EMDR is a relatively new type of therapy used in treatment of clients for PTSD and trauma. As of today it has helped an estimated two million people (EMDR Institute, 2005). EMDR originally began in 1987 by its founder, Dr. Francine Shapiro. For more information on the founder and how EMDR was realized as a therapy treatment, please visit the foundation’s website at: emdr.com/history.htm.

**What is EMDR?**
EMDR stands for Eye Movement Desensitization Reprocessing. The therapy’s foundation rests on psychotherapy and looks at how traumatic situations affect the brain. When a traumatic event occurs in a person’s life, often that event becomes frozen in memory. The person relives the trauma, which can be triggered by sights, sounds, smells, or other triggers. EMDR addresses how the brain processes those triggers, so that the person may have a lessened response. This does not mean that triggers disappear, but rather the response and intensity the person experiences is lessened and the trigger can be dealt with without the intense reaction that interferes with everyday life.

EMDR is considered an information processing therapy. Shapiro (2001) suggests that people have a system used for processing experiences to another stage where learning takes place. Memory is conceptualized by Shapiro as “being stored in linked networks that are organized around the earliest related event and its associated affect.” These memories hold the sights, sounds, images, and smells. When they are not processed properly after a traumatic event, these memories store the information as they were at the time of the event, resulting in triggers.

**Eye Movements and EMDR**
Commonly people believe that EMDR is solely focused on the eye movements. However, EMDR actually combines multiple approaches of therapy, including
the stimulation of eye movements (Shapiro, 1991). The term often used is “dual attention stimuli.” What this means is that while the person is focusing on the distressing event (internal stimuli), the client is also stimulated externally through eye movements. Eye movements however are not the only external stimulus that can be used. Tappers that vibrate alternatively in each hand, tactile stimulation, and auditory tones are also used.

**What Can I Expect During a Session?**

After the initial client-therapist meeting, the therapist works with the client to identify one specific problem to focus on. This can be a feeling, event, memory, or negative self belief. The client is asked to recall the emotions, triggers, and the thoughts or beliefs they currently have. The therapist will also ask where the client feels the trauma in their body, such as feeling guilt in the stomach area and describing it as “a sinking feeling in my stomach.” The therapist then will sit a comfortable distance from you, ask you to recall the memory, and perform the external attention stimulus (tappers, eye movements, etc.) that is comfortable for you. This is often referred to as processing. The stimulus lasts for a short amount of time, and the client is asked to share how they feel. This can include memories, feelings, emotions, or whatever may come to mind. The processing continues until the client reports the problem has decreased in intensity or disturbance. It then is associated with a positive belief. The therapist will check in with the client on the level of disturbance and where or if the client feels the distress in their body,

A typical EMDR session lasts 60 minutes, and it may take multiple sessions to clear or report a diminished level of disturbance (EMDR Institute, 2005). Clearing a target is dependent on the amount of trauma the client has faced, the memories, feelings, and emotions associated with it, and current life circumstances. There is no set amount of time for healing through EMDR.

**I Think EMDR is for Me**

If you think EMDR would be beneficial to your healing process, make sure that you search for a licensed clinician. A list of clinicians can be found at the EMDR Institute website at: [emdr.com/clinic.htm](http://emdr.com/clinic.htm). Remember to ask questions
if you have any! Many therapists understand reservations on beginning therapy, and there is never any question that should go unanswered. Many therapists have brochures or literature that you can browse or borrow that explains EMDR and what to expect.

**Further Reading**


Small Wonders: Healing Childhood Trauma with EMDR. Joan Lovtt. ISBN: 978-0684844466

EMDR Essentials: A Guide for Clients and Therapists
By Barb Maiberger, LPC. 2009.

**Resources**


