

## Stories for Attachment and Trauma Resolution:

The purpose of writing a 'life' story for children who have experienced significant trauma is to help make sense of what has happened to them - and to put the traumatic events in their lives, in the past. This is not an easy task and using 'life' stories has to be seen as part of the therapeutic process of helping children heal. But helping children create a story or narrative of their lives, one that 'makes sense' has the potential to free them from the 'black hole' of shame and to enable them to grow and develop, empowered by the knowledge that they were not responsible for the bad things that happened to them.

Some key issues to be considered when introducing children to this work include:

- Who should write the story?
- When should the life story work begin?
- Who should undertake this work with the child?
- What structure should the story take?
- The role of EMDR in life story work

### Trauma and Attachment

The process of attachment is essential for life and the foundation for healthy, secure attachment, is *trust*. Trauma ruptures trust. Trauma often disrupts our sense of well-being and can leave us with negative beliefs about ourselves and the world around us.

One of the negative beliefs that frequently follow an experience of a trauma is, 'It's not safe to trust'. When an infant or child experiences repeated, significant trauma, especially at the hands of her or his 'carer', the consequences can be profound in shaping the child's experience of trust and capacity to form attachments.

Attachment disorders arise when a child experiences frequently repeated trauma over a developmentally critical period of time and when significant traumas are not responded to with compassion, comfort and nurturing, or are inflicted by a caregiver. Infants and children can experience posttraumatic stress disorder (PTSD) though this often goes unrecognised.

A sense of loss and grief always accompany any experience of trauma. Adults can often understand and articulate these feelings but children rarely do unless provided with appropriate opportunities to do so by caring, compassionate and competent adults.

According to Joan Lovett, M.D.: Small Wonders: Healing Childhood Trauma with EMDR

*"The object of both trauma work and attachment work is to strengthen the natural, appropriate sense of safety, trust and well-being that makes it possible for a human being to engage in life, to be fully present, to recover from disturbing events and to grow and develop physically, emotionally and spiritually".*

The essential task is to help alleviate the children's sense of shame and feelings of anxiety resulting from the trauma they have experienced. Critical to this is the building of trust to enable the children to reach out and connect to others again.

What follows are some common negative beliefs held by traumatised children. Alongside these are the healthier more functional beliefs that are one of the goals of Eye Movement Desensitisation and Reprocessing (EMDR) and other forms of therapy with traumatised children.( <http://www.emdrassociation.org.uk/> )

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### Negative Beliefs

- I am bad
- Everything bad is my fault
- Confusion is dangerous
- I am alone
- I'm not safe
- I'm helpless
- No one can help me
- It's not safe to trust
- I'm worthless
- I must have constant attention
- I am not loveable
- I have to control everything
- I have to be the boss
- If I love I'll lose
- My feelings are bad
- Other people are bad
- Feeling bad means I'm bad
- If I feel good something bad is sure to happen
- I cannot tolerate feelings
- I don't belong
- It's not safe to feel happy
- It's too scary to have fun
- It's too scary to look at people

### Carers Message/ Educational Interweave

- You are okay
- It's not your fault
- You are safe even if you can't understand
- You have others in your life
- It's safe to play  
It's safe to look at people  
It's safe to relax
- You can ask for what you need and want
- Others can help you
- You can trust when someone is trustworthy
- You're okay even when you don't get everything you want
- You're okay even when an adult is not paying attention to you
- You can give love you can receive love
- You can be okay even if you don't get your own way all the time  
You can be okay when someone else is the boss
- It's worth the risk to love
- Your feelings are normal
- Most people are good
- You are good even if you feel bad sometimes
- Feeling good is good
- I can learn to tolerate my feelings
- You do belong, it's safe to belong
- You can be happy and you will be okay
- You can have fun and it will be okay
- It's safe to look at people

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### Story Telling and Eye Movement Desensitisation and Reprocessing (EMDR)

#### To help parents:

- ☐ Resolve their trauma
- ☐ Develop or regain confidence by helping their child

#### To help children:

- ☐ The story format is well suited for the developmental needs of young children who can not consolidate the memory of an event into a representative image and process events frame by frame.
- ☐ Who need educational interweaves in order to resolve the trauma.
- ☐ Who are unable to say what happened.
- ☐ Who don't want to verbalise what happened.

