



# EMDR History and Preparation: A Step-By-Step Guide for Preparing Clients for EMDR

Amanda Martin, PhD, LMFT-S, LPC, BCN

# Objectives

- Explain a brief review of the AIP Model
- Explain a step-by-step guide for Client History Phase
- Demonstrate treatment planning technique and sample forms
- Identify a step-by-step guide for preparation phase
- Practice stabilization exercises during preparation phase

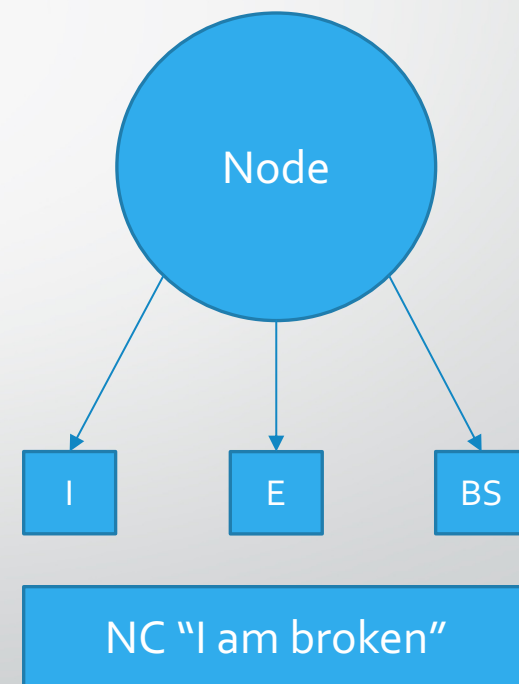
# Cultural Awareness Broaching Statement

All the trainers at CompassionWorks strive to be culturally and linguistically competent.

- We want to provide a kind, brave space for everyone's professional development.
- Also, as humans we cannot fully understand or appreciate others' experiences from different racial/ethnic backgrounds.
- We seek to provide an environment that supports gender-affirming and anti-oppressive practices.
- We are open to discussing these topics and welcome the opportunity to grow and collaborate in this area.
- Feedback and discussion on these topics are welcome throughout the training.

# Adaptive Information Processing Model- Brief Overview

- AIP Model posits there are 2 memory neural networks:
  - Maladaptive and Adaptive neural networks
- Life experiences are stored in a state-dependent form
  - Pathogenic memories
- EMDR results in memories being metabolized
- Transmutation is seen in all elements of the memory
- Linkage to the Adaptive neural network
  - Adaptive resolution



# Phase One: Client History

- Intake form
  - Preference is for the client to complete the intake form 24 hours prior to appointment
- Intake assessments
  - PCL-5/ UCLA PTSD RI
    - Send with initial intake form prior to appointment
  - ACE Questionnaire
    - Can be sent with intake forms or in session with client

# Phase One: Client History

- Intake assessments- continued
  - Resilience Questionnaire
    - Can be sent to the client with intake forms prior to session or in session.
  - Pittsburg Sleep Quality Index (PSQI)
    - Can be sent to the client with intake forms prior to session or in session.
  - Dissociative Experience Scale
    - Completed with the client in session (1<sup>st</sup> or 2<sup>nd</sup> appointment)
    - If the DES is high with a score over 30, focus on additional stabilization and regulation skills then recheck in 3-4 sessions.

# Standard Intake and History Forms Activity



- Review the Standard Intake Form and History Form
- Take 20 minutes to fill out the Standard Intake Form and History Form on a current or former client.
- Fill out as much as you can on the questions.
- Group discussion at the end of activity time.

# Intake Assessments: At a Glance





# Phase One: Client History

- Genogram
  - Collecting information on themes of: (3 generations preferred)
    - Trauma history
    - Mental health or brain health issues including addiction or substance use
    - Supportive and meaningful relationships
    - Emotional cut-offs
    - Family values and individual values
    - Patterns in romantic relationships
    - Parenting
    - Cultural values
    - Legacy burdens

# 3 Realms of ACEs

Adverse childhood and community experiences (ACEs) can occur in the household, the community, or in the environment and cause toxic stress. Left unaddressed, toxic stress from ACEs harms children and families, organizations, systems and communities, and reduces the ability of individuals and entities to respond to stressful events with resiliency. Research has shown that there are many ways to reduce and heal from toxic stress and build healthy, caring communities.



