

## **Eye Movement Desentization and Reprocessing (EMDR) For Exam Anxiety : A Case Report**



**PhD. Zeynep Gamze Kalkanlı \***

**ABSTRACT:** Exam anxiety causes poor academic performance and psychological problems for students. Those who have test anxiety; When they will take the exam, they encounter undesirable situations due to tension, anxiety and overstimulation of the central nervous system. Repetitive and self-critical thoughts that cause anxiety, physiological arousal, and marked emotional problems are associated with test anxiety. Negative experiences related to the exam before can also cause exam anxiety. It is known that various psychotherapy methods are useful for the treatment of test anxiety. There are few publications reporting that the Eye Movement Desensitization and Reprocessing (EMDR) method has been tried in the treatment of test anxiety. In this study, brief information about the Eye Movement Desensitization and Reprocessing (EMDR) method is given, and a 17-year-old case with intense test anxiety and a decrease in anxiety level as a result of the EMDR study is presented. In the counselee, who had intense anxiety and fear about the university exam, it was evaluated that this anxiety was related to the experience he had in the high school exam, and after the EMDR treatment, the counselee settled in a 4-year department of a well-established state university in Istanbul, which he targeted after the university selection and placement exam. Based on the case presented in this study, it can be said that Eye Movement Desensitization and Reprocessing (EMDR) method can be used as an effective treatment technique in exam anxiety caused by trauma.

**KEY WORDS:** EMDR, test anxiety, trauma

Early adolescence is generally considered a transitional period involving rapid changes in physical development, cognitive abilities, emotional adjustment and self-esteem (McGee & Williams, 2000). Adolescents are concerned about their selves. They strive to separate their emotional origins from their families and expand their networks to outside world, which emerges change in their relationships with family members. This rapid process of development and change introduces varying amounts of stress and adjustment problems. (Seiffge-Krenke, 2000). The family environment and patterns of family interaction can encourage or hinder adolescents' transition to adulthood, particularly to the extent that they help parents balance their need for emotional attachment to their family with their needs for individuality (Carter & McGoldrick 2003). Children who begin to assert their autonomy and independence without the support of their families experience more stress and anxiety (Peleg, 2002).

Exams can be a major source of stress in adolescents' lives when exam results serve their future opportunities and career paths (Peleg and Klingman, 2002). Many studies suggest that there is a relationship between the family environment and children's test anxiety. Links were found between parental expectations and test anxiety (Sarason, Davison, Lighthall, Waite, & Ruebush, 1960); family environment, test and trait anxiety of adolescents (Peleg, 2002); inconsistencies between parents' and adolescents' perceptions of family environment, testing, and trait anxiety (Peleg & Klingman, 2002).

### **CASE**

T.S. is a 17-year-old female, high school student, lives with her grandmother, mother and elder brother. She lost her father when she was 7 years old. After attending Anatolian High School for 3 years, in her senior year she was enrolled in a basic high school (supporting university preparation) to be successful in university exams. She feels incompetent and she finds her exam preparation inadequate, Coming home after the TEOG exam (high school exam) in 8th grade and crying in her room, her mother saying "*these are crocodile tears*".

In the first session, the history of the client was taken, information about EMDR was given, and the consent of the client and mother was obtained for the application. It was explained that if such a situation occurs during rework, negative emotions may arise, and that she can stop the sets by raising her hand. Information was given about bilateral stimulation (BLS). The client stated that she could continue to work with eye movements. Trials were completed. It is agreed that she will continue with the EMDR device in case she feels discomfort about her eyes.

In the next session, Safe Place study was performed before EMDR was applied. The client named the safe place "Submarine". She stated that she was alone, that the sea looked clean and she was in silence and peace. From the past memories for the EMDR study,

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the images in her room after the TEOG exam, her sobbing, her mother accusing her, saying "you didn't study enough already", "*be a scavenger*". Along with these, she had thoughts such as "*I won't be able to do it even if I work*". The SUD indicated the highest degree of discomfort as 10 points on a 1-10 scale. She stated that her mother's accusations ruined her life. As a body sensation, "*something is standing in my throat up my stomach*" "*as if there is a ball*". "*I want to talk but I can't*" she used expressions. She had a very difficult time expressing positive belief. At the end of the session, she used the expression "*I can do it*" as a positive cognition.