#### To help the clinician:

- ☐ Understand the family's belief system regarding the traumatic incident.
- ☐ Focus the therapeutic work – probably faster and more effective than play therapy for treating critical incident trauma in a young child

Story telling may help young children (pre-reading) who have experienced critical incident trauma or older child who was preverbal when a critical incident occurred (e.g. – 12 year old with separation anxiety whose mother was injured when he was 2)

It can be used with an adopted or foster child who needs help understanding their life story or a sequence of events a child with an attachment disorder who may benefit from hearing a story about how life would have been if everything had gone well for them or how life will be when life is easier.

It may be appropriate for a child with a difficult birth who may benefit from hearing a “corrected story” of their birth or an adult who wants to formulate a helpful story (for their inner child) about an early childhood event that was confusing at the time and remains too frightening to process

### Guidelines for Writing a Story for Your Child

The purpose of writing a story for your child is to help your child begin to make sense of what has happened to him/her and to put the events in their place in the past. Together, we can use the story for teaching your child healthy ways of viewing himself in relation to the trauma that disturbed his life. The story will make it easier to apply EMDR to desensitise the painful memories and to reprocess them so that your child can feel safer and more confident.

A “successful” story is one that your child will like, one that provides a resolution for the overwhelming, difficult to understand issues presented by the traumas, and one that gives your child developmentally appropriate beliefs about themselves that will help them go on with life.

Several pointers will make it more likely that this story will be a success with your child:

- The language in the story should be simple and easy to understand.
- The length of the story should be similar to the length of a familiar bed-time story.
- The story should be written about “a boy” or “a girl” without using the names of individuals. Some children claim the story as their own, other children find it easier to hear a story about “a child”. Let's leave it up to your child to decide whether he prefers to hear a story about himself or someone “like him”. Regardless of your child's

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preference, the story establishes the traumatic event as something that can happen to children, and proposes ways that a child can deal with such an upsetting event.

The story, or chapter, should have a beginning, middle and an end.

The beginning of the story may identify your child and present something positive about them that will catch their interest. For example, "Once upon a time, there was a boy who lived with his mother, his father, his brother, and his fluffy yellow cat. They all loved him, and he loved them." Right away, the child may guess that the story is about him, even though his name isn't mentioned. He may be willing to experience the feeling of being lived and of loving while doing eye movements or while being tapped on his hands or knees. This positive introduction to EMDR will prepare him for desensitising and reprocessing distressing memories later.

The middle of the story should include pertinent events leading up to the trauma itself.

The traumatic event should be described in detail, including sights, sounds, smells, tastes, textures and feelings that may have been experienced at the time. If your child experienced a series of traumatic events, it may be a good idea to devote a separate "chapter" to each part of the trauma.

Mention current symptoms that seem to be related to the trauma. For example, "After that, she was afraid to sleep by herself in her own bed at night, and she began to have stomachaches. Sometimes she woke up with nightmares about the accident". We will use EMDR to desensitise and reprocess each incident and each symptom related to the trauma.

The end of the story presents the resolution of the trauma and includes the positive beliefs you want your child to have about himself/herself.

For example, "When the accident was all over, some things were different about the family, but the little boy was safe. He started to feel comfortable with his new baby-sitter, he like playing with his friends, he slept happily in his own bed at night, and his body felt fine. He knew that he was brave, and strong, and loved".

Include any rules for safety that will help your child feel competent and powerful. For example, "The boy learned that he could use his voice to call for help. He could soothe himself by remembering his Mom's love for him".

