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**DELIVERED VIA E-MAIL AND FEDERAL EXPRESS**

**FEBRUARY 13, 2003**

**TO: SENATOR PARLEY HELLEWELL**

**FROM: R. CHRISTOPHER BARDEN, Ph.D., J.D., LP**  
B.A. - Child Development, Summa Cum Laude - University of Minnesota  
Ph.D. - Clinical Psychology, Psychotherapy, Scientific Methods  
University of Minnesota  
University of California, Berkeley  
Palo Alto V.A. Medical Center/ Stanford Univ. Medical Ctr  
J.D., cum laude - Harvard Law School  
Recipient of 2 National Research Awards in Child Psychology  
Invited Speaker/Consultant to the National conventions of the  
American Psychiatric Association, the American Psychological Association,  
the American Bar Association and the U.S. Surgeon General's Conference.  
Published in, and/or served as an editor or reviewer for, "A" list  
journals and texts in psychology, medicine and law including Developmental Psychology, Child Development, Psychological Bulletin, Ambulatory Pediatrics, Advances in Child Clinical Psychology, the Journal of Personality and Social Psychology, the Journal of the American Academy of Psychiatry and the Law, the Journal of Plastic and Reconstructive Surgery, the Harvard Journal of Law and Public Policy, and the Harvard Journal on Legislation.  
(The full resume can be viewed at [www.KidsComeFirst.info](http://www.KidsComeFirst.info) ).

**RE: Answers to your questions and statements re: "holding therapy"**

Dear Senator Hellewell,

I am in receipt of your recent letter including your questions and statements regarding so-called "holding therapy."

I am grateful for this opportunity to expand upon my earlier opinions with regard to so-called "holding therapy" and to demonstrate that ALL OF MY OPINIONS AS EXPRESSED DURING THE COMMITTEE HEARINGS WERE AND REMAIN COMPLETELY ACCURATE.

I also hope and pray that the detailed information I have provided will increase your understanding of the nature and consequences of science and

junkscience. Knowing the truth about the dangers of quack (unscientific) "therapies" is essential in making informed decisions regarding health care policy.

Having expended the time, energy and expense to answer your questions in good faith, I expect, as a courtesy to the legislative process, and as a forthright public servant, that you in turn will answer my questions and concerns regarding your public and private statements in this matter. I also hope you will -- to ensure the integrity of this process -- publicly affirm the truth of your answers under oath as I have done. I will send you my questions in written form. I hope -- for the integrity of the legislative process -- you will answer them promptly.

I look forward to our correspondence which I will share with other Senate members and the media to reaffirm the integrity of this legislative process.

Sincerely,

R. Christopher Barden, Ph.D., J.D.

**DR. BARDEN'S RESPONSES TO SENATOR HELLEWELL'S  
QUESTIONS AND STATEMENTS:**

**RE: Health and Human Services Committee Testimony - Set A**

**A-1 DR. BARDEN'S COMMITTEE STATEMENT :** "The United States Congress... passed a resolution against this kind of so-called therapy."

**DR. BARDEN'S COMMITTEE STATEMENT :** "...the Newmaker case in Colorado, which involved a young girl who was killed using this kind of therapy."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Did they not pass a resolution against Rebirthing therapy? Did the resolution mention restraint?

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** We are told rebirthing therapy is very different from physical restraint therapy. Doesn't Rebirthing refer to what happened in Colorado and includes a blanket held above the child and no one is holding their arms or legs. Do you see any difference at all between these therapies?

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Since we were discussing HB5 and coercive restraint, what is your reasoning in mixing these techniques together?

**DR. BARDEN'S RESPONSES TO QUESTIONS AND STATEMENTS  
REGARDING REBIRTHING AND HOLDING THERAPY:**

With all due respect, you appear to have been badly misinformed on this crucial issue. As a national expert in psychology and law and as an expert witness in the Newmaker (death by holding therapy) case in Colorado and based upon my knowledge, training and experience (Ph.D. in psychology from Minnesota, Berkeley, Palo Alto VA Med Ctr/Stanford, JD cum laude in law from Harvard Law School) and based upon my knowledge of scientific methodology (2 national research awards in psychology and editorial work on many professional journals) it is my considered opinion at this time that

"rebirthing" is simply a strikingly reckless and dangerous form of "coercive restraint therapy" a.k.a. "coercive therapy techniques" a.k.a. "attachment therapy" -- with "holding therapy" simply another version for this quack pseudo-treatment.

Your apparent error and confusion is common in nonprofessionals (and even in some educated professionals as these quack practices are not widely discussed or used in the reputable mental health world). Some research into the issue is usually needed before folks understand the underlying components of these very similar "therapies" with different names.

**HOW ARE THE QUACK THERAPIES KNOWN AS "HOLDING THERAPY" AND "REBIRTHING" ALIKE?:**

**Rebirthing** (as I have reviewed it in writings and viewed it in the Newmaker videos) **AND holding therapy** (as I viewed it on the Newmaker videos, viewed it on national media video, reviewed it in numerous interviews of patients who suffered through "holding therapy" , reviewed it in numerous writings and reviewed it via the Attorney General's report (DOPL) regarding Utah "holding therapists", **BOTH INVOLVE:** imparting false information to the patient about the effects of the treatment, utterly failing to obtain informed consent, manipulating the patient with bizarre and pseudoscientific "theories" to convince them to undergo procedures causing suffering and trauma, sadistic therapist practices, screaming at the patient, insulting the patient, grinding elbows -hands- knees - etc into the patients body, threatening the patient, and other bogus, irrational and coercive measures. There is little difference between these forms of quackery except for the psychodrama "birth" experience at the very end of a rebirthing session. Such a detailed analysis shows that it is OBVIOUS that rebirthing and holding "therapies" are, therefore, different "techniques" of the very same pseudo-treatment known as "coercive restraint therapy" or "coercive restraint techniques."

Who agrees with my opinion on this issue?:

**THE UTAH PSYCHOLOGICAL ASSOCIATION APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

See, Utah Psychological Association, Coercive Treatment Techniques (including Holding Therapy), **POSITION STATEMENT**

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"Recent attention has been given by the media and the community to a variety of practices that can be described as "coercive therapy techniques." These include practices such as prolonged restraint other than for the protection of the individual or others, prolonged noxious stimulation, interference with bodily functions such as vision and breathing, and the forced administration of substances such as water or other fluid (other than medication prescribed by an appropriately licensed professional). These coercive interventions, typically employed with children and adolescents, have been referred to as holding therapy, attachment therapy, re-birthing, rage therapy, and other things. Some therapists employ the same labels for noncoercive techniques and actually use other methods. The Utah Psychological Association, therefore, maintains that it is

critical to refer to actual techniques, rather than the name given to them, to prevent misunderstanding. The phrase "coercive therapy techniques" accurately encompasses the intrusive and potentially abusive behaviors described above.

**Despite multiple cases of injury and/or actual death of children treated with these so-called therapy techniques, a minority of therapists continue to advocate their use. The Utah Psychological Association, as well as a number of other professional organizations, maintains that there is no scientific evidence to support the effectiveness of such interventions.** In addition, coercive therapy techniques are contrary to most State and mental health facility regulations that prohibit the use of physical intervention, except as required for the immediate protection of the client/patient or others (for example, the Utah Department of Human Services Policy and Resource Manual, Section 5-03, "Provider Code of Conduct"). The Utah Psychological Association also maintains that such techniques are prohibited by the Utah State Psychologist Licensing Act Rules (R156-61-502). Finally, **there is a strong clinical consensus that coercive therapy techniques are, in fact, contraindicated and potentially dangerous, constituting a form of physical and/or emotional child abuse.**

**The Utah Psychological Association, therefore, unequivocally opposes the use of coercive therapy techniques.** Use of such techniques by a member of the UPA constitutes grounds for investigation by the organization's Ethics Committee and for potential professional censure."

#### **EVEN THE QUACK "HOLDING THERAPISTS" CONVICTED IN THE NEWMARKER CRIMINAL TRIAL APPARENTLY ALSO VIEW HOLDING THERAPY AND REBIRTHING AS TECHNIQUES WITHIN THE SAME KIND OF TREATMENT:**

**Even the defendant "holding therapist" C. Watkins -- while testifying under oath -- agreed that rebirthing is part of her "holding therapy" practice and that holding therapy is "not backed by scientific studies".**

**U.S. NEWS MEDIA:** THE DENVER CHANNEL, Accused Therapist Testifies In Rebirthing Trial... Watkin's Testimony Continues Tuesday GOLDEN, Colo., 6:16 p.m. MDT April 16, 2001 -- The therapist accused in the death of a 10-year-old girl took the stand Monday to defend herself .... Connell Watkins appeared to be shaking as the judge swore her in..... Watkins on Monday defended her rebirthing therapy, often looking directly at the jury. **She explained the effects of reactive attachment disorder, and admitted that although "rebirthing" and "holding" are not universally accepted therapies and not backed by scientific studies, she said, "I do it because it works."**... Candace was diagnosed with attachment disorder, which makes children resist forming loving relationships and frequently makes them violent and unmanageable. **Watkins said that she discovered "holding" therapy, where the patient is physically held during the session, in the mid-1970s when she was doing social work with foster children. "I establish that I am in control and that I am the boss at that time," Watkins said. "That will bring out the rage they have repressed.**

**THE MEDICAID SYSTEM APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

I also note for the record that the Medicaid Administration appears to agree with my opinion on this matter:

**Medicaid Information Bulletin (for the State of Utah), January 2002 Section 02-18, at page 10. Coercive Intervention Techniques Not Covered (holding, rage, rage reduction, attachment or rebirthing therapies). Medicaid does not cover the use of "coercive techniques"** where the therapist or others under the direction of the therapist use restraint other than for the protection of the child... **Coercive interventions are sometimes also referred to as "holding therapy", "rage therapy", "rage reduction" therapy, "attachment therapy", or "rebirthing therapy."**

**THE UTAH PUBLIC MENTAL HEALTH SYSTEM APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

Utah Public Mental Health System, Treatments for Reactive Attachment Disorders in Children, Practice Guidelines, Updated 11/13/01 .... **"No coercive methods of treatment will be approved..."**  
[thus "holding therapy" and "rebirthing" -- both coercive methods are not approved]

**MEMBERS OF THE NATIONAL AND INTERNATIONAL NEWS MEDIA APPARENTLY AGREE WITH DR BARDEN ON THIS ISSUE:**

**U.S. MEDIA:** Kreck, Carol , 'Rebirth' death spurs warning, THE DENVER POST, June 4, 2000 Denver Post Staff Writer " Following April's **"rebirthing" death of a 10-year-old girl**, state authorities are threatening to pursue child-abuse charges against mental-health professionals who physically restrain children as part of psychotherapy..... The department's warning puts scores of licensed and unlicensed mental-health practitioners who specialize in so-called aversive therapies on notice..... **SIMILAR THERAPIES HAVE BEEN CALLED "HOLDING THERAPY" OR "RAGE REDUCTION THERAPY."**

Rebirthing itself emerged from the explosion of alternative therapies in California in the 1970s; its founder was a therapist named Leonard Orr. He was a strong believer in the theory of birth trauma, or that many psychological problems can be traced to some trauma either in the womb or during labor and delivery. Orr reportedly had an epiphany one day while taking a bath. He is said to have reexperienced his own birth while soaking in the tub. Orr now lives in upstate New York and did not return phone messages."

**INTERNATIONAL NEWS MEDIA:** "Reed, Christopher "The cuddles that kill", Glasgow Herald, Scotland, June 21, 2001, (Features, page 17) ... Christopher Reed reports on the controversial American therapy that killed Candace Newmaker.

In a court hearing this week in Colorado, **two women, Connell Watkins and Julie Ponder were given the minimum prison sentence of 16 years each for suffocating to death a 10-year-old girl, Candace Newmaker**, in a grotesque "re-birthing therapy" technique. Most Americans think this will end a horrific but isolated incident. ... As a result of the

Newmaker case, many victims of frighteningly similar treatment from all over America are coming forward to describe what they suffered. One is Jessica Bice (sic), who asked the judge to impose maximum sentence and whose letter was read in court. She said the Newmaker case was "not the first time that this therapy has killed". She said "Watkins did **rage reduction therapy** on me when I was aged five to 11" in which **she suffered "bruises under the arms and verbal abuse"**. She said Watkins "never cared if I was hurting or tired, but I was lucky, I was strong." **THE TREATMENT INVOLVES DELIBERATE VIOLENCE AND ABUSE OF YOUNG CHILDREN who are prevented from moving, gripped in holds that can restrict breathing, and "take downs" in which they are knocked to the floor in a rugby tackle.** Parents are also encouraged to withhold food. Clinics charge thousands of dollars for such treatment, which may be performed by unqualified staff. **It is called Attachment Therapy (AT), and is used on children, usually adoptees, suffering Reactive Attachment Disorder (RAD), the "disease" diagnosed in Candace Newmaker, the girl who died in a Colorado clinic. Some psychologists recommend AT, but the APA declines to recognize it as proper treatment.....**

In a country where dubious psychological treatments are commonplace, **THE TECHNIQUES FOLLOW THE HISTORY OF QUACKISH REMEDIES, with attendant gurus of outlandish theories. AT can be seen as a fad that replaces the disastrous "repressed memories" cases of the 1980s and 1990s** in which dozens of innocent people went to prison on baseless charges of sexually molesting children. RAD is defined as a child's inability to bond with parents, and attachment practitioners claim 90% of adoptees suffer from it because of the traumatic loss of their natural mother. Its symptoms include sullen and distant behavior, violent temper, aggression, and uncontrollable acting-up. **ATTACHMENT, OR "HOLDING" THERAPY, USES PHYSICAL RESTRAINT, ABUSE, AND VIOLENCE, DELIBERATELY INDUCING RAGE, TERROR, AND PANIC.** This rage is then supposed to dissipate and the child develops warm affection and eye contact with the present parent, creating "attachment" and loving, obedient behavior..... Candace suffocated while the therapists leaned on her supine, wrapped body talking for half an hour about housing prices. The entire episode was filmed and shown at the trial in April. **Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up.** ..... AT can be traced to Wilhelm Reich, the Freudian-Marxist psychiatrist from Vienna. **He was imprisoned in the US in 1956 for fraudulently promoting his "orgone box", which was supposed to boost sexuality and mental health. He died in prison in 1957. ....** Several psychologists continued to develop AT theory, but a more definitive -- and controversial principle was Robert Zaslow's Z-Process, which detailed in 1975 the restraining and rebirthing techniques. **Zaslow, who lived in California until losing his medical licence,** is believed to have returned to Europe several years ago. The Z-Process involved several holders, one of whom restrained the head, while others rubbed their knuckles up and down the child's ribcage **"in order to provoke rage and overcome resistance".** Children could be restrained for two hours, said Zaslow, although sessions could last eight hours. **Active resistance and bruising were to be expected** before the child admitted that the therapist was "boss". .... A technique linked to AT is "re-parenting", introduced in America by Jacqui Schiff, a social worker now retired. She treated adults as children, making them wear nappies and suck on teats, to re-structure their early

development. **Schiff's methods have been denounced as "sadistic pseudo-science".** In one personal account she described touching the genitals of a naked, restrained patient, her adopted son, with a large hunting knife to confront his castration anxiety. **He was later convicted of involuntary manslaughter in the scalding death of a schizophrenic youth,** aged 16, in 1972. Dr. Jean Mercer, professor of psychology at Richard Stockton College in New Jersey... has raised concerns about attachment therapy... in a paper on "potentially dangerous" AT methods, published in the current Journal of Child and Adolescent Psychiatric Nursing, Dr. Mercer itemises eight "red flag" warnings about suspect treatments. **These include "cult-like defensiveness", and "absence of empirical support",** and poor comparisons with "accepted psychotherapy practices". .... **THE AT HOLDING THERAPY] TECHNIQUES ARE A HISTORICAL DESCENDANT OF THE BAD OLD DAYS OF MENTAL HEALTH TREATMENT IN WHICH PATIENTS WERE WHIPPED, CHAINED, AND EVEN THROWN INTO SNAKE PITS, TO CREATE TERROR THAT WOULD SHOCK THE PATIENT BACK TO SANITY.** .... During the trial the Colorado legislature hastily **passed a law forbidding the rebirthing technique that killed Candace, but it is widely criticized as riddled with loopholes.** Meanwhile, the governing body of AT, the Association for Treatment and Training in the Attachment of Children, or ATTACH, does not answer queries from journalists and its website is being "rebuilt". Connell Watkins and Associates has closed, and she and Julie Ponder now begin their 16 years each in prison. The body of Candace was cremated."

**THE JURY IN THE NEWMAKER CASE APPARENTLY AGREED WITH MY OPINION IN THIS MATTER:**

**I wrote to a member of the Newmaker jury who had written a previous statement regarding her experiences reviewing the "holding therapy" practices that led to Candace's death.**

2/11/03

Dear Dr. Barden:

Of course I remember you and your compelling testimony. I have no problem being quoted, however I would prefer to be referred to as simply a juror vs. NAME WITHHELD. These "wacko's" startle me and I don't want my family harassed.

Sincerely, NAME WITHHELD

From: E-MAIL ADDRESS WITHHELD

Date: Tue, 11 Feb 2003 10:47:55 EST

Subject: Candace Newmaker

To: E-MAIL ADDRESS WITHHELD

MIME-Version: 1.0

In April of 2001 I was chosen as a juror for the case against Connell Watkins and Julie Ponder. Reckless child abuse resulting in the death of 10 year old Candace Newmaker was the charge. During the trial we were told that Candace died during a rebirthing process. **As we viewed hours of video tape, we witnessed child abuse way before the rebirthing ever took place.**

**The holding therapy (I use the word therapy loosely) that we witnessed on tape, WAS the child abuse.** We watched, and wept in horror as Watkins shook this sweet child's face. We saw Candace's fear as she

trembled to "please" her abuser. We watched a 190 pound grown man (again I use the word man loosely), Jack McDaniels sit on her skinny legs as Watkins grabbed her face and shook it back and forth yelling "got it?". Candace begged repeatedly for mercy. She wept while being forced to call her abuser "ma'am." **This was reckless child abuse. This all took place BEFORE the rebirthing.**

Because of Candace's guts and courage during the holding therapy she was treated with even more abuse during the rebirthing therapy, which we thought was more on the lines of second degree murder, manslaughter at the least. Have you all seen these tapes? **Have you seen this vibrant child screaming during this so called holding therapy?** I've heard all the ridiculous rhetoric about Candace having a heart condition. Have you read the transcripts from the trial? The coroner and a heart specialist both swore under oath that this healthy vibrant 10 year old had no heart condition prior to coming to her Evergreen torture chamber. **How many children are going to be abused in the name of therapy.** I am now a student working toward a Masters Degree in Social Work and throughout all my studies, I've yet to read or research ANY therapy that requires sitting on a child, shaking her, screaming at her or calling her a "stupid liar."..

