Child and Adolescent Eye Movement Desensitisation and Reprocessing (EMDR) Training

Thank you so much to the FPSA for their generous grant. I was able to complete the EMDR training for Children and Adolescents which ran across 3 Saturdays, of 4.5 hours each day, in February 2021. I attended a Europe & UK Accredited course delivered by the Child Trauma Therapy Centre. Historically, these courses are usually run face to face due to having a very experiential, and practical, element to the intervention. However, due to COVID restrictions the training was delivered online using Zoom. Despite this Susan at the Child Trauma Therapy Centre did an incredible job. Numbers for the course was limited to 12, allowing lots of specific questions to be asked around our own population that we work with, and also allowed paired groups in break out rooms where the facilitator could supervise our work.

My background is a registered mental health, but I have spent the majority of my career working in trauma services, mostly with adults but more recently adolescents. I am already EMDR trained in adults for single incident traumas, however I have spent the last 2 years working with adolescents in a Youth Justice Service. In my capacity as a mental health nurse and trauma therapist, working with Children Looked After with complex histories of developmental trauma this training has been invaluable. It is very difficult for this population to access mainstream CAMHS due to difficulty with attachments, trust, the practical aspect of attending appointments, and long wait lists. I am now able to offer more specialist intervention at point of contact in my 1:1 work, thus likely having better outcomes for these young people.

As we are a developmental trauma informed service, the main influence on our focus is around attachment and relationship trauma. EMDR fits within this paradigm really well. The training specifically looked at attachment wounds, loss wounds, and trauma wounds with attachment being the most fundamental of these. As the population I work with have very likely experienced all three of these wounds it was helpful to learn how to structure and plan an appropriate intervention in order to target the right wound at the right time. This has allowed me to offer the therapy to a wider population (i.e. more than just trauma) and has left me feeling far more confident in how to work in this way. Furthermore, the theory discussed within the course has allowed me to have a better understanding of young people's behaviour, who have experienced attachment wounds, and allows me to offer more appropriate psychoeducation to other professionals (social workers, teachers etc) in the network to allow them to improve their relationships with the young person.

Although I have only recently completed the training I have already met with several young people and began formulating how I can help them. If they will be with my team for a short period of time then I am able to install some resources that they might already have i.e. strengthen positive attachment experiences using Developmental Needs Meeting Strategy (DNMS) resourcing, or further adaptive coping strategies. For young people who are with our team for a longer period of time I am able to offer resourcing, as well as processing of trauma, attachment and loss wounds in a safe and consistent manner. I am hopeful this will have a positive impact on their future relationships and allow them to move forward in their lives with work, education or any other aspirations they may have.

I would highly recommend this training for anyone who have done previous EMDR courses, since this part of the training fills in those gaps for more complex young people that the standard training does not cover. I am so grateful to the FPSA as without their support, I would not have been able to access this training.

Thank you,

Registered mental health nurse, CBT and EMDR therapist.