

# EMDR and Recovery from Addiction and Trauma

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SEPTEMBER 7, 2023

# What is Trauma

- ▶ According to a video on YouTube dated September 17, 2021 titled “What is Trauma, Bessel van der Kolk defined trauma as “not the event that happens, the trauma is how you respond to it. “
- ▶ Trauma is subjective to the person.
- ▶ Perspective of trauma vs the reality- society
- ▶ Storage of trauma in the brain
- ▶ Multiple environmental factors
- ▶ Multiple forms of treatment- EMDR focus for today

# The History of Eye Movement Desensitization and Reprocessing

- ▶ EMDR was developed, studied and published by Dr. Francine Shapiro in the late 1980s.
- ▶ 1990 the EMDR institute was founded according to the website
- ▶ The Eye Movement Desensitization and Reprocessing International Association (EMDRIA) website was started in 1995 and states there are over 13,000 members
- ▶ EMDR is used in multiple countries- EMDRIA Conference experience.

# How does EMDR work?

- ▶ EMDR is a therapy that assists people to reprocess trauma using bilateral stimulation.
- ▶ 8 phase approach





# Some Terminology

- ▶ Bilateral stimulation (BLS)- when something is used to stimulate both sides of the brain either by vibration, sound or visually
- ▶ Body Scan – noticing disturbance
- ▶ Negative Cognition – what do you believe about yourself when you think of the target memory
- ▶ Positive Cognition: What message you want to change your mindset to
- ▶ Resource development and installation (RDI)- creating resources for people to access to assist with EMDR.
- ▶ Set: 24 or more movements back and forth of bilateral stimulation
- ▶ Subjective units of distress (SUDS)- a person's perception of distress that they are experiencing when accessing a memory on a scale of 0-10.
- ▶ Target memory- The memory that starts the processing in the EMDR session.
- ▶ TICES Worksheet- Trigger, Imagine, Cognition, Emotions, Sensations in body
- ▶ Validation of Cognition (VOC) – when looking at the positive cognition, how true does it feel on a scale of 1-7
- ▶ Cognitive Interweave- Questions that are used to help people see things in a different way.

# Professionals and Benefits

## ▶ Who can provide EMDR therapy

- ▶ A mental health professional that has been trained in EMDR
- ▶ There is a specific training that takes 5-7 days, dependent on who is providing, that is required to be able to provide EMDR therapy to others

## ▶ Multiple diagnoses/ symptomologies can benefit from EMDR

- ▶ ANXIETY, PANIC ATTACKS, AND PHOBIAS
- ▶ CHRONIC ILLNESS AND MEDICAL ISSUES
- ▶ DEPRESSION AND BIPOLAR DISORDERS
- ▶ DISSOCIATIVE DISORDERS
- ▶ EATING DISORDERS
- ▶ GRIEF AND LOSS
- ▶ PAIN
- ▶ PERFORMANCE ANXIETY

## ▶ THERE ARE 3 LEVELS OF TRAINING: EMDR TRAINED, EMDR CERTIFIED, EMDR CONSULTANT



- ▶ PERSONALITY DISORDERS
- ▶ POST-TRAUMATIC STRESS DISORDER (PTSD) AND OTHER TRAUMA AND STRESS-RELATED ISSUES
- ▶ SEXUAL ASSAULT
- ▶ SLEEP DISTURBANCE
- ▶ SUBSTANCE ABUSE AND ADDICTION
- ▶ VIOLENCE AND ABUSE

# EMDR and Substance Use

- ▶ CravEx: Craving extinguished approach developed by Michael Hase.
  - ▶ “This approach hinges on reprocessing the addiction memory (memory network that develops specific to the client involving the craving and compulsion to use or act) which ideally results in the craving being extinguished. “
- ▶ FSAP: Feeling-state addiction protocol developed by Robert Miller
  - ▶ “This protocol involves identifying parts of the addiction experience that feel good to the client but are ultimately part of the addiction they wish to cease.”
- ▶ PEIA: Palette of EMDR interventions in addiction is a concept developed by Markus & Hornsveld (2017).
  - ▶ “The PEIA provides a framework for understanding EMDR and addictions treatment aims. The authors also introduce the idea of two lenses of EMDR and addiction treatment strategies: TF-EMDR (trauma focused EMDR) and AF-EMDR (addiction focused EMDR).”

# DeTUR

- ▶ Desensitization of Triggers and Urge Reprocessing (DeTUR) protocol developed by the late Dr. A.J. Popky.
- ▶ “This protocol focuses on desensitizing triggers to reduce cravings and includes establishing a positive treatment goal (A positive resource for the client to work toward not associated with the addiction) for the client to work toward”<sup>1 1 L</sup>
- ▶ Resources are internal states
- ▶ Uses Level of urge (LOU) to assess progress instead of SUDS.
- ▶ Instead of targeting the trauma, it targets the triggers and urges



# Resources

- ▶ <https://www.emdr.com/history-of-emdr/>
- ▶ <https://www.emdria.org/>
- ▶ <https://www.youtube.com/watch?v=3EcW-qsfvpU> interview with Dr. Popky
- ▶ <https://www.youtube.com/watch?v=1f7oHNKNQNY&t=1s> internal resource