**Stop the torture.** I know for a fact that there are many other therapy's that offer safe and nurturing practices.

Sincerely,  
NAME WITHHELD  
Juror for Candace

**PROF. JEAN MERCER -- A NATIONAL EXPERT IN THIS FIELD -- APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

Dear Dr. Barden:

I am writing to express support of your statement that "holding therapy" and "rebirthing" are both types of coercive restraint therapy and may accurately be categorized in the same way....

**In spite of the minor differences between the two practices, however, "rebirthing" and "holding" (as well as other unvalidated restraint therapies) are both clearly derived from the same philosophy or set of assumptions about human beings, a philosophy that is completely at odds with our evidence-based understanding of early development.** Briefly, the philosophy behind both "rebirthing" and "holding" therapies contains the following assumptions:

1. It is possible to rework or recapitulate an error in emotional development by a ritual repetition of events that would normally take place much earlier in life.
2. Emotional attachment to parents begins prenatally rather than in the second half-year of life.
3. Post-natally, attachment progresses as a result of the satisfaction of physical needs.
4. Healthy attachment causes children of all ages to be affectionate and cheerfully obedient to their parents and others in authority.
5. Parental authority must be absolute in order for a child of any age to develop good mental health.
6. Children who have been separated from their birth parents, even immediately after birth, react to this event with continuing rage and are



unable to form new attachments without treatment; the same is true of children who have experienced painful and traumatic early lives.

7. Rage can be neutralized by physical and verbal expression, but remains present and prevents affectionate relationships if unexpressed.

**8. The expression of rage can be forced by physical and emotional discomfort, which the child resists out of a desire not to change; the child's complaints of fear or pain reflect the resistance to change rather than any genuine harm.**

9. Neutralization of rage is followed by a brief period in which a child of any age is ready to form an emotional attachment.

10. Eye contact and sweet foods are powerful instruments in the formation of emotional attachment and can be used for this purpose in a child of any age.

11. Children who are unhappy, disobedient, and difficult to deal with are suffering from attachment disorders; all adopted children also suffer from attachment disorders.

12. If attachment disorders (as described above) are not treated through coercive restraint techniques, the children will grow up to be vicious criminals, possibly serial killers.

As I have noted in a number of published articles and in a forthcoming book (see attached c.v.), **not one of these assumptions is congruent with knowledge of child development as it has been established through half a century of careful empirical work. It is this set of assumptions, far more than the specific techniques used, that has led to the deaths of children in both "rebirthing" and "holding"**. Assumption #8, above, is a particularly dangerous one, because it encourages parents and practitioners to ignore a child's genuine pleas of distress in a way that appears to most observers devoid of common sense. Assumption #12, of course, is a most frightening claim that can persuade a hesitant parent to submit a child to either "rebirthing" or "holding". Assumption #11 exposes the most vulnerable of all our children to unvalidated treatments with a real potential for harm.

**To summarize, then, I agree strongly with the statement that "rebirthing" and "holding" belong to the same category of unvalidated mental health practices, that of coercive restraint therapies.**

Thank you for the opportunity to provide this information at a time when the Utah legislature is making a most important decision.

Yours sincerely,

Jean Mercer, Ph.D.

Professor of Psychology

President, New Jersey Association for Infant Mental Health

**My statements to the Committee were completely accurate and remain my considered opinion at this time.**

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**A-2. DR. BARDEN'S COMMITTEE STATEMENT :** "These are extremely dangerous, extremely harmful, as mentioned in the American Psychiatric Association National statement on this so-called treatment."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** My review of the APA statement doesn't reveal the words "extremely dangerous" or "extremely harmful" do you have further personal information that we can't find? Do you have further

evidence we can point to about the extreme dangers present in mental health therapy?

**DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS REGARDING HOLDING THERAPY BEING DANGEROUS:**

"Holding therapy" is obviously VERY dangerous. No competent observer could view it otherwise. Who agrees with me on this issue?

**THE UTAH PSYCHOLOGICAL ASSOCIATION APPARENTLY AGREES WITH DR BARDEN'S POSITION ON THIS ISSUE.**

See statement of the UPA re: "holding therapy" quoted in full above. The Utah Psychological Association also maintains that such techniques are prohibited by the Utah State Psychologist Licensing Act Rules (R156-61-502). Finally, there is a strong clinical consensus that coercive therapy techniques are, in fact, contraindicated and potentially dangerous, constituting a form of physical and/or emotional child abuse. UPA Statement on Holding Therapy (quoted in full above).

**THE AMERICAN PSYCHIATRIC ASSOCIATION SEEMS TO AGREE WITH DR BARDEN'S POSITION ON THIS ISSUE.**

My review of the APA Statement indicates that it states....

See statement of the UPA re: "holding therapy" quoted in full above. **"While some therapists have advocated the use of so-called coercive holding therapies and/or "rebirthing techniques", there is no scientific evidence to support the effectiveness of such interventions.** In fact, there is a strong clinical consensus that coercive therapies are contraindicated in this disorder [Reactive Attachment Disorder]. And unfortunately, **as recent events attest, such unproven and unconventional therapies can also have tragic consequences.**" American Psychiatric Association Reactive Attachment Disorder Position Statement, June 2002.

It remains my good faith belief and current understanding that the APAs reference to "tragic consequences" refers to the reports of **DEATHS OF INNOCENT CHILDREN FROM HOLDING/ REBIRTHING /RAGE THERAPY** e.g., Candace Newmaker and other news accounts, etc.

Having watched the video record of Candace Newmaker's death at the hands of "holding therapists" I am quite familiar with the dangers of such quack, fraudulent "treatments" as "holding therapy" and "rebirthing."

**PROF. JEAN MERCER, A NATIONAL EXPERT IN THIS FIELD, APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

See Prof. Mercer's letter as quoted in full above... **[ Holding therapy] Assumption #8, above, is a particularly dangerous one**, because it encourages parents and practitioners to ignore a child's genuine pleas of distress in a way that appears to most observers devoid of common sense..... Assumption #11 exposes the most vulnerable of all our children to **unvalidated treatments with a real potential for harm.**

Yours sincerely,  
Jean Mercer, Ph.D.  
Professor of Psychology  
President, New Jersey Association for Infant Mental Health

**THE NATIONAL ASSOCIATION OF STATE MENTAL HEALTH PROGRAM DIRECTORS , APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

<http://www.nasmhpd.org/posses1.htm>  
**National Association of State Mental Health Program Directors** The members of the National Association of State Mental Health Program Directors (NASMHPD) believe that seclusion and restraint, including "chemical restraints," are safety interventions of last resort and **are not treatment interventions.** The use of seclusion and **restraint creates significant risks for people with psychiatric disabilities. These risks include SERIOUS INJURY OR DEATH,** retraumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Approved by the NASMHPD membership on July 13, 1999.

**My statements to the Committee were completely accurate and remain my considered opinion at this time.**

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**A-3. DR. BARDEN'S COMMITTEE STATEMENT :** "There is no scientific... no scientific support whatsoever for these, for these practices"

**SENATOR HELLEWELL'S QUESTIONS AND STATEMENTS:** You stated in your testimony that "there is no scientific support whatsoever" for these practices. Given your testimony was specifically about coercive restraint therapy ("these practices") how do you reconcile your testimony with the research referred to that is published in a recognized, peer reviewed, journal. There are additional citations as well. Can you explain?

**DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS REGARDING HOLDING THERAPY AND SCIENCE:**

**YOUR ERRORS AND APPARENT MISINFORMATION ON THIS TOPIC ARE QUITE SERIOUS.** With all due respect you again appear very confused and/or badly misinformed on this crucial issue. This question displays serious errors in logic and in thinking -- this time your confusions appear to be about the nature of science itself...

The "research studies" claimed by some people in erroneous public statements on this issue are the rankest kind of incompetent junkscience. They are riddled with errors, poor logic, fatal methodological mistakes and other problems. If people had simply asked a competent scientist (try someone at the University of Utah or BYU) to evaluate these junkscience projects BEFORE making erroneous public statements you would have learned why these "studies" are classic junkscience.

**As a national expert on the distinctions between science and junkscience I am happy to help you understand this important issue in more detail.**

See, eg. Grove, W. M. and Barden, R.C. (2000) Protecting the Integrity of the Legal System : The Admissibility of Testimony from Mental Health Experts Under Daubert/Kumho Analyses, Psychology, Public Policy and Law, Vol 5, No. 1, 234-242.

**It is my considered opinion that the Meyerhoff and Mertlich and Elizabeth Randolph publications certainly do NOT constitute "science" -- hardly -- they constitute "junk science". They are shockingly incompetent -- flawed pilot studies that have never been replicated at any credible institution. I am not aware of any national experts in psychology, psychiatry or social work that consider these incompetent projects "science".**

**More specifically, as any competent social scientist would immediately note the so-called evaluations of "progress" in the Meyerhoff study were not made by independent raters (that is they were not "blind" or "reliable" or "objective" raters). In fact, the evaluations of the children were made either by the patient's parents or by therapists -- both groups desperately seeking proof of improvement and thus obviously biased. In another egregious error these already biased raters apparently knew whether or not the children were receiving "holding therapy", and their evaluations were therefore highly likely to have been further biased by this knowledge. As any neophyte psychology student might know, these evaluations should have been done by raters, evaluators or practitioners who did not have an enormous personal (and/or financial) interest in the outcome and who did not know what treatment the children were receiving. Without these minimal safeguards in place this "study" could not be considered worthy of the term "science". There are multiple other fatal flaws in this study including the failure to randomly assign children to treatment groups or non-treatment groups. Failing all of these minimal standards such studies qualify as "junk science" only.**

**THE AMERICAN PSYCHIATRIC ASSOCIATION APPARENTLY AGREES WITH DR BARDEN'S POSITION ON THIS ISSUE....**

See full APA statement quoted above.... "While some therapists have advocated the use of so-called coercive holding therapies and/or "rebirthing techniques", there is no scientific evidence to support the effectiveness of such interventions. American Psychiatric Association Reactive Attachment Disorder Position Statement, June 2002.

**EVEN THE QUACK THERAPISTS IN THE NEWMAKER CASE ADMIT THAT THERE IS NO SCIENTIFIC EVIDENCE TO SUPPORT COERCIVE RESTRAINT THERAPIES (Holding therapy and rebirthing, etc).**

**U.S. NEWS MEDIA:** THE DENVER CHANNEL, Accused Therapist Testifies In Rebirthing Trial... Watkin's Testimony Continues Tuesday GOLDEN, Colo., 6:16 p.m. MDT April 16, 2001 -- The therapist accused in the death of a 10-year-old girl took the stand Monday to defend herself and the unconventional rebirthing technique she used as part of the girl's therapy. Connell Watkins appeared to be shaking as the judge swore her in.... Watkins, 54, and fellow psychotherapist Julie Ponder, 40, are charged with reckless child abuse resulting in the death of Candace Newmaker (pictured, left) of Durham, N.C.

Candace died of asphyxiation after a controversial rebirthing therapy last April. Watkins on Monday defended her rebirthing therapy, often looking directly at the jury. **She explained the effects of reactive attachment disorder, and admitted that although "rebirthing" and "holding" are not universally accepted therapies and not backed by scientific studies....**

**THE UTAH PSYCHOLOGICAL ASSOCIATION ALSO APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

See full UPA statement quoted above, "The Utah Psychological Association, as well as a number of other professional organizations, maintains that there is no scientific evidence to support the effectiveness of such interventions."

**THE UTAH COUNSELING ASSOCIATION ALSO APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

These [holding therapy] techniques are not guided by theory or evidence based study. Most of all, they violate the potential of the non-maleficence code of the counseling profession. .... The Utah Counseling Association supports the proposal that use of coercive and restraint techniques by any mental health therapist is a violation of professional ethics. Furthermore, the use of such techniques by any counselor should be met with sanctions imposed by the Department Of Professional Licensing. Utah Counseling Association, UCA POSITION STATEMENT ON THE TREATMENT OF REACTIVE ATTACHMENT DISORDER AND THE USE OF COERCIVE RESTRAINT TECHNIQUES, Feb. 2003.

**NATIONAL EXPERT CAROL TAVRIS, PH.D. APPARENTLY AGREES WITH DR. BARDEN'S OPINION:**

TO: Dr. R. C. Barden  
FROM: Carol Tavis, Ph.D.  
1847 Nichols Canyon Road  
Los Angeles, CA 90046  
(323) 850-0514  
(323) 850-5113 (fax)

Dear Dr. Barden:

**I am writing to express my unequivocal support for the bill to ban all therapies involving coercive restraint--including "rebirthing" and "holding therapy."** These therapies may claim support from the therapists who practice them, but they are utterly without scientific validation; they are dangerous, having already claimed the lives of several children.

I have a Ph.D. in social psychology and my life's work has been devoted to educating the public about the difference between psychological science--ideas and practice based on good, solid, empirical evidence--and "junk" psychology, including unvalidated therapies. I am co-author of two leading psychology textbooks that are based on psychological science, and author of various trade books on psychological topics (such as "Anger: The misunderstood emotion").

**I am a Fellow of the American Psychological Association and of the American Psychological Society; a member of the board of the Council for Scientific Clinical Psychology and Psychiatry; Consulting Editor for the Scientific Review of Mental Health Practice; and a member of editorial board for Psychological Science in the Public Interest (published by the American Psychological Society).**

The general public -- including most legislators -- do not understand the growing chasm between psychological ideas based on good science, and those based on silly pseudoscience, dressed up in fancy psychological language. The promoters of holding therapy and its kin use all kinds of highfalutin' language to justify what they do, but **the basic assumptions are utterly unsupported by any evidence, as the statements of the American Psychiatric Association and other professional organizations note.**

I urge the Utah Senate to ban these practices, which would be nonsensical if they were not so devastatingly dangerous.

Sincerely,

Carol Tavis, Ph.D.

**BASED UPON MY KNOWLEDGE, CONVERSATIONS AND CORRESPONDENCE IT IS MY GOOD FAITH BELIEF and KNOWLEDGE THAT MY FELLOW MEMBERS OF THE COUNCIL FOR SCIENTIFIC MENTAL HEALTH PRACTICE -- AGREE WITH MY OPINIONS ON THIS MATTER. THIS LIST INCLUDES MANY OF THE MOST DISTINGUISHED PSYCHOLOGISTS AND PSYCHIATRISTS IN THE WORLD REPRESENTING MANY OF THE MOST DISTINGUISHED UNIVERSITIES, COLLEGES AND MEDICAL SCHOOLS IN THE WORLD**

<http://www.scientificmentalhealth.org/council.html>

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 Harald Merckelbach, Ph.D., Psychology, Maastricht University,  
 Netherlands  
 Harold Merskey, D.M., Psychiatry, Emeritus, University of Western  
 Ontario, Canada  
 Robert Montgomery, Ph.D., Psychology, Georgia State University  
 Timothy Moore, Ph.D., Psychology, Glendon College, York University,  
 Canada  
 Peter Muris, Ph.D., Psychology, Maastricht University, Netherlands

Charles B. Nemeroff, M.D., Psychiatry and Behavioral Sciences, Emory University  
John Paddock, Ph.D., Psychology and Psychiatry, Emory University  
Loren Pankratz, Ph.D., Oregon Health Sciences University  
August Piper Jr., M.D., Private Practice, Seattle, Washington  
Harrison G. Pope, M.D., MPH, McLean Hospital, Harvard University  
Ron Rapee, Ph.D., Psychology, Macquarie University, Sydney, Australia  
Lawrence Riso, Ph.D., Georgia State University  
Gerald Rosen, Ph.D., Private Practice and University of Washington  
Yuji Sakano, Ph.D., Psychology, Waseda University, Japan  
Wallace Sampson, M.D., Editor, The Scientific Review of Alternative Medicine, Los Altos, California  
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Richard Wiseman, Ph.D., University of Hertfordshire, UK  
James M. Wood, Ph.D., Psychology, University of Texas at El Paso

Finally, the only "evidence" supporting "holding therapy" that I am aware of is anecdotal evidence (personal stories). This is not scientific evidence. As even undergraduate science students learn, anecdotal evidence can be found for every form of quack medical "cure" under the sun.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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A-4 DR. BARDEN'S COMMITTEE STATEMENT : "in many states where we have all of the professional associations lined up against this practice"

SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: In your testimony you say that in "many states..all of the professional associations lined up against this practice." This seems partially true in Utah. Can you cite the states where all the professional organizations are lined up against coercive restraint as defined in HB5. What about the Osteopaths, Psychiatric Nurses, M.D.s etc.

DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS REGARDING THE POSITION OF PROFESSIONAL ASSOCIATIONS IN MANY STATES REGARDING "HOLDING THERAPY":



It is, was and remains my understanding and good faith belief that NO reputable professional association in the U.S. has endorsed "'holding therapy", "rebirthing" or any other variant of "attachment therapy". It remains my opinion that these are quack, fraudulent pseudotreatments and NO reputable association would or could endorse them.

