

Eye Movement Desensitisation and Reprocessing (EMDR)

Hello, my name is Sarah Harrison and I'm the EMDR pathway lead. I hope to tell you a little bit about EMDR today and what to expect. EMDR is an eight phase trauma structured psychological therapy and it works directly with trauma memory.

We work in a way that we call the three tiers or the three pronged approach. So, we work with past memory, we process that, and I'll tell you a little bit about that in a minute. Then we work with current triggers and what is, how is the trauma presenting in the now, and then we go to the future - desired state. How do you want to move forward with the memories processed effectively within the EMDR?

So EMDR, eight phase model, very brief overview and how I was taught it. We look at the first phase is what we call history taking and the acronym to me was Harry Potter and Dumbledore in Big Cheesy Relationship. So, H is for history taking. That's where we do an assessment of trauma in the past, and how it shows up in the now and how it manifests in terms of symptoms. The next phase, Harry Potter, is preparation. Preparation means getting you internally prepared and stabilised ready to work directly with memory, and externally stabilised so that you've got available resources.

A is for assessment. We do a direct assessment of the memory itself and that's very structured the way that we access that memory. And then we move on to D for Dumbledore and that is about desensitisation. And that is exposing you to the memory content and allowing your brain to naturally produce whatever information is required in the context of that memory. And that is done by us sitting opposite you, we call it ships that pass in the night. You're connecting to the memory, access the memory and we will use bilateral stimulation such as taps or bilateral eye movements or audio to speed up that memory processing system and allow the natural healing to happen. And that's what we know about EMDR.

It's based on the adaptive information processing model, and we know that by applying bilateral stimulation whilst accessing a memory it desensitises the emotion so you can think more clearly about it, and it becomes adaptive quicker. And that is how real healing occurs. Then we move on to after we do the desensitisation and that memory no longer causes you a problem, we move on to the closure of that memory.

Now before we do that we look at installing what we call a positive belief and we look at body scans and things like that, but essentially everything after phase three is all direct memory work. What we aim to achieve with EMDR is that we will work directly with the memory that is causing you complex PTSD or PTSD symptoms, such as flashbacks, nightmares, avoidance, fear, you know body reactions. We will directly target that memory and we will work with that memory using bilateral stimulation, supporting and facilitating the adaptive information processing by working and staying with that memory until your brain naturally creates a more adaptive way of relating to that memory.

You are completely awake, it's not hypnosis. We maintain dual attention so you have one foot in the now and you're present, and you're speaking to us, you're reporting back what

you're noticing, but you also have one foot in the past and you're directly accessing that memory. And then what we will do is, when we've done that memory we might move on to other memories as well.

Now within the context of the work we do, we appreciate we work with complexity in the centre, so often it's not just about the traumas that happened but it's about the lack of available resources as well. So, neglect, we work a lot with neglect, we work a lot with people who had no safe person to go to or no safe space. Where violence was everywhere. We can also work with that and we can build in internal resources so that you feel safer and more connected to self and to others essentially.

So, within the pathway we can offer up to 40 sessions. We are in the development phase of creating the preparation group which we're going to ask people to go through, because we appreciate we do all of that assessment at the front end of the pathway and that can be really triggering for people, and people have fed back that that is very triggering, then they sit on a waiting list. So we're going to develop a group that people can come to and they can be engaged in the preparation phase much earlier than waiting for individual therapy.

Then you'll be able hopefully to go on to one-to-one therapy with a EMDR trained clinician who's very competent in working with multi-layered trauma. So, I hope that's been helpful.

I love EMDR. Everybody who does with EMDR loves EMDR. It's really effective and I've seen life-changing outcomes associated with it so thank you for your time and take care.