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Helping Kids Heal: When Your Child Needs Psychotherapy

By Rachel Rashkin-Shoot

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Current Issue:
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We prepare children for all sorts of things in life—a new babysitter, the first day of school, a Bar or Bat Mitzvah, the arrival of a new sibling. Preparation is important because children, like adults, find comfort in knowing what to expect; this same sense of security is critical for a child entering psychotherapy.

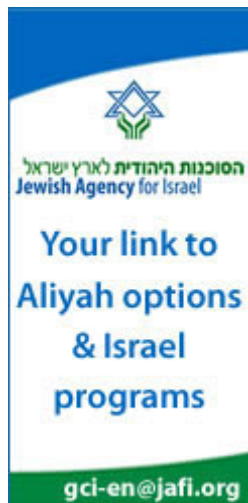
Therapy is usually considered if there are ongoing behavioral issues at home or school or both, or if a child is experiencing any kind of difficulty such as adjustment problems, phobias, trauma or loss. Parents may also seek out therapy if they have general concerns about their child's overall development. For children attending a yeshivah or day school, an existing problem may be exacerbated by the longer school day as well as the stress of navigating a dual curriculum. Therapy can be especially helpful when parents (along with, in many cases, teachers) find that attempted interventions have not succeeded, and a child's struggles are significantly interfering with his day-to-day functioning.

Whether your child is six or sixteen, it's important to help him understand the underlying reasons he will be seeing a therapist. Examples of helpful statements for young children might include, "Sometimes you get very angry at school and hurt the other children. A therapist can help you understand what makes you mad and teach you better ways to show how angry you are without hurting others." Try explaining to young children that a therapist is a "feelings doctor," and just like a medical doctor helps people with problems related to their bodies, a therapist helps kids with all sorts of

Choosing A Therapist

Choosing a therapist who will be a good match for your child is the first step in getting your child the therapeutic help he or she needs. It is often no easy task. Consulting with your rabbi, your child's pediatrician or trusted friends or family members for referrals can be a good start. Many Orthodox parents prefer to seek therapists who are either Orthodox themselves or who are familiar with the Orthodox way of life. There is comfort in familiarity, in knowing that the professional involved subscribes to your belief and value system. Alternatively, some Orthodox parents (or their children) may desire a therapist outside of the frum community, particularly in small communities where it may be more difficult to protect one's privacy.

Parents should not be shy about asking a potential therapist about his level of professional training or his



problems related to feelings. Some kids will take to this analogy instantly, while others will be more skeptical. Either way, the idea is to present a psychotherapist as someone kind and helpful.

Seeing a therapist is still highly stigmatized among some in the frum world. The idea of having a child see a therapist may raise anxiety about how others will perceive the family unit as a whole, and whether psychological counseling on a child's "track record" will somehow limit the potential for a good shidduch somewhere down the line. Some parents may consider it more acceptable to frame a child's psychological difficulties as being more spiritual in nature and therefore in need of rabbinical, rather than psychological, assistance. There is, of course, overlap, and often psychological and spiritual conflict are interconnected. Skilled clinicians and rabbis can, and should, know their areas of expertise as well as their limitations, and should refer a child to the appropriate help based on the nature of the problem.

Many parents who consider psychotherapy as a treatment option for their child feel they have somehow failed, and that if only they had done X their child wouldn't need "someone else's help." While these feelings are normal, it is also important to not let them interfere with getting a child the help he needs. Reducing the stigma of therapy begins at home, with parents reflecting on their own feelings regarding what it means to be emotionally healthy and on their attitudes towards psychologists and other mental health professionals. Generally, when parents are able to examine their own feelings and beliefs about therapy before attempting to prepare their child for it, they become more open and available to discussing therapy in a positive way.

It is important to keep in mind that for most of the year, day school and yeshivah students spend the majority of their waking hours in school. Therefore, it is important to ensure that sufficient therapeutic services are provided within the school milieu. This will also assist in reducing the stigma associated with seeing a therapist on a systemic level.

