Looking Through the Eyes: EMDR & Ego State Therapy Across the Dissociative Continuum

Sandra Paulsen, PhD

Dr. Sandra Paulsen is a world renowned speaker, writer and consultant on EMDR and preparation procedures since 1992. She is author and illustrator of Looking Through the eyes of Trauma and Dissociation: An Illustrated Guide for EMDR Therapists and Clients. Her recently published children’s book is, All the Colors of Me: My First Book About Dissociation, co-written by Ana Gomez. A new book to accompany her early trauma workshop: When There Are No words: EMDR for Very Early Trauma and Neglect. Dr. Paulsen is a fellow of the ISST&D, and was invited presenter at the 2010 Japan EMDR Association annual conference in Kobe, Japan and Master Series lecturer for the 2004 EMDRIA conference in Montreal. As a EMDRIA Certified Consultant she contributed to the 2010 Revision of the ISST&D Treatment Guidelines and the EMDR Task Force on Dissociation basic EMDR text. Dr. Paulsen teaches workshops worldwide.

When: March 10-11, 2018
Where: Coast Victoria Hotel & Marina
146 Kingston Street
Victoria, BC Canada

Questions: Michelle Gay, M.A., RCC, CCC
Phone: 250-412-5921
Email: michelle@arippleaffect.com
Website: arippleaffect.com
Eye Movement Desensitization and Reprocessing

Eye Movement Desensitization and Reprocessing (EMDR) was originated by Dr Francine Shapiro in 1987. EMDR has been established by extensive scientific and clinical research as an effective treatment for Post Traumatic Stress Disorder (PTSD). It has application beyond PTSD to other life experiences which had a negative learning outcome. It can be used to help establish self esteem, confidence, and to release attachments to out of date loyalties and unresolved baggage. EMDR typically involves left-right eye movements, or auditory or tactile stimulation. It can be accomplished using either equipment or the practitioner may move her hand left to right to cause the client’s eyes to move. This causes disturbing material to come forward in the client’s awareness, enabling it to be resolved adaptively. For information on the scientific status of EMDR, please go to www.emdr.com.

EMDR involves the following steps, if people are not dissociative. 1) Client History, 2) Preparation (when indicating, strengthening a safe sense, resourcing the client and ruling out red flags contraindicating proceeding EMDR), 3) Assessment of the memory, image, negative belief about the self, the positive belief one wishes to hold instead (and how valid it seems at the outset), the emotion and the body sense of the memory, and the level of disturbance at the outset. 4) Desensitization with bilateral stimulation, whether eye movements, auditory or tactile stimulation is chosen by the client, 5) Installation of the desired positive cognition when it is ready to be received and strengthened, 6) closure and 7) follow up. See "looking through the eyes" for the steps for more dissociative individuals. For dissociative individuals, Paulsen has published the ACT-AS-IF phases of treatment and the ARCHITECTS steps of EMDR for dissociative individuals, which includes fractionation and ego state methods.

Ego State Therapy

Ego State Therapy was originated by Dr Jack Watkins and the late Helen Watkins. They found that giving a voice to disowned or dissociated aspects of self enabled resolution of long-standing internal conflicts. Although it is sometimes practiced with formal hypnotic induction, it need not be. Dr Paulsen uses an imaging method called Dissociative Table (George Fraser's) to access ego states. Dr Paulsen has also collaborated with Dr Watkins, presenting on EMDR and ego state therapy in several international professional venues, including the Eye Movement Desensitization and Reprocessing International Association (EMDRIA), the American Society for Clinical Hypnosis (ASCH), the Society for Clinical and Experimental Hypnosis (SCEH) and the International Society for the Study of Dissociation. Ego state therapy typically involves identifying key parts of self involved in internal dynamics related to resistance to change, inner conflict, self-sabotage, child-like behavior, avoidance, criticalness, and/or many other presenting problems (certainly, anxiety, depression, anger, shame, trusting others, attachment, are all on the list). Using a powerful method called dissociative table and other methods (hypnosis is sometimes used), it is possible to identify and work directly with the young parts that are mobilized around these long-standing issues. Ego state therapy honors those functions and their reason for being, hears their concerns, needs, and fears, appreciates their survival function, and when indicated, helps them update their "job description" to be more in current time. We don't get rid of parts, though they sometimes choose to blend with other parts and the work progresses.

Integrating Ego State and Other Methods Into EMDR

EMDR can be combined with other therapies, but only if the integrity of the EMDR model is maintained. This workshop reviews specific ego state and other techniques and presents them in the context of how they may be appropriately combined with EMDR while maintaining the integrity of EMDR. Paulsen’s ACT-AS-IF and ARCHITECTS methods enable the integrity of EMDR to be maintained while fractionating the work and emphasizing stability and safety.
About the workshop

Dr. Paulsen describes how to work with dissociative clients using a phased approach to promote stabilization and containment before introducing EMDR therapy. A measured approach is also used to maximize safety for clients with dissociative tendencies. This workshop is open to all licensed mental health professionals.

