Physical Restraint as Catharsis?

Therapeutic Childcare: Hopefulness in a Changing Landscape

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Ground to cover today

• Catharsis

• Relationship between catharsis and physical restraint

• Need for containing environments
Catharsis

• General notion of intense expression of and/or purging of emotion

• Aristotle wrote of catharsis related to the function of tragedies (Greek plays) to purge the audience of pity and terror

• The concept/phenomenon has been explored from traditions of literary criticism, anthropology, sociology and psychology
Catharsis: in and out of favour

Freud & Breuer (psychotherapy): founders of modern catharsis theory. Initially excited by perceived therapeutic potential of catharsis, but later became disillusioned. (cited in Scheff, 1979)

Cathartic interventions peaked somewhere in the 1980’s, with their use increasingly declining since.

Key concerns: possibility of retraumitization, short-lived nature of insights, and danger of ‘addiction’.

(Klopstech, 2005)
Catharsis: Some Definitions

Bushman (experimental psychology): Catharsis theory -- venting one’s anger will produce a positive involvement in one’s psychological state. Bush makes strong links to the media.

3 Studies
1. Confirmed pro-catharsis messages increased desire;
2. Pro-catharsis message, followed by punching bag yielded increased aggression in participants;
3. Angered participants who ruminated while punching bag had higher levels of aggression and did not report positive mood afterward (Bushman, 1999; 2002)
Catharsis: Some Definitions

**Klopstech** (body psychotherapy): the process that brings something from the inside (emotional upset) to the outside (expression) causing a dramatic emergence into consciousness (insight). The process also accounts for quantitative and qualitative changes for the better (release of tension and revival). (Klopstech, 2004)
Scheff’s theory of catharsis

Underlying premise:

• Emotional expressions, such as crying, are instinctive, biological necessities
• Yet in many modern societies, several emotional expressions are socialised through punishment and/or disapproval
• Unresolved emotional distress gives rise to rigid or neurotic patterns of behaviour (and this unresolved emotion can accumulate)
• Catharsis can dissipate these patterns.
Physical Restraint and Catharsis

Funded by Save the Children, Scotland

Aim to explore experiences of staff and young people in residential child care of physical restraint

41 Staff & 37 young people participated in in-depth interviews

20 establishments involved in study
  – Care homes, secure settings, and residential schools
  – Local authority, voluntary and privately funded organisations
Physical Restraint and Catharsis

Some young people and over half of the staff made connections between restraint, the release of emotion and repeated restraints. – ‘seeking’ restraint for touch-related needs was also cited by young people and staff – often related to the need to release emotion and sometimes related to repeated restraints.
Young person

. . . there’s times where you need to be restrained and you feel yourself, there’s some boys in here in the, even, see in [name of establishment] there’s boys that speak to each other and, like, say, ‘Aye, I feel like I like getting restrained to take my anger out away.’
At the other end of the scale I’ve held a kid that’s, look it’s been the best thing for him, right, because they’ve been needing to let out what’s coming out and the only way they could do it was going over here, where being held and being safe for that 10 minutes . . . . And you come out of that and you’re very much, ‘Phew’. You feel as though that’s done them the world of good . . . again, it never does you the world of good. I don’t care what the circumstances is, I always feel sick.
Some kids just need to be held to comfort them. (young person) As a comfort thing? (interviewer)

Yeah. (young person)

So sometimes do they get held when they haven’t, when they’re not putting anybody at risk, but they just need the comfort of being held? OK. (interviewer)

Well they won’t, but like you have to mad before they can do it.

Oh, I see. So maybe a kid really just needs the comfort, but they have to kind of go into that ‘putting at risk’ place to be able to get the hold. Aye? That, what do you think about that? (interviewer)

Well I’ve done it a few times. (young person)

Yeah? That’s really honest. If there was a way to be able to get that need met without having to go mad, would you have liked to have had a way to do that?

