DESCRIPTION OF THE THERAPEUTIC PROCESS
By Dr. Violet Oaklander

Note: This handout was written to be given to parents and is also useful for teachers.

The following is a brief description of the therapeutic process:

1. Establishing the therapeutic relationship

Your child and I will spend time getting to know one another. This is a time for building safety and trust, and for establishing boundaries and limits. Without at least the thread of a relationship, nothing much can happen.

2. Contact

Contact involves the ability to be fully present in our interaction. When a child has difficulty staying in contact, the focus of the therapy is to assist the child in having the ability to sustain contact. Contact is established and evaluated at every session. Resistance, a breaking of contact, is honored and respected as your child’s way of coping with painful issues.

3. Contact Functions

The functions of contact include the use of the senses (touching, seeing, hearing, smelling, and tasting), awareness and use of the body, the expression of emotions, language and the intellect. Children who are anxious and worried will restrict and inhibit these vital functions. Developing and enhancing these aspects of the organism is an important part of the therapeutic process.

4. Self Support

This area involves helping the child build inner strength through the expression of the self. As the child begins to know and define him/herself through expression of wishes, wants, needs, likes, dislikes, ideas, opinions, he or she gains self-support. Providing the child with experiences of making choices, mastery, and power aid in this process. Many games and activities are used to facilitate self-support.

5. Emotional Expression

Self-support is a pre-requisite for the expression of blocked emotions. Emotional expression work involves helping children understand what feelings are, learning to know one’s own feelings, expressing those blocked feelings that interfere with healthy functioning, and learning skills to express feelings, as anger, in safe, healthy ways. A variety of creative, expressive, projective modalities are used to facilitate this work, as drawings, clay, puppets, sand tray scenes, storytelling, music and creative dramatics.

6. Self-Nurturing Work

The focus of this work is to help the child reframe those negative messages
about the self that the child generally introjects at an earlier age. Flushing out those negative parts of self and learning to be nurturing to those parts is the essence of this powerful work.

7. Dealing With Process

Generally inappropriate behaviors melt away through the above work. However, often children continue to utilize ineffective coping mechanism in unsuccessful attempts to get needs met. Your child discovers and experiments with new ways of being in the world, and obtains new tools that are more appropriate for getting needs met and obtaining support from the environment.

8. Closing Session

This session is important for making closure to our work together for a particular period of time. Children need to learn how to let go before moving on. Children can only deal with feelings and issues that are appropriate to their development level. They may reach a plateau and then at a later time evidence new symptoms or behaviors that indicate they are ready for further work.

9. Family Work and Parent Education

This is an essential part of the therapy and may take place periodically. You may be asked to experiment with some new behaviors/tasks to facilitate your child’s therapeutic process outside the confines of the therapist’s office.

NOTE:
The therapeutic process is not necessarily linear. We often go back and forth in order to give the child experiences as the needs for them present themselves.

The goal is to help the child feel happier in the world, develop a stronger sense of self, learn how to cope with stress, and find healthy and appropriate ways for dealing with emotions.

I believe that the child enters the world with full capacity for emotional health. The symptoms and behaviors that cause concern are often evidence of interruption of this capacity. The therapist’s task is to support the child’s thrust for life and growth, and to help the child get back on his or her rightful path.

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