experiences of a disintegrating self are actively reinforced in ritual abuse through coerced contact and ingestion of taboo substances such as faeces and blood (Salter, 2012). Lily observed that this dehumanisation has the effect of normalizing and justifying further degrading abuse, however she also describes the experience of being invaded by the

evacuated dread of the perpetrators: their “fear, hatred, insecurity, anger”. The consequence is the “soul murder” identified by Shengold (1989), in which child sexual abuse constitutes an attempt to “eradicate or compromise the identity of another person” so that the victim remains “in large part possessed by another, their souls in bondage to someone else” (p 2).

The resultant “catastrophic loneliness” (Grand, 2000) is evident in Lily’s anguished description of total abandonment. She provides a comprehensive list of the good objects that are corroded and fail in the wake of malignant trauma: peace, joy, tolerance, love, trust, light, goodness, truth, reality, family, belief in the world, belief in God, belief in self. The “absolutely nothing” that remains after ritual abuse then serves as the grounding for the reproduction of evil. Children are routinely forced to sexually harm other children in the context of organized and ritual abuse (Salter, 2013). However, over time, the sensation of sexualized perpetration (what Lily calls the “surge of energy that pulsates throughout my body”) provides a soothing container for anxieties of disappearance and non-coherence, while this dread is disavowed and projected into another who is attacked as a symbol of “powerlessness” and vulnerability. The “seduction” of evil is “erotic, sadistic, omnipotent”: weakness and loneliness is transmuted through perpetration such that, as Lily says, “I feel indomitable and full of contempt for all who are weaker than me”. Such reflexes are enforced in family cultures of sexual violence, where, as Schwartz (2013, p 11) puts it, the “[e]roticisation of power and cruelty may become a “stabilizing” focal point”. The psychological integrity of traumatized perpetrators may come to depend upon the perpetual ejection of primitive autistic-contiguous agonies into others as external repositories for disavowed affect (Schwartz, 2013 p 70). Simultaneously, this malignant trauma is not cognizable by the victim-perpetrator, who is profoundly dissociated from her own violence. As Lily makes clear, she did not perpetrate, but rather, parts of her did.

In the absence of external intervention, ritual abuse fuels an intergenerationally transmitted system of sexual violence, in which parental and familial interaction provide the medium for the re-enactment of early horrors. This violence produces an experience of dread for the

victim but an intense sensation of potency and significance for the perpetrator. This split experience arises from the dual nature of the autistic-contiguous mode, which is not solely the root of dread. It is also “the realm of the most profound experiences of meaning and vitality, a realm religion seeks to tap and articulate in symbolic form” (Alford 1997, p 45). In ritual abuse, meaning and vitality is experienced through the violation of others. This is why Alford (1997) calls evil a form of “cheating”, since it attempts to harness the vitality of autistic-contiguous experience while “avoiding its price, an awareness of human pain, vulnerability and death” (p 10). This form of cheating, of course, does not work. Ritually abuse groups are characterized by the maintenance of delusional beliefs that, for instance, their ceremonial tortures can prolong life or ensure immortality, alongside the inevitable aging, sickness and death of perpetrators. However these delusions are animated by the intense pleasures and vitality of perpetration, which in extreme abuse can take on mystical or spiritual qualities that Lily associated with “a form of worship and/or initiation”. The elaboration of evil into a duty or right of metaphysical significance is a particular hallmark of ritual abuse (Salter, 2012), providing group practices and structures for the experience of autistic-contiguous awe through sexualized violation and invasion.

The invisibility of ritual abuse victimisation

The intensity of media focus on ritual abuse and associated claims of “false memories” have diminished over the last two decades, linked to growing awareness of the many different forms that child sexual abuse can take, and the significant failures and sometimes complicity of religious and state authorities (Salter, 2017). However, it is notable that the invisibility of ritual abuse persists in a way that is unique in the field of child sexual exploitation. Despite the heightened visibility of the sexual abuse of children for profit and other gains, and the manufacture and distribution of CEM, ritual abuse remains overlooked in research, policy and practice. The invisibility of ritual abuse cannot be explained solely by the dynamics of disbelief and backlash, since other forms of child abuse previously dismissed as “urban legends” – for example, sadistic child abuse and the existence of “snuff” movies – are now widely recognized. This section explores how the concept of malignant trauma can explain

the persistent erasure of ritual abuse from awareness, even as ritually abused children and adults surface in multiple contexts, including child protection investigations, school and mental health services.