It is, was and remains my understanding and good faith belief that **EVERY SINGLE CREDIBLE PROFESSIONAL GROUP AND ASSOCIATION THAT HAS EVER MADE A STATEMENT ON THIS ISSUE IS ON RECORD AGAINST THE QUACK, DANGEROUS PRACTICE OF HOLDING THERAPY.**

As a national expert in mental health ethics and the regulatory system governing mental health professionals it is and remains my professional opinion that virtually ALL state mental health organizations are currently bound -- by their existing ethics codes, the relevant regulatory codes and the total lack of science support for "holding therapy" -- to oppose so-called "holding therapy". I note for the record that my opinion in this regard has apparently been proven true again and again in this process as more and more organizations take a stand against the bogus, corrupt practices of "holding therapy."

In addition, my investigations in this matter have included conversations with a former Chairman of the Ethics Committee of the American Psychological Assn, national experts in mental health ethics, and leading figures in relevant fields -- many of whom are prominent members of professional associations -- **ALL OF WHOM AGREE WITH MY POSITION ON THIS ISSUE.**

**BASED UPON MY KNOWLEDGE, CONVERSATIONS AND CORRESPONDENCE IT IS MY GOOD FAITH BELIEF and KNOWLEDGE THAT MY FELLOW MEMBERS OF THE COUNCIL FOR SCIENTIFIC MENTAL HEALTH PRACTICE -- AGREE WITH MY OPINIONS ON THIS MATTER. THIS LIST INCLUDES MANY OF THE MOST DISTINGUISHED PSYCHOLOGISTS AND PSYCHIATRISTS IN THE WORLD REPRESENTING MANY OF THE MOST DISTINGUISHED UNIVERSITIES, COLLEGES AND MEDICAL SCHOOLS IN THE WORLD AND REPRESENTING MANY PROFESSIONAL ASSOCIATIONS IN MANY STATES.**

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**THE AMERICAN PSYCHIATRIC ASSOCIATION APPARENTLY AGREES WITH DR BARDEN'S POSITION ON THIS ISSUE....**

See full APA statement quoted above.... "While some therapists have advocated the use of so-called coercive holding therapies and/or "rebirthing techniques", **there is no scientific evidence to support the effectiveness of such interventions.** American Psychiatric Association Reactive Attachment Disorder Position Statement, June 2002.

**THE NATIONAL ASSOCIATION OF STATE MENTAL HEALTH PROGRAM DIRECTORS , APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

<http://www.nasmhpd.org/posses1.htm>

**National Association of State Mental Health Program Directors** The members of the National Association of State Mental Health Program Directors (NASMHPD) believe that seclusion and restraint, including "chemical restraints," are safety interventions of last resort and **are not treatment interventions.** The use of seclusion and **restraint**

creates significant risks for people with psychiatric disabilities. These risks include serious injury or death, retraumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Approved by the NASMHPD membership on July 13, 1999.

**THE NEW JERSEY ASSOCIATION FOR INFANT MENTAL HEALTH , APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

See, the Position statement of the New Jersey Association for Infant Mental Health written by national expert Jean Mercer, Ph.D. Professor of Psychology. The Statement can be obtained at [www.KidsComeFirst.info](http://www.KidsComeFirst.info)

**and so on and so on...**

It remains my expert, good faith opinion that ANY competently educated person and ANY credible professional association would agree with my stance on this issue.

**QUESTION FOR SENATOR HELLEWELL -- Do you have any professional associations from any State to testify in support of so-called "holding therapy"? What kind of group would ever do such a reckless and unethical thing?**

My statements to the Committee were completely accurate and remain my considered opinion at this time.

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**A-5. DR. BARDEN'S COMMITTEE STATEMENT :** "spoken to hundreds and hundreds of patients of pseudo-psychotherapies, many of whom have been badly harmed by this therapy"

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** You stated "spoken to...many of whom have been badly harmed by this therapy." How many patients have you spoken to that received coercive restraint therapy (as defined in HB5)? You state they were "badly harmed." How did you establish that they were badly harmed what measurements and criteria did you use?

**DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS RE: MY INVESTIGATIONS INTO CASES INVOLVING PATIENTS WHO WERE BADLY INJURED BY QUACK "HOLDING THERAPISTS" :**

Over the past ten years I have indeed interviewed hundreds and hundreds (perhaps more than a thousand) of patients of a variety of pseudo-psychotherapies, many of whom have been badly harmed by such quack therapies.

In terms of those injured by quack "attachment therapies" such as rebirthing and/or holding therapies I have spoken to a few dozen persons regarding their personal reports of horrific experiences with these quack treatments.

In terms of how I came to believe that they were "badly harmed"... obviously a jury appears to have validated my conclusion that Candace Newmaker was killed by quack "holding/rebirthing" therapists. [See the statement of a juror above]. The medical coroner's report in that case also supported this analysis. As an expert witness in that case I carefully reviewed the tapes of her abuse at the hands of "holding therapists". This abuse included the typical coercive restraint, grinding knuckles-elbows-knees into Candace, yelling and screaming at Candace, spitting at Candace, insulting Candace, and the fatal "rebirthing". Based upon my review of the tape and the coroner's report I concluded that Candace was "badly harmed" - - killed -- by the "therapists". The jury agreed with my analysis. To the best of my knowledge the "holding therapists" are serving jail time in Colorado.

In other cases I typically interviewed the patients regarding their pre treatment level of functioning, reported experiences in "therapy" and post-treatment level of functioning. In several cases I asked the patients to complete an affidavit detailing their experiences and to sign it. In several cases I obtained records from other providers to validate and corroborate these reports.

It remains my opinion that many of these patients were "badly harmed" based upon self-reported injuries (including bruises, partial suffocation and other physical injuries, increased depression, suicide attempts, broken marriages, fears/panic, hypnotically induced hallucinations, false "recovered memories" of "cult abuse, lack of trust in mental health professionals and other reported symptoms). I then cross checked these reports with the reports of others including additional eye witness whenever possible. I also requested medical records from other providers whenever possible to cross check medical injuries and the consistency of reports by other mental health professionals. My work in this area is ongoing and will continue.

Clearly the Utah Attorney General's office agrees with my opinion in this matter [See Attorney General's Report Documents the Horrors of "Holding therapy" at [www.KidsComeFirst.info](http://www.KidsComeFirst.info)]

**PLEASE READ THE ENTIRE DOPL REPORT OF THE UTAH ATTORNEY GENERAL'S OFFICE ON THE TYPICAL, ABUSIVE, RECKLESS AND DANGEROUS PRACTICES OF UTAH "HOLDING THERAPISTS"**

In sum, my testimony before the committee was fully accurate and remains my considered opinion and good faith belief.

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A-6 DR. BARDEN'S COMMITTEE STATEMENT : "the psychological fields, the psychiatric fields, the social field, the hospital workers, all representatives that I know and their professional associations are on the record against this kind of treatment."

SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Our review shows that the APA (psychiatrists), the UPA (psychologists in Utah only), and the UASW (Social Workers in Utah only), and Primary Children's Hospital in Salt Lake City are the only

organizations you cited. So when you say "the psychological fields, the psychiatric fields, the social field, the hospital workers, all representatives that I know and their professional associations are on the record against this kind of treatment." We are not aware that the psychological fields nationally have come out against this therapy. If they have, please advise us and provide us their statements. Further, we are not aware that all hospital workers have done so. What is the name of their national organization? Please provide a listing.

**DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS REGARDING THE  
POSITION OF PROFESSIONAL  
ASSOCIATIONS REGARDING "HOLDING THERAPY":**

It is, was and remains my understanding and good faith belief that NO reputable professional association in the U.S. has endorsed "'holding therapy", "rebirthing" or any other variant of "attachment therapy". It remains my opinion that these are quack, fraudulent pseudotreatments and NO reputable association could ever endorse them.

It is, was and remains my understanding and good faith belief that EVERY SINGLE CREDIBLE PROFESSIONAL GROUP AND ASSOCIATION THAT HAS EVER MADE A STATEMENT ON THIS ISSUE IS VERY MUCH AGAINST THE QUACK, DANGEROUS PRACTICE OF HOLDING THERAPY.

As a national expert in mental health ethics and the regulatory system governing mental health professionals it is and remains my professional opinion that virtually ALL state mental health organizations are currently bound -- by their existing ethics codes, the relevant regulatory codes and the total lack of science support for "holding therapy" -- to oppose holding therapy and support legislation such as HB 05. I note for the record that my opinion in this regard has apparently been proven true again and again in this process as more and more organizations take a stand against the bogus, corrupt practices of "holding therapy."

In addition, my investigations in this matter have included conversations with the Chairman of the Ethics Committee of the American Psychological Assn, national experts in mental health ethics, and leading figures in relevant fields -- many of whom are prominent members of professional associations -- ALL OF WHOM AGREE WITH MY POSITION ON THIS ISSUE. See, eg.

BASED UPON MY KNOWLEDGE, CONVERSATIONS AND CORRESPONDENCE IT IS MY GOOD FAITH BELIEF and KNOWLEDGE THAT MY FELLOW MEMBERS OF THE COUNCIL FOR SCIENTIFIC MENTAL HEALTH PRACTICE -- AGREE WITH MY OPINIONS ON THIS MATTER. THIS LIST INCLUDES MANY OF THE MOST DISTINGUISHED PSYCHOLOGISTS AND PSYCHIATRISTS IN THE WORLD REPRESENTING MANY OF THE MOST DISTINGUISHED UNIVERSITIES, COLLEGES AND MEDICAL SCHOOLS IN THE WORLD

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Allan R. Harkness, Ph.D., Psychology, University of Tulsa

James Herbert, Ph.D., MCP Hahnemann University, Philadelphia, Pennsylvania

Terence M. Hines, Ph.D., Psychology, Pace University

John Hochman, M.D., Private Practice, Los Angeles, California

John Hunsley, Ph.D., Psychology, University of Ottawa, Canada

Thomas Joiner, Ph.D., Psychology, Florida State University

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Elizabeth F. Loftus, Ph.D., Psychology and Law, University of  
Washington  
Steven Jay Lynn, Ph.D., Psychology, Binghamton University, New York  
Richard McFall, Ph.D., Psychology, Indiana University  
Paul R. McHugh, M.D., Psychiatry, Johns Hopkins University  
Richard McNally, Ph.D., Psychology, Harvard University  
Harald Merckelbach, Ph.D., Psychology, Maastricht University,  
Netherlands  
Harold Merskey, D.M., Psychiatry, Emeritus, University of Western  
Ontario, Canada  
Robert Montgomery, Ph.D., Psychology, Georgia State University  
Timothy Moore, Ph.D., Psychology, Glendon College, York University,  
Canada  
Peter Muris, Ph.D., Psychology, Maastricht University, Netherlands  
Charles B. Nemeroff, M.D., Psychiatry and Behavioral Sciences, Emory  
University  
John Paddock, Ph.D., Psychology and Psychiatry, Emory University  
Loren Pankratz, Ph.D., Oregon Health Sciences University  
August Piper Jr., M.D., Private Practice, Seattle, Washington  
Harrison G. Pope, M.D., MPH, McLean Hospital, Harvard University  
Ron Rapee, Ph.D., Psychology, Macquarie University, Sydney, Australia  
Lawrence Riso, Ph.D., Georgia State University  
Gerald Rosen, Ph.D., Private Practice and University of Washington  
Yuji Sakano, Ph.D., Psychology, Waseda University, Japan  
Wallace Sampson, M.D., Editor, The Scientific Review of Alternative  
Medicine, Los Altos, California  
Margaret T. Singer, Ph.D., Psychology, Emerita, University of California  
at Berkeley  
Robert L. Spitzer, M.D., Columbia University and New York State  
Psychiatric Institute  
Carol Tavis, Ph.D., Social Psychologist/Author, Los Angeles, California  
Bruce A. Thyer, Ph.D., LCSW, School of Social Work, University of  
Georgia  
E. Fuller Torrey, M.D., Psychiatry, Uniformed Services Univ. of the  
Health Sciences, Maryland  
Samuel M. Turner, Ph.D., Psychology, University of Maryland  
Irwin D. Waldman, Ph.D., Psychology, Emory University  
Jerome C. Wakefield, D.S.W., School of Social Work, Rutgers  
University  
Richard Wiseman, Ph.D., University of Hertfordshire, UK  
James M. Wood, Ph.D., Psychology, University of Texas at El Paso

**THE AMERICAN PSYCHIATRIC ASSOCIATION APPARENTLY AGREES WITH DR  
BARDEN'S POSITION ON THIS ISSUE....**

See full APA statement quoted above.... "While some therapists have  
advocated the use of so-called coercive holding therapies and/or "rebirthing  
techniques", **there is no scientific evidence to support the effectiveness**



of such interventions. American Psychiatric Association Reactive Attachment Disorder Position Statement, June 2002.

**THE NATIONAL ASSOCIATION OF STATE MENTAL HEALTH PROGRAM DIRECTORS , APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

<http://www.nasmhpd.org/posses1.htm>

**National Association of State Mental Health Program Directors** The members of the National Association of State Mental Health Program Directors (NASMHPD) believe that seclusion and restraint, including "chemical restraints," are safety interventions of last resort and are not treatment interventions. The use of seclusion and restraint creates significant risks for people with psychiatric disabilities. These risks include serious injury or death, retraumatization of people who have a history of trauma, and loss of dignity and other psychological harm. Approved by the NASMHPD membership on July 13, 1999.

**THE UTAH COUNSELING ASSOCIATION ALSO APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

These [holding therapy] techniques are not guided by theory or evidence based study. Most of all, they violate the potential of the non-maleficence code of the counseling profession. .... The Utah Counseling Association supports the proposal that use of coercive and restraint techniques by any mental health therapist is a violation of professional ethics. Furthermore, the use of such techniques by any counselor should be met with sanctions imposed by the Department Of Professional Licensing. Utah Counseling Association, UCA POSITION STATEMENT ON THE TREATMENT OF REACTIVE ATTACHMENT DISORDER AND THE USE OF COERCIVE RESTRAINT TECHNIQUES, Feb. 2003.

and so on and so on...

Which organizations agree with you Senator Hellewell? Any?

It remains my opinion that ANY competently educated person and ANY credible professional association would agree with my opinion on this issue.

My statements to the Committee were completely accurate and remain my considered opinion at this time.

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**A-7 DR. BARDEN'S COMMITTEE STATEMENT :** "We would never permit someone to be mistreated and abused and held down and poked and prodded and braised and, and made to scream and cry for hours at a time, which is the standard component of this field."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** This fact is of great concern. If it is a "standard component" that means it is widely used. How can we establish this? Have you interviewed a majority of holding therapy patients to find

out? What documentation can you provide that these are the standard components? What documentation can you provide of bruising, screaming and crying for hours, etc.? Can you provide us with a list of all the patients (names and addresses) who received therapy as defined in this bill who have been bruised or screamed for hours?

**DR. BARDEN'S RESPONSE TO QUESTIONS AND STATEMENTS REGARDING THE  
ABUSIVE STANDARD COMPONENTS  
OF "HOLDING THERAPY"**

**FRANKLY YOUR QUESTIONS RAISE COUNTER QUESTIONS ABOUT  
WHETHER YOU ARE EVEN ASKING THESE IN GOOD FAITH -- HAVE YOU NOT  
READ THE UTAH ATTORNEY GENERAL'S DOPL COMPLAINT AND REPORT ON  
"HOLDING THERAPY" IN UTAH?**

**Any competent expert in this field would, in my opinion agree with my statements on this issue. Even the news media know these things....**

**INTERNATIONAL NEWS MEDIA:** "Reed, Christopher "The cuddles that kill", Glasgow Herald, Scotland, June 21, 2001, (Features, page 17) ... Christopher Reed reports on the controversial American therapy that killed Candace Newmaker.

In a court hearing this week in Colorado, **two women, Connell Watkins and Julie Ponder were given the minimum prison sentence of 16 years each for suffocating to death a 10-year-old girl, Candace Newmaker**, in a grotesque "re-birthing therapy" technique. Most Americans think this will end a horrific but isolated incident. ... As a result of the Newmaker case, many victims of frighteningly similar treatment from all over America are coming forward to describe what they suffered. One is Jessica Bice (sic), who asked the judge to impose maximum sentence and whose letter was read in court. She said the Newmaker case was "not the first time that this therapy has killed". She said "Watkins did **rage reduction therapy** on me when I was aged five to 11" in which **she suffered "bruises under the arms and verbal abuse"**. She said Watkins "never cared if I was hurting or tired, but I was lucky, I was strong." **The treatment involves deliberate violence and abuse of young children who are prevented from moving, gripped in holds that can restrict breathing, and "take downs" in which they are knocked to the floor in a rugby tackle.** Parents are also encouraged to withhold food. Clinics charge thousands of dollars for such treatment, which may be performed by unqualified staff. **It is called Attachment Therapy (AT), and is used on children, usually adoptees, suffering Reactive Attachment Disorder (RAD), the "disease" diagnosed in Candace Newmaker, the girl who died in a Colorado clinic.** Some psychologists recommend AT, but the APA declines to recognize it as proper treatment....