In the third session, the previous session was evaluated. The picture in which she cries on the bed: "*I am getting smaller and my mother is the same*". The voice of a 5-6 year old girl was coming from outside the session room. The client's attention was directed to the voice. "*I'm not old enough to take the TEOG exam, I'm just as young as the child whose voice comes from outside*" SUD asked. She stated the SUD as eight. The session was completed with Safe Place work.

In the fourth session, she mentioned her dream that she had the previous night. She said that she dreamed of her childhood and her present, and that they were both on the edge of the abyss. Afterwards, she stated, "*The house is raiding me, I want to leave*". The session continued with bilateral stimulation sets. "*I see those two version of myself, I'll either jump from the abbys or cling*" "*I can't get out from the dream.*" "*There is always a way out,*" I say. "*We are jumping down the front. One of us is on the right and the other one is on the left*" "*It is clear above, dark below. I'm trying to get out. I hear the little one crying*" "*I am looking for her in the white dress, I hear her voice. I am helping her and showing her way out.*" SUD asked. She specified the SUD as five. The session was completed with safe place work. The day after the session, the mother of the client was interviewed on the phone, information was given about the therapy process.

In the fifth session, the client stated that her mother now says yes to everything and started to use constructive words. Bilateral stimulation sets were continued. "*I spoke from the dark place, I convinced her. The picture is different. That's not me. She's making me want to let go.*" "*I won't be if you don't get out of here. I will be my mother.*" "*She made a face while I was talking to her. After the conversation was over, she started to get out of the maze. The little girl got up*". She was happy, she was smiling. The client's eyes were closed, she had a soft expression and a smile on his face. "*My mom is angry but I am happy. I am taking my revenge*" Body sensation was asked. "*It's like having a mint in my mouth. It gives me a sense of relaxation*". SUD asked. It indicated the SUD as zero. Bilateral stimulation was given, SUD was asked again. SUD was zero again. When you think about the event, does the phrase "*I can do it*" still seem appropriate to you? she was asked. She stated that the phrase "*I can do it*" is appropriate. They were asked to rate this statement on a scale of 1 to 7. Expressed as 7. Bilateral stimulation was given, VoC was asked again. Repeated VoC to seven. Body scan was initiated. The client was asked to close their eyes and think about that memory and positive belief. "Give your attention to different parts of your body, from head to toes. Are there any tension problems?" She was asked to specify them. "*I feel so good. It's like a huge weight has been lifted from my shoulders. I am very relieved,*" she said. Bilateral stimulation sets were applied to reinforce this, as it indicated a positive body sensation.

In the sixth session, the client stated that he had a good week and improved his net worth in the exam attempt. Resource development and installation work was done. This memory was taken as the main source because she was successful in the practice exam. Resource loaded with bilateral stimulation sets. Afterwards, the future template was created for the exam. The client experienced negative scenes and body sensations while filming the script in his mind. To eliminate these disturbances, long bilateral stimulation sets were applied. The film was re-told from the beginning, and the work was completed because there was no disturbance.

## RESULT

Exams are very worrisome situations for teenagers. Fear of failure and high expectations of parents and teachers prevent students from showing their real performance. It will be effective to work with students who have experienced trauma related to education and exams with the EMDR technique. Families supporting their children, not comparing them with other students and not having high expectations will ensure that the exam is successful.

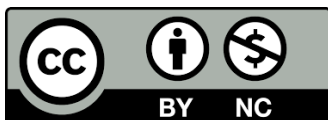
\* Üsküdar University, Doctor of Psychology PhD

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