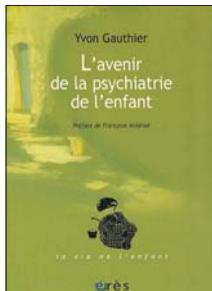


L'avenir de la psychiatrie de l'enfant



*Yvon Gauthier. Éditions érès: Paris, France, 2009.
240 pages. €25.*

Le Dr Yvon Gauthier présente dans ce livre une revue critique des étapes qui ont jalonné le développement de la psychiatrie de l'enfant en Amérique du Nord et en Europe en prenant appui sur son cheminement personnel et ses expériences de clinicien et chercheur dans un grand hôpital pédiatrique universitaire montréalais. Il s'interroge sur l'avenir de la psychiatrie de l'enfant dans ce parcours balisé par la psychanalyse d'enfant, l'arrimage de la pédopsychiatrie avec la perspective observationnelle de la pédiatrie, les interactions mère-enfant, les premières relations, la théorie de l'attachement des origines à nos jours, les interventions précoces, les facteurs de changement en psychothérapie et la difficile intégration de l'organique et du psychique.

La théorie de l'attachement constitue la toile de fond du livre. L'auteur démontre bien que l'on ne pouvait accéder à ce corpus de connaissances que si on se libérait des entraves exercées par les théories kleiniennes du développement du nourrisson. Il n'y avait de place que pour les fantasmes primitifs et le bébé réel était ignoré ainsi que sa mère (sa source et son prolongement). Pour les apprentis pédopsychiatres, il y avait heureusement Anna Freud dont les livres comme « Le moi et les mécanismes de défense » faisaient contrepoids ainsi que John Bowlby qui nous a ouvert les yeux sur les comportements d'attachement du bébé et de sa mère. Un bouffée d'air frais pour de nombreux pédopsychiatres de l'époque, à l'étroit dans les conceptions kleiniennes du développement.

L'observation des interactions entre jeune enfant, mère et autres personnes significatives de l'entourage devenait alors féconde, comme l'ont bien montré le Dr Gauthier et ses collègues lors de leurs travaux sur l'étiologie multifactorielle de l'asthme du jeune enfant. Signalons également la remarquable contribution de l'auteur à l'observation des réactions affectives et comportementales du jeune enfant hospitalisé. Le film « Les départs nécessaires », produit par l'Office national du film du Canada, a connu un grand succès et accru la crédibilité des pédopsychiatres auprès de leurs collègues pédiatres. Ces médecins « de l'âme » pouvaient aussi

s'intéresser et donner du sens à des données d'observation (hard data) considérées alors comme étant au cœur du modèle médical.

L'analyse des modalités relationnelles mère-enfant donnera naissance à la théorie de l'attachement dont l'auteur traite avec une grande maîtrise dans les chapitres centraux de son livre. À partir des premiers travaux sur la carence affective, il décrit les types d'attachement, discute d'apports conceptuels majeurs comme celui d'interaction fantasmagique de Serge Lebovici, des modèles internes de John Bowlby et de l'intersubjectivité de Daniel Stern dont le livre « Le monde interpersonnel du nourrisson » constitue une contribution majeure à la psychiatrie du nourrisson. Le père est abordé ici et là mais l'auteur aurait pu y consacrer un chapitre pour ouvrir beaucoup plus sur le système familial. Le lecteur aurait apprécié connaître plus à fond les recherches d'Elisabeth Fivaz sur le jeu triadique ou encore les contributions majeures de M. E. Lamb sur la place du père dans la relation parents-nourrisson. Le Dr Gauthier, dans la foulée des théoriciens de l'attachement, sous-estime la contribution des caractéristiques innées du nouveau-né. Le tempérament est brièvement abordé mais relégué au second plan comme corpus de connaissances significatif. Pourtant les bébés au tempérament difficile existent comme l'ont décrit Alexander Thomas et Stella Chess et plus tard Jerome Kagan avec son concept de réactivité. Certes, on peut discuter des limites de ces études mais des milliers de parents ont vécu l'expérience de bébés difficiles ou faciles ou encore « lents à se réchauffer ».

