Being Brief with EMDR
an Integrative, Belief Focused Approach to EMDR

EMDR

Stage One
- Phase 1: Target Planning
- Phase 2: Preparation

Stage Two
- Phase 3: Access & Activate (Assessment)
- Phase 4: Processing (Desensitization)
- Phase 5: Installation
- Phase 6: Body Scan
- Phase 7: Closure

Stage Three
- Phase 8: Reevaluation

3 Prongs
- Past
- Present
- Future

Integrative Psychotherapy

CBT, Solution Focused, Psychodynamic, EMDR, DBT, IFS, Somatic Experiencing, Hypnosis

EMDR

Stage 1
- Case Conceptualization
- Phase 1: Targeting Planning
- Phase 2: Resourcing

Stage 2
- Phase 3: Access & Activate
- Phase 4: Desensitization
- Phase 5: Installation
- Phase 6: Body Scan

Stage 3
- Integration
- Phase 8: Reevaluation

3 Prongs
- Past
- Present
- Future

Closure
Standard EMDR

Phase 1: History
Phase 2: Preparation
Phase 3: Assessment
Phase 4: Desensitization
Phase 5: Installation
Phase 6: Body Scan
Phase 7: Closure
Phase 8: Reevaluation

Three Prongs
- Past Experiences
- Present Triggers
- Future Templates

Brief, Belief Focused EMDR

*Stage 1: Case Conceptualization
Phase 1: Target Sequence Planning
Phase 2: Resourcing

*Stage 2: Treatment
Phase 3: Access & Activate
Phase 4: Linking, Binding, Consolidating Networks
Phase 5: Strengthening Adaptive Network
Phase 6: Implicit Memory Integration
Phase 7: Closure

*Stage 3: Integration
Phase 8: Integration
Completing the Target Sequence Plan
- Past Experiences
- Present Triggers
- Future Triggers

*Janet: 1898 approach to PTSD
Stage 1: Case Conceptualization

Adaptive Information Processing
(Emotional Learning)

Hebb’s Axiom: *Neurons that fire together, wire together*
1. A natural drive toward adaptive learning

2. Memory networks are viewed as the bases of dysfunction and health

3. Disturbing events are dysfunctionally stored: “frozen”

4. The Past is Present
   • Influence our
   • Perceptions
   • Attitudes
   • Behavior
The Development of an Isolated Neural Network

Kiessling: 2012

Emotionally charged memories develop into an emotionally charged neural networks

• Disturbing events are encoded with higher emotions/sensations (amygdala)

• Repeated exposure leads to an emotionally charged neural network

• Present triggers activate past emotional/sensorial networks

• When triggered, past experiences influence perceptions, attitudes, behaviors and **Core Belief**: e.g., *I’m worthless.*
Emotionally charged networks may become isolated/unable to link with adaptive networks

Isolated Network
I’m worthless

Adaptive network
I’m worthwhile, regardless

Teacher’s/mentor’s encouragement

Family criticism

Negative networks are unable to consolidate with adaptive networks
Stage 1: Case Conceptualization

Targeting:

Incident
(Desensitization)

vs

Neural Network Consolidation
(Linking, Binding, Blending, Consolidated)

Shapiro
Node
Frozen

Brief, Belief Focused EMDR
Neural Network
(Whole greater than sum of parts)

Past/Outdated
Isolated

Node (Incident)
(First, Worst, Most Recent)

Node (Neural Network)

Present/Functional
Stage 1: Case Conceptualization

Phase 1: Targeting Sequence Plan
(Linking, Binding, Blending, Consolidated)

1. Identify the presenting symptom
2. Discover its “Root Cause Core Belief”
3. Map out experience resonating with the core belief’s emotions and sensations
   - Past Experiences
   - Present Triggers
   - Future Triggers
4. Identify the preferred present, functional adaptive belief that is the adaptive resolution to all the experiences

Brief, Belief Focused EMDR
Neural Networks

Past/Outdated
Isolated

Node
(Neural Network)

Present/Functional
Adaptive Belief
Stage 1: Case Conceptualization

The Target Sequence Plan
Belief Focused Neural Network Mapping (Kiessling, 2018)

Brief, Belief Focused EMDR

Past/Outdated
- Vulnerable
- Guilt
- Worthiness
- Responsibility
- Control
- Survival

Present

Standard EMDR
- Power/Control
- Safety
- Responsibility
- Guilt
- Shame
Adult Core Belief Clusters
Developmental Plateaus

NEGATIVE / IRRATIONAL

I can’t protect myself.

I do bad things.
I’m not good enough.
I’m a failure.
I should have done something.

I’m unlovable.
I’m worthless.
I’m inadequate.

I’m responsible
(for everything).

I should have done something.
I have to be in control.

I’m powerless.
I’m helpless.
I’m trapped.

I’m discarded.
I’m defective.
I’m abandoned.

I’m alone.
It’s not safe to feel.
I’m unimportant.

I’m invisible.

I’m don’t deserve to exist

ADAPTIVE / PREFERRED

Vulnerability

I can protect myself.

Guilt

I can learn from my mistakes.
I am good enough.
I did the best I could.
I did what I could.

Worthlessness/ Lovability

I’m okay as I am.
I’m okay as I am.
I can accept myself.

Responsibility
Instinct

I can recognize appropriate
responsibility.

Control Instinct

I did what I could.

I can safely let go of some control.
I can recognize what I can
and cannot control.
I can control what I can.
I can control what I can.

Survival Instinct

I can survive / exist / get my needs met.

