



EMDR: A Trauma Treatment

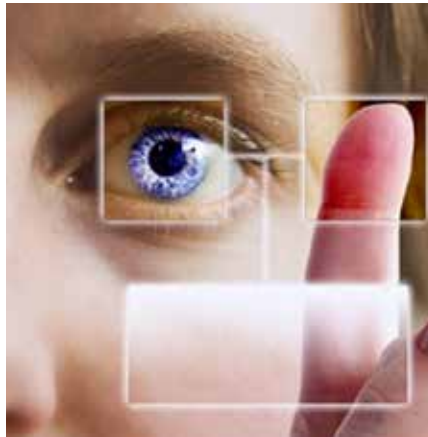
I'd like to introduce a treatment for trauma that has increasingly demonstrated to be helpful for first responders and members of the military: Eye Movement Desensitization and Reprocessing (EMDR), which is a mouthful, to say the least.

I won't bore you with all of the psychobabble behind it, but hope to offer a useful description of something that might help you or your co-workers one day. I think it is a timely discussion, given the number of first responders whose struggles with mental health issues contributed to their suicides over the last year. I don't think this treatment will resolve that issue – as there is much more to be done with prevention, police culture and support – but I believe it can significantly reduce the disturbance first responders experience following traumatic events.

EMDR was created by Francine Shapiro in 1987. Its use has increased drastically in the last decade, largely due to the widespread success of its application to military members exposed to traumatic events while at war. It's been found to reduce posttraumatic stress symptoms in first responders, accident and assault victims and victims of many other traumatic incidents. To explain how it is believed to work, I must first describe how the memories of traumatic incidents are stored in the brain. Again, I'll keep the psychobabble to a minimum.

When facing a traumatic event, the information-processing part of the brain, the cortex, is hijacked by the emotion-processing and storing part, the amygdala. This interrupts the brain's ability to properly store the event in memory. Instead, it is stored as an emotional memory in bits and pieces – a smell, face, flash of the scene, etc.

Since the story is fragmented, the brain doesn't realize it has ended and keeps sending



the person reminders because it thinks the threat is ongoing. This is why there might be flashbacks, nightmares and other ways of re-experiencing the traumatic event. The brain thinks it's doing you a favour by continually bringing these fragments back to your attention to be dealt with.

EMDR is believed to help the brain put these fragments together. The eye movements, which I won't describe here because they should be facilitated by an EMDR-trained clinician, are believed to stimulate both sides of the brain while you're thinking about the most salient fragment of the trauma and your interpretation of it.

The image, your thoughts, your emotional reactions and any physical sensations are all pulled together to integrate the event into a whole. You are then able to properly store the whole memory in your brain, adjust your skewed interpretation of it and, consequently, become desensitized to it. This lowers your disturbance level, usually to the degree that it is not disturbing at all.

The reprocessing aspect entails you being able to use the information processing part of your brain, the cortex, which was hijacked at the time of the event. In this way, you have integrated your understanding of the event, which might include resolving unfair self-judgements that tend to exacerbate traumatic reactions.

This process will not make you forget your trauma nor make you indifferent to a loss. You may still be sad about a loss, but that would be appropriate. What EMDR does is give you relief from environmental triggers, extreme emotional distress and any self-reproach that might stem from the event. EMDR works whether the traumatic event was last week or 25 years ago.

I've actually worked with clients whose traumas were more than 20 years ago and they were astonished at how different they felt about the event after just one EMDR session. EMDR is also useful for events beyond the large, discrete traumas police officers face on the job such as some of the smaller, ongoing, complex events that are disturbing.

Sound too good to be true? I agree but I have read the research and, more importantly, I have seen how well it works with my own eyes. I have even had it myself. Attempts to discredit it only serve to offer more support because it worked too well to not be considered effective. Theories of it being a placebo effect have also been tested and ruled out. Its effects are permanent since the memory is believed to be integrated.

If you or someone you know is struggling with a distressing event, I would urge you to read more about EMDR and find an EMDR-trained counsellor. I want to emphasize that this is not something that a counsellor is doing to you. This is something your brain wants to do anyway (hence all the reminders it keeps giving you of the event) and it simply needs some facilitation to complete the process.

One session won't do it all but it will make an appreciable difference, motivating you to continue until you can put the event behind you. Making EMDR available to all first responders, coupled with organizational support and a shift in the police culture that discourages help-seeking, could make a dramatic difference in the number of police officers suffering from the effects of traumatic events.

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