In a country where dubious psychological treatments are commonplace, **the techniques follow the history of quackish remedies, with attendant gurus of outlandish theories. AT can be seen as a fad that replaces the disastrous "repressed memories" cases of the 1980s and 1990s** in which dozens of innocent people went to prison on baseless charges of sexually molesting children. RAD is defined as a child's inability to bond with parents, and attachment practitioners claim 90% of adoptees suffer from it because of the traumatic loss of their natural mother. Its symptoms include sullen and distant behavior, violent temper, aggression, and uncontrollable

acting-up. **Attachment, or "holding" therapy, uses physical restraint, abuse, and violence, deliberately inducing rage, terror, and panic.** This rage is then supposed to dissipate and the child develops warm affection and eye contact with the present parent, creating "attachment" and loving, obedient behavior..... Candace suffocated while the therapists leaned on her supine, wrapped body talking for half an hour about housing prices. The entire episode was filmed and shown at the trial in April. **Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up.** ..... AT can be traced to Wilhelm Reich, the Freudian-Marxist psychiatrist from Vienna. **He was imprisoned in the US in 1956 for fraudulently promoting his "orgone box", which was supposed to boost sexuality and mental health. He died in prison in 1957.** ..... Several psychologists continued to develop AT theory, but a more definitive -- and controversial principle was Robert Zaslow's Z-Process, which detailed in 1975 the restraining and rebirthing techniques. **Zaslow, who lived in California until losing his medical licence,** is believed to have returned to Europe several years ago. The Z-Process involved several holders, one of whom restrained the head, while others rubbed their knuckles up and down the child's ribcage **"in order to provoke rage and overcome resistance"**. Children could be restrained for two hours, said Zaslow, although sessions could last eight hours. **Active resistance and bruising were to be expected** before the child admitted that the therapist was "boss". .... A technique linked to AT is "re-parenting", introduced in American by Jacqui Schiff, a social worker now retired. She treated adults as children, making them wear nappies and suck on teats, to re-structure their early development. **Schiff's methods have been denounced as "sadistic pseudo-science"**. In one personal account she described touching the genitals of a naked, restrained patient, her adopted son, with a large hunting knife to confront his castration anxiety. **He was later convicted of involuntary manslaughter in the scalding death of a schizophrenic youth,** aged 16, in 1972. Dr. Jean Mercer, professor of psychology at Richard Stockton College in New Jersey... has raised concerns about attachment therapy... in a paper on "potentially dangerous" AT methods, published in the current Journal of Child and Adolescent Psychiatric Nursing, Dr. Mercer itemises eight "red flag" warnings about suspect treatments. **These include "cult-like defensiveness", and "absence of empirical support",** and poor comparisons with "accepted psychotherapy practices". .... **THE AT [HOLDING THERAPY] TECHNIQUES ARE A HISTORICAL DESCENDANT OF THE BAD OLD DAYS OF MENTAL HEALTH TREATMENT IN WHICH PATIENTS WERE WHIPPED, CHAINED, AND EVEN THROWN INTO SNAKE PITS, TO CREATE TERROR THAT WOULD SHOCK THE PATIENT BACK TO SANITY.** .... During the trial the Colorado legislature hastily passed a law forbidding the rebirthing technique that killed Candace, but it is widely criticized as **riddled with loopholes.** Meanwhile, the governing body of AT, the Association for Treatment and Training in the Attachment of Children, or ATTACH, does not answer queries from journalists and its website is being "rebuilt". Connell Watkins and Associates has closed, and she and Julie Ponder now begin their 16 years each in prison. The body of Candace was cremated."

**PROF. JEAN MERCER -- A NATIONAL EXPERT IN THIS FIELD -- APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

Dear Dr. Barden:

I am writing to express support of your statement that "holding therapy" and "rebirthing" are both types of coercive restraint therapy and may accurately be categorized in the same way....

**In spite of the minor differences between the two practices, however, "rebirthing" and "holding" (as well as other unvalidated restraint therapies) are both clearly derived from the same philosophy or set of assumptions about human beings, a philosophy that is completely at odds with our evidence-based understanding of early development.** Briefly, the philosophy behind both "rebirthing" and "holding" therapies contains the following assumptions:

1. It is possible to rework or recapitulate an error in emotional development by a ritual repetition of events that would normally take place much earlier in life.
2. Emotional attachment to parents begins prenatally rather than in the second half-year of life.
3. Post-natally, attachment progresses as a result of the satisfaction of physical needs.
4. Healthy attachment causes children of all ages to be affectionate and cheerfully obedient to their parents and others in authority.
5. Parental authority must be absolute in order for a child of any age to develop good mental health.
6. Children who have been separated from their birth parents, even immediately after birth, react to this event with continuing rage and are unable to form new attachments without treatment; the same is true of children who have experienced painful and traumatic early lives.
7. Rage can be neutralized by physical and verbal expression, but remains present and prevents affectionate relationships if unexpressed.
- 8. The expression of rage can be forced by physical and emotional discomfort, which the child resists out of a desire not to change; the child's complaints of fear or pain reflect the resistance to change rather than any genuine harm.**
9. Neutralization of rage is followed by a brief period in which a child of any age is ready to form an emotional attachment.
10. Eye contact and sweet foods are powerful instruments in the formation of emotional attachment and can be used for this purpose in a child of any age.
11. Children who are unhappy, disobedient, and difficult to deal with are suffering from attachment disorders; all adopted children also suffer from attachment disorders.
12. If attachment disorders (as described above) are not treated through coercive restraint techniques, the children will grow up to be vicious criminals, possibly serial killers.

As I have noted in a number of published articles and in a forthcoming book (see attached c.v.), **not one of these assumptions is congruent with knowledge of child development as it has been established through half a century of careful empirical work. It is this set of assumptions, far more than the specific techniques used, that has led to the deaths of children in both "rebirthing" and "holding".** Assumption #8, above, is a particularly dangerous one, because it encourages parents and practitioners to ignore a child's genuine pleas of distress in a way that appears to most observers devoid of common sense. Assumption #12, of course, is a most frightening claim that can persuade a hesitant parent to submit a child to

either "rebirthing" or "holding". Assumption #11 exposes the most vulnerable of all our children to unvalidated treatments with a real potential for harm.

To summarize, then, **I agree strongly with the statement that "rebirthing" and "holding" belong to the same category of unvalidated mental health practices, that of coercive restraint therapies.**

Thank you for the opportunity to provide this information at a time when the Utah legislature is making a most important decision.

Yours sincerely,

Jean Mercer, Ph.D.

Professor of Psychology

President, New Jersey Association for Infant Mental Health

**SEE ADDITIONAL INFORMATION AND STATEMENTS AT  
[www.KidsComeFirst.info](http://www.KidsComeFirst.info)**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**A-8 DR. BARDEN'S COMMITTEE STATEMENT :** You made two statements which we'd appreciate being clarified: 1) "I can't really say what people went through when they were in these therapies" with 2) "in all of the treatments that I have been able to observe, either by videotape or actually speaking to people in great detail"

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Haven't you seen coercive restraint therapy as defined in HB5? How many times? Didn't you see rebirthing therapy? Please help.

**DR. BARDEN'S RESPONSE:** My understanding was that the questioner was asking about the treatments experienced by the SPECIFIC patients who testified in person that day at that hearing -- **I obviously can't say what THOSE INDIVIDUAL PATIENTS went through as I have not investigated THE CASES OF THOSE INDIVIDUAL PATIENTS...** I can certainly talk about what I saw on video and heard in interviews regarding rebirthing, holding and other coercive restraint therapy. (see complete answers above).

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**A-9 DR. BARDEN'S COMMITTEE STATEMENT :** "...only the expert witnesses saw all of the tapes and I believe I'm the only person in the State to see all of them and what I viewed in the Newmaker case is exactly what I viewed in the state, of Utah."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Will you provide evidence for this statement to help us see how the therapy in Utah is like rebirthing therapy and provide documentation regarding the tapes you viewed in Utah? Can you provide a listing of the holding therapy (coercive restraint) sessions you witnessed

and the dates of those sessions and any further detail as to who the therapist(s) were and age of the patient. How did you "view" them (e.g. in person, closed circuit, video tape, etc.)?

**DR. BARDEN'S RESPONSE TO THESE QUESTIONS AND STATEMENTS REGARDING REBIRTHING (NEWMARKER TAPES) AND HOLDING THERAPY BY UTAH THERAPISTS (NATIONAL MEDIA TAPE PLUS PATIENT INTERVIEWS PLUS COLLATERAL WITNESSES, DOCUMENTS, AND MEDICAL RECORDS):**

**FRANKLY YOUR QUESTIONS RAISE COUNTER QUESTIONS ABOUT WHETHER YOU ARE EVEN ASKING THESE IN GOOD FAITH -- HAVE YOU NOT READ THE UTAH ATTORNEY GENERAL'S DOPL COMPLAINT AND REPORT ON "HOLDING THERAPY" IN UTAH?**

You appear to have been badly misinformed by someone on this crucial issue. As a national expert in psychology and law and as an expert witness in the Newmaker (death by holding therapy) case in Colorado and based upon my knowledge, training and experience (Ph.D. in psychology from Minnesota, Berkeley, Palo Alto VA Med Ctr/Stanford, JD cum laude in law from Harvard Law School) and based upon my knowledge of scientific methodology (2 national research awards in psychology and editorial work on many professional journals) it is my considered opinion at this time that "rebirthing" is simply a strikingly reckless and dangerous form of "coercive restraint therapy" a.k.a. "coercive therapy techniques" a.k.a. "attachment therapy" -- with "holding therapy" and "rebirthing" both being versions of this kind of "treatment".

Your apparent error and confusion is common in nonprofessionals (and in some poorly educated professionals). Some research into the issue is usually needed before folks understand the underlying components of similar "therapies" with different names.

BOTH rebirthing (as I viewed it in on the Newmaker videos) AND holding therapy (as I viewed it on the Newmaker videos, viewed it on national media video and reviewed it in numerous interviews of patients who suffered through "holding therapy" and reviewed in the Utah DOPL report re: practices of these "therapists" in Utah INVOLVE: imparting false information to the patient about the effects of the treatment, utterly failing to obtain informed consent, manipulating the patient with bizarre and pseudoscientific "theories" to convince them to undergo procedures causing suffering and trauma, screaming at the patient, insulting the patient, grinding elbows - hands- knees - etc into the patients body, threatening the patient, and other bogus and coercive measures. There is little difference between these forms of quackery except for the psychodrama "birth" experience at the very end of a rebirthing session. Rebirthing and holding "therapies" are, therefore, different "techniques" of the same pseudo-treatment known as "coercive restraint therapy" or "coercive restraint techniques."

**THE UTAH PSYCHOLOGICAL ASSOCIATION APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE: I note for the record that the Utah Psychological Assn. apparently agrees with my assessment in this matter.**

See, Utah Psychological Association, Coercive Treatment Techniques (including Holding Therapy), POSITION STATEMENT

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"Recent attention has been given by the media and the community to a variety of practices that can be described as "coercive therapy techniques." These include practices such as prolonged restraint other than for the protection of the individual or others, prolonged noxious stimulation, interference with bodily functions such as vision and breathing, and the forced administration of substances such as water or other fluid (other than medication prescribed by an appropriately licensed professional). These coercive interventions, typically employed with children and adolescents, have been referred to as holding therapy, attachment therapy, re-birthing, rage therapy, and other things. Some therapists employ the same labels for noncoercive techniques and actually use other methods. The Utah Psychological Association, therefore, maintains that it is critical to refer to actual techniques, rather than the name given to them, to prevent misunderstanding. The phrase "coercive therapy techniques" accurately encompasses the intrusive and potentially abusive behaviors described above.

Despite multiple cases of injury and/or actual death of children treated with these so-called therapy techniques, a minority of therapists continue to advocate their use. The Utah Psychological Association, as well as a number of other professional organizations, maintains that there is no scientific evidence to support the effectiveness of such interventions. In addition, coercive therapy techniques are contrary to most State and mental health facility regulations that prohibit the use of physical intervention, except as required for the immediate protection of the client/patient or others (for example, the Utah Department of Human Services Policy and Resource Manual, Section 5-03, "Provider Code of Conduct"). The Utah Psychological Association also maintains that such techniques are prohibited by the Utah State Psychologist Licensing Act Rules (R156-61-502). Finally, there is a strong clinical consensus that coercive therapy techniques are, in fact, contraindicated and potentially dangerous, constituting a form of physical and/or emotional child abuse.

The Utah Psychological Association, therefore, unequivocally opposes the use of coercive therapy techniques. Use of such techniques by a member of the UPA constitutes grounds for investigation by the organization's Ethics Committee and for potential professional censure."

**EVEN THE QUACK "HOLDING THERAPISTS" IN THE NEWMARKER CASE APPARENTLY ALSO VIEW HOLDING THERAPY AND REBIRTHING AS TECHNIQUES WITHIN THE SAME KIND OF TREATMENT:**

I further note for the record that even the very therapists who killed Candace Newmaker apparently agree with almost everyone else's classification of "rebirthing" as simply a form of "holding therapy". Even the defendant "holding therapist" C. Watkins -- while testifying under oath -- agreed with my opinion (and the opinion of the APA and UPA, etc.) that holding therapy is "not backed by scientific studies".

**U.S. NEWS MEDIA:** THE DENVER CHANNEL, Accused Therapist Testifies In Rebirthing Trial... Watkin's Testimony Continues Tuesday GOLDEN, Colo., 6:16 p.m.

MDT April 16, 2001 -- The therapist accused in the death of a 10-year-old girl took the stand Monday to defend herself and the unconventional rebirthing technique she used as part of the girl's therapy. Connell Watkins appeared to be shaking as the judge swore her in..... Watkins, 54, and fellow psychotherapist Julie Ponder, 40, are charged with reckless child abuse resulting in the death of Candace Newmaker (pictured, left) of Durham, N.C. Candace died of asphyxiation after a controversial rebirthing therapy last April. Watkins on Monday defended her rebirthing therapy, often looking directly at the jury. **She explained the effects of reactive attachment disorder, and admitted that although "rebirthing" and "holding" are not universally accepted therapies and not backed by scientific studies, she said, "I do it [rebirthing and holding] because it works."...** Candace was diagnosed with attachment disorder, which makes children resist forming loving relationships and frequently makes them violent and unmanageable. **Watkins said that she discovered "holding" therapy", where the patient is physically held during the session, in the mid-1970s when she was doing social work with foster children. "I establish that I am in control and that I am the boss at that time," Watkins said. "That will bring out the rage they have repressed.**

#### **THE MEDICAID SYSTEM APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

**I also note for the record that the Medicaid Administration appears to agree with my opinion on this matter:**

**Medicaid Information Bulletin (for the State of Utah), January 2002 Section 02-18, at page 10. Coercive Intervention Techniques Not Covered (holding, rage, rage reduction, attachment or rebirthing therapies).** Medicaid does not cover the use of "coercive techniques" where the therapist or others under the direction of the therapist use restraint other than for the protection of the child... **Coercive interventions are sometimes also referred to as "holding therapy", "rage therapy", "rage reduction" therapy, "attachment therapy", or "rebirthing therapy."**

#### **THE UTAH PUBLIC MENTAL HEALTH SYSTEM APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

Utah Public Mental Health System, Treatments for Reactive Attachment Disorders in Children, Practice Guidelines, Updated 11/13/01 .... **"No coercive methods of treatment will be approved..."** [thus "holding therapy" and "rebirthing" -- both coercive methods are not approved]

#### **MEMBERS OF THE NATIONAL AND INTERNATIONAL NEWS MEDIA APPARENTLY AGREE WITH DR BARDEN ON THIS ISSUE:**

**U.S. MEDIA:** Kreck, Carol , 'Rebirth' death spurs warning, THE DENVER POST, June 4, 2000 Denver Post Staff Writer " Following April's **"rebirthing" death of a 10-year-old girl**, state authorities are threatening to pursue child-abuse charges against mental-health professionals who physically restrain children as part of psychotherapy..... The department's warning puts scores of licensed and unlicensed mental-health practitioners who specialize in so-called aversive therapies on notice..... **Similar therapies have been called "holding therapy" or "rage reduction therapy."** Rebirthing itself emerged from the explosion of alternative



therapies in California in the 1970s; its founder was a therapist named Leonard Orr. He was a strong believer in the theory of birth trauma, or that many psychological problems can be traced to some trauma either in the womb or during labor and delivery. Orr reportedly had an epiphany one day while taking a bath. He is said to have reexperienced his own birth while soaking in the tub. Orr now lives in upstate New York and did not return phone messages."

**INTERNATIONAL NEWS MEDIA:** "Reed, Christopher "The cuddles that kill", Glasgow Herald, Scotland, June 21, 2001, (Features, page 17) ... Christopher Reed reports on the controversial American therapy that killed Candace Newmaker.

In a court hearing this week in Colorado, **two women, Connell Watkins and Julie Ponder were given the minimum prison sentence of 16 years each for suffocating to death a 10-year-old girl, Candace Newmaker**, in a grotesque "re-birthing therapy" technique. Most Americans think this will end a horrific but isolated incident. ... As a result of the Newmaker case, many victims of frighteningly similar treatment from all over America are coming forward to describe what they suffered. One is Jessica Bice (sic), who asked the judge to impose maximum sentence and whose letter was read in court. She said the Newmaker case was "not the first time that this therapy has killed". She said "Watkins did **rage reduction therapy** on me when I was aged five to 11" in which **she suffered "bruises under the arms and verbal abuse"**. She said Watkins "never cared if I was hurting or tired, but I was lucky, I was strong." **The treatment involves deliberate violence and abuse of young children who are prevented from moving, gripped in holds that can restrict breathing, and "take downs" in which they are knocked to the floor in a rugby tackle.** Parents are also encouraged to withhold food. Clinics charge thousands of dollars for such treatment, which may be performed by unqualified staff. **It is called Attachment Therapy (AT), and is used on children, usually adoptees, suffering Reactive Attachment Disorder (RAD)**, the "disease" diagnosed in Candace Newmaker, the girl who died in a Colorado clinic. Some psychologists recommend AT, but the APA declines to recognize it as proper treatment....

