In the Spotlight: Francine Shapiro
Interviewed by Marilyn Luber Ph.D.

When I think of EMDR, I think of Francine Shapiro. This is because the beginning of EMDR is the extraordinary story of the multiple forces that came together and transformed the life of Francine Shapiro when she took a walk in the park one day.

Francine was born in Brooklyn, NY to Shirley and Daniel Shapiro. She had two sisters and a brother. Her dad was a mechanic and with his family owned a garage and a fleet of taxicabs. The cultural norm in the 1950’s in the United States was Dad was the breadwinner and Mom was a housewife taking care of the children and their home; this was the way that the Shapiro family lived their lives.

As is often the case in all of our lives, the loss of someone, something or some place that we love impacts us profoundly and creates a ripple effect that ebbs and flows through the rest of our lives. For Francine, that loss came when her sister Debra died at 9 years of age. Francine was 17.

How we respond to these losses determines how we move through our lives. Some of us freeze at that place in time; others push it into our unconscious only to have the feelings come out in many different ways; and others continue to grieve with no resolution. Still others of us find a way to grieve the loss and figure out a way to resolve it by transforming the grief into something that changes the very nature of who we are and gives new meaning and purpose to our lives.

As Francine grew, her interest turned to literature. She loved to read about the nature of human beings and their wide range of behaviors. She was granted her B.A. and M.A. at Brooklyn College. She became a High School teacher, instructing English in Bushwick and Bedford Stuyvesant in Brooklyn.

Her goal was to receive her Ph.D. in Literature at New York University (NYU). She took a sabbatical from teaching High School and became a Teacher’s Assistant and taught classes at NYU. Her passion was for nineteenth century literature and the poetry of Thomas Hardy which was to be the subject of her dissertation. At the same time, she was interested in
Behavior Therapy as a result of her reading the works of Andrew Salter and Joseph Wolpe. What fascinated her about the two subjects was that “The idea of a focused, predictable, cause-and-effect approach to human psychology seemed fully compatible with the concepts of literary character and plot development” and “I had fascinating discussions with my English professors on the interaction between the rich, multifaceted texts I was reading and the physiological cause-and-effect implications of behavioral formulations” (Shapiro, 1995).

Francine was a.b.d. in English Literature, when she was diagnosed with Cancer. As any scholar would do when fascinated with a topic, her interest in Cancer and its origins and cures absorbed her attention. She found the works of Norman Cousins and others in the field of psychoneuroimmunology which was just beginning. The key concept that she learned was that there was a connection between disease and stress. The only remaining problem was what to do about it.

By this time, Francine had been treated and her Cancer was cured. When she spoke to her physicians, they said something like “Your cancer is gone, but X percent get it back. We don’t know who and we don’t know how, so good luck!” (Shapiro, 1995). Discovering what psychological and physiological methods were the ingredients of physical health became Francine’s focus. Perhaps resonating with the earlier loss of her sister and certainly with her own catastrophic illness, Francine made a life-changing decision. She decided to leave her life in New York behind her and to discover what techniques were available, what worked, and make them available to the general public.

She sold everything she owned. She bought a Volkswagon camper and began a quest that led her throughout the United States and then the world.

Always a deep thinker, Francine changed the focus of her thoughts and spent weeks at a time introspecting in the desert. She attended different cutting edge trainings and workshops and came into contact with many different people. Ondrea and Stephen Levine taught Francine about hospice and meditative techniques. Although the information they imparted is more current and mainstream now, in the seventies, they were ahead of their time.
Francine was fascinated by all of the new information that she was learning. The calling that occasioned her leaving her Ph.D. program and her home of New York, tugged at her and she began to put on interdisciplinary workshops and present the work of different people whom she felt had something important to offer such as the Levines, Emmett Miller, Spencer Johnson, and many others.

Her curiosity in this field led her to enroll in a Ph.D. program to learn about what was more formally known in this area. She chose the Clinical Psychology program at the Professional School for Psychological Studies in San Diego, California. The analytic tools she learned at NYU to help her evaluate and understand the deep motives and behavior of characters in literature as they unfolded helped her to become an intuitive and rational psychologist with a keen eye for the observation of human behavior and character. The integration of evaluation and intuition has been the organizing principle through which Francine has channeled her choices in psychology and in building EMDR after its discovery.

Francine’s dream was to start a non-profit organization to bring together what was known in different areas such as Business, Motivational Psychology, Creativity for musicians, Psychoneuroimmunology, etc. for the benefit of humankind. Her organization was called Meta Development and Research Institute and she asked one of the people who influenced her earlier, Norman Cousins, to be on the Board of Advisors and he agreed.

In 1987, Francine was looking for a topic for her dissertation and took her famous walk in the park. In her own words:

"EMDR is based on a chance observation I made in May 1987. While walking through the park one day, I noticed that some disturbing thoughts I was having suddenly disappeared. I also noticed that when I brought these thoughts back to mind, they were not as upsetting or as valid as before. Previous experience had taught me that disturbing thoughts generally have a certain "loop" to them; that is, they tend to play themselves over and over until you consciously do something to stop or change them. What caught my attention that day was that my disturbing thoughts were disappearing and changing without any conscious effort.