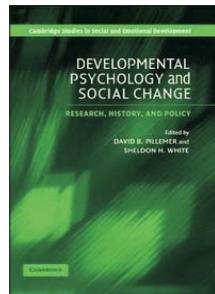
Il aurait été intéressant que l'auteur présente, en plus de la théorie de l'attachement, d'autres modèles explicatifs du développement de l'enfant. L'approche théorique du développement à l'origine du modèle Gène x Environnement (G x E) aurait pu aussi être présentée. Il s'agit du modèle transactionnel du développement qui étudie les caractéristiques pathogènes et protectrices des individus, de leurs parents et de leurs milieux de vie. Des développements significatifs de ce modèle au cours des années 1990 ont donné naissance au modèle G x E en permettant une meilleure compréhension des mécanismes épigénétiques des troubles mentaux. C'est ce modèle G x E qui a permis de reconnaître le rôle essentiel de l'environnement en psychiatrie génétique. Une telle percée scientifique nous paraît rassurante pour tous les cliniciens et chercheurs qui craignent qu'on tente de tout expliquer par les neurosciences. Le Dr Gauthier, par ailleurs, questionne à juste titre l'usage parfois abusif des médicaments visant à modifier la neurotransmission cérébrale mais il est opportun de se rappeler que c'est l'effet placebo qui explique en grande partie le taux de réponse aux antidépresseurs, lequel est tributaire des dimensions psychologiques en jeu dans la relation et non de l'action d'un médicament.

Les classifications DSM ont amélioré la fidélité des diagnostics psychiatriques mais, en contrepartie, le temps alloué à la

compilation des symptômes et critères se réalise souvent aux dépens de la recherche de sens comme l'explique si bien l'auteur. C'est ici que se situe le questionnement central de ce livre. L'auteur nous fait réaliser que l'évaluation des troubles mentaux occupe une place grandissante dans nos vies de cliniciens aux dépens du travail psychothérapeutique qui permet de faire des liens entre premières relations, événements de vie significatifs et relations conflictuelles. Or, l'expérience psychothérapeutique porte sur les relations (passées, présentes et futures) et le savoir-faire au plan relationnel constitue l'essence de la pratique clinique en pédopsychiatrie. Ce sont justement ces relations qui sont au cœur de ce livre qui constitue en soi une recherche de sens à partir de l'analyse des jalons de la croissance qu'à connue la psychiatrie de l'enfant au cours des dernières décennies. Les préoccupations de l'auteur quant à la reconnaissance de l'environnement nous semblent peu fondées eu égard aux connaissances actuelles mais il a cependant bien raison de se questionner sur l'avenir de la pratique clinique en pédopsychiatrie.

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Developmental Psychology and Social Change: Research, History and Policy



David B. Pillemer and Sheldon White, eds. *Cambridge University Press: New York, NY, 2005. 412 pages.*
\$92 (US), hardcover.

The provision of clinical care and early intervention services for disadvantaged children and their families represents a universal problem which varies from country to country contingent on the political milieu of the time and place. However, the introduction of scholarship and research directed at public policy for the welfare of children can be influential at the government level, creating an impetus for change. The book

under review explores the developmental psychology of children, with a focus on cognitive functions, in various locations in the United States in a recent historical context. Numerous themes and sub-themes are advanced in this collection of densely written essays.

The central theme is that healthy children everywhere undergo similar development and transformations in mental functions according to a sequence and timing determined by biological imperatives. However, the cultural milieu directs "emerging competencies to particular tasks in specific contexts" (page 23). The opening chapters of the book highlight this theme by citing research studies demonstrating, for example, recall competencies in children growing up in Kenya compared to New England, and second, the influence of parental attitudes in Asian and American rural and urban cultures on recall competencies in their children. The results of these studies suggest that the manner in which the parent asks (or demands) something of the child influences how well the child will recall earlier events. This opening chapter thus provides a stepping stone to the demonstration further in the book, with more support drawn from studies, showing that the educational progress of children correlates positively with an employment-based antipoverty program for parents. Subsequent chapters emphasize that only the provision of supplemental income for parents in less advantaged economic conditions improved the well-being of their children, and outlines the pathways by which experiences of parents outside the family, particularly employment opportunities, can advance behavioural competence and educational achievement in their children and grandchildren.

There is a sobering note in the evaluation of this research in the context of public policy. Although this type of research will always be an "orphan child at the table where policy is made" (page 132), it must continue so that hypotheses about effective investments in the lives of children are properly evaluated. This book does not include any evaluation of such programs as Head Start in the United States and Children First in Ontario. A subtheme in one section of this book is the vulnerability of development at transitional phases, such as at infancy and adolescence, when serious developmental crises can occur. The authors omit the occurrence of a first psychosis in the adolescent as an example of such a crisis.

