... and during the therapy

You will also have an important part to play during the therapy sessions: namely that of an observer. Observation is necessary to determine the effects of the therapy, especially where young children are concerned. They have neither developed their vocabulary sufficiently, nor are they able to create enough distance from their experience to put changes in their behaviour and experiences into words.

The other ways in which you will be involved in the therapy are dependant on both the age and wishes of your child.

• Toddlers and infants (age 1-5)

The younger your child is, the more important it is for you to be there, so that your child feels safe. The therapist will involve you intensively during the treatment, and will make grateful use of your knowledge of the child.

Children (age 6-12)

Children in this age group are usually able to attend the therapy sessions independently, as they may feel inhibited to be open and enter into detail with a parent or guardian present. The reason is that a child in that age is able to empathise with the emotions of others, and won't want to upset his /her parent or guardian. Your role here will be primarily to offer support to your child, and be an observant at home

Teenagers (age 12-18)

You will not be present at the sessions. You can best help your child by letting them know you are there if needed. Monitor your child, and don't handle on your own initiative too often. Try not to persist in asking them to tell you about the sessions or the effects of the therapy, but do listen attentively when your child starts to talk. Also learn to accept it when your child doesn't talk, as he/she is going through his or her own process. What matters is that your child feels safe and respected. Note any changes you may detect, and discuss them — after consulting your son or daughter — with the therapist.

Need more information?

On the Internet: www.emdr-uki.org

© EMDR Kind en Jeugd, the Netherlands: Renée Beer and Carlijn de Roos Translation: Joanne Morris- Smith

EMDR Traumatic memories become ordinary ones

You have asked for help because your child is suffering from emotional, physical or behavioural problems. These problems seem to be related to either one or a number of traumatic experiences, such as an accident, a fire, physical abuse, bullying, or some other damaging experience. Scientists believe memories of these upsetting event(s) aren't registered properly in the brain. Luckily, this can be helped, thanks to an effective therapy called EMDR (Eye Movement Desensitization and Reprocessing). Once these memories are registered properly, your child's problems will be reduced or even disappear completely.

EMDR information

Traumatic memories become ordinary ones

The good thing about EMDR is that it works so quickly. A child that has had a single bad experience is likely to need less therapy sessions than a child that has been exposed to long-term, systematic threats or interference. In those cases, EMDR is usually part of a more extensive therapy.

Reprocessing

The key is most probably the way in which memories are registered. The brain processes traumatic experiences in a different way to those that are normal. With normal experiences, the information flows from the senses to the brain, where it is registered and processed into a memory, which is basically a jumble of facts, impressions, and interpretations. In the case of experiences, involving intense fear, helplessness or life-threatening situations, the body puts itself in a state of alert. Consequently, the original disturbing images, thoughts, sounds, and feelings are registered in a raw (= unprocessed) form. Stimuli, such as images, smells, and sounds that trigger off reminders of that upsetting experience, can continue to re-activate these unprocessed memories. This makes the child respond with the same emotions as it did back then, causing it to be just as upset again and again. EMDR assists the brain in completing the normal processing of information, in order to enable traumatic memories to become ordinary ones.

The sooner the better

Long-term traumatic experiences can slow down the development of certain sections of the brain, which can result in a child falling behind in certain areas, as well as influencing the development of the child's personality. The effect of a single bad experience is less influential, but if the problems continue for a long period of time, it can also result in a developmental slowdown. EMDR removes mental blocks, enabling the restart of a healthy development, after which you may see a great improvement in how your child (re) acts and feels. This probably also has a positive effect on your family life after possible disruption caused by the problems of your child.

No risks involved

The first publication on EMDR appeared in the United States in 1989. In the years that followed, this method of treatment has been enhanced and scientifically studied. On the basis of this research EMDR is now considered to be an effective psychotherapy for adults, teenagers and children who are affected by memories of upsetting events. The only therapists qualified to apply this therapy are those who have received special EMDR training. There are no risks attached to this therapy if applied correctly. At worst there is no improvement, but that will soon become apparent. In that case, it is likely that the problems of your child and the event are not linked after all, or there are too many stress factors involved in the current situation which enable the perpetuation of the problems.

What happens during the treatment?

The therapist will ask your child to talk about the incident, and then freeze-frame the image that they find the most harrowing right now. Whilst the child is concentrating on this image and what he or she is thinking and feeling, they are asked to do something else, which could be:

- following the fingers of the therapist with the eyes, as they move them from side to side in front of their face, or
- listening to sounds on the headphones, or
- tapping on the hands of the therapist with their hands (or the therapist can tap on theirs).

The therapist will ask the child at regular intervals things like: "What are you feeling?" or "What is there now?" This could be images, thoughts or emotions, but also physical sensations such as tension or pain. The child will be able to face the image of those particular incidents increasingly. The therapy will continue until your child stops getting upset whenever being reminded of what happened.

There's no doubt that EMDR really works. It's not yet known exactly how though. It's presumed that the natural information processing mechanism is stimulated by the combination of two factors: concentrating on the upsetting memory and providing a distracting stimulus (eye movements, sound, or touch), which alternately activates the right and left-hand side of the brain.

Intermittent effects

What may happen during the therapy period is that your child is somewhat more focused on the upsetting experience(s) or instances related to them. This is a result of the process of information reprocessing that has been initiated. This process will not stop as soon as your son or daughter leaves here. Additional unsettling feelings or fear may occur, but this usually stops within three days of a therapy session.

Your role beforehand...

You could explain to your child why he/she needs to come here. You could also look through this information leaflet together. That way, you may already be able to answer a few of the questions your child may have, and collect some that you would like the answers to.

Before the therapy begins, the therapist will need some information from you in order to provide an accurate diagnosis, such as information about the seriousness, time frame, and development of the problems. What is important is how your child has developed until the present date, how he/she is behaving, and in what circumstances he/she is growing up.