The example of Emily illustrates how the invisibility of ritual abuse is psychosocially produced. Emily was an Anglo-Australia woman in her forties who, at the time of interview, was in treatment after a recent diagnosis of dissociative identity disorder. She described her adult life as happy and functional until a few years prior to the interview, when she had been mugged while jogging in a local park. She had frozen and dissociated during the incident, entering into a period of acute anxiety and depression. While she was receiving mental health care, her brother explained that he was also in therapy. When Emily asked why, he began to discuss a childhood she could not, initially, remember: one in which she was extensively abused by her parents. Emily was shocked to realize that she had no memories prior to her early twenties, however, as she slowly began to recall the conditions of her childhood, this new family history was expanded upon by her brother.

“[My brother] was in therapy and he said he was processing a lot of stuff about Mum and Dad. And at that stage, I said, "What do you mean, about Mum and Dad?" He goes, "Emily, you've got to remember how they treated you." His therapy was around sort of survival – survival guilt. Because his issue was the way I was treated, not what he, even though he, you know, was abused. But he had a lot of processing to do because of why, why I was treated the way that I was.

[...] He said, “I didn't want to tell you, because your life was so good up to now, but now we think you need to start, you need to realize what was happening when we were growing up”. So he started helping me, like introduced things to me, but I didn't remember any of it. But then, yeah, then I started remembering without him.”

In interview, Emily explained that her mother and father were involved in an extensive network of sexual exploitation that included ritual abuse and the traffic of children for abuse 'parties' and the production of CEM. Emily recalled spending her early childhood living in the garage separate to the family home, where she was routinely sexually abused by her father and his friends. She said:

"They treated me terribly, I didn't eat properly. I had to use, go to toilet on the newspaper. I didn't get to shower, the only time I got washed was so Dad could abuse me."

Despite the appalling conditions in the garage, Emily's parents were well off and she attended a local school, where her absences, injuries and infrequent washing raised concerns amongst teachers. Emily and her siblings were eventually subject to a child protection ruling and she recalls spending periods of time in foster care before being returned to her parents. However, her family's wealth and the trappings of middle-class attainment shielded her parents from further scrutiny or the permanent removal of their children. Emily recalled:

"I had a girlfriend that I grew up with, her parents adored my parents. They had dinners and whatever together, all the normal stuff. And she always envied our lifestyle, because we lived in a big house, we traveled. She doesn't know, but I was always envious of her because her mum was at every tennis match, and every sports event. My parents never attended, never came to school things, never showed an interest."

The extremity of Emily's abuse was so discordant with the middle class norms of her community that teachers, child protection services, and family friends never suspected the extent of Emily's exploitation. However, the underlying logic of ritual abuse is not discontinuous with dominant social and economic structures. As Schwartz (2000, p 74) observed, ritual abuse "always involves economics" in the sense that it is "inextricably woven

into the fabric of the power and economic basis” of illicit markets. During ritual abuse, Emily was trained to be highly compliant to adult sexual demands, which was further exploited by her father for profit and in the furtherance of business transactions. On several occasions, her father administered her a sedative and she would “wake up” in a particular hotel where she would be “auctioned off” alongside other children. She said:

“I always saw lots of money, lots of money. I'd always remember it's so much money. Money would change hands if I stayed for an hour, like in this room, like I said, I was getting dressed, I could see them exchange money, I always wondered when they were always going to give me some!”

Enmeshment in ritual abuse typically results in a dissociative disorder, and so victims have fragmentary or compartmentalized awareness of the abuse and limited capacity to disclose. This dissociation is reinforced by systemic and social responses such as those narrated by Emily above, in which the family’s pseudo-normal façade was accepted as authentic even by those teachers and social workers who had detected some evidence of abuse and neglect. Liberal norms of familial privacy and class structures ensured the opacity of her abusive family arrangements, while the scale of her abuse was beyond the prescribed understandings of ostensibly protective agencies. The development of a dissociative disorder parallels the denials of responsibility and refusals of recognition evident amongst Emily’s parents and co-perpetrators, and in their social and community context. In this process, Emily not only dissociated her experience of abuse, but remained unaware of the mechanisms of obedience and sadistic re-enactment recessed within the disavowed terror and loneliness of her brother and herself.

