

I TRIED THERAPY, AND IT DIDN'T WORK!

Understanding the reasons therapy might feel ineffective or not working requires an exploration of breaking down different areas that could be impacting that result. Here are some important points to ponder!

CONSISTENCY AND DURATION:

Therapy takes time, and changes may not happen overnight. It's essential to assess how long the child has been in therapy and whether they've attended consistently. Sometimes, it takes weeks or even months to see progress. The brain's ability to reorganize itself (neuroplasticity) through new experiences, such as therapy, is a gradual process. It can take repeated sessions for new neural pathways to form, especially in children, whose brains are still developing. Consistent engagement in therapy helps strengthen these pathways, but it requires patience.

THERAPIST-CHILD FIT:

The relationship between the therapist and the child is crucial. If the child doesn't feel comfortable or understood by the therapist, it may hinder progress. Parents can consider whether trying a different therapist with a new approach might help.

EMOTIONAL REGULATION AND THE BRAIN:

Emotional regulation is largely governed by brain structures like the amygdala (processing emotions) and the prefrontal cortex (decision-making and self-control). In children who have experienced trauma, anxiety, or other emotional struggles, these brain areas may be more reactive or underdeveloped. Therapy works to help "rewire" these parts of the brain to respond more calmly to stressors, but it takes time for the prefrontal cortex to develop greater control over emotional responses.

THERAPY TYPE:

Different types of therapy (e.g., play therapy, cognitive-behavioral therapy, or trauma-informed therapy) work differently depending on the child's needs and diagnosis. Parents may need to explore whether the approach used aligns with their child's specific challenges.

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ATTACHMENT AND BRAIN DEVELOPMENT:

A child's relationship with their therapist can influence brain development, especially when it comes to attachment. Secure, trusting relationships are essential for positive changes in the brain's social and emotional circuits. If the child hasn't connected well with the therapist, it may not be providing the necessary emotional safety for change to occur. Exploring the therapeutic relationship itself could be key.

PARENT INVOLVEMENT:

Therapy for children often requires parental involvement and support. Consider if the family is fully engaged with the treatment plan and following through with strategies recommended by the therapist at home.

STRESS AND THE BRAIN'S RESPONSE:

Chronic stress, which activates the brain's fight-or-flight response, can interfere with therapy progress. Stress hormones like cortisol make it harder for the brain to focus on learning new coping strategies. Reducing stress at home, or in school, can support therapy by allowing the brain to be in a more receptive state.

MEMORY AND PROCESSING TRAUMA:

If the therapy is targeting trauma, it's important to recognize that the brain processes traumatic memories differently. The hippocampus (which helps store memories) and amygdala (which triggers emotional responses) can become overwhelmed during trauma processing, making it harder for therapy to seem effective right away. Trauma-focused therapy often needs to go at a slower pace to ensure the brain isn't retraumatized.

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EXTERNAL FACTORS:

Sometimes, external stressors (school environment, peer relationships, family dynamics) impact therapy. Identifying and addressing these issues can be a key changing point for progress.

DEVELOPMENTAL STAGE:

The child's age and developmental stage impact how therapy is processed in the brain. For instance, young children primarily process emotions and experiences through their limbic system, rather than their prefrontal cortex, which develops later. Play therapy or creative approaches that work with the brain's developmental stage can be more effective than traditional talk therapy.

GOALS AND EXPECTATIONS:

Reflect on whether the goals for therapy were realistic and whether progress was measured in achievable steps. Parents may need to reassess their expectations of the child, the therapist or ask the therapist for clearer milestones.

FOOD FOR THOUGHT:

If you are seeing a medical doctor and the first treatment did not work, you wouldn't stop seeing the doctor. Give your child and family a second chance to try different options. Kids are resilient.

Questions to ask yourself: How much effort did I put into it? What was my contribution to the process? Therapy is more like a workout than surgery. Clients and their families need to be active participants to see results.