Parents can advocate hiring a competent, culturally sensitive school guidance counselor or psychologist, or suggest that the day school or yeshivah periodically invite therapists to speak to children on specific psychological topics (i.e., depression, test anxiety, healthy eating and exercise and academic or social pressure). Parents may also encourage the development of support groups for children struggling with divorce or other loss, social skills deficits, weight management and other social, emotional or academic issues.

Children of all ages may need to be reminded repeatedly that seeing a therapist does not make them "sick," "bad" or "weak," and parents need to genuinely believe that. Remember that many adults as well as children see therapists at various points in their lives in order to work through a range of issues. They do this, in part, to achieve more meaningful and satisfying lives with a greater sense of self-awareness and interpersonal insight. Supporting children throughout their therapy by discussing the process in a positive, reassuring tone will therefore help them perceive therapy as an opportunity for personal growth rather than as a punishment or something they have to ride out.

Children's reactions upon hearing they will be seeing a therapist vary. Keep in mind that for young children seeing a therapist can feel like a play date; the therapist is someone who simply has interesting things to play with and who talks about feelings. Do not be wary of the phrase "play therapy," which the therapist may throw around. Play therapy is a method of psychotherapy used with young children since play is their natural form of communication. A skilled therapist will learn a wealth of information about a child through play. For a school-aged child, however, the

Try explaining to young children that a therapist is a "feelings doctor" ...who helps kids with all sorts of problems related to feelings.

thought of seeing a therapist can be frightening and overwhelming, and can trigger all sorts of negative feelings such as inadequacy and embarrassment. In many cases, these reactions are related to anticipatory anxiety, and once therapy is underway a child may actually begin to look forward to sessions.

Adolescence presents its own set of challenges. Teenagers will need to be reassured that unless they are a danger to themselves or others, what they talk about in therapy is private (this is especially important in the frum community, where there may be heightened concern about issues of privacy).

Adolescents may simply need to hear that

confidentiality throughout therapy will be maintained, a concept a skilled therapist will reinforce as therapy progresses.

experience in working with children struggling with particular issues. In addition, parents may wish to know how a professional approaches the therapeutic process (i.e., behavioral therapy, play therapy, narrative therapy, et cetera), and what to expect in terms of their own involvement in their child's therapy. Keep in mind that there are numerous therapeutic approaches and that most are useful and beneficial; what's vital is a good fit between child and therapist, which will ultimately lay the groundwork for healing.

Most importantly, trust your gut. As a parent, you'll have a good sense of whether a particular therapist will click with your child. It will also be important to pay attention to your child's experience with a therapist. If, for example, several weeks go by and your child continues to express negative feelings towards a therapist, it is wise to explore to what extent those feelings are interfering with the therapeutic process. The length of a child's treatment varies, depending, in part, on the nature of the issue. Be forewarned: therapy requires patience and it is not uncommon for symptoms to worsen before improving.

Teens may worry that a therapist will simply be one more person in their lives telling them what (and what not) to do. An experienced therapist will be capable of tolerating an adolescent's feelings and in most cases will establish therapeutic rapport quickly.

Parents who are not ready to consider psychotherapy as an option or who truly cannot support their child during the therapeutic process may wish to consult a school guidance counselor, pediatrician or rabbi to discuss their concerns.

Finally, it is important to remember that children are resilient and won't be in psychotherapy forever. Children need to be praised for having the courage to work through difficult emotions and behaviors. Complimenting them for this will foster in them a sense of accomplishment and will help them feel proud of mastering problems. In turn, parents will feel competent and rewarded for their efforts in helping keep their child's well being on track.

Human behavior is complex, and our development is not always a smooth, even process. Parents must recognize the value of mental health services and of empathic, competent professionals who are dedicated to help individuals restore their emotional health. Doing so will help positively shape both their own and their children's attitudes towards psychotherapy.

Rachel Rashkin-Shoot is a graduate of The Erikson Institute for the Advanced Study of Child Development. She is the author of two children's self-help books, Feeling Better (Washington, DC, 2005) and An Umbrella for Alex (Roswell, Georgia, 2007). She lives in New Orleans, where she is currently completing her doctorate in clinical psychology.

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What a peculiar, defeatist statement for a therapist to be offering.

Harold A. Maio

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