Following her brother’s disclosures, Emily’s memories of childhood began to return spontaneously. She was eventually diagnosed with dissociative identity disorder and begun receiving regular trauma-informed psychotherapy. Fragments of memory began to coalesce in which her brother’s attempts to protect her as a child were undermined by her father, who

forced him to abuse her. When he became a teenager, his sexual abuse of her became routine. Even as he supported her recovery, Emily realized that the family culture of ritual and sexual violence was being reproduced by her brother. He evinced the startling, unpredictable shifts of profoundly dissociative perpetration: thoughtful and helpful one moment, and manipulative and sexually violating the next. She said:

“My brother’s still dangerous. We’ve gone places, he’s asked me to go, and he says things to me, and he’s raped me. He uses weird phrases, that cause me to think about something. Even though the family abuse has stopped, he’s still trying to get me to do weird stuff. Yet he was, he was the one that told me a lot of how this all started, when I was in the hospital, and he thought I wasn't recovering quick enough from the robbery.”

The invisibility of ritual abuse is thus a product not only of social collusion and disavowal but of the hidden instantiation of this collusion within psychic arrangements and interpersonal relations. Emily and her brother maintain ostensibly functional and outwardly facing selves, capable of working, interacting and socialising, and demonstrating considerable empathy and support for each other. Simultaneously, her brother harboured adhesive, perpetrating states that emerge to purge him of the dread of their shared childhood terrors through the manipulation of Emily’s own dissociated responses. At the time of interview, Emily was only beginning to grasp the extent of their enmeshment. She was uncertain as to whether she had truly broken free of ritual abuse, or whether her brother’s persistent and demanding contact with her was indicative of more revelations to come. In interview, she recounted multiple missed opportunities for the detection and disruption of her abuse throughout her childhood. However, systemic, social and individual refusals to acknowledge the realities of human cruelty intersected to conceal her abuse within normative familial, social and economic structures, enabling the malignant trauma of ritual abuse to reproduce itself intergenerationally via disavowed dread.

The enforced disappearance of ritual abuse

In Emily's example, it is apparent that it is not only individuals who engage in projected and evacuative reactions to dread. The responses of bureaucracies, services and systems when faced with evidence of evil directly parallels and reinforces the responses of ritual abuse survivors, as was evident in the failure of Emily's school, community and social workers to identify the extent of her abuse. Schwartz (2000, p 122) argues that:

“DID patients live by the same rules that society teaches the rest of us – ignore bad things, pretend they are not real, create amnesia, call them by another name and they will go away, pretending something never happened and it didn't. This strategy is taught directly or indirectly by the perpetrators, cultivated to survive the abuse, and reinforced by the cultural models of disavowal and minimization.”

This parallel process was described in detail by Maryanne and Kelly, who I interviewed together at a sexual assault service as part of a qualitative study into ongoing organised abuse in adulthood. Their experience highlights the impact of official and unofficial prescriptions that delimit recognition of extreme trauma and abuse even amongst those agencies and professionals tasked to respond to interpersonal violence. Maryanne was the manager of the service and Kelly was the clinical coordinator. When Maryanne first came to the service, it was struggling with a high caseload of ritual abuse clients and the resultant vicarious traumatisation of staff. There was conflict with their funding body whose policy framework assumed that women experiencing prolonged trauma in adulthood were victims of domestic violence, and did not recognize the specific problem of organised and ritual abuse. Stabilising the service and mending relations with the funding body required the streamlining of ritual abuse work, to be undertaken by designated specialist staff, as well as the removal of references to ritual abuse from service paperwork. Maryanne said:

“[When I joined the agency] I changed all of our paperwork, which used the term “satanic ritual abuse” to say “organized sadistic abuse” and I’ve figured that covered everything. After all, some of it’s not ritualized. But some of it is really ritualized.”

This compromise did not reflect a disavowal or trivialization of ritual abuse on Maryanne’s behalf, but rather her practical recognition of the need to adopt terminology that would restore trust and communication with their funding body. In interview, Maryanne and Kelly discussed their considerable shared learnings about ritual abuse in their previous and current professional positions. The seriousness with which they took ritual abuse contrasted with its total disappearance from the public language of their service, including in their communication with other agencies and with government. In the following conversation, Maryanne and Kelly discuss the different euphemisms they use for ritual abuse and the failures of funders and policy makers to recognize its distinctive complexity and severity.

