### **HOLDING THERAPY: PART ONE**

# Introduction to the Special Issue: Part 1

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If there is one take-home message from this special issue on such an important topic, it is the following: The "attachment therapy" promulgated by the Attachment Center of Evergreen, Colorado, and its devotees is **not** derived from the attachment theory developed by John Bowlby and Mary Ainsworth. In fact, this approach is counter to attachment theory along a number of critical dimensions.

For example, the intervention suggests that the problem is inherent in the child, a highly individual notion that is in direct contrast to attachment as a relational process. This dissonance is true whether or not the therapy being described is labeled as the traditional rage reduction approach, or its variations (i.e., holding therapy, attachment therapy, or humanistic attachment therapy).

Matthew Speltz's contribution to this special issue places these attachment therapies squarely within a sociological tradition. This tradition has served as the underpinnings of such "therapies" as the Reunification Church of the Rev. Moon and the ill-fated and now disregarded Synanon program from the late 1960s, which was designed to "break down" adult addicts.

Beverly James was an early critic of rage reduction therapy and its various permutations, and, in her seminal text, she elaborated on this sociological phenomenon (James, 1994). She suggested that mental health practitioners have long held to a hydraulic view of emotional problems. My summary of her perspective is that emotional problems are akin to fluids or pressures that build up and, after a certain point, they become bad things being held inside. The uninformed therapy that results from this viewpoint would be to "get the bad things out." Some of you may remember "primal scream" therapy from 25 years ago (Janov, 1970). This therapy, which still has its followers, is directly related to the hydraulic view.

James views these naïve theories advocating the "discharge of emotions" as an enormous obstacle to thinking accurately about therapy. As you will read in Speltz's description of the process, attachment therapy holds to this emotional discharge view of mental health.

Professionals who work with maltreated children know how challenging many of these children can be, whether in their birth homes, foster homes, or adoptive placements. I personally have found them among the most difficult children with whom I have ever attempted therapy. The increase in orphanage-reared Eastern European children now living in the United States and Canada has also created challenges for therapists. It is difficult to sit in an office with a warm-hearted, well-meaning couple who adopted a child with a lifelong history of neglect, hear their pleas for help, and not wish that behavior change could be more rapid. These factors, in combination with the highly publicized death of a 10-year-old girl while undergoing holding therapy in Colorado (King, 2000), prompted this special issue.

A stunning lack of precision and science abounds in the field of child mental health. The diagnostic labels of reactive attachment disorder and childhood onset bipolar disorder seem to be used indiscriminately and frequently. Attention deficit-hyperactivity disorder (ADHD) is increasingly viewed solely as a brain phenomenon. This is despite the research literature indicating that when ADHD presents in combination with oppositional defiant disorder or conduct disorder in the young child, it frequently means the child has been maltreated or traumatized or both (Ford, Racusin, et al., 2000).

This same lack of empiricism extends to psychotherapy with children. Despite the empirical support for relational approaches, such as parent-child interaction therapy (Hembree-Kigin & McNeil, 1995), or directive approaches, such as cognitive behavioral therapy in the treatment of maltreatment-related symptoms (Deblinger & Heflin, 1996; Deblinger, Lippman, & Steer, 1996), the majority of therapy with children continues to be nondirective and supportive (Friedrich, Jaworski, & Berliner, 1994). I believe that as members of a field, we should strive to practice at the most empirically supported level possible. The absence of empirical support for attachment therapy is another argument against its utilization.

We are privileged to have two outstanding contributors to Part 1 of this special issue. Dr. Rochelle Hanson presents a critique of the RAD diagnosis, the diagnostic category that therapists and service providers often use to validate the child's basic untreatability. Dr. Matthew L. Speltz's paper began as a document designed to educate a judge in Washington State about attachment therapy. As such, it provides an excellent overview of the history of this approach as well as the interventions involved. These authors also present separate critiques of the approach.

In Part 2 of this topic, to be printed in the following issue of the *Advisor*, we include the perspectives of two noted attachment theory experts, L. Allan Sroufe and Martha F. Erickson. Dr. Sroufe is an internationally recognized authority on attachment and one of the investigators of the ongoing, longitudinal Mother-Child project at the University of Minnesota, where one of his collaborators has been Dr. Erickson (example, Sroufe, et al., 1999). The two of them were gracious enough to respond to questions germane to the topic of holding therapy. In addition, I present several alternate perspectives about the assessment and treatment of severely disturbed and maltreated children that supplement some of the therapeutic interventions suggested by Hanson and Speltz. Rounding out the second issue on this topic are papers by Lucy Berliner of the Harborview Sexual Assault Center and Rosie Oreskovitch of the Department of Human Services in Washington State.

I believe that we have brought together some excellent perspectives in these two special issues of the *Advisor*. Clearly, this topic is important to those who work with maltreated children.

This special issue could not have been compiled without the additional input from Lucy Berliner, MSW, and Erna Olafson, PhD. I also acknowledge the influence of Beverly James, MSW, whose work in the field added to the momentum for this issue.

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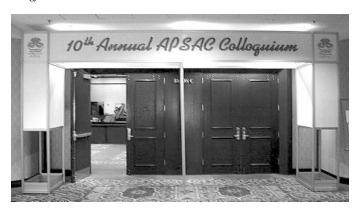
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#### **About the Contributors**

William N. Friedrich, PhD, ABPP, is a professor and consultant in the Department of Psychiatry and Psychology of the Mayo Medical School and the Mayo Clinic. He has developed an integrated model to guide the treatment of maltreated children. One component of this model is parent-child attachment, and a number of attachment-related interventions are suggested in his book, *Psychotherapy with Sexually Abused Boys*, which was published by Sage Publications in 1995.

**Rochelle F. Hanson, PhD**, is an associate professor at the National Crime Victims Research and Treatment Center (NCVC) at the Medical University of South Carolina. Her area of expertise is child abuse and traumatic victimization among children and adults. She is a member of the Board of Directors of the American Professional Society on the Abuse of Children.

Matthew A. Speltz, PhD, is a professor of psychiatry and behavioral sciences in the University of Washington Medical School in Seattle, Washington. He has served as the clinical director of the Child and Adolescent Psychiatry Outpatient Program at Children's Hospital and Regional Medical Center since 1988. He is also the director of the Clinic for Children with Attachment Problems, located at Children's Hospital within the outpatient program. This program provides evaluation services to foster/adopted children and their caregivers; the majority of these children have histories of significant maltreatment and unsuccessfully treated psychiatric disorders. Dr. Speltz has been the principal investigator for three longitudinal research projects funded by the National Institutes of Health; two of these have focused on the development of attachment in young children, including the study of boys with early-onset conduct disorder.

# Greetings from the new Editor-in-Chief:

As the new editor, I invite letters to the editor and brief commentaries from readers about this and other special issues and articles published in the *ADVISOR*. Letters and commentaries can be sent to my address, which is listed in the "Call for Papers" page of this issue.

I'm very pleased to be taking on the editorship and grateful to Terry Hendrix and Ann West for their help, Lucy Berliner for suggesting this special issue, and Bill Friedrich for putting it together.

— Erna Olafson