



# Add Play To Your Work.... Summer 2008

## New England Association for Play Therapy.



*Happy Summer:*

*The kids are out of school, so it must be summer.*

*Now what? For many of us summer is a time of a more relaxed schedule or finally being able to see clients during the day rather than into the late evening. But for many families summer is very stressful. The lack of a consistent schedule, less supervised time, and even less food provided for families with few resources, mean that the families we work with are often more stressed, and the kids are too.*

*I wish I could create idyllic summers of free time spent playing with friends with little adult supervision and a lot of learning by doing for today's kids, but those who do get to do that are the few and the lucky these days. So it is on my agenda to work for more safe play spaces, and to advocate that parents slow down and allow their children to enjoy low cost, low structure, old fashioned play more this summer. I hope you will join me in this pursuit. I also hope you will join us at one of the many exciting training opportunities this summer.*

*Just a reminder ... our fall annual conference has been set for November 7<sup>th</sup> at Boston University. The presenter is Helen Benedict, PhD, RPT-S and she will teach us about play themes. Learn more about Helen in the adjoining article and spread the word.... Also take a moment to renew your membership and ask a colleague to join us as well. As you can see, members receive a significant discount at many events.*

*Keep Playing. Enjoy,*

*Sarah O'Brien, President, NE-APT*

### Helen Benedict, PhD, RPT-S to present at 5<sup>th</sup> Annual New England Play Therapy Conference:

Mark your calendars now because the New England area is in for a rare treat as the esteemed Psychology and Neuroscience professor from Baylor University, Helen Benedict is scheduled to present on the topic of **"Play Therapy Themes in Understanding the Play Therapy Process"**. You may have explored thematic play before, but Helen is truly unique and so is her approach.

I have had the privilege of hearing her present at the Florida and numerous national conferences. Helen specializes in the area of attachment and therefore brings a component to the content she presents that I have not experienced elsewhere. She will be covering the use and description of themes in therapeutic play. Helen's list of themes is extensively researched and is by far the most thorough that I utilize in my practice. She breaks themes down by gender and diagnosis, explaining what is typical and what themes indicate which type of trauma or stress the child is experiencing. She will cover using themes as assessment tools and then present therapeutic responses to children's play themes based on cognitive-attachment theories.

Her expertise in the attachment area deepens participants understanding of the neuropsychology of the child and the importance of trust and appropriate bonding with caretakers and therapists. I strongly encourage you to reserve the date and plan to attend this exciting presentation.

Seeking Newsletter contributions. We love technique ideas, book reviews, giggles, announcements and job listings. Please submit to Sarah at [nea4pt@yahoo.com](mailto:nea4pt@yahoo.com)

**NE-APT Training Guide: Upcoming Training Announcements:**

The following workshops (unless otherwise listed) are offered by or in conjunction with the New England Association for Play Therapy. NE-APT is APT Provider #02-123.

July 28 - August 1, 2008. Strengthening Executive Function in Children with ADHD. With Daniel Yeager, LCSW, RPT-S. 15 CEUs. APT#00-0098. [www.playtherapyworks.com](http://www.playtherapyworks.com) APT members: To receive your \$40 discount (regular price \$485) enter the code a4pt when you register online.

August 4 - August 8, 2008. Helping Abused and Traumatized Children Through Play Therapy: Recognizing its value, optimizing its success, and prescribing directive and nondirective approaches that promote goals. With Eliana Gil, Ph.D., RPT-S. APT#00-0098. [www.playtherapyworks.com](http://www.playtherapyworks.com). APT members: To receive your \$40 discount (regular price \$485) enter the code a4pt when you register online.

August 22, 2008. Introduction to Sandtray Play Therapy. with Kay Edwards, MEd, LCMHC, RPT-S. Birch Tree Counseling, Londonderry, NH. 3 hrs. (603) 296-4087. [kayeedwards@comcast.net](mailto:kayeedwards@comcast.net).

Sept 26<sup>th</sup>, 2008. Doing Child Centered Play Therapy, with Sarah O'Brien, LICSW, RPT-S at Rhode Island College. [www.RIC.edu](http://www.RIC.edu). 6 hrs, \$80.

Nov 7, 2008. ANNUAL NE-APT CONFERENCE Metaphors in Play: What does it all mean? Using themes to decipher the child's play therapy process. Learn to link a child's play behaviors to interventions that address the child's therapeutic needs and goals. Helen Benedict, PhD, RPT-S. Boston University, Boston, MA. 6 hrs. \$100 non-member professionals, \$75 NE-APT members and Students. <http://www.bu.edu/ssw/training/pep/conferences/play/index.shtml>.

