

A Study on Reattach Therapy – W.A.R.A. for Stabilising Neuropsychiatric Symptoms

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Abstract

ReAttach is a brief and proper psychological intervention, that primarily assists to reduce psychological distress and unpleasant feelings through various kinds of sensory processes and optimization of negative affect optimization. Aside from this, W.A.R.A practice therapy is a sub-component of the ReAttach therapy that mainly focuses on wiring the unpleasant feelings of the patients. After the pandemic outbreak, the W.A.R.A. practice has been utilizing self-regulation tools, which could be provided through a therapist in both face-to-face and remote sessions. The main aim of this, research article is to analyze the working procedure of W.A.R.A practice, describe the major intervention of this procedure, and learn the impact of this therapy session. However, the major findings and discussion of this study is W.A.R.A. practice is much more effective compared to other kinds of therapy and the conclusion of this study is, this specific therapy is greatly beneficial for patients, who are suffering from sensory over-responsivity.

Keywords: W.A.R.A practice, ReAttach therapy, sensory over-responsivity. W.A.R.A remote practice.

1. Introduction

Neuropsychiatric patients initially share various symptoms all over the nosological categorization, such as self-regulation disturbance, anxiety, mood alteration, psychological distress, and many more symptoms. In this case, ReAttach is a special psychological intervention, that has its own key components, those components are the being's arousal regulation, external effect, simulation of the various kinds of sensory processing associative memory processing, affective metallization, and conceptualization. In the past, reattach therapy has been one of the crucial hypotheses that are majorly effective for decreasing the symptom's severity within different psychiatric criteria. According to W.H.O (World health organization), within the past years, the majority number of people have been greatly suffering from multiple types of mental health across the world. Even after the pandemic, mental health issue has been majorly growing across the world, especially those people, who are involved in the severe disorder.

The mental health effect is one of the single sensory experiences, which might be served as necessary elements among a large range of the psychological process. However, the affective stage greatly encourages any individual's behavioral, emotional, cognitive, and physical functioning. On the other hand, conceptualization, sensory integration, and arousal regulation could be regarded as crucial requirements of the negative affect (N.A) regulation. In the period of the N.A regulation, external sensory stimulation, and unpleasant internal need to

conceptualize, identified, and integrated as pain or emotion. The role of the therapist in medicating, the patient's mood and arousal is necessary, which is emphasized through the study, however, W.A.R.A is a component of the ReAttach therapy and a small practice through the ReAttach therapist for assisting the patients with problems regarding the emotional regulation, chronic pain and rehabilitate with the sensory over-responsiveness.

2. Literature Review

Working design of the W.A.R.A reattach therapy

ReAttach therapy is a specific psychological intervention and procedure, in which the social cognitive training, various kinds of sensory stimulation, arousal regulation, and environmental effects is properly combined for the patients. Practice evidence majorly introduces that, this particular ReAttach therapy is a much associable and gentle learning intervention that properly reduces psychological distress beside increase the learning conditions [1]. However, in the period of ReAttach therapy, the therapist greatly provides tactile stimuli through gentle tapping within the patient's hand palm. From some of case study and report, it has been observed that non-noxious activation and low-intensity activation of the sensory nerves in the skin majorly triggers the release of oxytocin. it has been further estimated that, even during the therapy, through low-intensity and non-noxious tactile activation of the hand, the body releases oxytocin with its relaxing and calming impact might be triggered.

Besides the W.A.R.A is a sub-components of the ReAttach therapy, which explicitly focus on wiring the unpleasant feeling and emotion towards a sizeable neural ensemble and actively composed through the therapist, however, the procedure would be further continued through the systematic activation of the various kinds of concepts under the condition of ReAttach therapy. The study article mainly focuses on the efficacy of the W.A.R.A. under the ReAttach therapy. W.A.R.A. is mainly designed and developed for the ReAttach therapist, who will specifically work with patients with severe mental illnesses such as chronic pain, sensory responsivity, and chronic emotional feelings of dysregulation. Even major number of case studies and report has been showing that ReAttach therapy greatly decrease the overlapping symptoms among patients with chronic pain and dysregulation, there are still patients with consistent complaints of unpleasant feelings and intense hypersensitivity. Apart from this, ReAttach therapy initially aims for influencing the symptoms through the social cognitive condition, which majorly falls under the optimal sensory procedure condition [1]. This particular therapy offers the patients an opportunity for mentalization training, modifying the cognitive biases besides utilizing associative memory formation for active learning. However, after this, a proper solution for that persistent and systematic problem could have lied in the fact, which is regulator ReAttach therapy might go rapidly for patients and skip the essential step process for developing the healthy stimulation process.

