Eye Movement and Desensitization and Reprocessing: An Overview
Disclosure

- The presenter has no financial relationship to this program.
Objectives

• Gain basic knowledge and history of Eye Movement Desensitization & Reprocessing Therapy (EMDR).

• Understand the connection between EMDR and trauma-informed care.

• Learn the requirements and upcoming opportunities for becoming trained to practice EMDR Therapy.
Oklahoma City Indian Clinic

• Urban Clinic

• Currently serving over 220 Tribes

• 13,187 Patients in 2014

• **Summer Welcher-Duke, LCSW**  
  Director of Behavioral Health, EMDR Therapist

• **Rebecca Bundy, LCSW,**  
  EMDR Therapist
Our Goals for Today

• Trauma-Informed Care

• What is EMDR & What Does it Look Like?

• Why Clinicians Like This Approach

• Why Clients Like This Approach

• EMDR Training Steps and Opportunities
Trauma Informed Care

• Trauma-informed care: A strengths-based service delivery approach that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment.

  -SAMHSA

• Encourages providers to think in terms of “What has happened to you?” instead of “What is wrong with you?”
ACE (Adverse Childhood Experiences) Study

- 17,000 predominantly white, college educated patients completed surveys

- Surveys asked about 10 categories of childhood abuse, neglect and family dysfunction

- Cross-sectional study: compared answers to an array of current health behaviors and conditions

- Conclusion: ACEs are common; and are strong predictors of later health risks and disease

Some Significant Findings

- People with 4 or more ACEs were 13 times more likely to have suicidal ideation.

- People with 4 or more ACEs were over 2 times more likely to have serious job problems.

- People with 6 or more ACEs live 20 years less than those without.

Trauma & Health

Associated with PTSD:

- Cardiovascular disease
- Gastrointestinal disorders
- Musculoskeletal disease
- High-risk sexual activities
- Chronic pain
- Suicide attempts
- Risk of perpetration of violence
- Inadequate social support
- Depression
- Substance abuse
- Homelessness

What is EMDR?

- A psychotherapeutic technique that facilitates healing from symptoms resulting from disturbing experiences.

- Based on Adaptive Information Processing (AIP) Model - The brain's information processing system naturally moves toward mental health, unless the system is “blocked”. EMDR helps remove the blocks.

- Uses eye movement, or other types of bilateral stimulation (BLS)
How Was it Discovered?

• “A Chance Discovery” by Francine Shapiro, PhD in 1987 – Walking in Park

• “Practiced” on 70 volunteers

• Published in *Journal of Traumatic Stress* in 1989

• Journal’s advisory board member contacted the editor with disbelief.

• Today, more than 70,000 clinicians throughout the world use EMDR
Who Can Benefit From EMDR?

- Combat veterans, or others with PTSD
- Persons with phobias, panic disorder, OCD and Generalized Anxiety Disorder
- Victims of crime, natural disaster & first responders
- People suffering from grief
- Sexual assault victims
- All stages of chemical dependency
- Adults and adolescents suffering from depression
Is this an Evidence-Based Treatment?

• **Recognized by:**
  – The American Psychiatric Association
  – The VA and Department of Defense
  – Substance Abuse and Mental Health Services Administration (SAMHSA) of the Federal Government
  – World Health Organization

• 20+ Controlled Studies – All have shown EMDR to be effective and often with faster results than other types of therapy (EMDR Institute)

• Study funded by Kaiser HMO –”100% of the single-trauma victims and 77% of multiple trauma victims no longer were diagnosed with PTSD after only six 50-minute sessions”
Treatment Description

- 3-pronged approach – **Past, Present, Future**
- **(Standard Protocol) 8 Phases:**
  1) History-Taking (treatment planning, targets)
  2) Preparation (Informed consent, calming resources)
  3) Assessment (7 questions, Progress measurements)
  4) Desensitization (Cognitive interweaves, Clinical Judgments)
  5) Installation
  6) Body Scan
  7) Closure
  8) Reevaluation
Assessment Phase

• Target (memory chosen for reprocessing)
• Image
• Negative Cognition
• Positive Cognition
• Validity of Cognition (VOC)
• Emotions
• SUD
• Location of Body Sensations
Visual Demonstration
Case Examples

• “Timothy”

• 62 year old male who presented with PTSD secondary to childhood emotional and physical abuse while in a boarding school

• Reoccurring nightmare – stopped after 2 reprocessing sessions with EMDR

• Reported not feeling “the hate in my heart anymore”

• Total of 6 months of EMDR
Case Examples

• “Amanda”

• 45 year old female, suffering from grief after her son was violently murdered

• One session – changed brutality of image

• Second session – let go of anger and fear
Challenges

• Our most common factor for NOT using EMDR, is client resistance.

• Ways to overcome client resistance

• “Getting Stuck” – Cognitive Interweaves

• Even when not doing reprocessing, we are still using the history-taking component and other pieces of EMDR
Clinician Appeal

- EMDR Clinicians LOVE EMDR!
- Typically see results in less time
- Organized from start to finish
- Documentation is easier, with specific language
- Various protocols
- Incredibly rewarding to watch the positive change happen
Client Appeal

• Typically see results in less time

• Don’t have to talk as much

• Sets them free to live in the present
Frequently Asked Questions

• Is EMDR the same as hypnosis?
• What if the patient has eye problems?
• What are the side effects?
• What if you haven’t had any major trauma?
• Are treatment effects maintained over time?
EMDR Training

- Typically 2 weekends (Part I & Part 2)
- 10 hours of consultation
- EMDR Institute  [www.emdr.com](http://www.emdr.com) – Training Information – Basic Training Schedule
- Certification is optional
- Training Brochures
Upcoming Basic Trainings
(Weekend One)

- August 7-9 Boise, Idaho
- September 11-13 Bloomington, MN
- September 11-13 Portland, OR
- September 25-27 Orlando, FL
- October 9-11 Reno, NV
- October 16-18 Rosemont, IL
- November 20-22 Los Angeles, CA
QUESTIONS?

• Feel free to check out websites or other material on EMDR:
  • http://www.emdr.com/
  • http://www.emdria.org/
  • http://www.emdrhap.org/
  • Book: “Getting Past Your Past” by Francine Shapiro, PhD
• Summer Welcher-Duke, LCSW
  Director of Behavioral Health
  (405) 948-4900 Ext. 612
  summer.d@okcic.com

• Rebecca Bundy, LCSW
  EMDR Therapist
  (405) 948-4900 Ext. 652
  rebecca.b@okcic.com