Maryanne: “Ongoing and severe organized abuse” and “sexual assault” is what I tend to use, those sort of words [instead of ritual abuse].

Kelly: Mmm hmm. And sometimes you’ve even got to leave out the “organized” bit depending on who you, you’re doing the advocacy with.

You’ve got to just go with the “complex, severe complex childhood and current trauma”. “Historical and current trauma”. Sometimes you’ve got to be really, really careful.

Maryanne: Because we are still in a society who balks at rape, let alone other things. I was just in a meeting the other day and got an example of an ex-husband and a group of organized people coming around to her house where she lived and regularly sexually assaulting her. I had to explain the difference between organized abuse and our usual domestic violence framework in terms of getting the woman out of the house to safety. And how sexual assault is different in terms of the intervention that’s required. Because often the person’s

living in the house and the perpetrators come in and then leave.

And I was trying to explain this actually to our funding body, in terms of, you know, we have a family violence framework, but this dynamic that we're managing in the sexual assault service is different to what you're responding to in domestic violence. And they're all just like ... you know, they don't get it.

And so, you water down, and water down, and water down your language, but we have, we always recognize here that we have a stranger element of, of, you know, or a darker element of what we have to deal with and what comes to the fore in, in other services that are dealing with, you know, domestic violence. Yet it all falls under the same framework.

In terms of, you know, most people are born into the families where this happens, it's parents who are involved, and then it's a broader group that, you know. So, even though there are cross-overs into, um, into what could legitimately be dealt within a domestic violence service, they're not responding to it, or they're not hearing about it.

For Maryanne, meeting the needs of survivors of ritual abuse calls on her to “water down, and water down, and water down your language” in her role as manager in order to avoid stoking the confusion and bewilderment of funders and stakeholders. She is obliged to perform this “watering down” within sanitized policy and funding frameworks whose partial recognition of generic patterns of interpersonal violence disallow the complexity and extremity of ritual abuse to surface. Just as ritual abuse survivors are forced to act as containers for the dread of perpetrators, and may be shamed and attacked by bystanders who cannot tolerate even vicarious exposure to this dread, Maryanne's service was also obliged to act as a vessel for the “darker element” of sexual violence while maintaining the appearance of normalcy. Providing care and support to ritual abuse survivors was contingent on ensuring that their service did not disrupt the carefully constructed and maintained ignorance of ritual

abuse evinced by the government and associated agencies. They knew from experience that attempts to fully articulate the severity of ritual abuse would rebound back upon the service. As Maryanne points out, not all cases of organised abuse involves ritualistic activity. However, the misuse of ritual is a consistent marker of the most extreme forms of child maltreatment and exploitation (Salter, 2013). The circumstances in which such maltreatment cannot be named are necessarily circumstances in which such maltreatment is likely to continue. For Maryanne and Kelly, their careful management of appearances was a necessary strategy in securing the future of their service and safeguarding their ongoing work with ritual abuse clients, but at the cost of leaving undisturbed the ignorance and intolerance of government bodies that maintains the basis for the reproduction of evil.

Disrupting the reproduction of evil

Grand (2000) appears somewhat pessimistic about the prospects of interrupting the metastases of malignant trauma. At times, she appears to deny that evil could ever be adequately cognized let alone addressed: “What the tongue cannot speak and what reason cannot comprehend, what is absolutely certain and absolutely in doubt: this is the relational nexus of evil” (Grand 2000, p 37). It is the very fact that evil emanates from a place *prior to* language and conceptualization that lends it such uncanny and elusive qualities, and tends towards obfuscation and reproduction. Psychotherapy can support traumatized clients to face their finitude and existential agonies through the lens of reflection and symbolization rather than enactment and wordless dread, but Grand (2000) did not expound upon a means by which the relational matrix of evil might be transformed. In contrast, Alford (1997) offers a more optimistic assessment of the capacity of individuals and society to transmute malevolent impulses born from autistic-contiguous terror. He acknowledges that the “experiential ground” of evil is presymbolic or nonconceptual: “People live an experience of evil, and it lives them” (Alford, 1997, p 4). However, he suggests that “[a]spects of this experience can be put into words, especially if people are encouraged to try” and that “[i]t may be that talking about evil is the best, possibly the only, alternative to doing it” (Alford 1997, p 4).