Intervention procedure of this therapy

After various kinds of work related to sensory therapy among the physical and emotional pain, the core arose, that mainly focused on regular ReAttach therapy. The therapy focuses on changing the overall concepts of emotions and pain through adjusting and identification of them besides fostering many adaptive coping patterns. Aside from this, for patients with systematic complaints, it could be a fair option for changing the main focus towards the unpleasant feeling. On the other hand, the W.A.R.A. a sub-components of the ReAttach therapy, majorly address the ore-conceptualized negative impact instead of doing an activity with the concepts of emotion or any pain [2]. In the period of W.A.R.A, the working procedure, the therapist majorly co-regulates and indicates to te negative feelings, that only referred to unpleasant feelings through manipulating the arousal beside sensory stimuli. After the overall downregulation of arousal, the therapist mainly mentions the five concepts, which follow each other individually and are not related to each other for this W.A.R.A practice.

In this research article the primary points are based on the face-to-face W.A.R.A practice, yet, there are some particular cases in that, patients take remote W.A.R.A practice through the ReAttach therapist. In this particular intervention, there are some specific processes that both therapist and patients have to follow. However, through the remote direction, the patients first have to adopt some of the crucial skill, which is primarily performed by the therapist such as taping (sensory stimulation) alongside the arousal regulation, performed through the changes of the tapping speed. Thus, it could simplify the overall tapping techniques, which are normally utilized for the

downregulation towards the gentle pressing among the surface [3]. At the beginning of this W.A.R.A practice session, the patients need to learn the procedure of optimizing the arousal sensor process for the various kinds of sensory procedures besides damping those unpleasant feelings through the tactile simulation. The first and beginning tactile simulation within the W.A.R.A practice session is the first beginning of this session. Thus, from this point, it could be estimated that, in the period of remote W.A.R.A practice, the patients need to learn some crucial skills for completing the session. W.A.R.A ReAttach therapy is much more beneficial as regards a particular strategy for properly dealing with various kinds of adult's mental illness. Those illnesses are psychological distress, sensory over-responsivity, unpleasant feelings, and many more. However, ReAttach therapists initially utilize the W.A.R.A therapy session as an advantageous tool in the period of the treatment procedure for massively assisting to reduce the negative feelings. Besides, this particular exercise further assists to process unpleasant feelings and regaining self-control rapidly. Therefore, this W.A.R.A. therapy session is ideal for both patients and patients with various kinds of unpleasant feelings. Aside from this, it could be further noted that these therapy sessions do not replace the ReAttach therapy as regard schema therapy for adults.

Effect of this reattaches therapy

In the period of W.A.R.A practice, and the downregulation procedure, patients need to be majorly focused on pre-conceptualized unpleasant feelings besides systematic association among the presented conceptualized ensemble. Aside from this, the patients would receive a particular procedure for associative memory formation in the period of a few seconds of tapping on the patients. After the second downregulation, the patients majorly regulated the both conceptual ensemble and unpleasant feelings, which mainly provide that, co-regulation and time are optimal. Apart from this, during the W.A.R.A practice, it became understandable, therapists who filed to give the positive concept and factors; quickly enough after the downregulation has become unsuccessful. However, from the major amounts of case studies and reports, it has been observed that W.A.R.A practice is majorly crucial and significantly much beneficial for the large effective areas rather than medium effective areas [4]. Major numbers of patients are agreeing to the fact that tapping among the hands, the W.A.R.A practice mainly requires the patient's trust and proximity towards the therapist. Before any kind of individual treatment could be afforded, the ReAttach therapist would first have to invest in a good relationship among the patients for gaining their trust.