In a country where dubious psychological treatments are commonplace, **the techniques follow the history of quackish remedies, with attendant gurus of outlandish theories. AT can be seen as a fad that replaces the disastrous "repressed memories" cases of the 1980s and 1990s** in which dozens on innocent people went to prison on baseless charges of sexually molesting children. RAD is defined as a child's inability to bond with parents, and attachment practitioners claim 90% of adoptees suffer from it because of the traumatic loss of their natural mother. Its symptoms include sullen and distant behavior, violent temper, aggression, and uncontrollable acting-up. **Attachment, or "holding" therapy, uses physical restraint, abuse, and violence, deliberately inducing rage, terror, and panic.** This rage is then supposed to dissipate and the child develops warm affection and eye contact with the present parent, creating "attachment" and loving, obedient behavior..... Candace suffocated while the therapists leaned on her supine, wrapped body talking for half an hour about housing prices. The entire episode was filmed and shown at the trial in April. **Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up.** ..... AT can be traced to Wilhelm Reich, the Freudian-Marxist psychiatrist from Vienna. **He was imprisoned in the US in 1956 for fraudulently promoting his "orgone box", which was supposed to boost sexuality and mental health. He died in prison in 1957.** ..... Several psychologists continued to develop AT theory, but a more definitive -- and controversial principle was Robert Zaslow's Z-Process, which detailed in 1975 the restraining and rebirthing techniques. **Zaslow, who lived in California until losing**

**his medical licence**, is believed to have returned to Europe several years ago. The Z-Process involved several holders, one of whom restrained the head, while others rubbed their knuckles up and down the child's ribcage **"in order to provoke rage and overcome resistance"**. Children could be restrained for two hours, said Zaslow, although sessions could last eight hours. **Active resistance and bruising were to be expected** before the child admitted that the therapist was "boss". .... A technique linked to AT is "re-parenting", introduced in America by Jacqui Schiff, a social worker now retired. She treated adults as children, making them wear nappies and suck on teats, to re-structure their early development. **Schiff's methods have been denounced as "sadistic pseudo-science"**. In one personal account she described touching the genitals of a naked, restrained patient, her adopted son, with a large hunting knife to confront his castration anxiety. **He was later convicted of involuntary manslaughter in the scalding death of a schizophrenic youth**, aged 16, in 1972. Dr. Jean Mercer, professor of psychology at Richard Stockton College in New Jersey... has raised concerns about attachment therapy... in a paper on "potentially dangerous" AT methods, published in the current Journal of Child and Adolescent Psychiatric Nursing, Dr. Mercer itemises eight "red flag" warnings about suspect treatments. **These include "cult-like defensiveness", and "absence of empirical support"**, and poor comparisons with "accepted psychotherapy practices". .... **THE AT [HOLDING THERAPY] TECHNIQUES ARE A HISTORICAL DESCENDANT OF THE BAD OLD DAYS OF MENTAL HEALTH TREATMENT IN WHICH PATIENTS WERE WHIPPED, CHAINED, AND EVEN THROWN INTO SNAKE PITS, TO CREATE TERROR THAT WOULD SHOCK THE PATIENT BACK TO SANITY.** .... During the trial the Colorado legislature hastily **passed a law forbidding the rebirthing technique that killed Candace, but it is widely criticized as riddled with loopholes**. Meanwhile, the governing body of AT, the Association for Treatment and Training in the Attachment of Children, or ATTACH, does not answer queries from journalists and its website is being "rebuilt". Connell Watkins and Associates has closed, and she and Julie Ponder now begin their 16 years each in prison. The body of Candace was cremated."

**PROF. JEAN MERCER -- A NATIONAL EXPERT IN THIS FIELD -- APPARENTLY AGREES WITH DR BARDEN ON THIS ISSUE:**

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5. Parental authority must be absolute in order for a child of any age to develop good mental health.

6. Children who have been separated from their birth parents, even immediately after birth, react to this event with continuing rage and are unable to form new attachments without treatment; the same is true of children who have experienced painful and traumatic early lives.

7. Rage can be neutralized by physical and verbal expression, but remains present and prevents affectionate relationships if unexpressed.

**8. The expression of rage can be forced by physical and emotional discomfort, which the child resists out of a desire not to change; the child's complaints of fear or pain reflect the resistance to change rather than any genuine harm.**

9. Neutralization of rage is followed by a brief period in which a child of any age is ready to form an emotional attachment.

10. Eye contact and sweet foods are powerful instruments in the formation of emotional attachment and can be used for this purpose in a child of any age.

11. Children who are unhappy, disobedient, and difficult to deal with are suffering from attachment disorders; all adopted children also suffer from attachment disorders.

12. If attachment disorders (as described above) are not treated through coercive restraint techniques, the children will grow up to be vicious criminals, possibly serial killers.

As I have noted in a number of published articles and in a forthcoming book (see attached c.v.), **not one of these assumptions is congruent with knowledge of child development as it has been established through half a century of careful empirical work. It is this set of assumptions, far more than the specific techniques used, that has led to the deaths of children in both "rebirthing" and "holding".** Assumption #8, above, is a particularly dangerous one, because it encourages parents and practitioners to ignore a child's genuine pleas of distress in a way that appears to most observers devoid of common sense. Assumption #12, of course, is a most frightening claim that can persuade a hesitant parent to submit a child to either "rebirthing" or "holding". Assumption #11 exposes the most vulnerable of all our children to unvalidated treatments with a real potential for harm.

**To summarize, then, I agree strongly with the statement that "rebirthing" and "holding" belong to the same category of unvalidated mental health practices, that of coercive restraint therapies.**

Thank you for the opportunity to provide this information at a time when the Utah legislature is making a most important decision.

Yours sincerely,

Jean Mercer, Ph.D.

Professor of Psychology

President, New Jersey Association for Infant Mental Health

**My statements to the Committee were completely accurate and remain my considered opinion at this time.**

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**A-10. DR. BARDEN'S COMMITTEE STATEMENT : "People were beaten, bruised, spit on, yelled at, screamed at, swore at."**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Would you please provide evidence all of the above. Names, dates, places, therapists, etc.

**DR. BARDEN'S RESPONSE TO QUESTIONS RE: PATIENTS WHO WERE BEATEN ETC DURING QUACK "HOLDING THERAPY"**

As you well know, patient confidentiality precludes my releasing the names of the living patients. Candace Newmaker's case -- I was an expert witness for the State of Colorado in that case -- has been reported worldwide. She was beaten, bruised, spit upon, yelled at, screamed at, swore at, etc.... The few experts who saw ALL of these tapes (day after day of "holding therapy" ending with "rebirthing") were significantly impacted by watching this child tortured in "holding therapy."

**GIVEN THE DOPL REPORT ON "HOLDING THERAPY" IN UTAH, THIS QUESTION RAISES COUNTER QUESTIONS ABOUT WHETHER THESE ARE EVEN GOOD FAITH QUESTIONS. ARE THEY? WHAT DID THE DOPL REPORT SAY ABOUT THESE ISSUES?**

**Also see, INTERNATIONAL NEWS MEDIA:** "Reed, Christopher "The cuddles that kill", Glasgow Herald, Scotland, June 21, 2001, (Features, page 17) ... Christopher Reed reports on the controversial American therapy that killed Candace Newmaker.

In a court hearing this week in Colorado, two women, Connell Watkins and Julie Ponder were given the minimum prison sentence of 16 years each for suffocating to death a 10-year-old girl, Candace Newmaker.... **The treatment involves deliberate violence and abuse of young children who are prevented from moving, gripped in holds that can restrict breathing, and "take downs" in which they are knocked to the floor in a rugby tackle.** ..... It is called Attachment Therapy (AT), and is used on children, usually adoptees, suffering Reactive Attachment Disorder (RAD)... In a country where dubious psychological treatments are commonplace, the techniques follow the history of quackish remedies, with attendant gurus of outlandish theories. AT can be seen as a fad that replaces the disastrous "repressed memories" cases of the 1980s and 1990s .... **Attachment, or "holding" therapy, uses physical restraint, abuse, and violence, deliberately inducing rage, terror, and panic.** This rage is then supposed to dissipate and the child develops warm affection and eye contact with the present parent, creating "attachment" and loving, obedient behavior..... Candace suffocated while the therapists leaned on her supine, wrapped body talking for half an hour about housing prices. The entire episode was filmed and shown at the trial in April. **Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up.** ..... AT can be traced to Wilhelm Reich, the Freudian-Marxist psychiatrist from Vienna. He was imprisoned in the US in 1956 for fraudulently promoting his "orgone box", which was supposed to boost sexuality and mental health. **He died in prison in 1957.**

MEDIA cont.:

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May 28, 2001 -- SECTION: FEATURES; Pg. 20

**HEADLINE: Death by Therapy; The New Age counselors who killed a little girl -- and the "child welfare" regime that enabled them**

BYLINE: BY CHRISTOPHER CALDWELL; Christopher Caldwell is senior writer at THE WEEKLY STANDARD.

The death of 10-year-old Candace Newmaker -- who was asphyxiated last year during a bizarre New Age therapy for a dubious disorder -- had all the ingredients of an O. J. Simpson-esque cause celebre. It's not just that Candace was a particularly charming girl, although she appears to have been. It's also that her therapists-cum-captors, throughout the Denver trial that ended in their conviction on April 20, showed every outward sign of unrepentant evil. They even videotaped the entire hour over which Candace was gruesomely killed.

Yet the New York Times gave the case only a brief story in the waning days of the trial, the Washington Post honored the guilty verdict with just a wire-service snippet deep inside the paper, and the networks were largely silent. Peggy Lowe's excellent reporting on the case in the Denver Rocky Mountain News never got the national attention it deserved. Candace Newmaker's story is a grisly one, but the media's inability to make sense of it may have another explanation -- that it tells ordinary Americans something they don't want to hear about the plight of a lot of their own children.

Candace Newmaker (born Candace Elmore) was removed by social service authorities from her home in Lincoln County, North Carolina, in 1995. She was given up for adoption (at age 6) to an unmarried Durham heiress and aspiring single mother named Jeane Newmaker, who lives in a five-bedroom house and works as a nurse practitioner. Newmaker showered her daughter with gifts and affection, but was troubled to find the two weren't "bonding." Candace continued to miss her siblings Michael and Chelsea and (go figure!) her mother. She had a temper. She knocked down a bookcase. Jeane Newmaker claims she killed her goldfish.

Jeane started surfing the Internet for information on Candace's "problem." She discovered ATTACH, the Association for Treatment and Training in the Attachment of Children. She attended one of their conventions in Alexandria, Virginia. There she discovered "reactive attachment disorder," or RAD, the clinical name for a child's inability to bond with new parents. **It may not surprise the reader to hear that a therapist who'd never met Candace (then at home in North Carolina) diagnosed her with RAD in absentia.**

**Since by definition "attachment" involves two people, there's something odd about the way reactive attachment disorder is identified as an illness of only one of them -- the one who's not paying the bills.** But leave that aside. In Candace Newmaker's case, the oddest thing about her reactive attachment disorder is that it had no symptoms discernible to anyone except her adoptive mother.

**"She wasn't a behavior problem at all," says Candace's first-grade teacher.** Others note that she was fond of animals and particularly kind to special-ed students. The Los Angeles Times interviewed the father of her best friend, who says not only that he "never saw the two girls argue," but also that he **"never saw any indications of a problem."** The most hard-line view of Candace comes from an attention-deficit-disorder specialist who compared Candace's behavior to "having the average 18-year-old adolescent in your house." **Candace's biggest problem seemed to be missing her birth family.** Kids at school taunted her for constantly drawing pictures of Michael and Chelsea, the brother and sister they assumed were figments of her imagination.

Defenders of the RAD concept (there are many of them, and they have grown in number since the wave of adoptions of troubled Eastern European children that followed the fall of the Berlin Wall) are quick to say that that's exactly the problem. Charm and self-control are the symptoms of secret obstreperousness. Most defenses of RAD take the form of "Outwardly, things appeared fine . . . but behind closed doors . . . "

ATTACH referred Jeane Newmaker to 54-year-old Connell Watkins, whose most advanced degree was a master's in social work from Denver University. Watkins's practice, like those of a half-dozen other radical attachment-disorder therapists, was based in Evergreen, Colorado. It was there, in the 1970s, that psychiatrist **Foster Cline founded "rage reduction therapy" -- one of those euphemisms, like "re-education," that bundle together several kinds of sadism that would get a person arrested were they inflicted on a non-consenting adult.** Cline's methods crossed the line in any case. Cline stopped practicing in 1988 after a gutsy 11-year-old ran away following a session and described to authorities the abuse he had been made to undergo. Cline settled in court with the state of Colorado and moved to Idaho. Many of his proteges stopped using Cline's therapies at that point. Watkins was the most prominent of his disciples to press on with them.

Newmaker agreed to pay Watkins \$7,000 for a two-week course of treatment. A major part of it was the "holding therapy" invented by Cline. This involves touching the child in intimate ways in order to render him vulnerable and break his sense of mastery over his environment. As Watkins described it, "I establish that I am in control and that I am the boss at that time." And how. **According to a wire report, during one 160-minute session in the last week of her life, Candace "had her face grabbed 90 times, was shaken or bounced 309 times . . . was shouted at 65 times, [and] was threatened 49 times with such consequences as being abandoned or institutionalized."** \*\*

Watkins threatened to shave Candace's head and tattoo it, and asked her if she had ever seen her (natural) mother have sex. Since Candace proved (to use Watkins's word) "resistive," Watkins and her assistant resorted to insults: "You act pretty stupid. . . . You're a liar and you lie all the time." All such therapies take not just planning but adult muscle. As Cline himself explained to a journalist, "You have to use some sort of strength to get the kids to allow touch." One notices the line blurring between therapy and rape.

It blurred further the day before Candace died, when Watkins moved on to "compression therapy." Jeane Newmaker lay on top of Candace and, on Watkins's instructions, licked her face. That Candace submitted to this was thought a breakthrough. Watkins decided to "build on" her supposed receptivity, and attempt a "rebirthing" session the next day. By simulating for Candace a trip through the birth canal, therapists would symbolically "deliver" her to Jeane Newmaker, and erase the inconvenient natural birth Candace had gone through ten years before. Watkins had been taught the method by the California-licensed New Age marriage therapist Douglas Gosney during a barnstorming tour he made through Evergreen in 1999. **Prosecutors alleged that Gosney had been fired from a hospital for "inappropriate contact with a patient," and that he claims to be able to remember his own birth. Gosney would become one of Watkins's most vocal public defenders during her trial.** \*\*

This rebirthing took even more planning and muscle than the usual Watkins therapies. Watkins not only needed her 40-year-old assistant Julie Ponder (who stood trial alongside her this spring). She also enlisted for the occasion two other helpers -- one male, one female. **Candace's "rebirthing" involved wrapping her tightly in a navy flannel blanket, covering her**

**with eight cushions, and having the four adults -- who weighed a total of 673 pounds -- sit on the 70-pound girl, bounce on her, and squeeze her to "simulate contractions," while taunting Candace about not "wanting" to be born enough. Her adoptive mother witnessed the whole thing. \*\***

So proud was Watkins of her novel treatment that she videotaped it from start to finish. This is not the place to describe fully the gruesome contents of the tape. It was shown to the jury in its entirety. (A transcript is available at the Rocky Mountain News website under "Candace's Final Hour.") Whereas none of Gosney's "rebirthings" had lasted more than six minutes, Candace's went on for seventy. Things started going wrong almost immediately. Ten minutes into the procedure, Candace was begging to be let out, warning that she was dying, that she couldn't breathe. But that was just a symptom of her sickness, part of her "denial." As one Evergreen attachment guru approvingly explained to the Los Angeles Times, "You need to use 'paradoxical intention.' When they say, 'I'm going to die' you say, 'Go ahead and die.' That way, you defuse the oppositional element. If you respond to it, you buy into it."

That's exactly the way Watkins and Ponder saw things. Sixteen minutes in, after her sobs and her pleas to be released have been ignored, Candace says, "You mean, like you want me to die for real?"

Ponder says: "Uh huh."

"Die right now and go to heaven?"

**"Go ahead and die right now," Ponder replies. "For real. For real." At one point Ponder was even bracing her feet against a fireplace in order to heave more force into her. \*\***

Among the most poignant elements in the video are the deference and exquisite good manners that this supposedly rude and cantankerous child shows throughout. She always says please, and frequently says sorry. At twelve minutes in: "Please quit pushing on me." At fourteen minutes: "OK, I'm dying. I'm sorry." At nineteen minutes: "Please, you said you would give me some oxygen." By contrast, the intimidation of her therapists is blunt and scatological. At twenty-three minutes, Watkins says, "Stay there with the poop and vomit." At forty minutes Ponder says, "She's stuck there in her own puke and poop."

That was when Candace spoke her last word ("No"), at which point Ponder went into a nyah-nyah taunt -- "Quitter, quitter, quitter, quitter! Quit, quit, quit, quit. She's a quitter!" A half-hour later they unwrapped the blankets. Candace was dead.

**On April 20, a jury deliberated five hours before pronouncing Watkins and Ponder guilty on all counts. The main charge, on which the two will be sentenced in June, was "reckless child abuse resulting in death," which carries a penalty of 16 to 48 years imprisonment. Lesser charges against Watkins include criminal impersonation, obtaining a signature by deception, and unlawful practice of psychotherapy. \*\***

Both defendants were wholly emotionless throughout the trial. As one juror put it, "I was waiting for at least any glimpse of remorse or sorrow or regret that they had ignored Candace, and I was quite shocked that that just never happened." Watkins and Ponder were not only remorseless but defiant. Said Watkins, "It could look to the superficial observer of the tape that she couldn't breathe. I knew she could." **This was part of a strategy to confuse jurors about what asphyxia is. The defense wanted to focus on the question of whether the blanket had been porous enough to breathe**

**through, and leave to one side the question whether a 70-pound girl's lungs could open under the 673-pound weight of four bouncing adults.**

In the end, Watkins's lawyers tried to claim Candace's death had had nothing to do with the "treatment" whatsoever. After all, no vomit was found in Candace's lungs. So she could have had a congenital heart condition! She could have died from one of the three medications she had been placed on for her RAD. She could have died from having stopped those medications. Or something. As Watkins put it, "Somehow the 10-year-old inexplicably stopped breathing." Watkins sent this observation to an Internet site set up by her defenders in the attachment-therapy profession. During the trial, Watkins contributed postings in which she warned that a wave of Columbine High School incidents and similar depredations awaited society if she and her colleagues were hindered from bringing future sociopaths like Candace to heel.

Deciding whom to blame for Candace Newmaker's death is harder than it looks. **The quack Watkins is easily enough taken care of.** She, personally, will be put away for a long time, and her therapies will be, too, at least in Colorado. In the aftermath of the trial, the state's governor Bill Owens signed "Candace's Law," to ban rebirthing therapy. No one will regret this bit of political posturing. But the next time such a thing happens, the therapy involved will be slightly different. Those who claim it's impossible to police the fringes of medicine are correct.

