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# Expressive Behavior and the Recovery of a Traumatic Memory: Comments on the Videotapes of Jane Doe

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I am very grateful to David Corwin for inviting me to participate in this study of the interviews with Jane. It is an extraordinarily important record that can help us better understand emotions, trauma, repression, memory, the importance of other than verbal clues, the robustness of personality, how to conduct interviews, and good ethical practices. In addition to my more general comments, with which I begin, I have also provided specific comments on emotions and expressive behaviors I observed in the videotape, which are contained in brackets in the transcript. At the end of my general comments I explain how I interpret some of these expressions.

Before I begin I should explain my background, to enable readers to understand the framework and perspective I bring to bear. I was trained as a clinical psychologist and was a psychotherapist for 3 years; however, I have not done clinical work for more than 30 years. Instead, my time has largely been devoted to the study of expressive behavior—how emotions, attitudes, personality, psychopathology, and deception may be revealed in facial movement, gesture, and voice (see Ekman, 1976, and Ekman & Friesen, 1972, for body movement research; Ekman, 1992a, 1993, for facial expression; Ekman, 1992b, on deception). In recent years I have been teaching clinicians how to become more sensitive to these expressive behavior signs. It is from this background and from repeated viewing of the videotaped interviews, both at real time and in slowed motion, that I provide my remarks.

## GENERAL COMMENTS

These transcripts are a model for how to conduct interviews with children and adolescents about traumatic events, specifically when there is a question of whether or not abuse has occurred. Corwin shows us

how to ask questions without leading or suggesting an answer, how to ask questions with sensitivity and understanding. The care taken in how Corwin words his questions and the usually spontaneous, very rapid replies that burst forth from the 6-year-old Jane allow us to have confidence in the truthfulness of Jane's statements in the first interview.

Corwin is also a model for how to consider ethical matters. His decision to contact Jane when she was 16 to determine if she would continue to grant consent for use of the videotape made of her when she was 6 is remarkable. It is exactly what should be, and rarely is, done. It is similar to the situation I faced 35 years ago when I first began filming interviews with psychiatric inpatients. I asked them for consent to film and to use those films in teaching and research. But can a hospitalized psychotic patient give truly informed consent? Even the neurotic outpatient may, no matter what he or she is told, feel coerced into consenting, fearing that refusal could jeopardize his or her treatment. For that reason I obtained consent not only at the time of the filming but again after treatment was over.

Jane was a robust, resilient child. If one had not seen the portions of the initial interview in which she describes the abusive incidents, one would not suspect that she had been subject to traumatic events. And again, if one had not seen those sections of the second interview, one would think Jane was a strong, healthy person. Yet we hear from the foster mother that Jane had a difficult, rebellious early adolescence and has been troubled trying to determine what did or did not occur. Further, we see in the initial part of the second interview that Jane has forgotten much of what happened to her.

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My judgment is that Jane is a very strong personality and had great strength before she was abused. It is that strength that allowed her to seek clarification of what did or did not happen to her. A less well-endowed person might have been much more damaged by the very same childhood experiences. Rebelliousness in early adolescence is not necessarily a sign of personality disorder and might have been manifest regardless of whether she was abused. A thornier matter is the fact that she forgot what happened; is this a sign of disturbance or the sign of how a strong personality may deal with a terrible set of events? I think it important to note, in making that judgment, that Jane rather quickly and easily recovers part of her memory, although I will suggest that she remains ambivalent about just how much she wants to know.

Jane is an expressive person who shows her emotions in her voice and face, usually in a way that is consistent with what she says in words. She is a charming and likable person, and this is evident in both interviews. Yet I will explain how her expressive behavior in the second interview suggests that she is unaware of some of her feelings and motivations.

#### SPECIFIC COMMENTS

My comments on the first interview, which are inserted into the transcripts, do not need any elaboration. The nature of her expressions suggests that she is aware of what she is feeling and showing in her face and voice. This is not so in the second interview.

#### *Microexpressions*

Haggard and Isaacs (1966) and Ekman and Friesen (1969) both suggest that very brief facial expressions—lasting only about 1/25 of a second—are indications of emotions that are being repressed or consciously suppressed. The microexpression is a sign of censoring but does not tell us if it is occurring with awareness. We have observed microexpressions in

patient interviews where there is strong clinical evidence that the patient is unaware of the emotions being manifest. We have also observed microexpressions in interviews in which the subjects have been instructed to lie deliberately. When emotions are manifest, in face or voice, whether micro or macro, they do not reveal their target. We may know that someone is angry, afraid, or disgusted, but we do not know from the expression whether it is directed at the

self or at another person, real or imagined, present or not. That must be inferred from the context in which the emotional expression is shown.