It is necessary and common practice for providing initial information about the ReAttach therapy and various kinds of relevant data about the associative nature of the ReAttach, arousal regulation, and multiple sorts of sensory stimulation. Since the W.A.R.A. practice majorly consists of necessary components of the ReAttach therapy, it makes the practice specifically suitable for the first introduction of ReAttach therapy interventions. Apart from this, the ReAttach practice is mainly scheduled, even before the start of the first ReAttach therapy session. However, in the period of W.A.R.A practice, Rewatch therapists mainly focus on the wiring negative effect through the systematic activation of various kinds of association, which falls under the ReAttach therapy condition. When W.A.R.A. practice is given face-to-face, the therapist outwardly operates the patient's sensory and arousal processing besides it greatly requires therapist physical contact and proximity by gentle tapping on the patient's hand [5]. On the other hand, in W.A.R.A remote practice, the therapist mainly instructs the patients to self-regulating the sensory and arousal process through verbal instruction besides exercise. However, in both cases, the major and primary focus of the W.A.R.A. practice is to store and conceptualized feelings and emotions through sensory integration utilizing associative memory formation.

3. Methodology

The methodology section, in the context of a research article, indicates one of the primary sections of the study. However, the research methodology mainly discusses a particular pattern, which would be adopted into the research article. The adopted research pattern would further assist to have a much better and deeper analysis of the subject matter. Aside from this, for the research approach, the deductive approach will be implemented for the particular process. That further explained the practical application of theories for further gaining information about the major and primary content of the research paper. On the other hand, for the research design, the descriptive research design will be further applied in this particular research article. A descriptive research design will be chosen for gaining the core details of the subject matter and obtaining the proper description of this research

article. Completing this research article, the data source is one of the vital and crucial components that massively help in extracting the relevant information and data according to the specific requirements.

However, there are two types of data collection procedure, which is the primary quantitative data collection procedure and the secondary qualitative data collection procedure. The primary quantitative data-gathering procedure mainly focuses on collecting relevant information based on statistical analysis. However, this particular research methodology is a systematic procedure either a frequent investigation through collecting and gathering statistical and mathematical information through some particular techniques [6]. Quantitative data-gathering procedures could be completed by conducting surveys, online polls, and questionnaires. On the other hand, the qualitative data collection procedure majorly focuses on the existing data, which helps to get core and better data and analysis related to the subject matter. Secondary qualitative data further help to avoid the extra burden of taking surveys and conducting questionnaires survey. However, in this research article, the secondary qualitative data collection procedure will be applied for completing this research article. In the period of collecting data and relevant information regarding the subject matter, it would be further ensuring that all the data would be collected from the relevant journal and research study.

4. Findings and Discussion

Primary procedure of W.A.R.A practice and its impact

The W.A.R.A. practice primarily includes arousal regulation and external impact regulation through the therapist. At the beginning of this session, the therapist mainly simulates the multiple senses. Those stimulations are visual through eye contact and facial expression, additive through verbal instruction, or through making tactile sounds through fast tapping on the back of the patient's hands. After that, the therapist would instruct patients for closing their eyes besides focusing on their unpleasant feelings during the period of completing the W.A.R.A practice sessions [7]. After completing the procedure, the therapist would activate the arousal through the changes in tapping speed on the patient's hands. Apart from that, during the low-speed tapping frequency, the therapist would direct the patients for focusing on the top five positive factors such as excitement, friends, holiday, love, and enthusiasm. After that, the therapist would again change the speed of tapping towards a bet fast tapping for activating the optimal arouses. The optimal arouses are mainly activated for properly processing the next instruction. However, the primary instruction is to remember the session as far as possible. Immediately after this direction, the therapist would change the tapping speed to much lower arousal. In the period of low tapping arousal, the therapist would remain silent for approximately 20 seconds. Next to this procedure, the therapist would finally end the W.A.R.A. practice under the fast tapping criteria by instructing the patients for opening their eyes.

