

BOOK REVIEW

TRAUMA AND THE AVOIDANT CLIENT:

ATTACHMENT BASED STRATEGIES FOR HEALING.

ROBERT T MULLER (2010) NORTON & Co.

I read loads of psychology books. I like reading them. I read them in preference to novels. This probably makes me a geek. This book, 'Trauma and the Avoidant Client', by Professor Robert T Muller, was a pleasure to read. I even took it on holiday with me to Moeraki, a little seaside village, an hour north of Dunedin. I was sorry when I finished it.

Commonly, I find therapy books repetitive. What is said in twelve chapters could be said in five. "Trauma and the Avoidant Client" is just right. It hits the ground running. The eight chapters are well-written, helpful and relevant and each finishes with a great summary of the main therapeutic points. While obviously strongly embedded in attachment theory and backed up with Professor Rob Muller's research, it is not a tedious theoretical read, and is written by someone with a good deal of clinical skill and knowledge. **This is a book for therapists.**

My clinical and personal experience makes me think being emotionally detached is a pretty common underlying problem in New Zealand, quite under-identified and usually untreated. These individuals typically look pretty together but underneath there is a deep, hidden need which is often neglected or missed completely, even by experienced therapists. Emotionally avoidant clients avoid attachment, closeness and painful feelings. This book helps therapists feel confident to dig further in our attempts to help these clients. Professor Muller asks:

How can clinicians draw out and engage individuals who aren't so sure they want to be helped and cannot admit their own vulnerabilities?

How do clients who have suffered painful attachment experiences learn to trust their therapist, and talk honestly about their hidden pain?

I guess I should be upfront about where and how I work as this book may not be everyone's cup of tea. I work in private practice and have eighteen years experience working as a clinical psychologist. A lot of my clients have severe trauma histories but most of them are just "everyday, normal Kiwis". After reading this book and hearing Professor Muller talk at the recent NZCCP conference in Dunedin, I realised how many of my high-functioning clients may have more subtle, avoidant styles of attachment. While many of my clients have developed autonomy, they have more difficulty with emotional intimacy. I'm thinking of clients such as a lovely but lonely professional woman, an elderly retired farming couple with relational issues, and a perfectionist, successful businessman who wants to be a better dad. Upon reflection, I thought about half the people who walk through my door might have some issues around emotional detachment.

Professor Muller's book is based on attachment theory principles and these are nicely woven into the first couple of chapters. Chapter One covers what avoidant defences look like. Typically these individuals minimise their attachment needs ("mum was there but I probably didn't turn to her much"), tend to use intellectualised speech or activity, try to end comments on a positive note, talk around important issues, show a tendency to cut people off in relationships, but pride themselves on their self-reliance, independence, strength and perceived normality.

Chapter Two is about activating the attachment system and challenging the client. Professor Muller encourages us to use the therapeutic relationship as a way of understanding an individual's relational difficulties. Goals in therapy include taking interpersonal risks, expressing feelings, mourning losses, facing vulnerabilities and clarifying the client's motivation for treatment. Understandably, avoidant or dismissive clients resist attachment in therapy, finding this an uncomfortable way of being, particularly early on in therapy but by building and utilising a strong therapy relationship, Professor Muller suggests we can support the client to tolerate more emotional vulnerability, gently challenge the client's defensive strategies, and deepen their capacity for healthy attachments.

This book includes lots of examples of therapy sessions. The style of questioning is reflective and client centred. The therapist does very little talking and largely tries to "keep out of the way" of the client's processing while encouraging them to connect with the more emotional, vulnerable aspects of themselves.

Therapist sensitivity and attunement in this model are paramount. Signs of client vulnerability (e.g., a break in the voice, the client taking a big breath in, tears, or broken, unclear narrative) are discussed. While the client may want to play down these feelings, the therapist is supported to 'approach versus avoid' and help the client to reflect on, and bear with, their more vulnerable feelings.

Chapters Five and Six are focused on building and understanding the therapy relationship including transference. These are particularly useful chapters as they provide the therapist with the necessary framework and subsequent courage to push forward even when the client is pushing us away. Emotional constriction is common in these clients. Pushing others away is often second nature and helps them avoid 'leaks' of weakness. Self reliance provides a sense of control, free of hurt and rejection. Self-sufficiency brings with it the tendency to put down sentimentality and to regard tears as childish or weak. In therapy, they may apologise for crying or make comments such as "*I feel stupid for saying this*". They may criticise the therapist in an effort to ward them off dangerous feelings ("*you psychologists are obsessed with feelings*"). The therapist is urged not to 'buy into' their avoidance but gently challenge the defences and help the client re-connect to their more vulnerable feelings.

Chapter Seven is a case study which combines many of the treatment strategies and provides pages of transcripts of 'Madeline' and Professor Muller's therapy sessions.

The final chapter talks about ending therapy. Many clients in this group try to stop therapy prematurely and this chapter provides warning signs of this. Professor Muller also covers strategies to make premature termination less likely and raises issues around therapist anxiety (hanging on to the client) and therapist avoidance (wanting to drop the client).

Given the book's title, it is tempting to think this is a book more for those who work with severely traumatised individuals, but I suspect it is a book for us all.

Books can be purchased on Amazon.com for about \$25 US. A very good buy.

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