Although very brief, a few people can recognize microexpressions when they are observed at real time. I am convinced that in less than an hour's time we can train nearly anyone to see them. We have just conducted an experiment to prove that this is so, but the results are not yet analyzed.

Jane shows a number of microexpressions in the second interview, and from other indications described later, I believe that she is *not* aware of the emotions shown in these expressions. All of my comments to follow are about the second interview. I cannot be certain who is the object of the contempt she manifests at points 1, 2, and 17. The microfear shown at point 7 I believe is her own fear of what she may discover. The contempt shown at point 24 is probably toward her mother.

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#### *Eyelid Closures and Eyelid Flutters*

Charles Darwin, in his book *The Expression of Emotions in Man and Animals* (1872/1998), said,

From the continued use of the eyes, these organs are especially liable to be acted on through association under various states of mind, although there is manifestly nothing to be seen. A man . . . who vehemently rejects a proposition, will almost certainly shut his eyes or turn away his face; but if he accepts the proposition he will nod his head in affirmation and open his eyes widely. I have noticed that persons in

describing a horrid sight often shut their eyes momentarily and firmly, or shake their heads, as if not to see or to drive away something disagreeable; and I have caught myself, when thinking in the dark of a horrid spectacle, closing my eyes firmly. (p. 33)

Darwin's remarks apply to Jane. At points 3, 4, 6, 9, 14, and 25 she shows a long eye closure, but only of one eye. My interpretation of why she closes only one and not two eyes is that she is ambivalent about whether or not she really wants to remember and know what happened to her as a child. These are metaphors for her dilemma, a dilemma I think she is aware of, although I do not believe she is aware of making these expressions. At points 3, 4, 6, and 9, these one-eye closures coincide with her saying the word *remember*. When she says her father said her mother had been diagnosed as multiple personality, 14 occurs with the word *personality*. At the end of the interview, 25 occurs when she says the word *traumatic*, explaining how she gives Corwin consent to use her interviews in teaching so that kids who have gone through traumatic experiences can be helped.

Jane also shows longer than usual closures of both eyes (prolonged closure during a blink) three times, at 10, 13, and 20. I interpret these as signs that she does not want to see what she is talking about—in each of these instances she is describing what her mother has said. I suspect these long closures are signs that she continues to repress some of the memories of what happened to her as a child. I have found long eye closures such as these within clinical cases where repression is occurring and in deliberate lies with normal subjects.

Jane also shows what Mardi Horowitz (1994, personal communication) described as *flutters*, or a series of rapid eye blinks, and which he has considered to be signs of repression. Examining some of his clinical interviews I agree with his interpretation, but I have

also noted flutters when individuals are consciously, deliberately lying. Like the microexpression, the flutter does not inform us whether the censoring is occurring on a conscious or unconscious level, but it does tell us that censoring is occurring. Flutters are shown

at 5, 11, 18, and 19. Examining what is being said when these flutters occur, I found no common theme. Perhaps the fact that the flutters at 18 and 19 are much shorter than the earlier ones indicates decreasing efforts to censor what she knows about her life.

*Holding eyes.* Just at the moment when Jane begins to remember part of her childhood experiences (15), she closes her eyes and holds her eyes with her fingers. Is this a final effort to not see, just as she begins to see what happened? Is it the need to not see what is around her as she focuses on the internal pictures that she so vividly describes a moment later? Or is she showing us that although she sees now her childhood experience, she is not prepared to remember all of it and must still hold back from remembrance much of what occurred?

*Moving emotion.* Jane's emotions are genuine and expressed poignantly. Those who see the videotape are moved emotionally. I have yet to see anyone who does not have a tear in his or her eye when Jane first remembers part of what happened to her and begins to cry.

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#### *Concluding Remarks*

I am very glad that this material is being made available to clinicians through this series of articles. Much can be learned from these transcripts. I have also tried to suggest that the transcripts leave out part of what is occurring, and that in a situation as emotionally charged as this one, with many levels and many likely sources of internal conflicts, to be able to

see and hear the patient, and not just read the words, is especially important.

I hope that David Corwin will continue his work with this patient. Many questions remain unanswered and will only be revealed over time as we can learn how her adult personality takes shape. To have such longitudinal case studies of how individuals deal with emotional trauma is admirable and, as this case exemplifies, of extraordinary importance. I also join Frank Putnam in urging the pursuit of other similar cases, to follow up on the development of children who were abused and who are now adolescents and adults.

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