It is a much interesting phenomenon and techniques that W.A.R.A. practice could be majorly helpful for decreasing the tactile over-responsivity. However, the patients with solid resistance towards physical contact or therapist proximity primarily receive the self-regulation practice. In this case, the W.A.R.A. practice could be provided as the prime self-regulation tool [8]. From this research study, the major findings were, this practice majorly provides great benefit to a large number of people. The conception of the negative impact of unpleasant emotions or feelings might be a solid point for the discussion. However, in the period of W.A.R.A instruction and practice, language is one of the most vital and crucial factors during the session therapy. During the session time, the therapist instructs the patients not to conceptualize and visualize those unpleasant feelings, which the patients could be able to address the pre-conceptual negative impact. However, the patient's group needs to develop a temporary ensemble for the concept, which might be chosen randomly, Aside from this, for making the W.A.R.A practice much more effective interventions; the therapist is selected for choosing various kinds of positive concepts that might suit the patient's feelings as well as their world of experience [9]. Thus, it can be said that this particular session majorly focuses on the positive concept of the patients.

Basically, patients of neuropsychiatric share various symptoms across the categories of nosological such as mood alterations, disturbances of self-regulation, and psychological distress. ReAttach is an intervention of novel psychology along with its main materials being arousal regulation, external effect, and processing of associative memory. ReAttach has been assumed to be efficient in decreasing symptoms' seriousness within various

conditions of psychiatric. Distraction and W.A.R.A are not comparable within the contact intensity along with the effect of expectation- inducing and the therapist of this assessment might be stronger. The main fact that W.A.R.A. includes distraction and touch might not influence the outcomes. W.A.R.A. is favourable in some of the psychotherapies such as emergency issues, privacy, and confidentiality. W.A.R.A. stated a more superior effect rather than disengagement, reprocessing therapy and “*eye movement desensitization therapy*”. These all are similar in terms of disengagement of taxing “*the working memory*” and also have been proven therapy in decreasing psychiatric problems. The working memory taxing for both E.M.D.R. and W.A.R.A. therapy is quite different. W.A.R.A. gives regulations for external arousal, active generation mentalization, and different sensory stimulations by the subject matter.

5. Conclusion

From the above study, it can be concluded that W.A.R.A. is mainly designed for the therapists of ReAttach working along with the patients suffering from “*sensory over-responsivity*”, dysregulation of chronic emotions and generating more styles of adaptive coping. W.A.R.A is the specific exercise of the ReAttach method that depends on the activation of proper development. ReAttach is an experience of emotionally neutral and gentle therapy of non-invasive. It mainly aims to treat different mental health issues by pointing out the proven processes of transdiagnostic while utilizing standard protocol. The distinctiveness of ReAttach lies within the pointing out of different underlying main processes, frequently and within a proper manner of one particular fluent therapy assessment. The assessment involves sensory processing, mentalization, conceptualization, associative learning, formation of associative memory, and physical arousal optimization. At the time of exercise of W.A.R.A. the therapists of ReAttach mainly aim at writing different negative influences by frequently activating of various associations of ReAttach conditions. Rather than concentrating on physical or emotional pain, within W.A.R.A. the experience therapists work along with the unpleasant feeling. At the time W.A.R.A. is given “*face-to-face*”, the therapists control the patient’s sensory and arousal processing, the therapists’ physical contact and proximity are needed in the whole process of gentle tapping on the hands of the patient. Within the remote therapy of W.A.R.A, the therapists command the patients to self-control the sensory and arousal processing by exercises and verbal instructions. Within both cases, the main goal of W.A.R.A. is to gather unpleasant and conceptualized feeling through the integration of sensory utilizing connected memory formation. Mainly, due to its simplicity and accessibility, W.A.R.A. may serve as a tool of self-regulation given by the remote therapy. Aside from this, from the above study, it has been concluded that, the W.A.R.A. ReAttach therapy could be massively beneficial for the patients with verius kinds of mental illnesses.

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