Thanks to Building Community Resilience Collaborative and Networks and the International Transformational Resilience Coalition for inspiration and guidance. Please visit [ACEsConnection.com](https://ACEsConnection.com) to learn more about the science of ACEs and join the movement to prevent ACEs, heal trauma and build resilience.



# Session One: Client History

- Review information prior to session to map out information and missing information needed for treatment planning
- Client story of current symptoms and concerns with memories of origin
- Client goals
  - Clear vision of what achievement looks like for them
  - Client homework exercises to help them clarify this if needed
- Explain EMDR therapy to client
- Teach regulation skill
  - Body Scan or Yogic Eye Movements



# Session One: Client Exercise Options

- Goal setting exercise
- Identifying values exercise
- Personal strengths and hobbies exercise
- Body Scan exercise
- Affirmation exercise
- Vision Board on Positive Goal State
- Top 10 best experiences
- Client History Form

# Session Two: Client History

- Review homework if given or use of skill
  - Any change to current symptoms
- Continue gathering history if not completed in first session
  - EMDR History Form
  - Start to fill in target sequence treatment plan when taking notes
- Start Trauma timeline or Top 10 List of Worst and Best Memories
- Gather dominate themes with symptoms and core negative cognitions
  - If not captured on timeline/ Top 10 list, may require a float back or affect scan
- Teach Container Exercise and/or Light Stream

# Session Two: Client Exercise Options

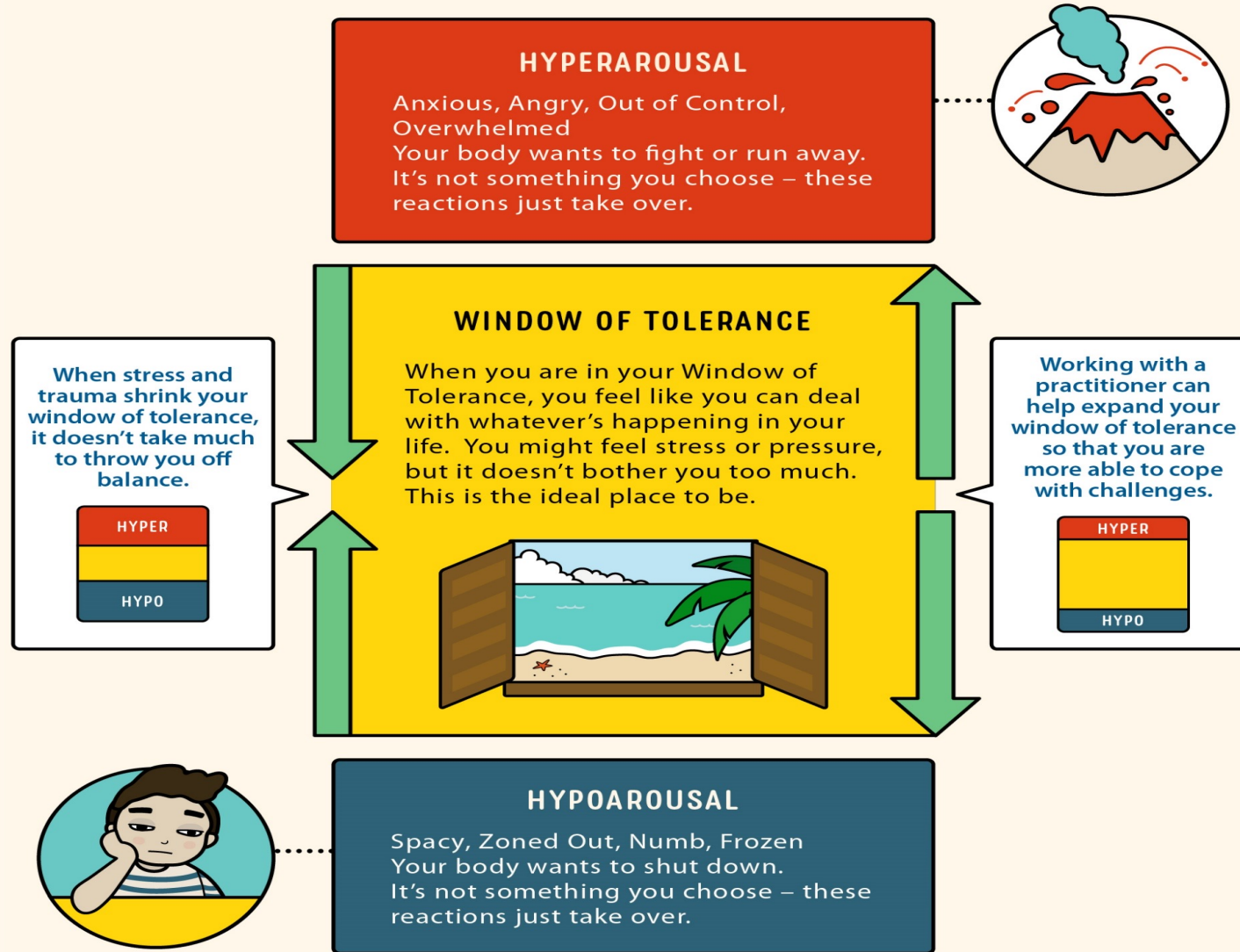
- Sensory toolkit exercise
- Box breathing with joy/gratitude exercise
- Progressive muscle relaxation
- Grounding techniques exercise
- Mindfulness exercise
- Guided meditation challenge exercise
- TRE® Yoga exercise