In his research with prison inmates, Alford (1997) argues that their violence was linked to their constrained abilities to symbolize and imagine, rather than *do*, evil. Giving symbolic form to evil – whether through words, activity, art, music and so forth – can successfully discharge the anxieties that might otherwise be channeled into the enactment and infliction of evil. Early trauma and deprivation can, in some cases, deprive children of the cathartic functions of imagination. Stein (2013) proposes that memories of abuse can lead to an experience of imagination as “intrusive and persecutory”, such that the abused child (and then adult) no longer has the capacity to resolve tension and anxiety through fantasy and creativity (p 68). As a result, dread and discomfort can only be discharged *behaviourally*; in the case of malignant trauma, through the infliction of dread on another. Alford (1997) adds that a major contributor to evil is also the hollowing out of cultural resources to represent and symbolize the basis of dread: that is, the inevitability of tragedy, loss and suffering. There is now an extensive body of cultural theory and research documenting the pervasive idealization of individual autonomy, choice and agency in consumer culture, disallowing personal recognition of the unchosen realities of interpersonal harm and suffering (Burkett & Hamilton, 2012; Harris, 2015; McRobbie, 2008). In a compulsively optimistic and consumerist culture, the stigmatization of passivity, failure and victimhood provides the cultural architecture of evil: “Better to be the evildoer than the victim if one has to choose, as so many feel they must” (Alford, 1997 p 17).

In this sense, Alford (1997) argues that the problem of evil can be resolved within the “depressive” position, the third position in a dialectic triangle with the autistic-contiguous and paranoid-schizoid positions. Whereas the autistic-contiguous position barely registers others except as surfaces and containment for a rudimentary self, and the paranoid-schizoid position experiences others primarily as idealized or hated objects, the depressive position integrates these conflicting impulses and develops recognition of the other as distinct and separate subjects. Within this more reflective mode, symbolization and intersubjective forms of relationality are possible, capable of acknowledging finitude and loss while containing and discharging the anxieties and tensions that result from it. In the depressive mode, the

symbolisation rather than enactment of dread becomes possible. This observation would lend itself, of course, to recommendations of the “talking cure”; that is, the relational transmutation of autistic-contiguous pain into recognizable and grievable forms of loss and regret through psychotherapy. However, as the analysis above shows, dread is also active in institutions, systems and society at large, and it is the pervasiveness of dread that ultimately provides the accelerant for the untrammelled malignancy of trauma.

For this reason, the disruption of malignant trauma is dependent upon social change and, ultimately, political struggle, including the generation and promulgation of cultural and symbolic resources capable of containing and stabilizing recognition of human cruelty and vulnerability. Arguably, we are already in the midst of such a project. Almost two decades ago, Schwartz (2000, p 107) was prescient in his claim that “as denial recedes and tolerance for knowing about atrocities increases, more evidence is likely to surface about the widespread sexual abuse and sale of children”. Indeed, recognition of clergy abuse, online child abuse networks and global demand for CEM has considerably expanded the scope of public awareness and willingness to address the diversity and severity of child sexual abuse. Despite these developments, ritual abuse remains recessed within the psychosocial structures of denial and dissociation as perhaps the most visceral enactment of primal agony and cruelty. Facilitating the materialization of ritual abuse as a matter of concrete public concern requires the cautious articulation of its horrors but also the containing assurance that victims can be restored to health, that perpetrators can be brought to justice, and that the blurred victim-perpetrator boundary in ritual abuse will be thoughtfully and compassionately addressed.

The possibility of transmuting autistic-contiguous dread via symbolization and creative reworking offers more than protection from evil; indeed, it opens up a space for profound reverie which in turn can animate moral projects and impulses. In the following quote, Anne nominated a sublime dream in her mid-20s as a pivotal moment in her life:

Once I had this dream, I called her a “pearl lady”, I guess it was an angel because I looked to see her feet and I couldn’t see her feet. And for two or three days I was absolutely uplifted and inspired. And she said to me, “You have never experienced human love. And your thoughts and your feelings do matter.” Now, that was such a profound and important thing to be told. And yet that happened in a paranormal dream.

[...] Until then, I’d only been taught that our physical survival mattered. I had to be grateful for the fact that I was physically alive, that was all that my parents had sent me off into the world with. The direction was, “You are alive. Be grateful for that.” And that dream gave me the belief that what I think, and what I feel, are important. And that’s when I tried to start constructing a set of values for myself.