**It's impossible, because this is really not a medical case at all. Watkins's treatments have less in common with medicine and therapy than they do with cult rituals.** In this respect, Candace Newmaker was like the children carried off to Jonestown. But cults aren't the only parallel. **There is sadism involved.** One has the sense that both Watkins and Ponder were actually getting a perverted thrill out of their treatment of Candace Newmaker, and to procure that thrill they had first to dehumanize their "patient." Anyone who has read the literature of twentieth-century totalitarianism will find political parallels.

Candace Newmaker was killed by something that goes much deeper than medical malpractice or rough trade or ideology -- by a mentality. Anyone can see the monstrous metaphysical arrogance in Watkins's treatment. If Watkins took seriously the idea that she was going to give "birth" to Candace -- and there is every indication that she did -- she had no sense that what she was squashing beneath those pillows was already a human being.

The person who understood best what had been done to Candace was her own birth mother, Angela Elmore, who raged at Jeane Newmaker for putting the child in that position. "You only have one birth," said Elmore. "I'm her mama. What I did was God's will. What [Jeane] did was cuckoo. She played God with my child."

Certainly Newmaker's role is a haunting aspect of the case. She acted not like a mother but an outraged consumer. She seems to have thought that when she adopted Candace she had a right to a "normal" parent-child relationship. When Candace's natural bond with the mother she'd known for her first six years persisted, Newmaker took Candace to Evergreen to be "cured" of it. Newmaker will stand trial on charges of criminally negligent child abuse in September (and Brita St. Clair and Jack McDaniel, the two assistants who helped squash Candace, will face the same charges as Watkins and Ponder).

Jeane Newmaker's terrible parental judgment should make us ask whether placing children in single-parent households is generally wise. Two heads being better than one, a simple but big problem with single parenthood is that it doesn't provide for built-in second (parenting) opinions. One parent's mistaking his child's temper for a "problem" requiring treatment may happen



from time to time, but it's much less likely that two parents will be thus deluded.

We can also blame the it-takes-a-village zeal with which North Carolina's authorities, acting in the name of the public, examine family dynamics, declare parents unsuitable, and separate children from their parents forever. North Carolina's practice in this regard is chilling in a way that goes beyond merely raiding poor families for upper-middle-class adoption prospects. It is Orwellian, and wholly unaccountable. Candace's early home life may have been dysfunctional enough to imperil her. But we can't know, because the never-look-back Lincoln County child welfare authorities who ordered her removed will neither speak to the press about the criteria they used to do so, nor unseal any of their records.

No one outside of North Carolina's family-welfare bureaucracy knows where Candace's siblings Michael and Chelsea are now. Certainly not their mother, Angela Elmore, for under the state's laws, once a child is removed from a home, all parental rights cease. And the state will go to any lengths to make sure they're never reasserted. Candace's very birth was rendered a nullity, through a bit of Zhdanovite airbrushing of the records: Upon Jeane Newmaker's adoption of Candace, the state of North Carolina issued a new -- and fraudulent -- birth certificate, listing the girl's birthplace as Durham and her name as Newmaker. Her original certificate, which records her birth in Lincolnton on November 19, 1989, and her name as Elmore, has been removed from the records. North Carolina's social workers rebirthed Candace before Connell Watkins did.

In keeping with this official obliteration of Candace Elmore, the state of North Carolina never told Angela Elmore of her own daughter's fate. She found out from two journalists who showed up one morning at the door to her trailer home. At that point, Candace had been dead for five months.

#### **THE JURY IN THE NEWMAKER CASE APPARENTLY AGREED WITH MY OPINION IN THIS MATTER:**

**I wrote to a member of the Newmaker jury who had written a previous statement regarding her experiences reviewing the "holding therapy" practices that led to Candace's death.**

2/11/03

Dear Dr. Barden:

Of course I remember you and your compelling testimony. I have no problem being quoted, however I would prefer to be referred to as simply a juror vs. NAME WITHHELD. These "wacko's" startle me and I don't want my family harassed.

Sincerely, NAME WITHHELD

From: E-MAIL ADDRESS WITHHELD  
Date: Tue, 11 Feb 2003 10:47:55 EST  
Subject: Candace Newmaker  
To: E-MAIL ADDRESS WITHHELD  
MIME-Version: 1.0

In April of 2001 I was chosen as a juror for the case against Connell Watkins and Julie Ponder. Reckless child abuse resulting in the death of 10 year old Candace Newmaker was the charge. During the trial we were told that Candace died during a rebirthing process. **As we viewed hours of**

video tape, we witnessed child abuse way before the rebirthing ever took place.

**The holding therapy (I use the word therapy loosely) that we witnessed on tape, WAS the child abuse.** We watched, and wept in horror as Watkins shook this sweet child's face. We saw Candace's fear as she trembled to "please" her abuser. We watched a 190 pound grown man (again I use the word man loosely), Jack McDaniels sit on her skinny legs as Watkins grabbed her face and shook it back and forth yelling "got it?". Candace begged repeatedly for mercy. She wept while being forced to call her abuser "ma'am." **This was reckless child abuse. This all took place BEFORE the rebirthing.**

Because of Candace's guts and courage during the holding therapy she was treated with even more abuse during the rebirthing therapy, which we thought was more on the lines of second degree murder, manslaughter at the least. Have you all seen these tapes? **Have you seen this vibrant child screaming during this so called holding therapy?** I've heard all the ridiculous rhetoric about Candace having a heart condition. Have you read the transcripts from the trial? The coroner and a heart specialist both swore under oath that this healthy vibrant 10 year old had no heart condition prior to coming to her Evergreen torture chamber. **How many children are going to be abused in the name of therapy.** I am now a student working toward a Masters Degree in Social Work and throughout all my studies, I've yet to read or research ANY therapy that requires sitting on a child, shaking her, screaming at her or calling her a "stupid liar."..

**Stop the torture.** I know for a fact that there are many other therapy's that offer safe and nurturing practices.

Sincerely,  
NAME WITHHELD  
Juror for Candace

See additional supporting documents in other answers above.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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**A-11 DR. BARDEN'S COMMITTEE STATEMENT :** "High school students who aren't licensed were laying on young girls for 3 hours at a time. This is the kind of stuff that is very, very common in this treatment program."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Can you please provide evidence that high school students are laying on young girls? Can you provide evidence that young girls are laid on for 3 hours at a time and that it is "very, very common" (E.g. daily, more than once a day, 3 times a week, always three hours, less, more, how many young girls were laid on, how many agencies/therapists do this, which ones)? Were the high school students males - females and what age were the young girls who were laid on.

**DR. BARDEN'S RESPONSE RE: SPECIFIC COMPLAINTS  
BY VICTIMS OF QUACK "HOLDING THERAPY":**

This information was obtained via interviews with local victims of "holding therapy". The patients involved are pursuing legal action. The practices in question have, I understand, been reported to the proper Licensing authorities.

Will local "holding therapists" testify -- under oath -- that this did not take place at local holding therapy centers?

I NOTE FOR THE RECORD THAT THE UTAH ATTORNEY GENERAL'S DOPL REPORT ON UTAH HOLDING THERAPISTS CONTAINS CONFESSIONS OF FAR WORSE AND FAR MORE BIZARRE BEHAVIOR.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

A-12. DR. BARDEN'S COMMITTEE STATEMENT : "Well then they should have no opposition to this bill whatsoever. If that's true, sir, if what this bill bans was not done to them by their therapist then they shouldn't have any problem with this bill whatsoever."

SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Please reconcile this statement with lines 15 and 16 of HB5. The opponents of the bill are saying these lines prevent any restraint outside of danger to self/others. Representative Buxton was referring to your statement that people were beaten. Do you see any way that the beating, bruising, spitting, and danger can be outlawed without outlawing holding therapy altogether? How does outlawing physical or mechanical restraint provide protection from physical battery?

DR BARDEN'S RESPONSE:

It is my understanding that HB 5 bans quack practices by licensed therapists.

It is and remains my expert opinion that that there is NO scientific support for "holding therapy" and that the dangers of "holding therapy" are very real and documented

Since there is NO scientific evidence to support holding therapy, it is and remains my expert opinion that "holding therapy" is health care fraud. The State of Utah should not be a co-conspirator in health care fraud. Licensing people to perform health care fraud is unwise and would bring international humiliation to the State of Utah.

It is and remains my expert opinion that only RECKLESS, IGNORANT and dangerous "therapists" would EVER practice this abusive, quack practice and that the THEORIES and ASSUMPTIONS underlying this quack, dangerous practice are a GRAVE DANGER. [See Statement of Prof Mercer above]. As documented above numerous national and local professionals association agree with my opinion on this issue -- to the best of my knowledge none agree with you.

It is and remains my expert opinion that those who wish to obtain "holding therapy" services following passage of HB 5 could obtain them from sources not sponsored, endorsed (i.e., licensed) by the State of Utah.

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**Child Welfare Oversight Committee - QUESTION SET B**

**B-1 DR. BARDEN'S COMMITTEE STATEMENT :** " holding, so-called therapy, or holding quackery or something like that, but it's certainly is very confusing to call something a therapy for which there is no scientific evidence that it is therapeutic...there's no scientific evidence for such coercive procedures"

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** This statement is not accurate. You appear to have intentionally ignored the Meyeroff and Mertlich research, Elizabeth Randolph research, etc..

**DR. BARDEN'S RESPONSE RE: SENATOR'S  
HELLEWELL'S ERRONEOUS BELIEFS RE: "RESEARCH"**

**THIS QUESTION HAS BEEN ANSWERED IN GREAT DETAIL ABOVE.**

Again you appear to be badly misinformed and confused on this serious issue. This level of confusion is odd. Have you had no training in science, whatsoever?

Specifically, this statement -- it is clearly not a question -- displays a deep confusion about the nature of science. Your "opinion" in this statement that my analysis "is not accurate" indicates that you may now believe you are a national expert in science -- do you really believe that? Are you claiming, Senator Hellewell, to be an "expert" in science? Will you do so under oath? If you are not an expert who is feeding you this (mis) "information"?

I note for the record as documented in detail above that **the American Psychiatric Association, the UPA etc, -- and all national experts I am aware of -- appear to agree with my position.**

"While some therapists have advocated the use of so-called coercive holding therapies and/or "rebirthing techniques", **there is no scientific evidence to support the effectiveness of such interventions.** American Psychiatric Association reactive attachment disorder position statement, June 2002. "

It is my considered opinion that the Meyeroff and Mertlich and Elizabeth Randolph publications certainly do NOT constitute "science" -- hardly -- they constitute "junk science". They are shockingly incompetent -- flawed pilot studies that have never been replicated at any credible institution. I am not aware of any national experts in psychology, psychiatry or social work that consider these incompetent projects "science".

More specifically, as any competent social scientist would immediately note the so-called evaluations of "progress" in the Meyerhoff study were not made by independent raters (that is they were not "blind" or "reliable" or "objective" raters). In fact, the evaluations of the children were made either by the patient's parents or by therapists -- both groups desperately seeking proof of improvement and thus obviously biased. In another egregious error these already biased raters apparently knew whether or not the children

were receiving "holding therapy", and their evaluations were therefore highly likely to have been further biased by this knowledge. As any neophyte psychology student at a decent college might know, these evaluations should have been done by raters, evaluators or practitioners who did not have an enormous personal interest in the outcome and who did not know what treatment the children were receiving. Without these minimal safeguards in place this "study" could not be considered worthy of the term "science". There are multiple other fatal flaws in this study including the failure to randomly assign children to treatment groups or non-treatment groups. Failing all of these minimal standards the Myeroff study qualifies only as "junk science".

**ESSENTIAL QUESTION FOR SENATOR HELLEWELL:** Senator Hellewell, for the record you ended your "question" statement with an "etc" ...To protect the integrity of this process, please list for me all of the studies that you claim offer "scientific support" for holding quackery. Senator, do you have "expert" witnesses who will dare to claim -- under oath -- that "scientific studies support holding therapy"? Who would dare do this? Have they received national research awards, served on editorial boards of major journals, and/or given invited addresses at major universities and medical schools? What associations will dare to back them up? Will you be the ONLY person making such claims?

**SEE VERY DETAILED ANSWERS TO THIS VERY ISSUE IN PREVIOUS QUESTIONS.**

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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**B-2 DR. BARDEN'S COMMITTEE STATEMENT :** "But you really shouldn't even get to that because the immediate intent is to harm, in order they think to help in the long term. But the clear immediate intent is to hurt and to terrorize these children into behaving."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** There is no proof provided for this statement. How does you intend to prove this - that the therapists intended to 'terrorize' or 'hurt'?

**DR. BARDEN'S RESPONSES RE; THE  
INTENT OF HOLDING THERAPISTS:**

**FRANKLY YOUR QUESTIONS RAISE COUNTER QUESTIONS ABOUT WHETHER YOU ARE EVEN ASKING THESE IN GOOD FAITH -- HAVE YOU NOT READ THE UTAH ATTORNEY GENERAL'S DOPL COMPLAINT AND REPORT ON "HOLDING THERAPY" IN UTAH? READ THE REPORT PLEASE.**

**DR BARDEN'S RESPONSE TO QUESTIONS/STATEMENTS  
RE: THE THEORY OF "HOLDING THERAPY" AND  
THE INTENT OF "THERAPISTS"**

In sum, my statement is accurate as stated and stands as my considered expert opinion. It is clear from review of holding therapy materials, videos and interviews with patients and depositions of therapists that the intent of so-called "holding therapy" is to induce pain, suffering and anger in the child -- the "therapists" believe such efforts are a "therapy." See assumption #8 in Prof. Mercer's analysis below.

SEE DETAILED ANSWERS TO THESE ISSUES IN RESPONSES TO PREVIOUS QUESTIONS including the letter from Prof. Mercer, the national and international news articles, etc.

[Error ridden Assumptions of these therapists] Prof. Jean Mercer.

" 8. The expression of rage can be forced by physical and emotional discomfort, which the child resists out of a desire not to change; the child's complaints of fear or pain reflect the resistance to change rather than any genuine harm. ...."

As I have noted in a number of published articles and in a forthcoming book (see attached c.v.), not one of these assumptions is congruent with knowledge of child development as it has been established through half a century of careful empirical work. It is this set of assumptions, far more than the specific techniques used, that has led to the deaths of children in both "rebirthing" and "holding". Assumption #8, above, is a particularly dangerous one,

THE DOPL REPORT AND INVESTIGATION OF THE UTAH ATTORNEY GENERAL'S OFFICE CONTAINS "CONFESSIONS" OF LOCAL "HOLDING THERAPISTS" THAT PROVIDE FURTHER EVIDENCE FOR MY OPINION IN THIS MATTER.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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B-3 DR. BARDEN'S COMMITTEE STATEMENT : "I don't think these people are trying to [permanently] injure children, they're not wicked [people]. They simply are shockingly ignorant and they are applying their ignorance to children with terrible, terrible results."

SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Prove the 'shocking ignorance' of the therapists. Which 'terrible, terrible results' came from coercive restraint as defined in HB5? Please respond with reference to the following: The definition of coercive restraint in this bill is "the application of physical force without the use of any device, for the purpose of restraining the movement of the patient's body." and "any manual method or physical or mechanical device, material, or equipment attached to or adjacent to the patient's body that the patient cannot easily remove that restricts freedom of movement or normal access to one's body."

DR. BARDEN'S RESPONSE REGARDING  
THE SHOCKING IGNORANCE OF THERAPISTS

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**FRANKLY YOUR QUESTIONS RAISE COUNTER QUESTIONS ABOUT WHETHER YOU ARE EVEN ASKING THESE IN GOOD FAITH -- HAVE YOU NOT READ THE UTAH ATTORNEY GENERAL'S DOPL COMPLAINT AND REPORT ON "HOLDING THERAPY" IN UTAH? DIDN'T THE UTAH "HOLDING THERAPISTS" DEMONSTRATE TRULY SHOCKING IGNORANCE IN RESPONDING TO INVESTIGATORS -- PLEASE READ THE DOPL REPORT.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED PREVIOUS ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**THE DOPL REPORT AND INVESTIGATION OF THE UTAH ATTORNEY GENERAL'S OFFICE CONTAINS "CONFESSIONS" OF LOCAL "HOLDING THERAPISTS" THAT PROVIDE FURTHER EVIDENCE FOR MY OPINION IN THIS MATTER.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-4 DR. BARDEN'S COMMITTEE STATEMENT : "Children are dying because of this failure to understand simple scientific methodology."**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Name the cases of coercive restraint in outpatient mental health that lead to a child's death and where the cause of death was a 'failure to understand simple scientific methodology.'**

**DR. BARDEN'S RESPONSE:**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING THERAPY PRACTICES.**

**It is my good faith belief that several other parents have charged "holding therapists" with teaching them practices that caused the death of their children.**

**APPARENTLY THE DESERET NEWS EDITORIAL BOARD AGREES WITH MY GOOD FAITH OPINION IN THIS MATTER.**

Wednesday, November 20, 2002

**Holding therapy life-threatening**  
Deseret News editorial

**It is true that the two Utah children believed to have died as a result of so-called holding therapy died at the hands of their parents. But it is doubtful that these parents conceived of the therapy themselves. More likely, they acted on the advice of a mental health professional.**

While a parent may not know what is considered best practice or even accepted practice for treating reactive attachment disorders, a licensed professional had better. **It strains logic that a reputable mental health professional would recommend a therapy that has not withstood scientific review and has not been endorsed by reputable psychiatric organizations.**

Experts believe coercive therapy techniques have the potential to further damage already fragile children. **The death toll nationwide stands at eight, among them a 4-year-old Utah girl who died in 1997 of asphyxiation in a hugging therapy session at her Midvale home.**

**The water intoxication death of 4-year-old Cassandra Killpack of Springville is also believed to be linked to holding therapy**, although the matter remains under investigation. Meanwhile, her adoptive parents have been charged with child abuse homicide and child abuse in connection with her death.

Some argue that the government overreaches when it bans therapeutic practices. Banning this therapy, as other states have done, is no different than the federal government refusing to sanction certain types of treatments for



diseases. Remember the buzz over Laetrile as a cure for cancer? There's a reason the treatment was not approved in the United States. It didn't work.

