# Description, Objectives, References EMDR Therapy Training: Part II

Discovered by Dr. Francine Shapiro, eye movement desensitization and reprocessing (EMDR) therapy is one of the most researched and utilized methods in the treatment of post-traumatic stress disorder (PTSD) and other forms of human distress connected to trauma. Completing our full basic training approved by the EMDR International Association is a multi-tiered process of which this three-day training is your second part. Part II Training (3 Days= 21 total hours of Lecture and Practicum): Enhanced practicum content, covering best practices for using EMDR Therapy with special populations and in the tricky scenarios of clinical practice; advanced content on ethics and neurobiology also covered, in addition to working with the art of case conceptualization. Day 4 of the training focuses on ethical practice, learning about interweaves, appropriate use of modifications (according to the EMDRIA definition of EMDR). and applying modifications for special populations. By the end of Day 4, participants will have had the chance to practice supervised implementation of some of these techniques. Day 5 instructs participants on specific protocols/targeting sequences, best practices with special populations and clinical situations, and accessing specialty resources and protocols for variously noted populations. By the end of Day 5, participants will experience supervised practice of targeting sequences/protocol for identified special populations/situations. In Day 6 participants will review the neurobiology of trauma, present a clinical case study through the EMDR Therapy/AIP framework, complete supervised practice of practice elements, discuss the characteristics of a strong EMDR therapist, and develop a plan for continued consultation.

#### Learning Objectives with References

By completing this CE workshop, participants will be able to...

#### Part II, Objectives Day 4

• Discuss, in general, what it means to be an ethical EMDR Therapist and list three safeguards for ensuring safe and ethical practice

- Hase, M. (2021).
- o Marich, J., Dekker, D., Riley, M., & O'Brien, A. (2020).

• Explain, in a general sense, the policy of the EMDR International Association condemning the use of EMDR therapy for Sexual Orientation Change Efforts (SOCE)

- Whitehouse, J. (2019).
- EMDRIA. (2022).
- Define interweaves and describe at least three situations where using interweaves are useful in EMDR therapy
  - o Dworkin, Mark. (2003).
  - o Hensley, B. J. (2012).
  - o Hase, M., & Brisch, K. H. (2022).

• Apply three different styles of interweaves and articulate at least three examples for implementation within these styles

- o Dworkin, Mark. (2003).
- o Hase, M., & Brisch, K. H. (2022).
- o Jarero, I., & Artigas, L. (2021).
- Sattaur, O. (2021).

• List examples of situations within EMDR therapy where making modifications may be necessary, especially when addressing abreaction and dissociation in the various phases of EMDR therapy

- Forner, C. (2019).
- Hase, M. (2021).
- o Jarero, I., & Artigas, L. (2021).
- Sattaur, O. (2021).

• Describe the types of modifications that might be necessary and appropriate in addressing dissociation within the clinical setting

- Forner, C. (2019).
- o Garland, E. & Howard, O. (2018).
- Marich, J. (2023).

• Implement the EMDR 8-Phase protocol under supervised practice and receive necessary instruction about interweaves and modifications (implementing accordingly).

- Hase, M. (2021).
- o Santos, I. (2019).

#### Part II, Objectives Day 5

• List the specific protocols/targeting sequences that Shapiro overviews in her seminal text and be able to set them up (e.g., recent events, anxiety and phobia, illnesses and somatic disorders, grief, self-use)

- o de Jongh, A., Hafkemeijer, L., Hofman, S., Slotema, K., & Hornsveld, H. (2024).
- Laliotis, D., Luber, M., Oren, U., Shapiro, E., Ichii, M., Hase, M., LaRosa Salvi, L., Alter-Reid, K., & Tortes St Jammes, J. (2021).

• Discuss the best practices for conducting EMDR therapy with the following groups of people/clinical situations: Children, couples and families, addictions, survivors of sexual abuse, complex PTSD and developmental trauma, military and public safety personnel

- o de Jongh, A., Hafkemeijer, L., Hofman, S., Slotema, K., & Hornsveld, H. (2024).
- o Garland, E. & Howard, O. (2018).
- Marich, J., & Rodriguez, I. (2023).
- o van der Hart, O., Groenendijk, M., Gonzalez, A., Mosquera, D., & Solomon, R. (2014).
- Wise, A. & Marich, J. (2016).

