BOOK REVIEW: TREATING TRAUMATIZED CHILDREN: NEW INSIGHTS AND CREATIVE INTERVENTIONS By Beverly James Reviewed by Neil Schecker, M.D.

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Treating Traumatized Children: New Insights and Creative Interventions, by Beverly James, was published in 1989 by Lexington Books, D.C. Health and Company, Lexington, Massa-

As a psychiatric resident undergoing training in psychodynamically oriented, tertiary care, private psychiatric hospital, I have been impressed with the number of patients who have a history of childhood physical or sexual abuse. Two-thirds of my female patients, one-third of my male patients, and roughly sixty percent of the adolescent patients I encountered during a recent rotation had been severely and repeatedly traumatized as children. Invariably these patients presented with significant character pathology that often overshadowed their other psychiatric symptoms. Their treatment was complicated and multimodal, but rarely entailed a sustained, focal approach to the effects that resulted from the abuse they had suffered. Considering their often unimproved clinical state, or their abrupt termination of treatment, I have pondered whether active exploration of the abusive events and their sequelae would have led to a better outcome for these patients. Left unanswered have been the questions of how to initiate such an active exploration and how to integrate such a therapeutic effort into a comprehensive treatment approach for these difficult patients.

Beverly James has written a stimulating book that details a variety of active approaches for diagnosing and treating patients with abusive histories. As its name implies, her work offers new insights and creative interventions for treating traumatized children. A social worker and family therapist by training, Ms. James integrates psychoanalytic, family systems, and community organization perspectives into a practical approach that is often divergent from theory. She draws on her knowledge of the dynamics of intrafamilial abuse, modern developmental research, and Van der Kolk's work on the biopsychosocial aspects of trauma to encourage a multidisciplinary, holistic approach. Listing the sub-headings of her second chapter provides a framework for understanding the critical aspects of her treatment strategy: returning to the pain; developmentally sequenced treatment; involvement of the child's caregivers; direct, open approach; intense, fun style; multidemensional strategy; hidden, trauma-reactive behaviors; and therapist's responses to children's experiences. Ms. James also provides an excellent

focus on actively developing the therapeutic alliance and strongly encourages clinicians to become familiar with techniques from psychodrama and the creative therapies.

A major portion of the book is devoted to Ms. James' descriptions of nine traumagenic states, defined as emotional conditions that derive from traumatic experiences. With labels such as "self-blame," "stigmatization," and "dissociative disorder" these traumagenic states are offered as guidelines for assessment and the development of treatment plans. They are clinically derived diagnostic categories, with no solid research foundation, and herein lie both their strengths and weaknesses. As Ms. James cautions, these states can serve to organize the clinician's perceptions and thoughts about the abused child, but there are frequent overlaps and partial presentations. While the book's third chapter provides a brief and somewhat confusing description of the characteristic dynamics, psychological impact, and behavioral manifestations for these states, some of the more detailed chapters on these states are excellent. For instance, the large chapter of attachment disorders provides clear differential descriptions of secure, anxious, and distorted attachments; careful attention to reunification issues, especially with regard to the work of agencies; and superb characterizations of children who are clinging-demanding, rebellious, or parentified, with good therapy techniques for each. The chapters on social rehabilitation, integration of traumatizing events, and crisis intervention in large scale disasters are excellent, giving the reader additional perspectives for diagnosis and treatment.

As is perhaps befitting a work that emphasizes a multimodal, holistic approach there is tendency for many of the chapters to have a patchwork quality. At times one perceives a cookbook, gamey style that detracts from the clarity of Ms. James' otherwise comprehensive and engaging approach towards traumatized children. Lacking is a sense of how to integrate this approach towards the most severely disturbed children, particularly those who require hospitalization. Two personal wishes are that the book offered more detailed perspectives on working with adolescents and adults who were traumatized as children, and how to implement the active family treatment efforts when the family is severely dysfunctional or when family members themselves were traumatized as children. Despite these criticisms this is an excellent book that calls on clinicians from any discipline to employ their capabilities for empathy, engagement, compassion, and integration in the service of actively healing the wounds suffered by traumatized children.