Fascinated, I started paying very close attention to what was going on. I noticed that when disturbing thoughts came into my mind, my eyes spontaneously started
moving very rapidly back and forth in an upward diagonal. Again the thoughts disappeared, and when I brought them back to mind, their negative charge was greatly reduced. At that point I started making the eye movements deliberately while concentrating on a variety of disturbing thoughts and memories, and I found that these thoughts also disappeared and lost their charge. My excitement grew as I began to see the potential benefits of this effect” (Shapiro, 1995).

Francine was so fascinated with her finding that, over the following 6 months, she worked with approximately 70 people to understand and create a protocol that could be replicated and used to decrease anxiety. She called this protocol Eye Movement Desensitization and its primary focus was to decrease anxiety.

During that same year, Francine was teaching a course in Communication at San Jose University and met Robbie Dunton. Robbie was to become a friend and a key person in the ongoing development of EMDR.

In 1988, Francine—concerned about the 40 years of war in Israel—thought that she had something to offer there and went to Israel to teach EMD. She had contacted different Israeli psychologists and offered to teach them about her new finding. By then, she had written the article, “Efficacy of the eye movement desensitization procedure in the treatment of traumatic memories” which appeared in 1989 in the Journal of Traumatic Stress Studies. Francine taught about EMD in Kiryat Schmona, Haifa, Tel Aviv and for the Israeli Army. In Jerusalem, she presented at Shiluv, a Family Therapy organization who wanted her to come back and teach them how to do EMD. She was invited back in 1989 and taught the EMD workshops all over Israel. She thought about staying in Israel but felt that she had completed what she needed to do in Israel and felt that there was more to do in the United States concerning EMD.

One of her trainees from the organization Shiluv suggested that she contact the Mental Research Institute (MRI) as the pioneers there such as John Weakland, John Fisch and Paul Watzlawick were known for their interest in Brief Therapy. It was an ideal fit and Francine joined and subsequently became a Senior Research fellow at that organization.

The word was getting out about EMD and Francine was contacted by different research teams to train them. Charles Figley, the editor of the
journal for the International Society for Traumatic Stress Studies, invited her to give her workshop for the organization. She also presented her work to Joseph Wolpe who was very interested in her outcomes. After she taught him, he began to use EMD and published an article in the Journal of Behavior Therapy and Experimental Psychiatry with the title “Post-traumatic stress disorder overcome by eye movement desensitization: A case report”. He subsequently introduced it at the Association for the Advancement of Behavior Therapy as a “breakthrough.”

Francine was astonished that it took until 1989, nine years after the diagnosis of PTSD was first accepted into the DSM, for there to be any published research on the effects of different treatment methods for PTSD. This year marked studies on PTSD in the areas of behavioral, dynamic, hypnosis and EMD therapies. As she read the APA code of ethics, it clearly stated that clinicians should be trained in the methods that they use as well as the researchers who were studying the methods.

In March 1990, Francine taught her first workshop with the help of three colleagues. It was a 2-day workshop limited to 36 clinicians of those who had asked her to train them after hearing her presentations at various conferences since practice needed to be supervised. The next trainings occurred through word of mouth.

One of the major principles that Francine followed was to always pay attention to the feedback of the participants in the trainings. As a result, she learned that teaching the procedure was far more complex than she had thought. The course was extended to attend to additional issues and questions.

EMD was changed to Eye Movement Desensitization and Reprocessing (EMDR) when Francine realized through the evaluation of hundreds of cases that when the procedure was done correctly, there was “a simultaneous desensitization and cognitive restructuring of memories and personal attributions, all of which appeared to be byproducts of the adaptive processing of the disturbing memories” (Shapiro, 1995). This change in name was the result of a paradigm shift that would take EMDR beyond its original purpose as a treatment of PTSD towards a methodology and new approach to psychotherapy.
In the Cognitive-Behavioral world trouble was brewing. The belief of those in the forefront was that a therapist should be able to learn a procedure by reading a manual instead of in a formal training. Francine went against the tide when she insisted that EMDR demanded training and clinicians attending her training had to be licensed or in a licensing track while being supervised. The reason for this decision was that Francine had found out that when therapists had not been trained in EMDR or if non-therapists worked with EMDR, there could be dire results. She had also heard the negative reports of the clients of lay hypnotists and therapists who had received instruction from people she had trained. She then began to ask participants to sign an agreement not to teach EMDR without the appropriate training. She also continued the system during her trainings that included one facilitator for small groups of participants to help them learn this complex process. At first, the facilitators were the people who took to EMDR naturally and believed in it. They were informally trained, however, as the trainings became more formalized, a more structured training and process for them was implemented.

As a result of some of these issues, Francine asked a group of senior clinicians to come together to monitor her, make sure the teaching was appropriate and evaluate the training requirements and professional issues. This group became the first EMDR Professional Ethics Committee.