Remember that your child will probably add their own ideas about why the trauma happened or what they felt and thought as they remember the trauma. We will modify the story to accommodate their memories and to meet their needs. It is important for us to be flexible. We will let them listen to the story and take it in at their own place.

### **The Process of telling the story:**

The child is encouraged to sit on a sofa/couch between parents/caregivers or on someone's lap. The story is read to them whilst one of the parents/carers alternatively pats their shoulders gently. (Bi lateral patting of each shoulder about one to two seconds apart)

Your child may become comfortable with the story of the trauma and get over the symptoms quickly, or it may take a number of sessions. Some children prefer to hear the whole story many times, each time doing EMDR on one of the upsetting parts. Others choose to work on only a part of the story in each session. Your child may need encouragement to listen to the story and do EMDR, or he may need time to play. EMDR can be used to help master fears as they play. Your story can serve as a model for helping to imagine ways to overcome fears or worries and to feel safe and confident again.

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Between sessions, please notice, which problems have cleared and which posttraumatic behaviours persist. If possible, observe what seems to “trigger” these behaviours. For example, “He’s no longer afraid to go in the kitchen when the stove is hot, but he still worries about a fire when he hears the sizzling sounds of food frying”.

Some parents like to keep a log of their child’s posttraumatic behaviours so that we can have an inventory of symptoms that require treatment. The log might look like this:

<u>Date</u>	<u>Situation</u>	<u>Behaviour</u>	<u>Trigger</u>
7/10	in kitchen	crying;	grease sizzling while dinner’s being prepared

Being aware that the sounds of sizzling trigger the child’s anxiety will let us know to use EMDR to target the auditory cues that provoke undue anxiety.

The story and your feedback about your child’s progress enable us to work together to help your child.

### **Stories for Attachment and Trauma Resolution: (The Basic Framework)**

#### **A Girl’s / Boy’s Story**

##### **1<sup>st</sup> Paragraph (Establishes a current safe place)**

Once upon a time there was a girl/boy (current info e.g. little boy, a girl, a teen, a young woman) who lived with \_\_\_\_\_

They enjoyed \_\_\_\_\_

They loved \_\_\_\_\_

##### **2<sup>nd</sup> Section (Described the circumstances; critical incidents with sensory info)**

Just like everyone else in the world, the girl/boy had some things in his life that were lucky and some things that were sad/difficult/hard to understand.

One lucky thing was that she/he was born good, lovable, and resilient. Strong/creative.

The sad/difficult thing was that \_\_\_\_\_

Sometime when sad/difficult things happen, they can be confusing and hard to understand. Little children sometimes wonder whether it is their fault or think they are bad.

The little girl/boy

Wondered \_\_\_\_\_

Thought \_\_\_\_\_

Felt \_\_\_\_\_

Target:

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Badness:

Fault:

Confusion:

"If parents/carers had known him then, they would have been right there to help".

Or

"If his parents/carers had known, they never would have let....."

Luckily \_\_\_\_\_

### **3<sup>rd</sup> Section (Understandable resolution with educational interweaves, positive cognitions, words of wisdom from parents/carers, and future template)**

Now that she is older, she can understand some things that babies/little children can't understand.

She can understand that \_\_\_\_\_

(it was nobody's fault/it was not his fault)

(she is loveable)

(she can be OK even if things don't go her way)

(now she can express her feelings and \_\_\_\_\_ will understand)

(she can have her feelings and calm herself enough to control her behaviour)

(we can be OK even if we can't understand exactly why something happened, the world is full of things we can't understand)

(everyone deserves to be treated kindly and so does she)

(she can trust \_\_\_\_\_ to \_\_\_\_\_)

Her mother says, " \_\_\_\_\_ "

Her father says, " \_\_\_\_\_ "

Now she can \_\_\_\_\_

or Now she is free to \_\_\_\_\_

or Now she can begin to \_\_\_\_\_

or Now it is safe for her to \_\_\_\_\_

Adapted from: Joan Lovett, M.D.: Small Wonders: Healing Childhood Trauma with EMDR  
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