Toxic
Shame

I have value regardless.
I can get my needs met.
I deserve to exist.
Stage 1: Case Conceptualization

Stage 2: Resource Enhancement

Standard EMDR

Affect Management
- Safe Place

RDI

Brief Belief Focused EMDR

Teach Affect management tools as necessary
- Secure Place
- Securing a Place
- Container
- Mindfullness
- Aroma

Positive Adaptive Network Enhancement
- Resource Focusing
- Extended Resourcing
Stage 2: Treatment

Target Selection

Standard EMDR
Incident Specific

1. 10 worst
   Chronological

2. Symptom:
   • Belief
   • Person
   • Place
   • Thing
   • Emotion
   • Sensation
   • Behavior

3. Target Identification
   • First,
   • Worst
   • Most Recent

4. Processing
   • Touchstone

Brief, Belief Focused EMDR
Neural Network Focused

1. Symptom:
   • Core Belief

2. Target Identification
   • Neural Network

3. Processing
   • Any target within the plan
     • What to process
       • Specific incident
       • Part of the neural network

Target Treatment Plan Summary

Name: _______________________________________. Date: ______/____/_______

Negative Belief                                        Adaptive Belief
___________________________________                _________________________________________

Past

Present

Future

_______________________________
_______________________________
_______________________________
_______________________________
_______________________________
_______________________________
_______________________________

Root Cause___

Closure:

[ ] Breathing.  [ ] Acupressure.    [ ] Butterfly    [ ] Secure Place.    [ ] Container.    [ ] Other

Additional treatment notes
____________________________________________
Stage 2: Treatment

Standard EMDR Target Specific Reprocessing

3 Prongs

Past

Present Triggers

Future Templates

Disturbing Image
NC

Node
(First, Worst, Most Recent)

Channels of Association

Reprocessing
SUD=0

Installation
VoC=7
Clear BS

PC
Stage 2: Treatment

Brief Treatment EMDR

Neural Network Focused
Linking, Binding, Consolidation (Kiessling)

Neural Network Identification
Negative  Positive

Linking, Binding and Consolidation
Functional/Adaptive

I’m lovable regardless!

I’m unlovable

I’m lovable
**Stage 2: Treatment**

**Phase 3: Access & Activate**

**Standard EMDR**

Phase 3: Assessment
(10,20 or more minutes)

Picture
Negative Cognition (identified at this time)
Positive Cognition (identified at this time)
VoC: 1-7
Emotions
SUD: 0-10
Body Location

Do not challenge the cognitive distortion

“Stay out of the way” - Phase 4 Desensitization

**Brief, Belief Focused EMDR**

Phase 3: Access & Activate
(3-4 minutes)

**Worst Part**
Negative Belief (already identified in Target Plan!)
Positive Cognition (already identified in Target Plan!)
VoC: 1-7
Emotions
SUD: 0-10
Body Location*

*EMDR and EMDr, Not EMD^*

“Help discover the way” by clarifying beliefs, outlining negative and adaptive neural networks during Targeting Sequence Plan (Phase 1)
Stage 2: Treatment

Phases 4–6: Processing

**Standard EMDR**

- Phase 4: Desensitization
  - EMDR: Unrestricted Processing
  - 24 or more passes
  - Channels of Association
  - SUD=0

- Phase 5: Installation
  - VoC=7

- Phase 6: Body Scan

**Brief, Belief Focused EMDR**

- Neural Networks

- Phase 4: Processing
  - The Processing Continuum
    - EMD^, EMDr, EMDR
    - SUD >0?

- Phase 5: Strengthening Adaptive Network
  - VoC<7?

- Phase 6: Implicit Memory Integration
  - *The Body Keeps Score*
Stage 2: Treatment

The Processing Continuum

EMD^:

Client cannot manage affect, may dissociate if overwhelmed

Phase 3: Access and Activate: No Body Location

Phase 4: Desensitize a specific incident
  • 5-10 seconds of BLS
  • Breath, Target, SUD 0-10?, Go with that
  • SUD stops decreasing, proceed to Strengthening

Phase 5: Strengthen adaptive belief
  • 5-10 seconds BLS
  • VoC<7

NO PHASE 6: BODY SCAN
  • Body is the umbilical cord to the rest of the neural network
Stage 2: Treatment

The Processing Continuum

EMDr

Client can manage affect, does not want to process the entire neural network

Phase 3: Access and Activate

Phase 4: Process an agreed upon arena
  • 10-15 seconds of BLS
  • Breath, Target, What do you notice?…Go with that
  • SUD stops decreasing, proceed to Strengthening

Phase 5: Strengthen adaptive positive belief
  • 5-10 seconds BLS
  • VoC<7

Phase 6: BODY SCAN - integrate associated sensations*
  • *If sensations are related to the targeted arena
Client can manage affect, is willing to process the entire neural network regardless of the incident targeted.

Phase 3: Access and Activate
Target is the entry point into the neural network.

Phase 4: Process an agreed upon arena
- DAS paced according to client’s non-verbals
- Process entire network, not just target
- SUD=0

Phase 5: Strengthen adaptive positive belief
- 5-10 seconds BLS
- VoCo7

Phase 6: BODY SCAN - integrate associated sensations
- Implicitly stored sensations

EMDR: Unrestricted Processing
- Negative Neural Network
- Positive Neural Network
- Consolidated Adaptive Neural Network
Stage 3: Integration

Complete the Targeting Sequence Plan
- Process Remaining incidents
  - Past Incidents
  - Present Triggers
  - Future Triggers

Complete the Overall Treatment Plan
- Teach additional:
  - Skills
  - Behaviors
  - Attitudes
  - Etc.

Integrative Psychotherapy
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Adaptive
(The Sum is Greater than the Parts)
Integration
Wrap-up

For expanded videos on:
Belief Focused EMDR
The Processing Continuum
EMDR Unchained
and much more
visit:
Roy Kiessling video links at:

www.vimeo.com/emdrconsulting