• Discuss, in greater detail and clinical competence, best practices for the specific groups of people/clinical situations that participants are likely to see in their clinical settings

- o de Jongh, A., Hafkemeijer, L., Hofman, S., Slotema, K., & Hornsveld, H. (2024).
- Forner, C. (2019).
- Marich, J., & Rodriguez, I. (2023).
- o van der Hart, O., Groenendijk, M., Gonzalez, A., Mosquera, D., & Solomon, R. (2014).
- Wise, A. & Marich, J. (2016).

• Explain the meaning of anti-oppression in psychotherapy and discuss the role of the EMDR therapist and EMDR therapy is advancing anti-oppression work

- o Day-Vines, N. L., Wood, S.M., Grothaus, T., Craigen, L., Holman, A., Dotson-Blake, K. & Douglass, M.J. (2021).
- o Dinardo, J. & Marotta-Walters, S. (2019).
- o Levis, V. (2022).
- o Lipscomb, A. & Ashley, W. (2021).
- o Lipscomb, A. & Ashley, W. (2022).

• Access resources for obtaining specialty resources and "protocols" for these variously noted populations

- o Jarero, I., & Artigas, L. (2022).
- o Maxfield, L. (2019).
- o Wise, A. & Marich, J. (2016).

• Cultivate the quality of empathy for clients struggling with trauma-related presenting issues as a necessary first skill in building a case conceptualization treatment plan

- o Forner, C. (2019).
- Jarero, I., & Artigas, L. (2022).
- o Santos, I. (2019).

• Complete, under supervised practice, a future template targeting sequence

o Udo, I., Javinsky, T-R., & Awani, T. (2022)

• Implement Phase 8 Re-Evaluation strategies at both a micro-level and macro-level, including (but not limited to): Future template; rechecking Phase 1 Client History; assessing for blocking beliefs; treatment plan review

- Hensley, B. J. (2012).
- Laliotis, D., Luber, M., Oren, U., Shapiro, E., Ichii, M., Hase, M., LaRosa Salvi, L., Alter-Reid, K., & Tortes St Jammes, J. (2021).
- o Santos, I. (2019).

#### Part II, Objectives Day 6

• Discuss the neurobiology of trauma covered on Day 1 of the course in the context of EMDR Therapy and working hypotheses about mechanisms of action

- o Bergmann, U. (2012).
- o Cesario, J., Johnson, D., & Eisthen, H. (2020).
- o Hill, M. D. (2020).
- Pagani, M., Hogberg, G., Fernandez, I., & Siracusano, A. (2014).
- o Patel, G. J., & McDowall, J. (2016).
- Van Veen, S., Kang, S., Van Schie, K., (2019).
- Present a clinical case study for the participant's clinical practice through the EMDR Therapy/AIP framework
  - Chamberlin, D. E. (2019)
  - Hill, M. D. (2020).

• Complete, under supervised practice, any remaining practice elements that a participant may need to attend to using EMDR therapy.

- o Maxfield, L. (2019).
- o Santos, I. (2019).

• Explain EMDR therapy to a client in a general sense and provide clients with adequate informed consent for EMDR therapy

- o Hill, M. D. (2020).
- Maxfield, L. (2019).
- Discuss the characteristics of strong EMDR therapists
  - Laliotis, D., Luber, M., Oren, U., Shapiro, E., Ichii, M., Hase, M., LaRosa Salvi, L., Alter-Reid, K., & Tortes St Jammes, J. (2021).
  - Marich, J., Dekker, D., Riley, M., & O'Brien, A. (2020).

• Evaluate any issues that a participant may need to address to better capture these qualities of strong EMDR therapists

o Marich, J., Dekker, D., Riley, M., & O'Brien, A. (2020).

