I. Introduction to Attachment-focused EMDR

* My background and experience. The evolution of my thinking over twenty-five years.

* EMDR and Resource Tapping (Resource Installation)

* Standard versus modified EMDR protocol.
The Five Basic Principles of Attachment-Focused EMDR

* Client Safety
* The Importance of the Therapeutic Relationship
* Client-Centered
* Resource Tapping to Repair Developmental Deficits
* The Use of Modified EMDR (EMDR-M)

Resource Tapping (Parnell, 2008)

* The importance of tapping in resources
* Neurobiological rationale (McFarlane)
* Basic principles
* How to tap in resources
The Four Foundational Resources

* Safe/peaceful place
* Nurturing Figures
* Protector Figures
* Inner Wisdom Figures

Peaceful Place
Protector Figure

Circle of Protection
Integrating the Resources into Treatment

- For Safety and Assessment
- Affect Regulation and Coping
- Help with Anxiety and Self-Soothing
- Creating new Neuro-networks
- Repairing Developmental Deficits
- Interweaves
- Closing Sessions

Suggestions for repairing attachment wounds with Resource Tapping

- Tap in imaginal womb, birth and nurturing/attachment through developmental stages using ideal mother they develop and tap in
- Tap in client’s experiences of nurturing and loving their own children, children they know or even pets
Suggestions for repairing attachment wounds with Resource Tapping

- “If you had a baby/child what would you do to give him/her love?” (include eye contact gazing, interest, facial expressions of adoration, smell, touch) Tap in what they imagine.
- Tap in positive experiences of healing with the therapist, making them explicit.
- Through all of these imaginations the importance of the therapist’s eye contact, voice, touch with the BLS to add new neuro-pathways.

EMDR Trauma Processing

- Establishing safety
- Distancing techniques
- Resources
- Use of the therapist (offering a hand to hold)
  “What do you need to feel safe?”
EMDR Trauma Processing

* The use of touch, eye contact, voice during the reprocessing of traumas
* The use of interweaves to unblock blocked processing (including resources)
* EMDR targets, including the use of the bridging technique (Parnell, 2007)
* Closing sessions

The modified protocol

* Resources
* Picture
* Emotions
* Body sensations
* Negative belief
* Bilateral stimulation – desensitize and reprocess to completion
My discovery and insight: dissociation, not denial

There have been reported successes using this protocol with cocaine, methamphetamine, alcohol, smoking, sex addiction, bulimia, unhealthy relationships and diabulimia.

This protocol only works if there has been a physical, emotional, psychological or social consequence for the addiction or undesirable behavior.

The premise behind this protocol is that the associative link between the desire to use and the use is continually reinforced, and not associated (dissociated) from the consequence of the use.

The purpose of this protocol is to re-associate the link between the urge to use, the use (high), and the consequence of the use.
With this in mind, the protocol can be used in different ways, depending on the client and response. The theory is that when the consequence is re-associated, then the behavior will change. The urge to use will be associated (linked) to an adverse consequence.

The theory is that bilateral stimulation integrates memory networks. By employing continuous bilateral stimulation as the client links the urge to use, the use and the consequence, they will integrate the information that has been stored in different memory compartments. When the information has been integrated, the desire to use will decrease or be eliminated. This is what we have observed clinically in several cases.
Connecting the Consequences Protocol

* Get the narrative of the addictive pattern, using a recent time or a time they can recall well that has a consequence. What led up to it, the urge, the use/high, and the consequence.

* You can get an urge to use score 0-10 no urge to use, to highest urge to use.

Connecting the Consequences

* Ask the client to play the movie in their mind from the beginning of the urge to use, the scoring it, the use, high and the consequence, paying special attention to emotions and body sensations. Use continuous BLS with the movie. Breaks can be taken, but pick it back up and keep going to the end.

* Check in with the client and hear what they say.

* You can run the movie another time from beginning to end.

* Ask for the urge to use 0-10. If still there, run the movie again.
Connecting the Consequences

- Tap in a negative future: Ask your client to “Imagine what your life will be like if you keep doing what you are doing,” then add BLS.
- Tap in a positive future: Ask your client to “Imagine what your life will be like if you maintain your sobriety and healthy lifestyle.” And add BLS

Connecting the Consequences
Other Things You Can Do:

- Install the Negative Consequence: If you want to reinforce the negative consequence more, you can ask the client to bring up the urge to use, then bring up the memory of the consequence and add BLS. This more firmly links them together.
References


References