# Treatment Planning

- Prior to third session:
- Start target sequence treatment plan
- Identify gaps in information
- Review assessment scores and history from intake and sessions
- Identify triggers and reactions, negative cognitions, intrusive thoughts, coping behaviors and resilience
- Identify stabilization needs to prepare for processing
  - Therapeutic rapport
  - Ego strength
  - Affect tolerance
  - Life stability and support system

# How Trauma Can Affect Your Window Of Tolerance

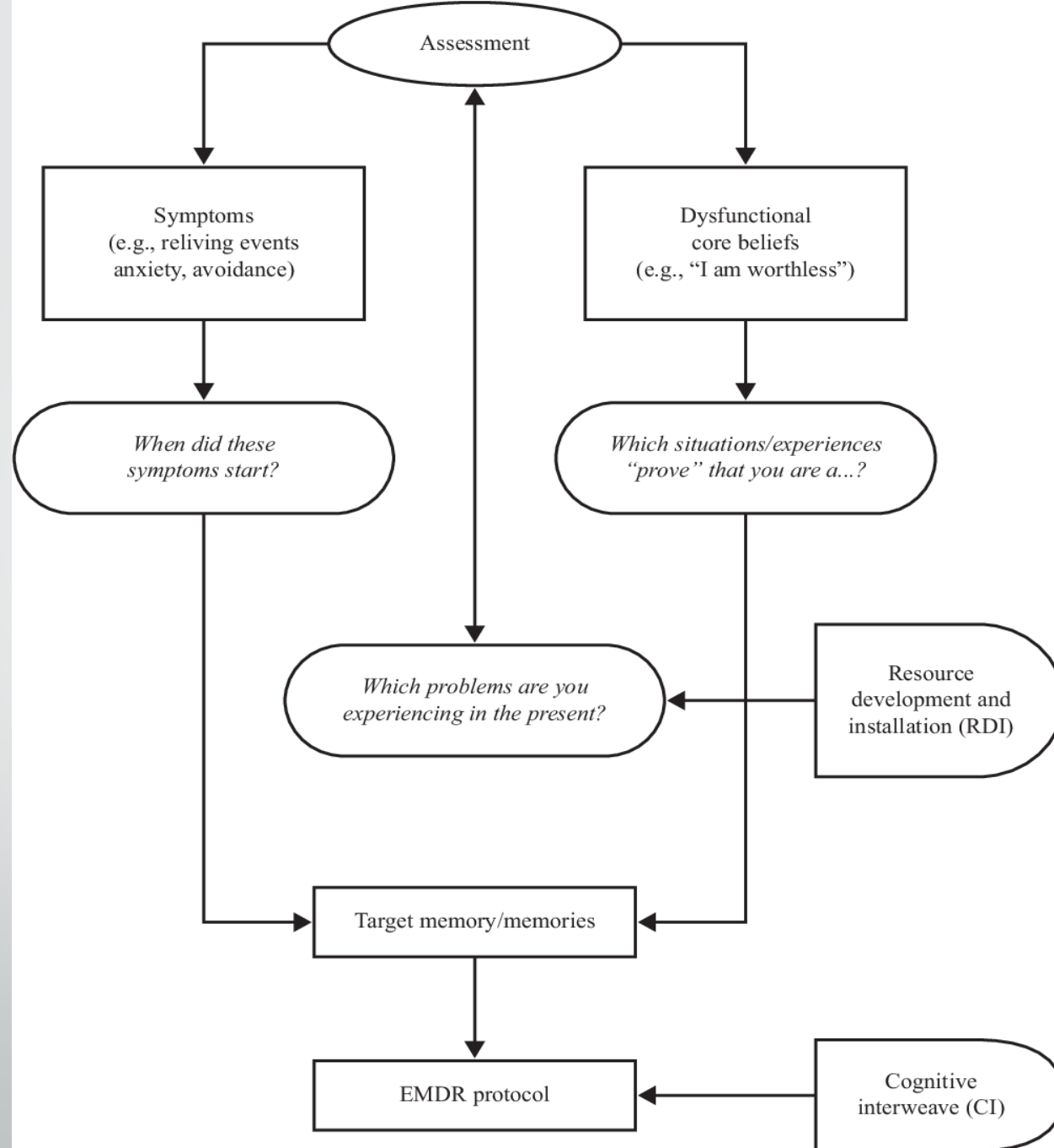


nicabm



# Target Sequence Treatment Plan

- Components include:
  - Presenting problem/symptoms
  - Dominant themes
  - Triggers
  - Goals for treatment
  - Assessment scores
- Resource development and installation
  - Top 10 best experiences
- State change exercises
- Ego state work
- Target memories identified for processing
  - Top 10 list or sequencing by theme option



# Target Sequence Treatment Plan

- Three prong approach – past, present, future
- Flexible to client's feedback – follow the mind
- Quick Reference for therapists on skills taught with cue words
- Ordering of memories for processing options:
  - Chronological order (Top 10 list or Trauma timeline)
  - Themes of targets by type of abuse, negative cognition
    - Subthemes – ex: if different people were involved
    - Moving to different themes
    - Memory chaining

## Target Sequence Treatment Plan Activity

**Instructions:** Each group will select one case from the standard intake form and complete the target sequence treatment plan. Identify any areas client needs and how you would sequence the memories to process. You have 15-20 minutes for the activity followed by a quick group case presentation.

# Session Three: Preparation

- Check in with client on use of tools and changes in areas of progress or symptoms experienced.
- Review target sequence treatment plan with the client and fill in any additional information needed.
- Complete Safe/Calm Place with the client and intuition integration exercise.
