

EMDR Therapy – Introduction

- Comprehensive trauma therapy system
- · Highly effective, gold-standard
- Multi-modal
- · Integrative, meta-therapy
- Client-centered
- Optimistic

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EMDR - Implicitly Contemplative

- Secular not explicitly contemplative
- · Meditative qualities
 - Silent, interior exploration
 - Rhythmic bilateral stimulation
- · No formal meditation
 - Only normal levels of attention
 - No transcendental concepts
- · But implicitly contemplative
 - By functional analogy with Buddhist practice
 - Works by insight

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EMDR & Buddhism - Overview

- EMDR
 - Phase 1 safety, confidence & stability
 - Phase 2 trauma processing
- Buddhist Practice
 - Refuge & attentional stability
 - -Insight meditation

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Phase 2 - Trauma Processing Overview

- Invoke Phase 1 skills
- · Invoke traumatic material
- · Identify positive belief
 - -Put in background
- · Rate distress level
- · Actual trauma processing

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Phase 2 – Actual Trauma Processing

- · Brief sets of silent free association
 - Catalyzed by bilateral stimulation (BLS)
- Between sets, therapist:
 - -Asks "what do you get now?"
 - -Assesses progress or blockage
 - Mostly says "go with that" for another set
 - -Or if needed, offers targeted intervention
 - -Occasionally asks for updated distress rating
- Repeat until distress level is 0 or 1

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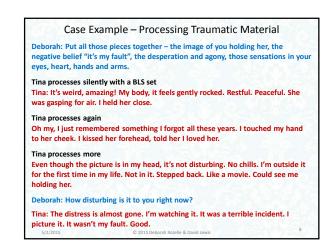
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EMDR's Free Association

- · Primed with multimodal image:
 - Emotions
 - Negative Belief / Positive Belief
 - Body sensations
- · Attention, both:
 - Moves among linked content
 - Fixes on particular content
- Activates natural recovery process
 - Integrates trauma memory into web of experience
 - Enables insight into trauma memory's true nature
 - Dissolves traumatic distress

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Mahayana Analytical Insight Meditation

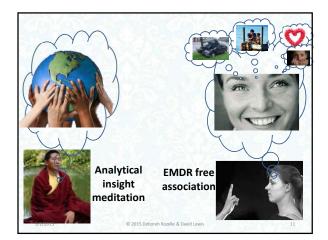
- · Moving as well as fixed attention
- · Start with topic or theme
- · Explore from multiple standpoints
- · When glimmer of insight arises...
- Concentrate on particular thoughts

 Vivid, felt, experiential not just cognitive
- Result is leap of insight "aha" moment

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Remaining Processing

Done

- Processed traumatic material
 - Distress is gone
 - -Re-experiencing ended

Yet to do

- Revisit & process positive belief
 - -Until it's strong
- Process lingering body discomfort
 - -Until neutral or positive

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Case Example — Processing the Positive Belief

DEBORAH: As you think about the image you started with, the moment your friend died, is "I'm worthy" still the thought you would prefer about yourself?

TINA: I Want to change it to "I'm a loving person."

DEBORAH: Good. On the scale from 1 to 7, how true is that thought?

TINA: Oh, I think a 5.

DEBORAH: What gets in the way of a 6 or 7?

TINA: I don't know if she heard me, felt my kiss; maybe I was too late.

DEBORAH: Go with that.

Tina processes silently with BLS

TINA: (With tears running down her face) Oh, I see, it doesn't work that way; it's about the love. I gave her what she needed the most. I told her I loved her. I am a loving person.

DEBORAH: (Gently) Yes. So, on the scale of 1 to 7, how true is that thought now?

TINA: A 7. I couldn't save her, but I did love her, do love her.