PHASES 3–6: RESTRICTED PROCESSING

TARGET SELECTION:
Refer to the Targeting Sequence Plan Summary Worksheet

Core belief schema ________________________________

Selected target ________________________________

INSTRUCTIONS FOR RESTRICTED PROCESSING (EMD):
“I’m going to read a series of questions to remind us of the incident we have chosen to start processing today.”

“After that, I will begin the eye movements. Generally, I’ll do this for about 10 to 15 seconds and then stop. During the stimulation, just focus on the incident.”

“When I stop, I’ll ask you to rate, from 0 to 10, where 0 is no disturbance and 10 is the highest disturbance how disturbing the incident feels now, and then I’ll repeat the stimulation.”

“We’ll do that about three or four times and then I’ll ask you to briefly describe what’s changing about the incident. We’ll repeat that cycle as long as the disturbance decreases.”

“Once it has stopped decreasing, we’ll focus on your adaptive belief and strengthen it the best we can. We may or may not work on how you will handle other aspects of the incident.”

STOP SIGNAL / BACK-TO-TARGET REMINDER
“Remember, you have a stop and back to the incident signal that you can use any time you want to stop or refocus your attention on the [name the chosen target] ________________ .”

“You also have your [name the stabilization / containment skill that has been developed], __________________________ any time you’d like to use it.”

PHASE 3: ACCESSING AND ACTIVATING CHECKLIST
(Restricted Processing; Kiessling, 2010)
TARGET:
“Today we have decided to work on________________________. Does that still fit?”
[If not] “What fits now?” ________________________________

WORST PART:
“Tell me the worst part of the incident?” ________________________________

NEGATIVE BELIEF (NC):
“We had decided your negative belief was [name the NC] ______________________. Does that still fit or is there a better one now?”

POSITIVE BELIEF (PC):
“We had decided that you would like to believe [name the PC] ______________________. Does that still fit or is there a better one now?”

VoC:
“When you think of the incident, how true do the words [name the PC] __________feel to you now on a scale from 1 (totally false) to 7 (totally true)?”
1  2  3  4  5  6  7

EMOTIONS:
“When you think of the incident and [name the NC] ________________________, what emotions are you feeling now?”

SUD:
“On a scale from 0 (no disturbance) to 10 (highest disturbance), how disturbing is it now?
0  1  2  3  4  5  6  7  8  9  10

BODY LOCATION:
“Where do you feel it in your body?” ________________________________
PHASE 4: RESTRICTED PROCESSING (a.k.a. EMD)

**Step 1.** Set up the experience in order to begin processing.

“Bring up the incident, those negative words, and where you feel it in your body and follow my fingers.” [rapid and brief sets (approximately 10 to 15 round-trips) of BLS]

**Step 2.** “Return to target” and “take an SUD” after each set.

“Take a breath, let it go. As you think of the incident, how disturbing is it now, 0 to 10?”

**Step 3.** As soon as client reports his/her level of disturbance, begin another set of BLS.

“Go with that.” [rapid and brief BLS, 10 to 15 round trips]

**Step 4.** Repeat steps 1 to 3 (above) three or four times.

**Step 5.** Every fourth set:

“Take a breath, let it go. What is different about the incident now? On a scale of 0 to 10, how disturbing is it now? Go with that.”

**Step 6.** Repeat steps 1 to 4 above as long as the level of disturbance is decreasing.

CAUTION: If the client uses his/her stop signal more than twice, stop processing.

**Step 7.** Ecological validity: Processing may not result in a SUD = 0.

Proceed to Phase 5: Installation (strengthening the positive belief bundling) when SUD is ecological (i.e., consistent with the situation).

PHASE 5: INSTALLATION

**Step 1. Recheck the positive belief:** “Does the original positive belief [repeat the original positive belief developed during EMDR treatment planning] still fit, or is there one that fits better now?”

**Step 2. Take a VoC:** “Hold the original incident and the positive belief together. Now, on a scale from 1 (totally false) to 7 (totally true) how true does it feel?”

1 2 3 4 5 6 7

**Step 3. Process with BLS:** “Go with that.” [BLS; 10 to 15 round-trips processing speed]

Repeat until the belief integrates to an adaptive level (i.e., consistent with the situation).

A. If the VoC < 7? (VoC may not fully integrate to a 7—ecological.)

“What keeps this from going to a 7?”

“What is the worst thing that would happen if it were to go to a 7?”

“What would help it move closer to a 7?”

PHASE 6: BODY SCAN

**Step 1.** If processing has been uninterrupted and complete (i.e., SUD = 0 and VoC = 7), then consider doing a body scan.
If not, proceed to the next target, debriefing, integration, or closure.

Step 2. “As you think of the event and your positive belief, scan your body and tell me if you are experiencing any tension or disturbance.”

Step 3. If the client reports some tension or disturbance, ask: “Do you think this is related to the event we have been processing or something else?”

Step 4. If only related to the event, do a set of BLS (processing speed) and then ask for another scan. Repeat until the client reports no change.

“Focus on those body sensations and follow my fingers.” (BLS-processing speed)

“Take a breath, let it go. What do you notice now?”

Continue process as long as the client notices any negative or disturbing sensations.

Body scan phase is complete when the client reports neutral or relaxed body sensations.

CAUTION: If memories arise other than the agreed-upon target, stop and move into debriefing and closure

PHASE 7: CLOSURE

CLOSING AN EMDR (BLS) SESSION

• Time management
  • Use clinical judgment regarding how much time is needed to stabilize the client before ending the session.
  • Inform the client it is about time to stop.
    • “It is about time we stop. Would you like to do one more set or stop now?”

• Stabilization
  • As needed, consider interventions to stabilize the client.
    • Stabilization / affect management resource / guided imagery exercises

• Debrief
  • New insights / connections / memories / what has been learned
  • Instruct the client that processing will continue after the session so he / she should note responses to triggers, changes in behaviors, dreams, insights, etc.