- Assess if client needs additional homework.



# Why intuition work with clients?

- It's autogenic in nature by helping the autonomic nervous system calm down
- Helps connect the client to inner strength
- Builds self-awareness
- Assists with establishing self-trust
- May help improve self-regulation
- Can be a powerful resource figure
- Provides additional information for therapist on client treatment needs

*Transforming Trauma (Gordon, J., 2019)*

# Therapist Intuition

Therapist's intuition is very useful in psychotherapy. It can help to incorporate some of these practices to enhance clinical intuition when working with clients (Charles, R., 2004; pp.215-216).

- Meditate before and between client appointments to help clear mind and center self
- Use resourcing development and installation with EMDR to develop an "inner supervisor" to help provide non-judgmental and intuitive guidance
- Be attune to the client's unspoken needs in session
- Practice intuition exercises several times a week
- Notice any hunches or intuitive thoughts that appear and check with the client when they come up



# Intuition Integration Exercise Demo



# Client Exercise Options

- Intuition Integration exercise  
(preferable to have already done safe/calm place)
- Intuitive gratitude exercise
- Transforming fear/anxiety exercise
- Intuitive boundary exercise
- Intuitive choice exercise
- Self-significance exercise
- Emotional Contentment exercise



## Session Four: Preparation

- Check in with client on use of regulation tools, current symptom changes (is there any reduction with use of stabilization tools being used) and follow up on homework if given.
- Therapist completes any additional resource development and installation figures (RDI).
- Therapist completes a self-care plan with client if time or assign the template as homework to review in the following session.
- Therapist prepares client for starting processing next session if proceeding to Phase 3 on touchstone event.
- Review TICES Log.