Hmm [affirmative]. (young person) Yeah? (interviewer)

I don’t know how to for, [pause] you don’t, you need to get all your anger out and then you just go mad and then you need to be held. (young person)
Question

Can/do extreme expressions of emotion have a therapeutic effect or can/do they reinforce destructive behaviour and emotions?

Is catharsis a good thing or a bad thing?
Scheff’s theory of catharsis

According to Scheff, catharsis has two components:

- Somatic-emotional, motoric discharge
- Achieved at optimal distance
Scheff’s theory of catharsis

<table>
<thead>
<tr>
<th>Emotional State</th>
<th>Catharsis (at optimal distance)</th>
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</thead>
<tbody>
<tr>
<td>Grief</td>
<td>Sobbing with tears</td>
</tr>
<tr>
<td>Fear</td>
<td>Shaking with cold sweat</td>
</tr>
<tr>
<td>Embarrassment</td>
<td>Spontaneous laughter</td>
</tr>
<tr>
<td>Anger</td>
<td>Hot sweat or spontaneous laughter</td>
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</tbody>
</table>
Optimal Distance

Derived from the notion of aesthetic distance

Participant <-> Observer

Balance of thought and feeling
Balance of emotional resonance and control
Dredging up the past?

(Scheff’s theory of catharsis)

Verbal recall is neither necessary nor sufficient for catharsis

- Emotional discharge without verbal recall is effective

- Sometime a ‘somatic discharge’ is necessary before recall can happen
Scheff’s theory of catharsis

Within this model, there is an important distinction between emotions as distress and emotions as discharge.

Evidence of greater levels of therapeutic gain amongst emotive patients and especially amongst patients who exhibit cathartic release.
Klopstech stresses the key components for catharsis to be beneficial:

• Integration of the cathartic experience after cathartic experience,

• In the context of the therapeutic relationship,

• All towards promoting the development of self-regulation.
So when has ‘catharsis’ been a bad thing? *(some reflections)*

- When it hasn’t been cathartic – over or under distanced or not catharsis at all;
  - (e.g. Bushman, 2002)

- When the emotion has simply been a sign of distress and not a sign of discharge (perhaps related to degree of distance);

- When it’s the ‘wrong’ expression... perhaps, for example, expressions of anger do little to resolve repressed, accumulated grief.
Catharsis and Containment

If the expression of emotion (some of which may be intense expressions of emotion), has a biological imperative and facilitates growth and healing under the right circumstances, we need models that promote such circumstances.

Containment theory resonates with Scheff’s theory of catharsis and holds promise for conceptualising environments that can provide the right circumstances for (extreme) expressions of emotion.
Containment

“Containment is thought to occur when one person receives and understands the emotional communication of another without being overwhelmed by it, processes it and then communicates understanding and recognition back to the other person. This process can restore the capacity to think in the other person” (Douglas, 2007, p.33).
Some key concepts in containment theory

• Making the unmanageable, unbearable, uncontainable – containable, manageable, bearable;

• Absorption: A settled shift isn’t always indicative of a good shift

• Based in care and relationship

• Can involve a component of making sense (integration)

• Staff’s needs for containing processes
Conclusions

• Catharsis and non-cathartic discharges of emotions are very likely to be happening regularly in residential child care and other settings that work with kids who are in pain.

• The concepts of emotional discharge & optimal distance and the distinction between emotion as distress and emotion as discharge are useful in considering how we support the expression of emotion and catharsis in residential child care and other settings that work with kids who are in pain.
Conclusions

• Containment theory is useful in guiding efforts to provide optimal circumstances for discharge of emotion – one that does not require physical restraint

• Staff’s need for expression of emotion and even for their own catharsis warrants consideration
  – Overlooking or ignoring this may contribute to unnecessary physical restraints
Bibliography/References


Bibliography/References


Bibliography/References


Further reading on the restraint study


Further reading on restraint study


CYC-Online
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Steckley On Containment

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