Remember, regardless of whom the presenter is, if the workshop announcements do not state APT approval with a provider number, APT will not approve it for RPT/RPT-S application or renewal. If you are not a member, please join to receive the member discounts plus many more benefits outlined on [www.a4pt.org](http://www.a4pt.org) Check for updated announcements on [www.NewEnglandPlayTherapy.org](http://www.NewEnglandPlayTherapy.org)

**Announcing a new free resource:**  
**Favorite Therapeutic Activities for Children and Teens: Practitioners Share Their Most Effective Interventions.** It is a collection of play therapy techniques. This resource is available in E-book format for free at [www.lianalowenstein.com](http://www.lianalowenstein.com)

We are fourth-year doctoral students at Yeshiva in the School-Clinical Program. We are researching children's use of imaginary friends in psychotherapy. If you have a child client who has used an imaginary friend in any manner, for at least one session, we would appreciate the opportunity to interview you for approximately one hour.  
Miriam Alkon: [miriamalkon@yahoo.com](mailto:miriamalkon@yahoo.com) 347-546-4266  
Melissa Otero: [oterome03@yahoo.com](mailto:oterome03@yahoo.com) 203-918-5947

The Southern New Hampshire (Londonderry) Supervision Group will take a break for the summer and begin again Sept 12<sup>th</sup>. Contact [kayeedwards@comcast.net](mailto:kayeedwards@comcast.net) for more info.

Anyone interested in re-starting the Providence, RI supervision group contact [nea4pt@yahoo.com](mailto:nea4pt@yahoo.com) with preferred times for the fall.



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### EMDR in the Playroom

DeeDee K. Nold, LICSW, RPT-S,  
Ashland Family and Play Therapy Center

EMDR or Eye Movement Desensitization and Reprocessing is a psychotherapy technique that is proving highly effective in treating children, even young pre-verbal ones who have had upsetting experiences, trauma, repeated failures or a sense of powerlessness in their lives. EMDR allows children a safe way to recall traumatic memories and to resolve them quickly. In an era of managed care demanding instant results, EMDR can be a powerful tool in the play therapist's arsenal to assist clients.

It is not entirely clear how the eye movements and dual stimulation of the right and left hemispheres actually works. However, over 20 research studies have proven it is an effective method in treating traumatized children. It is thought that it may work similarly to REM (rapid eye movement) sleep, where information is processed by the brain. It can help children relax while recalling painful memories, and it may allow processing to move across the midline thereby activating the body's natural healing process. With children, therapists use dual attention stimulation (DAS) which is the alternate right-left tracking with eye movement, tones, music or battery operated automatic tappers.

I have always been interested in EMDR and decided it might be helpful to fellow play therapists to interview my colleague, Laurie Parker, LMFT, RPT-S who is level II trained in EMDR and uses it regularly in her practice with children and adults. Laurie stated that she likes EMDR, because it can quickly resolved phobias or fears that may have developed from a specific incident of mid level or "small t" trauma. She gave the example of a seven year old boy who had experienced a severe night time storm in which he witnessed a utility pole fall and catch on fire. He ran and told his parents, who called the fire department. After this incident, the boy could not sleep in his room and was sleeping fitfully on the family couch. Laurie stated that before asking a child to recall painful memories, the therapist asks the child to imagine a safe or protected place where they feel confident and relaxed. These positive images are then paired with the dual attention stimulation to reinforce the child's sensory and emotional connection to the comfortable place. In a subsequent session, Laurie asked him to draw the worst part of the scary night storm while the bilateral tappers were turned on and placed in the child's right and left pockets. The stimulation helps keep the child's attention in the present, while recalling the past experience. When recalling the worst memory, she asked how he felt and where in the body he felt it. Next, the child drew a picture of what it would look like when everything is okay. "How does that feel, and where do you feel it?" She

states it is helpful to have the child recite an affirmation while drawing, such as "I am okay. I am safe now". In this particular case, the EMDR session provided enough relief that the child could return to sleeping in his own bed and no longer felt compelled to keep half an eye open in case another storm might come.

Laurie states she has started using EMDR with work in the sandtray. She gave the example of a child who was caught in a custody dispute. The child was taken by the non-custodial parent and traumatized by being told she would live with that parent and go to a different school. After the police came and returned her to the custodial parent she developed regressive behaviors that were upsetting and embarrassing. Before doing the tray, Laurie asked her to imagine she had a trusted friend or resource with her to give her strength. While she was doing the tray, again the tappers were placed in her pockets to create the bilateral stimulation. As different images come to the child, they are depicted in the sandtray while the tappers continue to be turned on. It is the bilateral stimulation accompanying the images in the sand tray which allows rapid processing of the traumatic memory.

Laurie uses the DAS when children report progress on symptoms. For example, if a child can go to sleep without continually getting out of bed to seek the parent's attention, it is an opportunity to reinforce whatever skill is developing with EMDR. The child might say, "I only got out of bed one time to get Mommy and then I went to sleep." Then the therapist can say, "What does it make you believe about yourself?" The child might say she believes she is braver now or doesn't worry as much. The child can then imagine a future template, a time when the child felt proud the regressive behaviors were gone.

Laurie stated she has paired tapping with soothing smells or the use of lotion. Children can learn to self tap for a coping strategy that they can utilize outside the playroom. Laurie is enthusiastic about her use of EMDR and would recommend it to other play therapists. In order to ethically utilize EMDR in the play room, a therapist needs to complete two weekends of training, called EMDR Level I and II. In order to be certified, a therapist needs to have 20 or more hours of supervision with at least 25 clients, and have conducted no less than 50 emdr sessions.

For more info on EMDR and training see: [www.emdria.org](http://www.emdria.org), or [www.EMDR.com](http://www.EMDR.com).

References:  
"EMDR and Children". EMDR International Association. (2007)  
Lovett, J. **Small Wonders: Healing childhood trauma with EMDR**. (1999) New York: The Free Press