

What is EMDR?

EMDR stands for Eye Movement Desensitization and Reprocessing. One component of EMDR is a technique called “bilateral stimulation” where a therapist will guide a client through eye movements, tones, or taps. However, EMDR is an entire integrated therapeutic approach that considers a person’s somatic (physical) and emotional states. EMDR was founded in 1987 by Francine Shapiro and is currently one of the most researched methods of contemporary psychotherapy. EMDR therapy has been empirically proven to be particularly effective in the treatment of Post Traumatic Stress Disorder (PTSD) as well as developmental trauma. EMDR relieves the symptoms of trauma by changing the way traumatic memories are stored. Neurobiological imaging research has documented changes in the brain during EMDR sessions (Pagani, M. 2014). EMDR therapy is based on a model called the Adaptive Information Processing model (AIP). This model posits that psychopathologies are a result of the maladaptive encoding or incomplete processing of traumatic events. A combination of our genetic predisposition and our experiences create memory networks that are stored in our minds and bodies. These memory networks dictate how we experience the world in the present. They are the basis of our beliefs, attitudes, and perceptions. Memory networks can be a source of dysfunction, as well as a healthy resource to draw from. Most memories are functionally stored in the brain but intense or traumatic events tend to be stored without a coherent sense of time. This incorrect storage can lead to a client to feeling like the past traumatic event is about to happen again at any moment or is currently happening in the present. They overreact to present stimuli with hyperarousal and/ or somatic symptoms because of their dysfunctional memory network. Specific protocols in EMDR therapy help to access these memory networks in order to move them from a place of emotional activation to a more logical, rational place. EMDR changes the way traumatic memories are stored so that a client’s human system can know and feel that the traumatic event is in the past and they are safe in the present. Through EMDR therapy, the triggers of the present no longer have the same charge. The client can react to what is happening now instead of having an overreaction due to a past event.

EMDR is a present-focused therapy. In EMDR we are more interested in the ways past events manifest in a client’s system in the present moment than we are in gathering historical data. We do gather historical data, but it is mainly to access how that memory was stored. Therefore, we do not ask how the client felt at the time of the event. Rather, we ask how those memories activate emotions in the present.

Note: EMDR is a Therapeutic Approach not a Technique. Although EMDR brings together various aspects of different theoretical orientations, EMDR is a therapeutic treatment approach. It is based on the Adaptive Information Processing (AIP) model. If a therapist uses EMDR as a technique, they are less likely to be effective. EMDR is not just the eye movement or dual attention stimulation. The approach includes 8 phases and 3 prongs and is a comprehensive therapeutic orientation.