# Session Four: Preparation

- Completing self-care plan
- Practice completing TICES Log



# Self-Care Plan Activity



- Review the self-care plan
- Take 15-20 minutes to complete the Self-care plan for the client example
- Use with the client
- Post therapy aftercare

# Additional Regulation Tools

- HeartMath
- Emotional Freedom Tapping
- Animal-Assisted Therapy
- Equine-Assisted Psychotherapy

# References

- Armstrong, J., Carson, E. B., & Putnam, F. (1993). *Adolescent Dissociative Experiences Scale-II (A-DES)*. [Measurement instrument]. Retrieved from <https://www.emdrworks.org/Downloads/a-des.pdf>
- Buysse, D. J., Reynolds, C. F., Monk, T. H., Berman, S. R., & Kupfer, D. J. (1989). The Pittsburgh Sleep Quality Index (PSQI): A new instrument for psychiatric research and practice. *Psychiatry Research*, 28, 193-213.
- Buysse, D. J., Reynolds, C. F., Monk, T. H., Berman, S. R., & Kupfer, D. J. (1989). The Pittsburgh Sleep Quality Index (PSQI). Published instrument. Retrieved from <http://www.goodmedicine.org.uk/files/assessment,%20pittsburgh%20psqi.pdf>
- Carlson E. B. & Putman, F. W. (1993). *An update on the Dissociative Experiences Scale*. [Measurement instrument]. *Dissociation* 6(1), p. 16-27. Retrieved from <http://traumadissociation.com/downloads/information/dissociativeexperiencescale-ii.pdf>
- Charles, R. (2004). *Intuition in psychotherapy and counselling*. London, England and Philadelphia, PA: Whurr.
- Childre, D. & Rozman, D. (2005). *Transforming Stress: The HeartMath solution for relieving worry, fatigue, and tension*. Oakland, CA: New Harbinger Publications.

# References

- Two Method Model of EMDR. Adapted from De Jongh, A., Ten Broeke, E., & Meijer, S. (2010). Two method approach: A case conceptualization model in the context of EMDR. *Journal of EMDR Practice and Research*, 4(1), 1221.
- Daily Calm (2016, October). 10 Minute Mindfulness Meditation: Be present. Retrieved from <https://www.youtube.com/watch?v=ZToicYcHI0U>
- Gordon, J. (2019). *Transforming trauma: The path to hope and healing*. New York, NY: HaperCollins.
- Hase M, Balmaceda UM, Ostacoli L, Liebermann P, Hofmann A. (2017). The AIP Model of EMDR Therapy and Pathogenic Memories. *Frontiers in Psychology*. (8)1578.
- Headspace: Meditate. Retrieved from <https://www.headspace.com>
- Legge, S. (2016, April). Yoga exercise for the eyes. *Feeling Soul Good: The alchemy of Yoga and Sound*. Retrieved from <https://feelingsoulgood.com/yoga-for-the-eyes/>

# References

- Lombardo, M. (2012). EMDR target time line. *Journal of EMDR Practice and Research*, 6(1), 37-46.
- Manfield, P. (2010). *Dyadic resourcing: Creating a foundation for processing trauma*. USA: CreateSpace.
- McLeod, S. (2021). Context and state dependent memory. *Simple Psychology*. Retrieved from <https://www.simplypsychology.org/context-and-state-dependent-memory.html>
- Theodore. (2019, August). State Dependent Memory + Learning (Definition and Examples). Retrieved from <https://practicalpie.com/state-dependent-memory/>.
- Miller, W. R., C'de Baca, J., Matthews, D. B., and Wilbourne, P. L. (2001). Personal Values Card Sort. [Instrument]. Retrieved from [https://motivationalinterviewing.org/sites/default/files/valuescardsort\\_o.pdf](https://motivationalinterviewing.org/sites/default/files/valuescardsort_o.pdf)