Some striking studies on the effect of environmental changes in the development of children are described in the final section of this book. The first compares the gradual establishment of institutional education in three generations of a Mayan community, showing both sides of the coin of the impact of compulsory education on family life. Attending school when it is compulsory leaves the younger siblings at home and the parents and the younger siblings unattended and abandoned. This is the price for the acquisition of new

language skills, greater mobility and economic advantages in the new generation who are now able to leave the world of their parents and grandparents behind.

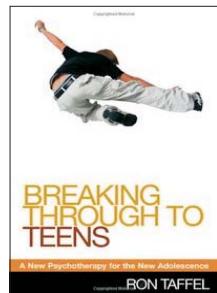
The second study engages the reader in the startling observation of the effects of political changes in Germany on adolescent development. One consequence of German reunification has been the transformation of a relative absence of national identity among former East German families to a rising popularity of extreme National Socialist agendas among some in this generation. This is thought to explain the widespread aggressive, and at times violent, behaviours on the part of adolescent groups aimed at the new regime and at anyone felt to be on the side of the new liberal left. In this way the rise of Neo-Nazism is explained by political and cultural changes that are otherwise considered political progress.

This book presents a collection of highly informative research essays linking cultural influences and child development. This is of great importance to the policy maker and social scientist and of less interest to the mental health clinician who may not be as concerned about global issues. Yet perhaps we all should be.

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Breaking through to Teens: Psychotherapy for the New Adolescent



Ron Taffel. *The Guilford Press: New York, NY, 2005.*
292 pages, \$25 (US), softcover.

The great merit of this book is the acknowledgement that adolescence, like many aspects of our society, has changed. Therapists, however, have been slow to give up their traditional ways though they should also change to connect empathically to the *new adolescent*. The author, an experienced clinician, writes in a personal, friendly and pragmatic way with plenty of clinical examples. A simple common-sense wisdom permeates this book, despite a number of contradictions (e.g. kids are behind a "wall of silence" (page 20)/ "it is a myth that

teens do not open up to parents" (page 194)). Paradoxically, such contradictions give credibility to the author as they add to the felt complexity and authenticity of the work with adolescents. He describes a relational-behavioural therapy that stresses the importance of an empathic connection with the adolescent along with behavioural change. While the author's clinical approach is very elegantly illustrated by numerous examples, it doesn't essentially differ from the new wave of therapies that are symptom focused in contrast to those that focus on the hidden causes of symptoms. The author specifically advises not to ask *why* and not to look for hidden motivations (page 221) but rather *what, who* and *when*. There is no mention of earlier upbringing or childhood experiences, but rather is focused on the here and now. I agree that the therapist must often be rather concrete and present-focused in the interaction with many adolescents, but if the therapist doesn't project on the adolescent, a live and unique internal world based on history, who will?

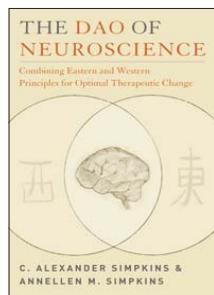
According to the author, chronic and habitual lying is a major characteristic of the new adolescent and one of the elements of this "wall of silence" behind which he hides from the adult world. Interestingly, the author doesn't consider this lying as being delinquent or even symptomatic but "something very different than it did in post-Victorian United States" (page 128). He adds that "dealing with non-conflictual, chronic lying is an essential part of teen treatment" (page 128). Typically, he ends the first session with a patient by asking: "on a scale of 1 to 10, how much of your life have you been honest about with me?" (page 45). I think that it is excellent advice not to be naïve with our patients, however by considering chronic lying as normative, adults run the risk of colluding with aspects of today's teen's life that have become clearly dangerous and problematic. In my opinion, this kind of lying is a symptom of what he later describes as a "divided self" (page 74) and should not be trivialized. The new adolescent comes with new "culturally induced anxiety" (page 11) related to competitiveness and overstimulation, and new anger accompanied by verbal brutality and violence. He is also defined by the importance of the peer group which he calls "the second family," a concept that I find enlightening to understand how alienated he may be from the first family. The author promotes in the work with adolescence a "flexible confidentiality" (page 148) based on the need to talk to parents and to peers. Youngsters who refuse are referred to colleagues. This is understandable in situations of danger but when generally applied, it dilutes the sense of inner boundaries that defines intrapsychic work in contrast to counseling and case management. While clearly non-analytic, the author – though very briefly and with no elaborations – refers in his discussions to fundamental authors like Donald Winnicott, Margaret Mahler, Melanie Klein, and Heinz Kohut, and

devotes his last chapter to counter transference. Surprisingly, there is no mention of founding authors on adolescence like Peter Blos, Erik Erickson or Moses Laufer. Even though this is unequivocally a non-theoretical pragmatic *know-how* book, there is a lack of inner coherence.

