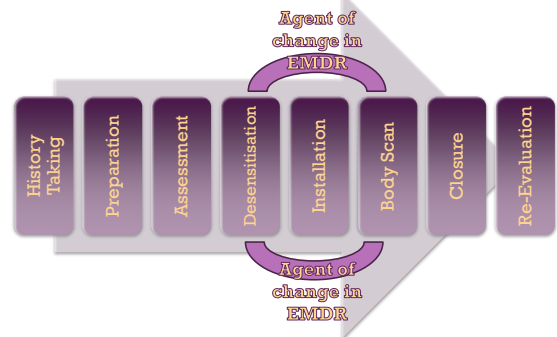


Phase 8: Re-Evaluation

Dr Derek Farrell – EMDR Europe Accredited
Trainer & Consultant
6th April 2013

Overview of the EMDR Process



+ Re-evaluation

- Commencement of the next session after reprocessing
- Acts as the 'cement' in the overall plan of care in providing continuity
- Uses the AIP model to orientate and provide a rationale for target sequencing and target selection

+ Phase 8: Re-evaluation

- Micro Re-evaluation
 - Target memory from last session
- Macro Re-evaluation
 - Changes in sleep pattern/ dreams
 - Reactions to current stimuli (threat cues)
 - Additional memories
 - New thoughts or insights
 - Changes in primary symptoms

+ Phase 8: Re-evaluation

- "Survivors of early neglect or abuse do not always have sufficient self-knowledge or skills for self-monitoring to accurately assess their capacities to tolerate the continuing impact of uncovering and reprocessing. They are often in a hurry to get reprocessing 'over with'" (Leeds, 2009; pg 188).
- Any trauma-focussed intervention can lead to gradual or rapidly worsening symptoms for survivors of chronic or complex traumatic exposures (Cloitre et al, 2002; Korn & Leeds, 2002).

+ Phase 8: Re-evaluation (Micro)

- Previously incomplete session (SUD +1)
 - Confirm that the client is ready for reprocessing to continue
 - Return to 'target memory (incident)'
 - "When you bring your attention back to that experience we worked on in our last session, what do you notice now?"
 - "What's the worst part of it right now?"
 - "On a scale of 0-10 how disturbing does it feel to you right now?"
 - "Where do you feel that in your body?"
 - "Focus on that original target memory and notice what happens next."

+ Phase 8: Re-evaluation (Micro)

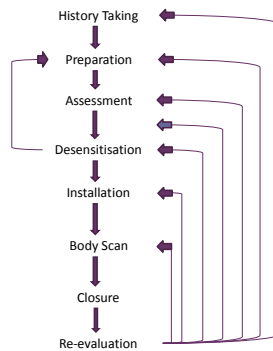
- Previously complete target
- "When you bring your attention back to the experience we worked on last session what do you notice now?"
- "As you focus on the original experience, on a scale of 0-10 how disturbing does it feel to you right now?"
- "Think about that original experience and those words (C+) on a scale of 1-7 how true do those words feel to you now?"

+ Phase 8: Re-Evaluation

- Treatment Plan (Global)
 - "Tell me what you have noticed different in your life since our last session?"
 - Any changes in how you respond to the issue we have been working on?
 - Any new insights?
 - Any dreams
 - Any changes in behaviour
 - Changes in symptoms

+ Phase 8: Re-Evaluation

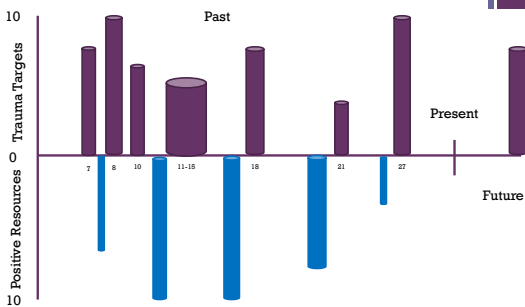
- Target (Target Specific)
 - "Now as you think about the incident (target) we focussed upon during our last session, what are you noticing now?"
 - What has changed or is different about the incident now?
 - Any new insights or thoughts?
 - Any new connections
 - When you think of that incident now, on a scale of 0-10 how disturbing is it now



EMDR as an Eight Phase Protocol – Phase Orientation



+ Target & Resources Sequence Plan



+ Target Sequence Plan Approaches

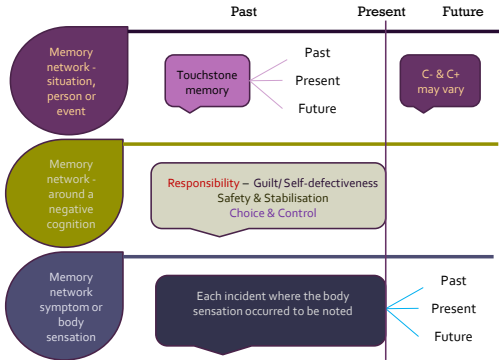
1. Target symptoms or complaints experienced by clients



2. Target 'core beliefs'



Target Sequencing Plan - Memory Network Time Line Approach within EMDR



+ Cognitive Behavioural Therapy: Core Principles for Practice by William T. Donohue and Jane Fisher (2012)

“Cognitive Behavioural Therapy (CBT) is an important therapeutic paradigm as it has been shown repeatedly to be an efficacious and effective intervention for a variety of psychological problems **it might be argued, in an important technical sense, that it is the only valid therapeutic paradigm** In this important sense CBT maybe said to be the only, or at least the foremost, paradigm in psychotherapy it is not a ‘one problem therapy’ as some interventions are for example EMDR”.

+ Interesting Quotation

“... Mindfulness, ACT, and EMDR are considered to be the third wave in CBT.

Bannink, F (2012) Practising Positive CBT: From Reducing Distress to Building Success

+ EMDR & TF-CBT have much more in common that what divides them including:

- o Importance of a therapeutic relationship in correlation to an effective outcome
- o Identifying intrusive memories
- o Identifying trigger factors
- o Utilisation of imagery
- o Affect regulation
- o Cognitive reappraisal
- o Challenging avoidance
- o Exposure
- o Psycho-education
- o Addressing the past, present and future aspects of trauma experiences
- o Dual Attention Stimulus
- o Subjective unit of measurement piece

+ Three Important Differences between EMDR & CBT

- Bilateral stimulation – unique to EMDR
- Dual Attention Stimulus has a different premise
 - TF-CBT – Work on the past in the present (First person – Now of the event)
 - EMDR – Use the present as an anchor point to work on the past (Then)
- Theoretical Framework of AIP is different behavioural and cognitive formulations



+ EMDR & Future



- World Health Organisation endorsement
- United Nations Training & Research (UNITAR)
- Different EMDR training modalities
- We need more good quality EMDR research
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