Moreover, many people who seek coercive therapy for their children adopted from the state system receive government adoption subsidies to help provide for their mental health care. **Government has a clear interest to ensure those stipends are spent for treatments sanctioned by reputable mental health organizations.**

A ban on holding therapy likely wouldn't rid the nation of the practice. It may move further underground, which poses its own set of dangers.

While parents who struggle daily with children who have reactive attachment disorders will seek out unconventional therapies when traditional treatments aren't working or aren't working fast enough, they need the benefit of law that eliminates a form of therapy that could leave their child more damaged or that has the potential to kill him or her.

Families who adopt children with reactive attachment disorders are a remarkable lot. They agree to love and nurture children who, through no fault of their own, have the potential to rip apart their respective adoptive homes. It is understandable that parents want every mental health option at their disposal to address the problems of children who have tremendous difficulty bonding with the loved ones in their lives.

**The targets of this law would be licensed mental health providers who know that holding therapy is unproven and dangerous and yet tell parents to use it.** Do they do this because they know their professional licenses could be in jeopardy if something goes awry during treatment? Is it because they know holding therapy hasn't been sanctioned by reputable psychiatric organizations?

Lawmakers need to ask a lot of these question as this matter winds through the legislative process. Whatever they do, they can't nibble around the edges of this issue. **A compromise would be tacit approval of unproven approaches that have great potential for harm and are highly suspect in their effectiveness. It is unthinkable that legislators could sanction these practices in any form.**

<http://deseretnews.com/dn/print/1,1442,450015632,00.html>

**It is my opinion that the scientific ignorance of these therapists is amply demonstrated by the methods they use, the junkscience "research" they cite, the bizarre and irrational nature of their theories, etc.**

**It is my good faith belief based upon reading additional news accounts and case reports that several other children died from coercive therapy practices.**

**I have also interviewed a Mr. Tibbets who has reported that his child died from "holding therapy" in Utah. I have not had time to cross reference and corroborate his story so I have no opinion at this time about this particular case.**

**THE DOPL REPORT AND INVESTIGATION OF THE UTAH ATTORNEY GENERAL'S OFFICE CONTAINS "CONFESSIONS" OF LOCAL "HOLDING THERAPISTS" THAT PROVIDE FURTHER EVIDENCE FOR MY OPINION IN THIS MATTER.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-5 DR. BARDEN'S COMMITTEE STATEMENT :** "But this entire dark corner of the mental health industry, and I call it that because these treatments aren't done at Stanford Medical School, and these treatments aren't done at the University of Utah. These treatments aren't done, they're done in dark corners of the mental health system where the public doesn't get to look and videotapes aren't being made and people aren't getting informed consent and the national experts aren't involved, and that kind of failure to apply basic scientific methodology is dangerous to patients. It's dangerous to children."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** We're confused by this assertion, can you prove that all therapy that is not done at Stanford, U of U, and other universities leads to dark corners. Is the definition of dark corners of mental health therapy where video tapes are not being made? I believe that describes nearly all therapy done at Valley Mental Health and Children's Center in Salt Lake City and so many other mental health settings. What makes this dark? What is the assertion here? Shall we involve all the national experts in therapy done in all locations other than Stanford etc? Please prove the 'dark corner' theory.

**DR. BARDEN'S RESPONSE REGARDING THE DARK CORNERS (AND SHOCKING IGNORANCE AND SCIENCE ILLITERACY AND RECKLESS DANGEROUS PRACTICES) IN WHICH THESE THERAPISTS OPERATE**

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR -- AND DANGERS OF -- "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR RECKLESS, ABUSIVE HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**In my expert opinion, holding therapy is health care fraud and SB 137 would make the State of Utah a "partner" in health care fraud by endorsing health care fraud -- not a good idea.**

**THE DOPL REPORT AND INVESTIGATION OF THE UTAH ATTORNEY GENERAL'S OFFICE CONTAINS "CONFESSIONS" OF LOCAL "HOLDING THERAPISTS" THAT PROVIDE FURTHER EVIDENCE FOR MY OPINION IN THIS MATTER.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-6 DR. BARDEN'S COMMITTEE STATEMENT : "A danger to themselves, a danger to children, a danger to parents, a danger to families and a danger to the health care system, and this has been going on in small pockets of the mental health community for many, many decades."**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: You have asserted danger many times in reference to outpatient 'coercive restraint' without any proof.? We are struggling to not believe that this is simply 'if I say it enough times they'll believe it.' All this while you lecture on and on about the scientific method while appearing unscientific.**

**Again, provide proof of your assertion of danger.**

**DR. BARDEN'S RESPONSE REGARDING THE DANGERS OF HOLDING THERAPISTS -- SHOCKING IGNORANCE AND SCIENCE ILLITERACY AND RECKLESS DANGEROUS PRACTICES :**

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR -- AND DANGERS OF -- "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**In my expert opinion, holding therapy is health care fraud and SB 137 would make the State of Utah a "partner" in health care fraud by endorsing health care fraud -- not a good idea.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-7 DR. BARDEN'S COMMITTEE STATEMENT : "Now this is simply the last and a particularly dangerous form of these kinds of problems"**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Again, please provide proof of danger in outpatient mental health setting using HB5's 'coercive restraint.'**

**DR. BARDEN'S RESPONSE REGARDING THE DANGERS OF HOLDING THERAPISTS -- SHOCKING IGNORANCE AND SCIENCE ILLITERACY AND RECKLESS DANGEROUS PRACTICES :**

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR -- AND DANGERS OF -- "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**In my expert opinion, holding therapy is health care fraud and SB 137 would make the State of Utah a "partner" in health care fraud by endorsing health care fraud -- not a good idea.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-8 DR. BARDEN'S COMMITTEE STATEMENT : "Now we've already had several children killed unfortunately by this, by these kinds of so-called therapies."**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: A 'children are dying' assertion without any proof. Again, please provide proof of death in outpatient mental health setting using HB5's 'coercive restraint'**

**DR. BARDEN'S RESPONSE REGARDING THE DANGERS OF HOLDING THERAPISTS -- SHOCKING IGNORANCE AND SCIENCE ILLITERACY AND RECKLESS DANGEROUS PRACTICES AND PATIENT DEATHS AND THE NEWMAKER CASE AND REBIRTHING-HOLDING THERAPIES, ETC :**

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR -- AND DANGERS OF -- "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED**

**WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**In my expert opinion, holding therapy is health care fraud and SB 137 would make the State of Utah a "partner" in health care fraud by endorsing health care fraud -- not a good idea.**

**You seem obsessed with the "number" of children killed by "holding therapy" -- isn't one too many?**

**Here is a good faith list of cases linking AT "holding therapy" to child deaths. I have not completed my investigation into all of these cases.**

**APPARENT DEATHS FROM HOLDING THERAPY : CITATIONS**

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**Candace Newmaker's death appears linked to "holding therapy"**

- 1.) People v. Watkins, 00CR1257  
Watkins/Ponder Trial Transcripts
- 2.) <http://www.papillonsartpalace.com/deathby.htm>  
"Death by Therapy," by Christopher Caldwell May 28, 2001/Vol 6, Number 35 The Weekly Standard ....  
"Newmaker agreed to pay Watkins \$7,000 for a two-week course of treatment. A major part of it was the 'holding therapy' invented by Cline. This involves touching the child in intimate ways in order to render him vulnerable and break his sense of mastery over his environment.

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**Andrea Swenson's death appears linked to "holding therapy"**

- 1.) "Afraid of Our Children," ("Too Tough" segment) 48 Hours, April 6, 1995. Interview with mother after Andrea's suicide at attachment center in Evergreen. "Expert on attachment disorders in children feels holding therapy is torture; Colorado teen commits suicide and mother feels holding therapy was wrong for her daughter."  
<http://www.burrielles.com/transcripts/cbs/fehr95.htm>
- 2.) "Holding in the New Millenium," B. Rila, Michael Pine, C Chalmers, Audio Tape #38-0213, 14th Annual Conference on Attachment & Bonding, ATTACH; October 2002. Two past presidents of ATTACH claim that Attachment Therapy was the direct cause of Andrea Swenson's suicide.
- 3.) "Alternative Therapies Not New in Evergreen," by Karen Auge, June 17, 2000, Denver Post.

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**Cassandra Killpack's death appears linked to "holding therapy"**

- 1.) "Therapy Center Searched in Probe of Girl's Death," Thursday, June 13, 2002, By Ashley Broughton, The Salt Lake Tribune.  
<http://www.sltrib.com/2002/jun/06132002/utah/745060.htm>
- 2.) "Man Seeks Ban on Therapy He Used on Daughter," September 29, 2002, by Jacob Santini, The Salt Lake Tribune.  
<http://www.sltrib.com/2002/sep/09292002/utah/2450.htm>  
"Coercive therapy has come under renewed scrutiny following the recent death of a 4-year-old Springville girl. Investigators allege that Cassandra Killpack died June 10 after her adoptive parents forced her to drink a fatal amount of water; her hands allegedly had been tied behind her back during the incident.

The Killpacks, charged with child abuse homicide and child abuse, claim they were acting as directed by therapist Larry VanBloem, director of the Cascade Center for Family Growth in Orem -- an allegation VanBloem denies.

**THE SAME UTAH "HOLDING" THERAPIST ALSO TREATED KRYSTAL TIBBETS...."**

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**Krystal Tibbets' death appears linked to "holding therapy"**

1.) "Man Seeks Ban on Therapy He Used on Daughter," September 29, 2002,  
by Jacob Santini, The Salt Lake Tribune.

<http://www.sltrib.com/2002/sep/09292002/utah/2450.htm>

"Only weeks after his release from prison last winter, Donald Tibbets appeared before the state Legislature to urge lawmakers to ban coercive holding therapy -- the technique he was using on his adopted daughter when she died..."

Once known as rage reduction therapy, the technique in general consists of holding a child down as fingers, fists or elbows are pushed into the abdomen to get the child to vent suppressed rage. It is an outdated, though not illegal, treatment for children..... Tibbets says VanBloem taught him to lie across Krystal, who weighed 35 pounds, and to push his fist into her abdomen..."

**THE SAME UTAH "HOLDING" THERAPIST ALSO TREATED CASSANDRA KILLPACK'...."**

2.) "The cuddles that kill, " by Christopher Reed Glasgow Herald, Scotland June 21, 2001, (Features, page 17)

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**Lucas Ciambone's death appears linked to "holding therapy"**

1.) "The cuddles that kill," by Christopher Reed Glasgow Herald, Scotland June 21, 2001.

"Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up. It was approved attachment therapy, the court heard, and is conducted at most AT clinics in America, and also by parents at home. **The four other deaths were: Russian adoptee Viktor Matthey, seven, in New Jersey in 1999; another two, in Colorado in 1997; adoptee Lucas Ciambone, seven, in Florida also in 1997; and Krystal Ann Tibbets, three, in Utah in 1995.** In each case, lawyers defending the adoptive parents argued that the children had been diagnosed with RAD and the violent treatment was approved.

2.) "Ciambone returns to court, seeks new trial," September 3, 2002, Sarasota Herald-Tribune (FL),

"...Joseph Ciambone, 48, was convicted of first-degree murder in 1997 for killing his son, Lucas. Ciambone's attorney, Robert Barrar, claims Lucas suffered from reactive attachment disorder.... Dr. Foster Cline [a holding therapist], an expert on the disorder, will testify during a two-day hearing this week..."

3.) "Suffer the Children," by Karen Bowers, July 27, 2000, Westword (Denver)

<http://www.westword.com/issues/2000-07-27/feature.html/page1.html> **"Three kids [Evers, Ciambone, Polreise] with attachment disorder have died in Colorado -- but according to [holding therapist] Foster Cline, their parents and therapists are the ones most in need of help."**

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**Viktor Matthey's death appears linked to "holding therapy"**

1.) "The cuddles that kill," by Christopher Reed Glasgow Herald, Scotland June 21, 2001.

"Before the re-birthing, Candace endured two AT "holding" sessions for a total of 69 minutes, during which a therapist grabbed or covered her face 48 times, shook or bounced her head 83 times, and shouted 68 times in her face from close-up. It was approved attachment therapy, the court heard, and is conducted at most AT clinics in America, and also by parents at home. **The four other deaths were: Russian adoptee Viktor Matthey, seven, in New Jersey in 1999; another two, in Colorado in 1997; adoptee Lucas Ciambone, seven, in Florida also in 1997; and Krystal Ann Tibbets, three, in Utah in 1995.** In each case, lawyers defending the adoptive parents argued that the children had been diagnosed with RAD and the violent treatment was approved.

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**David Polreis' death appears linked to "holding therapy"**

1.) "A dead child, a troubling defense," by Miriam Horn, July 14, 1997, US News & World Report.

2.) "Little Boy Lost: Accused murderer Renee Polreis pulls out all the stops in a pre-trial hearing," by Karen Bowers, May 22, 1997, Westword (Denver) <http://www.westword.com/issues/1997-05-22/news5.html> and "Psychological Warfare: The defense loses a key battle over attachment disorder for the upcoming Polreis toddler-death trial." by Karen Bowers, March 27, 1997, Westword (Denver) <http://www.westword.com/issues/1997-03-27/news5.html>

"Ever since the arrest, however, Renee and her attorneys have been preparing the groundwork for a unique defense theory: They claim that David, whom Norton diagnosed as suffering from reactive attachment disorder, went into a rage and inflicted the injuries on himself.

3.) "In Colorado, An Adoption Goes Awry," By Peter S. Canellos, 1997 The Boston Globe

[http://www.stolaf.edu/people/leming/soc260fam/news/April\\_18.html](http://www.stolaf.edu/people/leming/soc260fam/news/April_18.html)  
 "It's preposterous," said Dr. Eli Newberger, medical director of the child protection program at Boston Children's Hospital. "I'm not aware of any behavior we could call suicidal in 2-year-olds..."

There's a whole lot of quackery in attachment theory," said Newberger, a pediatrician. He said the case illustrates the dangers of psychologists elevating theories about the necessity of infant "bonding" into medical diagnoses. Edick testified that the psychologist, Byron Norton, diagnosed David Jr. with an attachment disorder...Norton did not testify and did not return a phone message.... Renee Polreis consulted other specialists, including counselors at the Attachment Center in Evergreen, Colo....

4.) "Suffer the Children," by Karen Bowers, July 27, 2000, Westword (Denver) <http://www.westword.com/issues/2000-07-27/feature.html/page1.html>

"Three kids [Evers, Ciambrone, Polreise] with attachment disorder have died in Colorado -- but according to [holding therapist] Foster Cline, their parents and therapists are the ones most in need of help."

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#### **Roberta Evers' death appears linked to "holding therapy"**

1.) <http://www.geocities.com/Wellesley/9950/Roberta.html>

2.) "Suffer the Children," by Karen Bowers, July 27, 2000, Westword (Denver) <http://www.westword.com/issues/2000-07-27/feature.html/page1.html>

"Three kids [Evers, Ciambrone, Polreise] with attachment disorder have died in Colorado -- but according to [holding therapist] Foster Cline, their parents and therapists are the ones most in need of help."

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#### **Logan Marr' death appears linked to "holding therapy"**

1.) "The Taking of Logan Marr," Frontline, February 2003.

<http://www.pbs.org/wgbh/pages/frontline/shows/fostercare/marr/>

"...Logan stopped opening her gifts and told Christy that Sally had hurt her. She squeezed her cheeks together with one hand, and said, 'She did this to me, and I cried, and it hurts me. She did it to my sister, too.'"

...Logan again told Christy that Sally had handled her roughly, wrapping her up in a blanket...."

2.) Police Interviews with Sally Schofield:

<http://www.pbs.org/wgbh/pages/frontline/shows/fostercare/marr/police.html>

3.) Interview with Sally Schofield:

<http://www.pbs.org/wgbh/pages/frontline/shows/fostercare/marr/sally.html>

"I really didn't want a child with like an attachment disorder ..."



4.) Frontline: The Taking of Logan Marr, aired January 31, 2003  
[Sally Schofield claims that Logan Marr had "attachment disorder."]

5.) Daniel Hughes, Attachment Therapist for this victim:

\* Author of books: "Facilitating Developmental Attachment"(2000)

"Building the Bonds of Attachment" (1998) [Contain information on holding therapy] Hughes website: <http://www.homestead.com/danielahughes/index.html>

(Note 11/02 statement distancing himself from more violent forms of holding therapy, post Logan Marr death.)

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-9 DR. BARDEN'S COMMITTEE STATEMENT : "There is no evidence that hurting children in this manner is helpful."**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: Again, please provide evidence that children are being hurt in 'coercive restraint' therapy as defined in HB5.**

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS: A 'children are dying' assertion without any proof. Again, please provide proof of death in outpatient mental health setting using HB5's 'coercive restraint'?**

**DR. BARDEN'S RESPONSE REGARDING THE DANGERS OF HOLDING THERAPISTS -- SHOCKING IGNORANCE AND SCIENCE ILLITERACY AND RECKLESS DANGEROUS PRACTICES AND PATIENT DEATHS AND THE NEWMARKER CASE AND REBIRTHING-HOLDING THERAPIES, ETC :**

**THIS QUESTION HAS ALREADY BEEN ANSWERED IN GREAT DETAIL.**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR "HOLDING THERAPY"**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE WACKY ASSUMPTIONS AND THEORIES OF THE HOLDING THERAPISTS**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING THE JUNKSCIENCE APPROACH OF RELYING UPON ANECDOTAL EVIDENCE IN HEALTH CARE RESEARCH**

**E.G. SEE DETAILED ANSWERS TO QUESTIONS REGARDING NO SCIENTIFIC SUPPORT FOR -- AND DANGERS OF -- "HOLDING THERAPY"**

**It is my good faith belief that Candace Newmaker was killed by coercive restraint therapy (the jury apparently agreed, the prosecutors apparently agreed, etc). As an expert witness for the State I watched the fatal "holding therapy-rebirthing" sessions.**

**It is my good faith belief that Watkins and Ponder -- the criminal "therapists" in the Newmaker case -- were quite adamant that they DID NOTHING OUT OF THE ORDINARY FOR HOLDING-REBIRTHING THERAPISTS. FORMER PATIENTS AND OTHER HOLDING THERAPISTS APPARENTLY AGREED WITH THEM THAT THE PRACTICES AND IGNORANT THEORIES USED TO KILL CANDACE NEWMAKER WERE STANDARD HOLDING-REBIRTHING THERAPY PRACTICES.**

**In my expert opinion, holding therapy is health care fraud and SB 137 would make the State of Utah a "partner" in health care fraud by endorsing health care fraud -- not a good idea.**

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-10 DR. BARDEN'S COMMITTEE STATEMENT :** "If you strike down one of these it's gonna pop up in another version, in another way, because there will always be people who are so angry at their children for misbehaving that they're willing to punish them and call it a so-called therapy."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** A VERY arrogant statement that needs proof. We would prefer that you not disparage these parents in this manner using the Utah State Legislature. Our interaction with these parents has not lead us to believe such things. If you wish to make such allegations without proof, please do it in a venue that does not involve us or the State of Utah!

