

# *Effectiveness Of EMDR Therapy* *- A Positive Refugee Transformation*

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# What is EMDR ?

- Discovered & developed by Francine Shapiro in 1987.
- EMDR is synthesis of many traditional psychological orientation such as cognitive reframing, free association, mindfulness focus on physical sensation.
- Endorsed by WHO (2013)

# What is EMDR ?

- EMDR is linked into the same processing that occurs during REM sleep.
- Shapiro's (2001) - EMDR processes traumatic memories to bring these to an adaptive resolution. Distress is reduced & negative beliefs are reformulated.
- **Eye movements** or other dual attention disrupt working memory, decreasing vividness, resulting in decreased emotionality & changes in somatically stored memory



Sensory stimuli:  
visual, auditory,  
kinesthetic etc.  
• (Sensory Cortex)



Personal Meaning  
• (Pre frontal  
Cortex)



Somatic & Emotional Response  
• (Amygdale)

# What is EMDR ?

- Involves Eight phases of Treatment – from client history , assessment to re- evaluation



# Case Study I



# Case Study I

**Target Image:** Perpetrator said “I will kill you, if you tell anyone”

**Negative cognition-** “I am powerless”

Subjective unit of disturbance **(SUDS)** 0 to 10

**Positive Cognition-** “I can cope with it”

Validity of positive belief **(VOC)**- 1 to 7

**Body scan** -with SUDS with (SUDS)





# Research Studies

- Gunter & Bodner,( 2008). Studies found EM performed to recall unpleasant memories made them less vivid, emotional, and complete .
- Elofsson et al.,( 2008). Studies show that de arousal effects of BLS activates Para sympathetic nervous system while inhibiting sympathetic nervous system.

# Research Studies ( Comparison)

- Jaberghaderi, et al.( 2004). Comparison of CBT and EMDR- both produced significant reduction in PTSD. **However EMDR** used half the number of sessions to achieve results.
- Van der Kolk, et al. ( 2007). A randomized clinical trail of EMDR, fluoxetine and pill placebo in the treatment of PTSD. EMDR was superior to others and upon termination **EMDR group** continued to improve while Fluoxetine group became symptomatic.

# Pain & EMDR

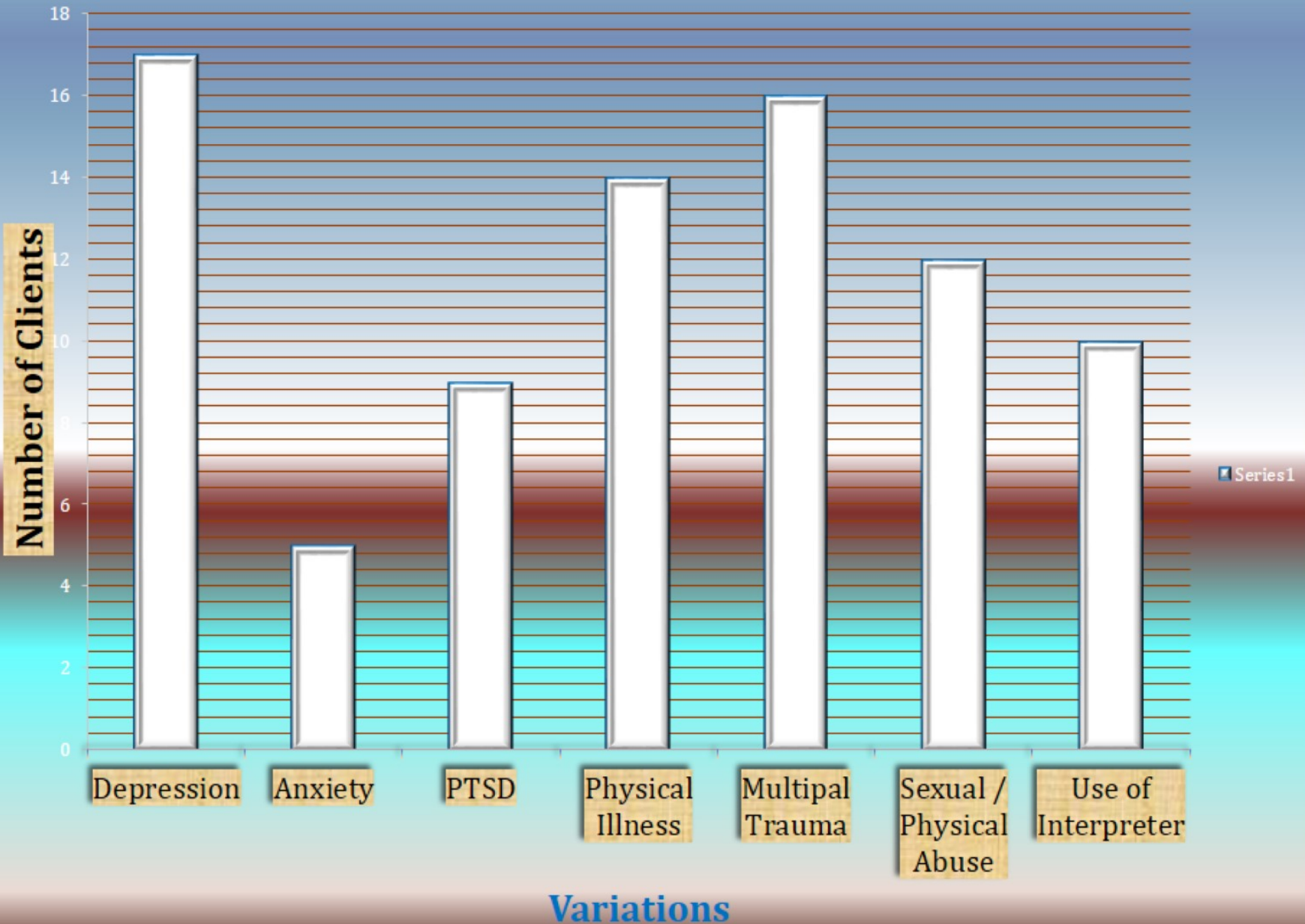
- Most refugees & asylum seekers complain of chronic pain and also experience multiple health problems.
- Grant MD. (2014). EMDR & chronic pain. Post treatment participants reported decrease pain, PTSD & depression symptoms & increased self – efficiency.