# References

- Mindful Movement: Getting started with mindfulness. *Mindful.org*. Retrieved from <https://mindful.org/meditation/mindfulness-getting-started/>
- Mineo L. (2018, April). Health & Medicine: With Mindfulness, life's in the moment. *The Harvard Gazette*. Retrieved from <https://news.harvard.edu/gazette/story/2018/04/less-stress-clearer-thoughts-with-mindfulness-meditation/>
- National Institute for the Clinical Application of Behavioral Medicine (2019). How to help your clients understand their window of tolerance. Retrieved from [www.nicabm.com/tag/window-of-tolerance/](http://www.nicabm.com/tag/window-of-tolerance/)
- Popky, A. J. (2014, June). DeTUR. Preconference presentation at the 15th EMDR Europe Association Conference, Edinburgh, Scotland.
- Pynoos, R. S. & Steinberg, A. M. (2013). *UCLA PTSD Reaction Index for Children/Adolescents for DSM-5*. [Measurement instrument]. Retrieved from [https://pathwaysu.com/pluginfile.php/12797/mod\\_resource/content/1/UCLA%20PTSD%20RI%20-%20DSM-5%20%28Final%29.pdf](https://pathwaysu.com/pluginfile.php/12797/mod_resource/content/1/UCLA%20PTSD%20RI%20-%20DSM-5%20%28Final%29.pdf)

# References

- Raypole, C. (2019, May). 30 Grounding techniques to quiet distressing thoughts. *Healthline*. Retrieved from <https://www.healthline.com/health/grounding-techniques>
- Robinson, L., Segal, R., Segal, J., & Smith, M. (2020, September). Stress Management: Relaxation techniques for stress release. *Help Guide*. Retrieved from <https://www.helpguide.org/articles/stress/relaxation-techniques-for-stress-relief.htm>
- Rosanoff, N. (1991). *Intuition workout: A practical guide to discovering and developing your inner knowing* (2<sup>nd</sup> ed.). Fairfield, CT: Aslan Publishing.
- Santos, I. (2019). EMDR case formulation tool. *Journal of EMDR Practice and Research*. Vol 13(3), 221-231.
- Shapiro, F. (2018). *Eye Movement Desensitization and Reprocessing (EMDR) Therapy: Basic principles, protocols, and procedures*. New York, NY: The Guilford Press.
- Smith, G. S. (2007). *History grid*. Form presented in educational seminar. [www.GregorySmith.info](http://www.GregorySmith.info)
- Smookler, E. (2019, April). Mindful Movement: Beginner's Body Scan Meditation. *Mindful.org*. Retrieved from <https://www.mindful.org/beginners-body-scan-meditation/>

# References

- Stephenson, J. (2020, July). Short Guided Meditation: Release all negative energy & worries. [Video]. Retrieved from <https://www.youtube.com/watch?v=G1TD2uVdotM>
- Stevens J. (2017, January). Got your ACE, Resilience scores? *ACEs Connection*. Retrieved from <https://www.acesconnection.com/blog/got-your-ace-resilience-scores>
- Stinson, A. (2018, June) What is Box Breathing? *Medical News Today*. Retrieved from [www.medicalnewstoday.com/articles/321805](http://www.medicalnewstoday.com/articles/321805)
- Rains, M. & McClinn, K. (2013). Resilience Questionnaire. Retrieved from [http://www.traumainformedcareproject.org/resources/resilience\\_questionnaire.pdf](http://www.traumainformedcareproject.org/resources/resilience_questionnaire.pdf)
- TRE® For All (2021, January). TRE®'s Response to COVID-19. [Video]. Retrieved from <https://traumaprevention.com>
- Weathers, F.W., Litz, B. T., Keane, T.M., Palmieri, P.A., Marx B.P., & Schnurr, P.P. (2013). *The PTSD Checklist for DSM-5(PCL-5)*. [Measurement instrument]. Retrieved from [https://www.ptsd.va.gov/professional/assessment/documents/PCL5\\_Standard\\_form.PDF](https://www.ptsd.va.gov/professional/assessment/documents/PCL5_Standard_form.PDF)
- West, C. (2019). *We all have parts! A little book with big ideas about healing trauma*. El Cerrito, CA.
- Vaughan, F. E. (1979). *Awakening intuition*. Garden City, NY: Anchor Press/Doubleday.