

*A Child Psychotherapy Primer*



# **First Contact**

**Josiah B. Dodds PhD**

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e-Book 2016 International Psychotherapy Institute

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## Table of Contents

### FIRST CONTACT

WHAT WOULD YOU ADVISE THE PARENT(S) TO TELL THE CHILD ABOUT COMING TO THE FIRST SESSION?

HOW CAN YOU DEAL WITH A CHILD'S RESISTANCE TO COMING INTO THE THERAPY ROOM?

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### WHAT WOULD YOU ADVISE THE PARENT(S) TO TELL THE CHILD ABOUT COMING TO THE FIRST SESSION?

What the parent tells the child about the clinic prior to the first visit often suggests much about the parent-child relationship. Less than open, straight communication between parent and child would be suggested by the following: the parent blames the child (“We are having to go to the doctor because you are bad”); the parent lies to the child (“We are going to the zoo”); the parent doesn’t tell the child anything, just puts the child in the car and drives to the clinic; the parent threatens the child (“If you don’t behave, I’ll tell the doctor so he won’t like you”); and the parent bribes the child (“If you go see the doctor without a fuss, I’ll give you an ice cream”).

Parents will sometimes ask the child’s therapist or the clinic intake worker what they should say to their child prior to the first visit. Even if they do not ask, it may be helpful to give the parents some suggestions as to words they might use with their child to explain coming to the clinic. Whatever is suggested should facilitate clear, honest communication. Here is one example. The parent says, “We are concerned about your fighting with Judy so much, our hollering and fussing at each other so much of the time, your sadness—whatever the problem is] so we will go see X [the child worker] for some help. X does not use needles [if that indeed is the case]; rather he/she helps kids by talking and playing with them.” If the child asks further questions such as: “What will we play with?” “How old is X?” “How long will I go there?” “Will X shrink my head?” and if the parent knows the answers, then he/she should be urged to answer them in a straightforward manner. If the parent does not know the answers, then the child should be encouraged to find out for him/herself when at the clinic.

### HOW CAN YOU DEAL WITH A CHILD’S RESISTANCE TO COMING INTO THE THERAPY ROOM?

Every beginning child worker has the fantasy of being left standing at the starting gate. “How can I evaluate or treat the child who refuses to leave Mother in the waiting room?” “What will my supervisor think about me if I can’t even get the child into the therapy room?” “Why am I getting into this business anyway?” Quite often the beginning child worker focuses his/her anxiety about all aspects of training in

a new profession or a new subspecialty on the question of the resistant child. I tell the students to relax, that the probabilities that they will draw a resistant child for their first case are small. This reassurance, of course, does nothing to lower anxiety.

The refusal of the child to separate from the mother almost always is the result of fear: fear of losing mother, fear of the stranger, fear of an unknown room, or fear of losing autonomy, of being changed against his/her will. Underlying the fear in each of these instances is the child's perception of possible loss: loss of parent, loss of control, loss of self. The child's refusal to go into the therapy room reveals much about the child's level of fear, about his/her way of dealing with that fear, about the child's relationship with the mother (or other person bringing the child to the clinic), and about the mother's behavior toward the child. The beginning child worker needs to remember that assessment does not begin in the playroom; it begins as soon as the child and mother are first observed.

All of this theoretical discussion will probably not help lower the anxiety of the beginning worker. The response I have frequently received from a student after going over the above points is, "Yes, but what should I *do*?" The following is offered not as *the* way to deal with the reluctant child but as *a* way to respond. Students find that they feel more comfortable if they have in mind some definite steps they can take, even if the actual interchange seldom follows the script they have in mind.

After introducing yourself to the mother you might turn to the child and say, "And you must be [name]." Squat down to the child's level. "How are you? We are going to play some games. Come on, let me show you the playroom." (Be careful not to ask the child a question that may be answered with a yes or no, such as "Do you want to come with me?" If the child answers, "No," then you are stuck; either you accept the child's answer and abort your relationship or you do not accept the no and act contrary to the child's stated desires.) Turn around and head for the door. At the door turn your head to see if the child is following. If not, say, "Come on, let's go." If the child does not come say, "Well, let's have your mom come with us. Come on. Your mother can see where we will be." At the door of the therapy room say, "See, this is where we will be playing, and your mother will be in the waiting room." If the child refuses to separate at this point, simply ask them both into the room and invite the mother to sit in a chair that you have placed near the door. Ask her in a polite way to just remain passive and let you interact with the child at the child's own pace. Invite the child to explore the room. If the child is reluctant to leave the mother, get

some materials like clay or paper and crayon or blocks and sit on the floor somewhere in the child's half of the room (do not crowd the child) and begin playing with the materials. Do not push or urge the child; just begin playing and expect that the child will join in. The mother will undoubtedly urge the child to become involved in the play, but just say to her, "It's OK, let him join in when he is ready." If the child eventually joins you in play and you feel the child is quite comfortable, you might ask the mother if she would just step out to the waiting room and wait there until you and the child are finished playing.

If the child still refuses to separate after a session or two of the above routine, then indeed you have an interesting mother-child relationship.