



Tina* entered the counseling center on April 14, reporting nightmares due to seeing a film that was a psychological thriller. She stated this was a repetitive occurrence whenever she watched horror films, but didn't expect what she seen in this movie. Tina was unable to sleep with the lights off, she couldn't shut her eyes in the shower, and she hated feeling weak and helpless. Based on a first impression of Tina, this was not the woman who was presenting herself to me. She appeared confident and bold. She had heard of EMDR (Eye Movement Desensitization and Reprocessing) and had two weeks to dedicate to treatment.

EMDR is a form of psychotherapy that has a direct effect on the way the brain processes information. When a person is very upset, their brain cannot normally process information. One moment becomes "frozen in time," and remembering a trauma may feel as bad as going through it the first time because the images, sounds, smells, and feelings haven't changed. Such memories have a lasting negative effect that interferes with the way a person sees the world and the way they relate to other people.

EMDR can be thought of as a physiologically based therapy that involves bilateral eye stimulation. It appears to be similar to what occurs naturally during dreaming or REM (rapid eye movement) sleep, yet when we use the eye movements when awake, alert and in control, reprocessing takes place, allowing us to see disturbing material in a new and less distressing way. Following a successful EMDR session, a person still remembers what happened, but it is less upsetting. As a clinician, I cannot make promises of the outcome, as we never know what will come up in the history taking process or during the reprocessing sessions. Tina assured me she didn't have any traumas from her past, she completed some routine testing, and we moved aggressively into therapy.

After gathering extensive information and preparing Tina for the reprocessing, we began the desensitization phase. We started by targeting the beliefs that were triggered when she thought of this incident "I am weak and helpless." She shared that her earliest memory of those thoughts and feelings were from elementary school when she was bullied by another child. She felt the thought of being helplessness came when she informed her father and although he said he would go talk to the parents, he ended up apologizing for her behavior instead of standing up for her. "He should've protected me." At the end of the session, Tina stated that she still felt disturbed by the memory, but the level of distress decreased from a 7 to a 1 on a 0-10 disturbance scale. We were not finished, as the goal is to make sure that this memory no longer disturbed Tina and decrease other negative symptoms that were alive in her life today.

Tina entered the fourth session by sharing frustrations from a heated argument she had with her sister which reinforced her beliefs that she is weak and helpless, "It's like I can't live the life I want to live. I don't feel safe around her." We continued reprocessing these beliefs, but I could see that Tina was not feeling resolve about her thoughts of being weak and helpless. I was realizing that this may take longer than the two weeks she dedicated to her therapy sessions. As she left the session, I reminded her of the self-care and coping skills to use between sessions and encouraged her to continue noticing if she had any new thoughts, beliefs, images or senses.

The next day, session five, Tina came in eager to share a new memory. “Over the weekend my sister said she was so mad at her daughter that she wanted to beat the crap out of her, like dad beat me, and I became very disturbed.” This triggered Tina’s memory of story she was told her own infancy. “My parents always believed in corporal punishment, but one time when I was crying, he hit me so hard that it literally stopped me from breathing.” She went on to share that her parents were worried that he had killed her. She hadn’t thought about it in a while, but realized she felt the same body sensations and feelings of helplessness that she had while reprocessing the other events. She said that she had not thought of this event because through the years, the story had been repeated to her as ‘no big deal,’ so she learned to dismiss the horror of it. I knew this was the target we needed to reprocess.

Tina could feel the tension in her back and the knot in her stomach as we began the reprocessing. She cried, “I was so helpless. I was reaching out to be comforted and instead I got whacked.” We continued to reprocess. “This is why I struggle to share my emotions in relationships today; I don’t feel I have a voice.” We continued. Between eye movements she looked at me with tears of joy, “I can have a voice!” During the next set, her look began to change to that of concern, “I don’t want to be angry with my dad.” Several more sets of eye movements... “If I could’ve told him that I just wanted a hug, I know he would’ve done that for me.” Again... “He is a good man and I do have a voice today.” After a few more bilateral eye movements, Tina was laughing and holding her stomach “My pain in my back is gone! I feel like something has been released!” Tina’s disturbance of her father’s abuse was gone. It didn’t change the circumstances of what happened; but she knew her father to be a good man who did not know his strength with corporal punishment. As we closed out this session, I shared with Tina that it was her brain that did the work; that she uncovered this truth that she does have a voice through the reprocessing on her own. I also informed her that we were not finished; we still need to see where she is with her nightmares and if any other triggers arise. Tina started a new job out of state on April 30, but she is coming back to Ohio in a few weeks and we will continue our work. The evening of that counseling session I received this e-mail from her:

“I felt I had a break through today! It was difficult to relive some of the painful experiences I had long ‘forgotten’, but I felt the dots connecting when they were brought to light in the context of the irrational beliefs I have been dealing with. The other thing I thought was so neat was that I came to that ah-ha moment on my own! I could have read about it, or had somebody tell me about it, and I would have agreed with the logic 100% on an intellectual level. But when I came to it myself from the labyrinth of feelings I was sorting out in the session, I felt I came up to the surface from a deep ocean and found my breath! That feeling was unforgettable and priceless because I know for sure that the positive belief is mine!”

If you would like to know more about EMDR, go to the EMDR International website: www.emdria.org, or contact Leslie Marshall, MA, PCC at 614-865-0513.

*This article was written with the client’s permission. The name has been changed to protect the client’s identity.