

EMDR History Taking

Here we need to build up a formulation of why the client has come to be the way they are..... Remember that EMDR is not just about phases 3 and 4, it has 8 phases, and each phase is important.

Phase 1 – History taking

For therapists new to EMDR it is important to really listen to the client: this may sound obvious but when you have the new EMDR protocol on your mind, it is not easy to fully listen.

If you are aware early in the history taking that the client has a complex history and/or that they struggle to manage their emotions, go straight to phase 2 and practice some resourcing/emotional management techniques, before returning to the history taking. You may need to move back and forth here between phases one and two for complex cases to keep them in their window of tolerance.

Using the three-prong approach Past/Present/future

Present

Here you want to know what has brought your client to therapy now. How is it affecting their life? including relationships/work/hobbies, etc.

List their symptoms e.g. nightmares, intrusive thoughts, avoidance, panic/anxiety, relationship problems Etc.

Past

When did this problem or these difficulties start? where did their difficulties come from in the past? What has led them to be the way they are now?

If possible, identify the touchstone memory (First/earliest), and memories that can be clustered for example bullying, parental criticism, and things with the same theme for example "I am unlovable." Where have you learned that you are unlovable? What has happened in the past that has led you to believe that?

Or

Start a timeline (headlines only, not going into the story) being aware of your client's window of tolerance, the more complex the client, the smaller their window of tolerance. When completing a timeline add a timeline of positive/good memories also, these can often be used as a resource later in therapy.

Future

By the end of therapy what would they like to be different? – set goals. Keep this positive, for example avoid goals like 'I want my nightmare to stop', and change them to 'I want to have restful sleep and/or sleep through the night for more than half the nights of the week. ' Keeping it realistic and specific; it is not realistic for anyone to sleep well and sleep through the night every night of the week.

Resources - Is the client resilient? have they had past experiences that they have overcome and coped well? Do they already have some positive resources for example meditation, yoga, attending walking groups, and exercise classes. Are they able to relax/use relaxation techniques? Do they have people around them for support? Can they self-soothe when distressed?