

Treating Trauma with EMDR Therapy

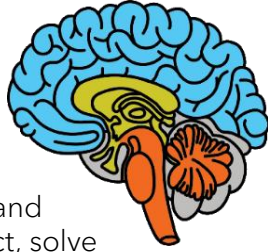
The Three-Part Brain

Our brains are made up of three main parts:

The *thinking part* comes online when we are safe and it allows us to learn, reflect, solve problems, and engage socially with others.

The *feeling part* assesses everything that we see, hear, touch, taste, smell, and feel inside to see if there is any real or perceived danger, then attaches emotions to our experiences.

The *automatic part* controls our body's basic systems, including our breathing, circulation, digestion, temperature, and sensory systems.



Responding to Stress and Trauma

When we experience stress or danger—this can be obvious physical danger such as losing control of a car or less obvious social danger such as being bullied or ignored—the feeling part of our brain sends a message to the automatic part to activate our body's survival systems. The thinking brain goes offline so that our body can react quickly by *fighting, running away*, or if the danger is so extreme that there is a real or perceived threat to our life, by *shutting down*.

If we have grown up in a safe environment and have been physically and emotionally nurtured by our parents or caregivers, we can develop resilience, or the ability to quickly recover from stress, such as by seeking comfort from the people we are close to. If, on the other hand, we experienced abuse in childhood, or if our caregivers were not responsive to our physical or emotional needs, our ability to calm down from stress may be weakened and we may struggle to trust the safe people around us.

Regardless of our childhood experiences, some situations are so overwhelming that our brains and bodies cannot calm down on their own or even with the help of others. These traumatic experiences can become frozen in our brains and bodies and can continue to disturb us through flashbacks, dreams, or unwanted feelings or body sensations. These memories can be re-activated whenever we experience something that the feeling part of our brain associates with the original event.

Calming Our Stress Response

Traumatic symptoms can come up when we least expect them, and the images, feelings and body sensations can be as vivid as when the original event occurred. Sometimes we might not even recognise the links between the current "trigger" and the original trauma, but our brain does and will still react as if we are in danger, even when everything and everyone around us now is actually safe.

We can practice skills that can help calm our brain and body when they get triggered by a traumatic association. These might include:

Diaphragmatic breathing or breathing from your stomach to a count of 2 for the inhale and a longer count of 4 for the exhale.

Imagining a calm or peaceful place using all your senses (i.e., what can you see, hear, touch, taste, and smell in that place?)

Imagining putting your painful memories into a container that is big and strong and can only be opened by you and people you trust.

Engaging in moderate physical activity such as sport, walking, jogging, doing push-ups, or simply pushing hard against a wall.

Treating Trauma with EMDR Therapy

Learning to calm ourselves is important, but this may not get rid of our painful memories. We can get help from someone trained in a treatment called EMDR therapy. EMDR stands for Eye Movement Desensitisation and Reprocessing, and this therapy works directly with the feeling part of our brain to help it understand that our traumatic memories are in the past and that we are safe now.

In EMDR therapy, you will be asked to bring up the image, feelings, and body sensations associated with the painful memory and then the therapist will try to distract you by having you follow their fingers with your eyes, listen to tones, hold vibrating pulsers in your hands, or do other random tasks that make it harder for you to focus on the memory. Eventually the memory will feel more distant and less emotionally and physically disturbing. Your brain will stop thinking you are in danger and will let you get on with your life without being hijacked by unwanted reminders of the event.

Preparing for EMDR Therapy

Will EMDR Therapy Help You?

EMDR therapy was originally developed to help people who experience post-traumatic stress disorder (PTSD), but it can also be used to treat anxiety, phobias, panic attacks, pain, addictions, and many other conditions. If you experience any of the following* related to a painful past event or feared future event, it is likely that EMDR therapy will help you:

- ☐ Disturbing thoughts or memories of the event that arise in your head against your will.
- ☐ Disturbing dreams about the event.
- ☐ You behave or feel as if the event is happening now.
- ☐ You get upset by things that remind you of the event.
- ☐ Physical reactions (such as rapid heartbeat, heavy stomach, sweating, dizziness) when you are reminded of the event.
- ☐ Difficulty falling asleep or waking up too early.
- ☐ Irritability or tantrums.
- ☐ Having trouble concentrating.
- ☐ Increased awareness of potential dangers to yourself and others.
- ☐ Being tense or startled by something unexpected.

Goals of Therapy

What would you like to experience **less** of?

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What would you like to experience **more** of?

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What would you like to **believe** about yourself?

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Resources

What are your main **character strengths**?

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Who or what helps you feel **safe** and/or **calm**?

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Target Memories or Intrusions

It is normal to feel anxious and try to avoid thinking about painful memories. Often those memories are associated with strong feelings such as anger, fear, sadness, or even shame for things that were not our fault. In order for EMDR therapy to help us, we need to be able to think about those memories and fully feel the emotions—but you don't actually have to describe them in any detail to the therapist, if you don't feel like you can or want to.

List a keyword for each of the most disturbing memories or intrusions (e.g., dreams, worries, emotions, or physical sensations) you want to resolve and rate the level of distress for each one on a scale of 0 (none) to 10 (most):

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* Screening questions adapted from <https://psytrek.nl/ptss-zelftest>