# RASNZ CLIENTS

- Clients with diagnosis of PTSD, Major depressive disorder, Panic disorder etc.
- Issues - sexual abuse, grief issues, torture, war traumas, domestic violence, somatic complaints, dissociation ,physical illnesses .
- Clients belonged to different ethnicities such as Congo, Afghanistan, Iraq, Iran, Ethiopia, Eretria, Nigeria, Vietnam etc.



# Mental Health & Physical Illness






# RASNZ CLIENTS

- “I had panic attack in my first session. But now I feel like a new born. I am ready to face challenges in the future”
- I left my 3 months baby in Uganda. Taking medication did nothing. But EMDR changed my life 100%. Now I can drive a car , study & have also lost weight. Even children say I am different now for the better”



# RASNZ CLIENTS



“I thought it was a big joke moving  fingers. Now -past cannot hurt me anymore & feel I have a real life.”

“I was surprised I could watch a recent video of refugees being tortured, without fear. I wanted to kill myself in the prison but now think such things do happen. I recommend EMDR should be given when refugees are in a refugee camp overseas”



# CASE STUDY 2





“I had a very troubled and **traumatised** childhood, attempted suicide and had to escape to NZ in search of a better life.

Prior to my diagnosis of PTSD life was a mirage and I lost hope for the future. I had inner fears and was **unable to handle a knife**. I had constant flashbacks and nightmares. I was scared of sleeping and thought I was **going crazy**.

After months of sessions, I was informed about EMDR. I **doubted its efficacy**. The therapeutic experience changed my life forever.

Initially my body reacted negatively and I had nightmares, **flashbacks**, asthma attacks and headache.



I was able to use a knife for the very first time. I could think of my past and was not triggered. I found **inner peace** and happiness that has eluded me all my life. I could feel a different energy and rejuvenation inside me.

My life has completely changed for the better. Once you **resolve your past** traumas, your future will be a smooth ride. There is **hope for recovery** if you are **bold** enough to seek help.”



# WHY USE EMDR ?

- To avoid clients from being re-traumatized.
- No homework, assignments and speech is not necessary
- It involves use of fewer sessions compared to interventions such as CBT.
- It is easier for clients who are illiterate or clients belonging to different cultures.
- The therapist is only the navigator
- Easy to use with children

# References

- Elofsson, U.O.E. (2008). Psychophysiological studies of EMDR. *Journal of EMDR practice and Research*, Volume 2 (4), 282-288.
- Grant, M.D. (2014). Eye movement desensitization and reprocessing treatment of chronic pain. *OA Musculoskeletal Medicine*, 17;2 (2), 1-30
- Gunter, R., & Bodner, G.E. (2009). EMDR Works...But How? Recent Progress in the search for Treatment Mechanisms. *Journal of EMDR Practice and Research*, Volume 3(3), 161-168
- Jaberghaderi, N., Greenwald, R., Rubin, A., Zand, S.O., & Dolatabadi, S (2004). A comparison of CBT and EMDR for sexually -abused Iranian Girls. *Clinical Psychology and Psychotherapy*, 11, 358-368.
- Shapiro, F. (2001). *Eye movement desensitization and reprocessing: Basic principles, protocols and procedures* (2nd ed.). New York, NY: Guilford Press.



# References

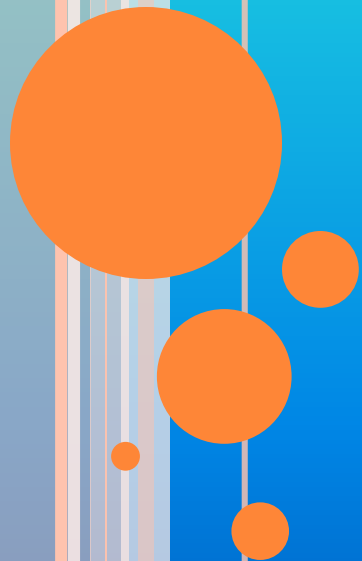
- Van der Kolk, B.A., Spinazzola, J., Blaustein, M.E., Hooper, J.W., Hooper, E.K., Korn, D.L., Simpson, W.B. ( 2007). A randomized clinical trial of eye movement desensitization and reprocessing (EMDR), fluoxetine, and pill placebo in the treatment of posttraumatic stress disorder: treatment effects and long term maintenance. *Journal of clinical psychiatry* 68(1), 37-46.
- Pictures- retrieved- <http://www.canstockphoto.com>

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# RESOURCES ON EMDR

- [www.sonomapti.com](http://www.sonomapti.com)
- [www.emdria.org](http://www.emdria.org)
- [www.emdr.com.au](http://www.emdr.com.au)
- [www.emdr.com](http://www.emdr.com).



# THANK YOU

## ANY QUESTIONS?