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** What proof do you have that the motive of parents who bring children to holding therapy is punishment and that the parents are angry? This is a very strong accusation and I would like you to answer to the parents across the nation who have been involved in holding therapy. Many of them have read this assertion and are very offended.

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** A 'children are dying' assertion without any proof. Again, please provide proof of death in outpatient mental health setting using HB5's 'coercive restraint'?

**DR. BARDEN'S RESPONSE REGARDING  
MOTIVATIONS OF PARENTS:**

**Your bizarre, unthinking and irrational "spin" on my statement and your unprofessional name calling is troubling. Do you wish to apologize now or later? Are your behaviors demeaning the legislative process?**

**I have spent 28 years working with and for the parents of ill and injured children. Much of my effort has been voluntary. Whether assisting families of chronically ill children or doing research on how children and families cope with stress or drafting legislation now protecting the lives of thousands of children each year in the U.S. my role as advocate for children and families has been a major part of my career in psychology, law and public policy.**

**E.G. EFFORTS TO REFORM THE U.S. EMERGENCY MEDICAL SYSTEM FOR CHILDREN VIA LEGISLATION:**

In 1993 we created a multidisciplinary team (physicians, psychologists, methodologists, attorneys, economists and others) to propose legislative reforms for the U.S. Emergency Medical System for Children.

See, Barden, R. C., Kinscherff, R., George, W., Flyer, R., Seidel, J., & Henderson, D., (1993), Emergency Medical Care and Injury Prevention Systems for Children: An Economic-Medical-Legal-Psychological Analysis and Legislative Proposals, Harvard Journal on Legislation, Vol. 30, No. 2, pgs 461-497.

Some version of this proposed legislation has been enacted by the States of New Jersey (1992), Texas (1993), Utah (1994), Colorado (1995), Hawaii (1996), Louisiana (1996) and many other states. These legislative ideas have continued to expand across the U.S. As of July 1997 18 states reported the creation of a separate Emergency Medical System for Children Advisory Board (as required by this legislative proposal) and 15 states required pediatric representation on State EMS Advisory Boards. (See, EMSC News, Vol 10, No. 2, Summer 1997).

**Comments on Emergency Medical Systems for Children legislation**

"Emergency medical services geared to the unique needs of our youngest citizens are absolutely necessary if we are to save critically ill or injured children... This [New Jersey] law could serve as a model for the rest of the United States to follow. Congratulations!"

Antonio C. Novello, M.D., M.P.H., Former Surgeon General of the United States of America, letter dated Sept. 9, 1992.

"This landmark law will save the lives of countless children in New Jersey and will serve as a model for the nation."

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"This landmark bill will significantly improve services for critically ill and injured children in New Jersey and will serve as a model for other states... I salute your efforts!"

C. Everett Koop, M.D., Former Surgeon General of the United States of America, in a letter dated Oct. 28, 1992.

Senator Hellewell -- As someone who claims to put children first you should be the first in line to be thankful for such work.

It remains my professional opinion that the vast majority of parents who enter "holding therapy" are good and kind and loving parents who are looking for answers to difficult family challenges. It remains my professional

opinion that the vast majority of parents who enter "holding therapy" ARE VICTIMS OF HEALTH CARE FRAUD -- when they are told false information about the pseudo science underlying these "treatments." Like many victims of health care frauds of the past (e.g. "repressed memories) often it takes years for them to understand how they have been duped -- some never do. Others figure out they have been "taken" and injured and they report to licensing authorities, etc.

With regard to my statement above, it remains my professional opinion that it is OBVIOUSLY THE CASE that ..... IF the State of Utah were to endorse any form of the quack, health care fraud known as "holding therapy" ... and thus tried to restrict the harmful practices of such quackery by loophole ridden language (e.g. see SB 137) ..... and IF such "defanged" holding therapy were used by HUNDREDS OF FAMILIES together with the typically shockingly ignorant "therapists" that believe in such practices.. THAT IF THESE THINGS CAME TO PASS THEN... "it's (the harmful practices are) gonna pop up in another version, in another way, because there will always be people [perhaps just 1-5 % but always some] who are so angry at their children for misbehaving that they're willing to punish them and call it a so-called therapy."

Whether its 1% percent of the families or 10 % of the families, in my opinion the risk is far too high that abusive and cruel practices will begin again under the bogus, junkscience theories of "holding therapy." Given that there is NO scientific evidence of benefit and MUCH evidence of harm.. no rational system would endorse the health care fraud known as "holding therapy".

More particularly, as part of several investigations of "holding therapy" I have had the time and resources to investigate the claims of several of the parents regarding their troubled child. It is my professional opinion and good faith belief based upon my investigations that some of the parents statements were quite accurate -- and several others were quite false indeed. Before believing such anecdotal histories I INTERVIEW THE TEACHERS AT SCHOOLS AND OTHER HEALTH CARE PROFESSIONALS AND, IF NECESSARY OBTAIN RECORDS, to try to verify the statements of family members.

Again, it remains my professional opinion that the vast majority of parents who enter "holding therapy" are good and kind and loving parents who are looking for answers to difficult family challenges. They are usually not equipped however to evaluate the bogus junkscience claims and theories of "holding therapists".

NOTE the earlier analysis of the danger of anecdotal evidence -- alien abductions, past lives therapy, so-called "repressed memories" and almost every other kind of quackery are "proven" with anecdotal evidence -- its Medieval thinking at best.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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**B-11 DR. BARDEN'S COMMITTEE STATEMENT :** "You know, it's really interesting that families rarely will do things that are this, and I don't use the term lightly, will rarely do things that are this wicked to their own children unless they're put up to it by someone who is mis-informing them that this somehow is gonna help their child."

**SEN. HELLEWELL'S QUESTIONS AND STATEMENTS:** Arrogance again. You see yourself as the one who knows that parents are being duped and if every therapist were like you there wouldn't be any wicked therapists and the problems of the mental health system would be solved. Please provide proof that the therapy is wicked and that the therapists are mis-informing the parents and that the parents are allowing wicked things to be done to their children.

#### **DR BARDEN'S RESPONSE REGARDING COERCIVE RESTRAINT BEING WICKED:**

Obviously, as noted by the UPA Statement, "holding therapy" is a form of child abuse. Child abuse is wicked.

But whoso shall offend one of these little ones which believe in me, it were better for him that a millstone were hanged about his neck, and [that] he were drowned in the depth of the sea.

-- Matthew 18: 6

#### **CONTRAST CORRECT PRINCIPLES WITH ABUSIVE, QUACK HOLDING "THERAPY" PRACTICES:**

##### **"How to Set Your House in Order**

To set our house in an order pleasing to the Lord, we need to do it His way. We are to employ His attributes of "righteousness, godliness, faith, love, patience, [and] meekness." Each father should remember that "no power or influence can or ought to be maintained by virtue of the priesthood, only by persuasion, by long-suffering, by gentleness and meekness, and by love unfeigned."

Parents are to be living examples of "kindness, and pure knowledge, which ... greatly enlarge the soul." Each mother and father should lay aside selfish interests and avoid any thought of hypocrisy, physical force, or evil speaking. Parents soon learn that each child has an inborn yearning to be free. Each individual wants to make his or her own way. No one wants to be restrained, even by a well-intentioned parent. But all of us can cling to the Lord." See, Dr. Russell M. Nelson - "Set in Order Thy House" - October General Conference - Ensign, Nov. 2001, 69

In one of my church talks as a member of the High Council of the North Salt Lake Stake of the Church of Jesus Christ of Latter Day Saints I emphasized the importance of teaching children with loving kindness, of teaching children to be grateful in all things (D&C 59:7), of teaching children with love unfeigned and being an example of loving care to children.

In contrast, it is my opinion that the very nature of coercive restraint such as "holding therapy" is to pinch, hit, scream at, gouge, bruise and injure children in the name of so-called "therapy" - It is my belief that such practices (providing injury with no evidence of benefit) are child abuse and

are certainly wicked. (See, letter from Prof. Mercer, Statements from Professional Associations against "holding therapy").

Effective medical treatments sometimes do cause pain. When we permit surgery or inoculations we do so because surgery and inoculations have a very reliable and demonstrable scientifically proven benefit that far outweighs the "harm" of the procedure. In contrast, "Holding therapy" has no scientific evidence of benefit and much evidence of harm making it a form of child abuse. (see statements of the APA, UPA, NASW-Ut etc etc).

Child abuse is wicked ... even when falsely labeled as "therapy."

#### **DR. BARDEN'S RESPONSE REGARDING THE MOTIVATIONS OF PARENTS:**

Your bizarre and irrational "spin" on my statement and your unprofessional name calling is troubling. Is this responsible behavior on your part? Do you wish to apologize now or later? Do you consider your behavior irresponsible?

I have spent 28 years working with and for the families of ill and injured children. Whether assisting families of chronically ill children or doing research on how children and families cope with stress or drafting legislation now protecting the lives of thousands of children each year in the U.S. my role as advocate for children and families has been a major part of my career in psychology, law and public policy.

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**Senator Hellewell -- As someone who claims to put children first you should be the first in line to be thankful for such work -- and to ban child abuse in the guise of "holding therapy."**

**It remains my professional opinion that the vast majority of parents who enter "holding therapy" are good and kind and loving parents who are looking for answers to difficult family challenges. It remains my professional opinion that the vast majority of parents who enter "holding therapy" ARE VICTIMS OF HEALTH CARE FRAUD -- they are told false information about the pseudo science underlying these "treatments." Like many victims of health care frauds of the past (e.g. "repressed memories") often it takes years for them to understand how they have been duped -- some never do. Others figure out they have been "taken" and injured and they report to licensing authorities, sue for damages, etc.**

**With regard to my statement above, it remains my professional opinion that it is OBVIOUSLY THE CASE that ..... IF the State of Utah were to endorse any form of the quack, health care fraud known as "holding therapy" ... and thus tried to restrict the harmful practices of such quackery by loophole-ridden language (e.g. see SB 137) ..... and IF such "defanged" holding therapy were used by HUNDREDS OF FAMILIES together with the typically shockingly ignorant "therapists" that believe in such practices..... THAT IF THESE THINGS CAME TO PASS THEN... "it's (the harmful practices are) gonna pop up in another version, in another way, because there will always be people [perhaps just 1-5 % but always some] who are so angry at their children for misbehaving that they're willing to punish them and call it a so-called therapy."**

**Whether its 1% percent of the families or 10 % of the families, in my opinion the risk is far too high that abusive and cruel practices will resurface again under the bogus, junkscience theories of "holding therapy." Given that there is NO scientific evidence of benefit and MUCH evidence of harm.. no rational system would endorse the health care fraud known as "holding therapy".**

**More particularly, as part of several investigations of "holding therapy" I have had the time and resources to investigate the claims of several of the**

parents regarding their troubled child. It is my professional opinion and good faith belief based upon my investigations that some of the parents statements were quite accurate -- and several others were quite false indeed. Before believing such anecdotal histories I INTERVIEW THE TEACHERS AT SCHOOLS AND OTHER HEALTH CARE PROFESSIONALS AND, IF NECESSARY OBTAIN RECORDS, to try to verify the statements of family members.

Again, it remains my professional opinion that the vast majority of parents who enter "holding therapy" are good and kind and loving parents who are looking for answers to difficult family challenges. They are usually not equipped however to evaluate the bogus junkscience claims and theories of "holding therapists".

READ THE DOPL REPORT ON THE BIZARRE AND ABUSIVE PRACTICES USED IN UTAH ON CHILDREN AND FAMILIES.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

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**B-12 DR. BARDEN'S COMMITTEE STATEMENT :** "...it may be another 5 years and another 10 or 20 deaths before we find out what's really going on with these children."

**SEN HELLEWELL'S QUESTIONS AND STATEMENTS:** Again, please provide proof that any child has died in outpatient mental health therapy where licensed therapists have used coercive restraint as it is defined in HB5 - or any licensed outpatient mental health therapy for that matter. HB5 refers strictly to licensed mental health therapy - as you heard Representative Thompson testify in this same hearing as follows: "This has, this only deals with licensed therapists."

**DR. BARDEN'S RESPONSE:** My statement as quoted was an accurate statement of my considered opinion and remains an accurate statement of my considered opinion.

Given the number of deaths generally attributed to "holding therapies" see various news reports and criminal cases --and the emotional, irrational defense of "holding therapists" in the legislative process -- my estimate may be conservative.

Wednesday, November 20, 2002  
**Holding therapy life-threatening**  
Deseret News editorial

It is true that the two Utah children believed to have died as a result of so-called holding therapy died at the hands of their parents. But it is doubtful that these parents conceived of the therapy themselves. More likely, they acted on the advice of a mental health professional.

While a parent may not know what is considered best practice or even accepted practice for treating reactive attachment disorders, a licensed professional had better. It strains logic that a reputable mental health professional would recommend a therapy that has not withstood scientific review and has not been endorsed by reputable psychiatric organizations.



Experts believe coercive therapy techniques have the potential to further damage already fragile children. The death toll nationwide stands at eight, among them a 4-year-old Utah girl who died in 1997 of asphyxiation in a hugging therapy session at her Midvale home.

The water intoxication death of 4-year-old Cassandra Killpack of Springville is also believed to be linked to holding therapy, although the matter remains under investigation. Meanwhile, her adoptive parents have been charged with child abuse homicide and child abuse in connection with her death.

Some argue that the government overreaches when it bans therapeutic practices. Banning this therapy, as other states have done, is no different than the federal government refusing to sanction certain types of treatments for diseases. Remember the buzz over Laetrile as a cure for cancer? There's a reason the treatment was not approved in the United States. It didn't work.

Moreover, many people who seek coercive therapy for their children adopted from the state system receive government adoption subsidies to help provide for their mental health care. Government has a clear interest to ensure those stipends are spent for treatments sanctioned by reputable mental health organizations.

A ban on holding therapy likely wouldn't rid the nation of the practice. It may move further underground, which poses its own set of dangers.

While parents who struggle daily with children who have reactive attachment disorders will seek out unconventional therapies when traditional treatments aren't working or aren't working fast enough, they need the benefit of law that eliminates a form of therapy that could leave their child more damaged or that has the potential to kill him or her.

Families who adopt children with reactive attachment disorders are a remarkable lot. They agree to love and nurture children who, through no fault of their own, have the potential to rip apart their respective adoptive homes. It is understandable that parents want every mental health option at their disposal to address the problems of children who have tremendous difficulty bonding with the loved ones in their lives.

The targets of this law would be licensed mental health providers who know that holding therapy is unproven and dangerous and yet tell parents to use it. Do they do this because they know their professional licenses could be in jeopardy if something goes awry during treatment? Is it because they know holding therapy hasn't been sanctioned by reputable psychiatric organizations?

Lawmakers need to ask a lot of these questions as this matter winds through the legislative process. Whatever they do, they can't nibble around the edges of this issue. **A compromise would be tacit approval of unproven approaches that have great potential for harm and are highly suspect in their effectiveness. It is unthinkable that legislators could sanction these practices in any form.**

<http://deseretnews.com/dn/print/1,1442,450015632,00.html>

**In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.**

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**B-13 DR. BARDEN'S COMMITTEE STATEMENT : "I mean I can't think of any hospital or clinic with any credibility I've ever heard of that's done anything at all remotely like this."**

**SEN HELLEWELL'S QUESTIONS AND STATEMENTS: This comment may have been made in true ignorance but, please, check your facts. Primary Children's Medical Center (Residential Treatment) provided holding therapy for years.**

**DR. BARDEN'S RESPONSE:**

It appears that your definition of holding therapy and my definition of holding therapy are VERY, VERY different. I am not aware and have never been aware of PCMC doing what I consider "holding therapy" (ie. coercive restraint therapy).

To the best of my knowledge your statement may well be inaccurate -- PCMC may not have done anything like "holding therapy" for 10 years or more. If that is true your statement to me -- apparently accusing PCMC of health care fraud and child abuse -- appears potentially defamatory. Perhaps the I.H.C. legal staff could assist you in obtaining (and disseminating) accurate information on this issue. Or perhaps the I.H.C. legal staff could assist you in issuing a public apology.

In any event, please do send me any documents or affidavits you believe support your serious claims against PCMC.

In addition, please inform me as to what years you claim PCMC conducted "holding therapy".

In addition, please inform me what definition of "holding therapy" you are using in making this very serious accusation against one of the premier medical facilities in Utah.

In addition, please inform me of the specific names of the health care professionals at PCMC you claim were conducting "holding therapy" within the last ten years.

In sum, my testimony was fully accurate and remains my considered opinion and good faith belief.

Now, I end as I began this correspondence...

Having expended the time, energy and expense to answer your questions in good faith, I expect, as a courtesy to the legislative process, and as a forthright public servant, that you in turn will answer my questions and concerns regarding your public and private statements in this matter. I also hope you will -- to ensure the integrity of this process -- publicly affirm the truth of your answers under oath in committee or by sworn affidavit. I will send you my questions in written form soon. I hope -- for the integrity of the legislative process -- you will answer them promptly.

I look forward to our correspondence which I will share with other Senate members and the media to reaffirm the integrity of this legislative process. Thank you for your consideration.