Limitations of the Standard EMDR Protocol

Although EMDR is efficacious in the treatment of PTSD, for dissociative clients, the standard protocol of EMDR is not appropriate and can cause serious clinical setbacks. This is because EMDR can lance dissociative barriers prematurely and cause flooding, when the volume of material accessed exceeds the capacity of the client to process the material. Additionally, when EMDR clinicians are untrained to screen for and recognize dissociation, and are unaware that special procedures are necessary for the safe and effective use of EMDR with dissociative clients, the risk is compounded. The middle of an EMDR session is no time to discover an undiagnosed dissociative disorder, to discover that dissociative disorders really exist, or to try to establish rapport with alter personalities disoriented as to time, person, and place.

LEARNING OBJECTIVES

Participants will be able to:

1. Explain why and when to assess every client for degree of dissociation prior to doing EMDR and choose an appropriate protocol.
2. Utilize a phased approach to therapy, including EMDR when and where appropriate, for complex dissociative clients.
3. List six tactics for stabilizing clients, prior to doing EMDR for dissociative clients to increase rapport, increase soma tolerance, contain affect, orient to present circumstances, reduce inner conflict, and build coping resources.
4. Prepare for EMDR processing using ego state and other methods to clarify roles and plan the work.
5. Structure EMDR sessions using imagery, ego state interventions (and somatic methods, for the second workshop) for pacing, fractionating and trouble shooting the work.
6. For the somatic version of the workshop, list several somatic interventions to assist with various phases work with dissociative clients.
COURSE REGISTRATION
LOOKING THROUGH THE EYES: EMDR AND EGO STATE THERAPY ACROSS THE DISSOCIATIVE CONTINUUM

***14 EMDRIA CE REQUIREMENTS***

EMDRIA REQUIRES COMPLETING THE COURSE IN ITS ENTIRETY. FOR THIS TRAINING, ATTENDANCE FROM 9:00AM-5:30PM ON MARCH 10 & 11, 2018.

FULL NAME: ____________________________________________________________________________
UNIVERSITY: ____________________________________________________________________________
REGISTERING BODY: ____________________________________________________________________________
COMPLETED EMDR BASIC TRAINING? YES [ ] NO [ ]
IF YES, PLEASE PROVIDE DETAILS
___________________________________________________________________________________________
___________________________________________________________________________________________
PREFERRED MAILING ADDRESS:
___________________________________________________________________________________________
CITY: __________________________________________________________ STATE/PROVINCE: __________________

NAME TAG INFORMATION:
NAME __________________________________________
ORGANIZATION __________________________________________
LOCATION __________________________________________
DO YOU HAVE ANY ALLERGIES? PLEASE SPECIFY.
___________________________________________________________________________________________

PLEASE MAKE PAYMENTS OUT TO MICHELLE GAY. SEND REGISTRATION FORM AND PAYMENT TO:
MICHELLE GAY
923 SELKIRK AVENUE
VICTORIA BC
V9A 2T9

REGISTRATION FEES (ALL FEES LISTED IN CANADIAN FUNDS). INCLUDES TWO LIGHT LUNCHES, MORNING/AFTERNOON REFRESHMENTS (Blue Crab Catering)

WORKSHOP FEES
PAYMENT OPTIONS: CHEQUE, BANK DRAFT, MONEY ORDER, E-TRANSFER

IF YOU ARE IN THE U.S, YOU MAY SEND CHEQUE OR MONEY ORDER. PLEASE CONTACT MICHELLE GAY AT MICHELLE_ARIPPLEAFFECT.COM IF YOU WOULD LIKE TO SUBMIT PAYMENT USING PAYPAL.

EARLY BIRD UNTIL February 1, 2018 AFTER February 1, 2018
$375 [ ] $425 [ ]

NOT FOR PROFIT RATE

EARLY BIRD UNTIL February 1, 2018 AFTER February 1, 2018
$325 [ ] $375 [ ]

TOTAL ENCLOSED: $ __________

PLEASE NOTE: Sponsor may cancel or postpone the workshop due to under-enrollment, presenter illness or inclement weather. Cancellations/Changes and Refunds: Fees for late arrivals, and early departures will not be refunded. 50 PERCENT REFUND Fees will be refunded, less a $30.00 processing fee, if cancellation or change resulting in a refund is received in writing no later than MARCH 2, 2018. After that date, fees are non-refundable. All refunds will be processed within 2 weeks after the workshop. $25 fee charged on cheques returned by the bank due to insufficient funds. Check with sponsor about late registration.