Anne was in her forties at the time of interview, and living in hiding after her son had disclosed ritual abuse by Anne’s parents. Anne also recalled organized and ritual abuse by her parents and their friends when she was a child, although she hadn’t believed her memories until her son described similar experiences. Up until the ‘dream’ described above, she had worked excessively long hours in low-wage jobs while also tending to her parent’s wishes. The dream denoted the moment at which she began to consider that her life had more value than what she could bodily do for others. It is notable that many of my interviews with ritual abuse survivors are marked by descriptions of unsurpassed experiences of wonder and awe. Moments of fusion with religious figures, transcendental dreams or profound affinities with nature become touchstones in lives otherwise bereft of love, often sustaining survivors through periods of profound grief and pain. The awe that is the flip-side of autistic-contiguous dread can provide those feelings of connection and understanding that enable victims to withstand and overcome their entrapment within the reproduction of evil. Throughout Anne’s childhood and early adulthood, the horizon of her experience had been delimited by the “bare life” (Agamben 1998) grudgingly allowed to her by her parents, in which she could hope for no more than mere biological existence and servitude. The moment

at which she was able to symbolize the extent of her loss and loneliness – as the “pearl lady” said, “you have never experienced human love” – was also the moment at which she began to imbue “bare life” with meaning and significance. Facing the dread of human loneliness and powerlessness, made so overwhelming by early and sustained violation, provided access to the other dimension of autistic-contiguous position: an ecstatic encounter with a vast and unknowable universe. Freed of the malevolent projections of ritual abuse, Anne described this encounter as profoundly moral and impelling her towards the development of ethical structures and positions. Similarly, collective recognition of ritual abuse need not be an occasion for shame or loss but rather a shared movement towards moral growth and restoration.

Conclusion

Theories of malignant trauma offers solutions to the gordian knot of ritual abuse, and the specific dilemmas and paradoxes that it poses: How could parents commit such atrocities on their own children? Why would paedophile rings engage in bizarre ritualistic behavior? And how could networks of child torture flourish amidst the surveillance of the contemporary state? This article illuminates the psychosocial structures within which ritual abuse is concealed and reproduced, in which the intergenerational transmission of ritual abuse is secured through projective cruelty in the embodied resolution of autistic-contiguous anxiety. While the ritual and religious dimensions of ritual abuse channels the vitality of the autistic-contiguous mode into atrocity, it remains concealed within the collective dread of perpetrators, victims and bystanders. This study of ritual abuse provides further evidence for the critical importance of addressing the mechanisms and contexts within which familial sexual violence is intergenerationally transmitted. Gentile (2017) observed the focus of psychoanalytic scholarship on trans-generational trauma on the Holocaust and other forms of mass genocide. Despite the existence of “only a handful of articles that describe sexual violence through the lens of trans-generational trauma”, she notes that the majority of cases she observes in clinical work involve “generations of domestic violence, sexual violence and profound neglect” (p 170). With between 10% and one third of therapists reporting contact

with survivors of organised and ritual abuse (Salter & Richters, 2012), identifying and treating familial cultures of sexual violence is vital to the disruption of malignant trauma.

This article argues that ritual abuse survivors are victims of a persistent failure of cultural memory, in which the evacuative responses of perpetrators to dread are reproduced by bystanders and larger systems and processes. The invisibility of ritual abuse is guaranteed by social structures and systems that deny the possibility of the ritualised violation of children, and that refuse to attribute reparative meaning to the struggles of survivors to speak and be heard. In such a context, the malevolent expulsion of dread is multiply determined at the intra-psychic, interpersonal and collective level, of which the dissociation and reenactment of ritual abuse is the inevitable result. The framework of malignant trauma points towards the intersection of forces that are at work in the disappearance and invisibility of evils such as ritual abuse; forces that are grounded in human subjectivity and relationality, and thus present in us all. Indeed, Alford (2016) argues that trauma is irreducibly social *and* psychological, in which the risks, impacts and understandings of violence and loss are mediated by cultural and political processes. The solution is to craft symbolic resources at the individual and collective level that attribute significance to tragedy, loss and vulnerability as inevitable features of human existence, rather than as embarrassing and avoidable contingencies. The experience of ritual abuse survivors suggests that conceptualisations of abuse and trauma capable of withstanding evacuative impulses may also prompt renewed ethical commitments to the disruption of evil. At the individual and social level, it would seem that the symbolization of dread is intimately involved with moral growth and the containment of malignant trauma.

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