My greatest criticism of this book is the author's obviation of the intrapsychic world. Have we altogether given up attempting to work psychodynamically – let alone analytically – with this age group? But how then will our theory building and consequent interpretative work be informed? Akin to our patients and their parents, we are driven by strong external pressures out of our thinking *mind*. Despite these shortcomings, I strongly recommend this book for anybody working with this age group. In fact, the authenticity, humility and genuine care of the author constitute an experience of empathic connection with the reader: you are not alone to find it difficult. I agree with Ron Taffel when he says: "*I cannot tolerate the arrogance of clinicians who think they have all the answers,*" (page 5) and he doesn't make that claim.

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The Dao of Neuroscience: Combining Eastern and Western Principles for Optimal Therapeutic Change



C. Alexander Simpkins and Annellen M. Simpkins.
W.W. Norton & Company: New York, NY, 2010. 278 pages.
\$45, softcover.

The Drs. Simpkins are psychologists in private practice specializing in meditation and hypnotherapy. Their clinical focus is important for the prospective reader to know, because, given the title, there are a vast number of topics that could be included in this book. This book seems written for the general public, although therapists may find it informative and useful. Techniques used with children and with adults are included.

The book consists of two sections — the first section is about the brain, and the second is about therapy. There is an attempt to bring together East and West throughout the book. I enjoyed the clinical examples liberally scattered throughout, clarifying some Eastern concepts, and varying the pace of the book so it is less dry.

The East is mainly represented by Taoist, Buddhist, and Hindu material, blended together, with no attempt to distinguish one from another. Quotations, stories and poetry are brought in from ancient as well as modern sources (including the authors' own works), with little information provided about these sources.

The first section begins with an exploration of brain versus mind as a way to compare Eastern and Western perspectives. Next is a quick description of imaging techniques and a more detailed discussion of brain models. The Connectionist Model is described in a page and a half, and I confess, not having heard of it before, I still did not understand it after reading this. Comparing the on-off signaling of neurons to Yin and Yang seems a stretch. The authors also compare the neural net model to the Buddhist Indra's Net, explaining only that Indra's Net is a net. The authors equate analogies between Eastern and Western models with proof, which I would argue is unsound. Chapters 3 and 4 summarize basic (Western) neuroscience, focusing on topics relevant for a later discussion of therapy. The experienced clinician may learn something new, but it is oversimplified and contains few references. The Eastern view is not very evident in these chapters, and acupuncture is not even mentioned. The last chapter, on change in the brain due to evolution, development and environment, compares this with ideas such as a Buddhist idea of the Cosmos being self-creating, self-maintaining, and self-defining. It is interesting to learn this about Buddhism, but it does not add to the reader's understanding of the brain.

I hoped to learn about Eastern therapeutic techniques beyond those already found in the mainstream literature. The East includes half a world, numerous traditions, and thousands of years of culture and knowledge. However in this book the East is represented mainly by meditation and hypnosis and the use of Taoist and Buddhist perspectives in cognitive behavioural therapy.

The second section, titled "Redirecting the Flow for Change" and focusing on therapeutic techniques, starts with an overview of cognitive therapy, behavioural therapy, meditation, and hypnosis. Then follow chapters on such topics as attention, memory, emotions, and empathy. Each contains an overview of Western structural and functional research and models based on these, followed by exercises from meditation, mindfulness and hypnosis that allegedly improve functioning of these systems. References are scant, and mostly to

the authors' other works. The authors provide examples of using these exercises with children. I would expect stronger evidence before I suggested to any patients that mirror neuron exercises could help autism or that meditation would significantly help ADHD, as the authors seem to imply. Nonetheless, the exercises seem harmless and could be of some benefit if not fun for some children. Probably these techniques would be more effective if taught by trained and experienced practitioners than out of a book. In any case, these techniques have already been part of the Western therapeutic armamentarium for the last few decades.

This ambitious book attempts to cover a lot of ground in an easy to read format. In my opinion, it works better as an overview of hypnosis, meditation, and neuroscience, than as an integration of East and West. I recommend it to those who are interested in a broad overview of neurobiology as it pertains to therapy and to those who want to explore meditation, hypnosis, and mindfulness with accessible exercises.

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