• Develop a plan for continued consultation and formation as an EMDR therapist after the completion of the training course.

o Marich, J., Dekker, D., Riley, M., & O'Brien, A. (2020).

## Timed Outline EMDR Therapy Training: Part II 8:00am – 4:30pm EST each day

#### Day 4: Advanced Work with the Standard Protocol—Interweaves & Ethics

Introduction & Orientation to Second Half of Course (8:00am-8:30amEST) Issues for the Advanced EMDR Practitioner: Ethics & Interweaves (8:30am-9:45amEST) Break (9:45am-10:00amEST) Supervised Practicum: Working with Interweaves (10:00am-12:00pmEST) Lunch Break (12:00pm-1:00pmEST) Issues for the Advanced EMDR Practitioner: Abreactions & Dissociation (1:00pm-2:30pmEST) Break (2:30pm-2:45pmEST) Supervised Practicum (cont.) (2:45pm-4:30pmEST)

### Day 5: Special Populations and Situations in EMDR Therapy

Questions and Discussion from Day 4 (8:00am-8:30amEST) Working with Special Populations (8:30am-9:45amEST) Break (9:45am-10:00amEST) Supervised Practicum (10:00am-12:00pmEST) Lunch Break (12:00pm-1:00pmEST) Working with Special Populations (cont.), Case Conceptualization Exercise Part I, Phase 8: Re-Evaluation-Enhanced Logistics, Explaining EMDR to a Client (1:00pm-2:30pmEST) Break (2:30pm-2:45pmEST) Supervised Practicum (cont.) (2:45pm-4:30pmEST)

#### Day 6: The Art of EMDR Therapy and Case Conceptualization

Questions and Discussion from Day 5 (8:00am-8:30amEST) The Neurobiology of Trauma: Implications for EMDR Therapy & AIP Review (8:30am-9:45am) Break (9:45am-10:00amEST) Supervised Practicum (10:00am-12:00pmEST) Lunch Break (12:00pm-1:00pmEST) Case Conceptualization Exercise Part II, Blocking Beliefs & Treatment Planning, Final Wrap-Up: The Art of EMDR Therapy & Continuing Consultation/Training (1:00pm-2:30pmEST) Break (2:30pm-2:45pmEST) Supervised Practicum (2:45pm-4:30pmEST)

\*\*For start times other than 8:00am EST, please adjust accordingly.

#### **CE/Continuing Education Credit Information**

This is live interactive training. This is a beginner level course. Attendance at all live sessions, and course evaluation is required to receive CE Certificate. Course evaluations are made available after all live sessions have been completed within this course portal. Upon completing the evaluation, participants will be able to download their CE certificates.

Each 3-day course is approved for 21 CE credits by the following approval agencies (a total of 42 for both Part I and Part II):

#### **EMDR International Association**

Amber Stiles-Bodnar Consulting is an approved provider of continuing education in EMDR Therapy by the EMDR International Association (EMDRIA) in conjunction with The Institute for Creative Mindfulness who licenses the training curriculum. Approval: #10002.

#### American Psychological Association

Amber Stiles-Bodnar Consulting maintains responsibility for this program and its content and is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists.

#### National Board of Certified Counselors

Amber Stiles-Bodnar Consulting has been <u>approved by National Board of Certified Counselors (NBCC)</u> as an Approved Continuing Education Provider, ACEP No. 7170. Programs that do not qualify for NBCC credit are clearly identified. Amber Stiles-Bodnar Consulting is solely responsible for all aspects of the programs.

#### State of Ohio Counselor, Social Worker, and Marriage and Family Therapist Board

Amber Stiles-Bodnar Consulting is an approved provider of continuing education by the State of Ohio Counselor, Social Worker, and Marriage and Family Therapist Board (OCSWMFT) for counselors, social workers, and marriage/family therapists. Approval Number: #RCST032001

#### **REFERENCES**

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https://www.emdria.org/about-emdria/emdr-international-association-policies/ Forner, C. (2019). What mindfulness can learn from dissociation and dissociation can learn from mindfulness. *Journal of Trauma & Dissociation, 20*(1), 1-15.

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