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## Task Force Report on Methodology and Empirically Supported Treatments: Introduction

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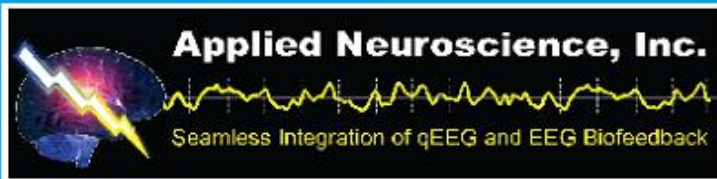
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## TASK FORCE

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# Task Force Report on Methodology and Empirically Supported Treatments: Introduction

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**ABSTRACT.** Recent criticism of biofeedback has increased the importance of rating the efficacy of each biofeedback and neurofeedback therapy. A joint task force of the Association for Applied Psychophysiology and Biofeedback (AAPB) and the Society for Neuronal Regulation (SNR) has developed standards for efficacy research methodology and template for rating the level of efficacy of each application. The Task Force Report has been approved as a policy guideline by both the AAPB and SNR Boards.

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**KEYWORDS.** Efficacy guidelines, psychophysiological interventions, treatment outcome, taskforce on efficacy, biofeedback

In June 2001 Donald Moss, then President, Association for Applied Psychophysiology and Biofeedback (AAPB), and Jay Gunkelman, then President, Society for Neuronal Regulation (SNR), appointed a Task Force to develop standards on research methodology and on the empirical support of treatments. Theodore J. La Vaque represented AAPB as cochair, and D. Corydon Hammond represented SNR as cochair. The AAPB Neurofeedback and sEMG Divisions supported the Task Force and named delegates.

There have been several recent instances in which researchers have made critical statements about biofeedback lacking efficacy. The Association for the Advancement of Behavior Therapy newsletter (*The Behavior Therapist*) published a paper critical of neurofeedback (Lohr, Meunier, Parker, & Kline, 2001). Reuters Health issued a press release reporting William Mullally's headache research and his statement that biofeedback is too expensive and not effective for headache. An AAPB response to the Mullally research has been published (Moss, Andrasik, McGrady, Perry, & Baskin, 2001). The *New England Journal of Medicine* published a landmark paper challenging the placebo effect (Hrobjartsson, & Gotzsche, 2001). In a follow-up to the NEJM study, a science reporter highlighted a biofeedback hypertension study and stated that just entering a study was as effective as biofeedback in treating hypertension.

Practitioners announce new applications regularly, yet as a field we fail to discriminate among first line well-documented treatments, and experimental new applications. The current health care movements toward evidence-based medicine and "best practices" standards will leave biofeedback behind, unless we better validate/support and rate our own treatment protocols.

The Task Force worked diligently for 4 months, reviewing a massive body of research reports on methodology and efficacy studies. The American Psychological Association (APA) addressed many similar issues in developing its guidelines on the empirical validation of psychological treatments (APA, 1995; Chambless et al., 1996, 1998; Task Force on Promotion and Dissemination of Psychological Procedures, 1995). Review of the APA efforts provided significant guidance and some of the framework for the AAPB/SNR Task Force in developing guidelines for rating the efficacy of biofeedback and neurofeedback

treatments. The Task Force also reviewed ethical issues regarding research on humans subjects, addressed in two critical documents, the Declaration of Helsinki (World Medical Association, 2000) and the Belmont Report (Department of Health and Human Services, 1979).

The Task Force produced a “Template,” which has now been approved as a policy guideline by both the AAPB and SNR Boards. This Template provides our field with a strong set of methodological standards, by which we can classify applications at one of five levels of efficacy, according to the quality and quantity of outcome research that has supported each application: Level 1: Not empirically supported, Level 2: Possibly efficacious, Level 3: Probably efficacious, Level 4: Efficacious, and Level 5: Efficacious and specific. Regular use of this new template to assess the efficacy of mind-body therapies will give credence to our better treatment protocols.

Both AAPB and SNR extend gratitude to the Task Force, its chairs, members, and reviewers for providing guidelines for rating applications of biofeedback and neurofeedback.

#### Participants in the Task Force included

Chairs: Theodore J. La Vaque, PhD, and D. Corydon Hammond, PhD

Members: David Trudeau, MD, Vincent Monastra, PhD, John Perry, PhD, Paul Lehrer, PhD

Reviewers: Douglas Matheson, PhD, and Richard Sherman, PhD

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