

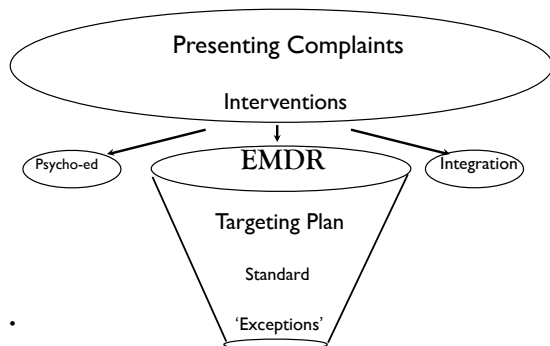
LECTURE 8

THE PROCESSING CONTINUUM

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ROY KIESSLING, LISW
EMDRIA Approved Training Provider
&
Consultant
roykiessling@me.com

Bio-Psychosocial Intake



EMDR Considerations

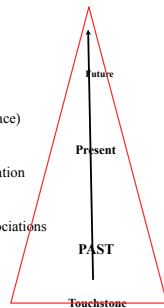
- Case Conceptualization
- Clustering & Targeting Sequence Planning
- Clinical Judgement
 - Resourcing
 - Processing
 - Target Selection
 - (Past, Present, Future)
 - Processing Management
 - Standard, Contained, Restricted

What if...?

- The client experiences
 - Assaults
 - Disaster
- The Environment
 - Disasters
 - War zones
- The client doesn't want to
 - Symptom reduction
- The Referral Source
 - Managed Care
 - Workman's Comp

Single Incident, Symptom, or Multiple Symptoms EMDR's Standard Eight Phases, 3 Prongs

- History**
 - In-depth, biopsychosocial Intake
 - Client Selection Criteria
 - EMDR Phase 1: Targeting Sequence Plan
- Preparation (Phase 2)**
 - Mechanics
 - Calm Place (Affect Management Skill--Calm Place)
- Access and Activate (Phase 3)**
 - Target, NC,PC VoC, Emotions, SUD, Body Location
- Desensitization (Phase 4)**
 - Free Association, non-directive, channels of associations
- Installation (Phase 5)**
- Body Scan (Phase 6)**
- Closure (Phase 7)**
- Reevaluation (Phase 8)**



EMDR Standard Protocols (Francine Shapiro)

1. Presenting Complaint (Core Belief or other Symptom)

2. Past

Touchstone

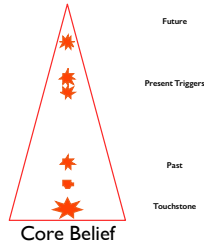
Worst

3. Present

Triggers

4. Future

Anticipated Anxieties



- STANDARD PROTOCOLS (aka EMDR) --Standard 8 Phases and 3 Prong Processing

- R-TEP-- Expanded Recent Events Procedures useful for acute stress situations in 'now-stable' environments
Current/on-going 'unstable environment' situations (being explored/researched)

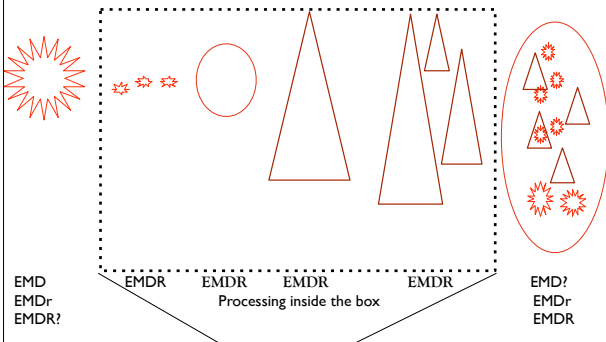
- A-TIP --Acute Traumatic Incident Procedures --minimal history, single incident, symptom reduction, unwilling, unable, or clinically inappropriate for full EMDR 3 Pronged Protocols

Contained (aka EMDr) ---8 Phases/3 prongs but contained processing (Phase 4) focusing on only **target specific** channels of association,

Restricted (aka EMD)--Restricted processing, focusing only on the target (**no associated channels**) and SUD's & VoC, **No** body scan

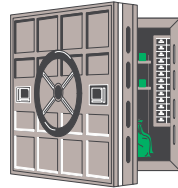
RECENT EVENTS--Incident presents as 'fractionated' - multiple 'mini-target' initial

Acute RE Single Symptom Multiple Complex



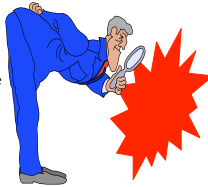
Developing & Enhancing a Container

- Steps
1. Image
 2. When used or how would it feel if you could
 3. Enhance
 4. BLS
 5. Cue Word-BLS
 6. Self-cuing
 7. Cuing w disturbance
 8. Self-cuing w disturbance
 9. Practice
 10. Re-evaluate



Contained/Restricted Processing Hierarchy

- Symptom Focused Targeting
 - Acute present stress
 - Present focus
 - Unwilling to address past
- History
 - Informed decision
- Preparation
 - Container, firewall, reprocessing resource
- Reprocessing
 - Hierarchy
 - Standard
 - Contained
 - Restricted



- **Standard:** EMDR (free association)

"Take a breath, let it go, what do you get now?"



- **Contained:** EMDr (back to target)

"Take a breath when you think

of __, what do you notice now?"

is it now from 0-10?"



Contained Processing



Contained Processing Review - Q&A

- Phase 1: History
- Phase 2: Preparation (Container... Stop Signal)
- Phase 3: Activate/Access
- Phase 4: Desensitization (Back to Target...SUD>0?)
- Phase 5: Installation (Target Specific, VoC <7?)
- Phase 6: Body Scan (Clinical Judgement)
- Closure
-

- **Restricted:** EMD (target & SUD)

*"Take a breath, let it go, when you think
of ____, your negative thought, how disturbing
is it now from 0-10?"*



Every 3-4 sets:

"What are you noticing now about the incident?"

- **CAUTION:** Excessive contamination-STOP

Restricted Processing Considerations

- Stop Signal
- Desensitization
 - SUD > 0
- Installation
 - VoC < 7
- Body Scan?



Restricted Processing



Contained Processing



Contained Processing



Restricted Processing Review - Q&A

- Phase 1: History
- Phase 2: Preparation (Container... Stop Signal)
- Phase 3: Activate/Access
- Phase 4: Desensitization (Back to Target...SUD>0?)
- Phase 5: Installation (Target Specific, VoC <7?)
- Phase 6: Body Scan (Clinical Judgement)
- Closure