In order to keep clinicians up to date, the EMDR Network was created where people could come together to talk about their cases and special interests. The Network Newsletter that grew out of these meetings was extremely popular for its content and innovations. Members of the Network also received all the articles that were published on EMDR, both pro and con.

Trainers were trained two years after Francine began to do the trainings. The learning process occurred over a 2 year period and entailed a deep knowledge of the material to be presented. These were the people who took EMDR across the nation and throughout the world.

Francine was particularly concerned that veterans had access to EMDR. Anywhere she was asked to train members of the Veterans’ Administration, she would go. By 1991, Steve Silver, Neal Daniels and Howard Lipke, who
were Directors of PTSD units, had been trained and gave a panel at ISTSS. All of them reported on the efficacy of EMDR with their veterans and advocated its use throughout the VA system.

Unfortunately, many of the early studies of EMDR were component analyses that treated only one memory in multiply traumatized veterans, or used undiagnosed populations, or untrained clinicians. It took until 1995 when Sandra Wilson, Robert Tinker and Lee Becker published the first randomized study with appropriate clients who were given the appropriate amount of treatment. The study appeared in the Journal of Consulting and Clinical Psychology and the title was "Eye movement desensitization and reprocessing (EMDR) treatment for psychologically traumatized individuals".

In 1995, Francine published her first edition of "Eye Movement Desensitization and Reprocessing: Basic Principles, Protocols, and Procedures". She felt that there were enough published studies to show support for EMDR as a valid treatment for PTSD. She thought that it was time for EMDR to go public so she canceled the earlier training agreements and endorsed an independent group to monitor the standards and trainings. This group became the EMDR International Association or EMDRIA.

During the same week that the EMDR text came out, the Oklahoma City bombing of the Federal building occurred. Francine received a call from Judy Albert, an EMDR Institute facilitator and a Red Cross volunteer that the therapeutic community there needed support. Francine supported her to go out, network and see if the EMDR community could help. This marked the beginning of Francine’s dream to bring knowledge and healing to people in need and the start of the Humanitarian Assistance Program (HAP). HAP became a non-profit organization within a year and expanded its mandate to treat people in need worldwide.

In addition to the conference presentations, the way that EMDR grew was through the interest of clinicians and researchers who came to the trainings. A clinician would come to a training and decide that he/she would like to sponsor one in their city, state or country. It was in this manner that EMDR has spread throughout the world in an expanding wave of people who loved it and brought their friends and colleagues in to be trained.
Francine has been a prolific writer on the subject of EMDR. She has written three books and edited two. She has chapters on EMDR in at least 12 books and 33 articles at last count. She has participated in 3 videotapes on EMDR. Francine is a much sought after speaker throughout the years and has been invited to lecture or give keynote or plenary speeches at organizations as diverse as the American Psychological Society, Evolution of Psychotherapy, International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy, Family Therapy Network, the California Association of Marriage and Family Therapists, the International Society for Traumatic Stress Studies, the 1st Pan-Pacific Brief Psychotherapy Conference, the American Society of Clinical Hypnosis, the American Psychological Association, the International Society for the Study of Dissociation, the Harvard Medical School, the Society for the Exploration of Psychotherapy and the Italian Association of Cognitive and Behavioral Therapy and, of course, EMDRIA to name a few.

Francine received the Journal of Behavior Therapy and Experimental Psychiatry award for the best article published in 1989. She was the recipient of the 1993 Distinguished Scientific Achievement in Psychology Award presented by the California Psychological Association. In 1996, she was given the Humanitarian Assistance Award by EMDRIA. Francine was the recipient of the 2002 prestigious International Sigmund Freud Award for Psychotherapy presented by the city of Vienna in conjunction with the World Council of Psychotherapy.

Her interest in research and the quality of the psychotherapeutic process is highlighted by the many different editorial boards of which she has been a member such as the Journal of Traumatic Stress, Journal of Anxiety Disorder, Journal of Brief Therapy, Journal of Forensic Psychiatry and Psychology, American Journal of Clinical Hypnosis; and the new Journal of EMDR Science and Practice.

When asked what she would like to say to the EMDR community Francine responded:

“I want to repeat the same thing that I have said for years. There is so much we have done but so much to do. Anyone who cares to can open the treatment room doors in a way that can really make an impact. Documenting
your outcomes and sharing it is "research." Research is not just about proving to others. It is a way to guide ourselves to establish the best practices. It is about staying on the right road. Everyone can also take a part through strengthening the professional organizations and by supporting HAP. We are all responsible for the world we live in. Worldwide clinicians are forging bonds that transcend countries and ideologies. Bonds that can help heal the trauma and pain that lead to ongoing violence and suffering. To make a difference that effects generations to come--don't leave it to anyone else. We all have to take a part in it".

When I think of the extraordinary journey that led Francine to this point, I am always touched and profoundly grateful. If she has touched your lives, your patients and your community in the way she has touched mine, I can say on behalf of us all, "Thank you, Francine".