

EMDR DIALOGUE PROTOCOL

EMDR Reprocessing

With Attachment Disorders & Complex Trauma

Integrating Ego State Work and EMDR Reprocessing

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Content

- **Attachment /Complex Issues with Complex Trauma**
- **Challenges For EMDR Trauma-Reprocessing In Phase 3**
- **A Psychodynamic Perspective Helps To Understand Difficulties**
- **The DIALOGUE PROTOCOL: A Field-Tested Psychodynamic Approach To Foster & Enhance Reprocessing Core Issues**

Challenges in Phase 3

Problems in developing adequate cognitions

Difficulties With Cognitions:

- Can Not Find Adequate And Meaningful PC
 - **Emotional Deactivation &**
 - **Mental Blocking** In Search Of PC
- **Confusion In Time Perspective** “Today **Or** Then And There?”
- **Affective Load With Either NC Or PC**
 - No Interaction NC And PC, though formally correct
 - Exist “Beside” Each Other (As If Different Stories)
 - PC Formalistic, Emotionally Irrelevant, Uninspiring for New Self)Perspective (not addressing the core issue of NC)

Challenges in Phase 3

Problems in developing adequate cognitions

The more complex the disorder and the topics envisioned for reprocessing, the higher the challenges in Phase 3

All implicit aspects of incidents:

- Attachment issues / disorders
- Related dysfunctional attachment styles incl. IWM for Self
- Emotional abuse (distortions of self image)
- Shame-based picture of disorder
- Neglect
- Chronic Violence
- Dissociative / Strong Ego State - Phenomena

Challenges in Phase 3

- **Common difficulty that hinders successful application of EMDR**
 - **lack of understanding about the role of cognitions**
 - **as consequence, an impasse in finding adequate and emotionally relevant PC**

Challenges in Phase 3



Confusion With Reluctance/Avoidance To Use
EMDR With Complex Topics



“More” Stabilization ?

Use “Other” Techniques Or Protocols?

Skip The PC?

Reminder: High Drop Out Rate Of Colleagues Learning EMDR And Not Using EMDR
With Complex Issues!

Is the standard perspective too narrow?

Standard: **Activation Of The “Target” memory** =
Incident, Image, NC ,PC, Affect, Body Sensation

Where are:

- Related Attachment Modalities?
- Related Internal Working Model(s) (Image Of Self & Image Of Self In Relation)?
- Related Dissociative Structures?
- I.E. : Activated Ego States / Parts?

➔ Broader perspective needed

Phase 3 Much More Than Activation Of Target Memory
(= Real Incident) With Its 4 Modalities:



***Activation Of Implicit Intrapsychic Dynamic
Corresponding To Target Memory / Cluster***

**Urgent Need For Psychodynamic Understanding Of
Role Of Cognitions In EMDR Phase 3**

➔ Broader perspective needed

Attachment In Phase 3

“Unhappy and disturbed interactions within the attachment relationship with the primary caregiver result in the *development of multiple Internal Self- and Object-Representations instead of a cohesive and integrated Self Representation and attachment style*”.

(J. Bowlby in G. Liotti, 2006)

Neurobiological Model Phase 3

Two Neural Networks involved

Activation Trauma Network =

Target Memory With

- Sensory
- **Cognitive (NC)**
- Emotional
- Physiological

+ Attachment Issue (IWM)
+ Dissociative - /Ego State
Structure !??

= «Bottom Up» Information



Network Of «Present-day-self»

Working Memory (Le Doux)

- Involving Prefrontal Cortex
- Perspektive Of Here And Now
- New Evaluation Capacity
- New Integrative Capacity

= **Positive Cognition PC**

= „Top Down“ Information

Failure Of Coordinated Learning Of Involved Neural Networks
Not Sufficiently Connected With Each Other = No Adequate Top Down Message

Psychodynamic Perspective

- **NC = Self/Object Image Of IWM**
- **NC Implies Dissociation Of Healthy Self-image =**
Thus Difficulties To Find PC
- ***Crucial With PC: «How Would You Like To Think About Yourself Today?» Whom Do You Ask?***
- **Dissociation Often Enhanced, Not Addressed**

Psychodynamic Perspective

- More Or Less **Subtle Dissociation** Between Self Images / Relational History (IWM) Of Target Memory = Ego State & Present Day Self
- PC Formally Correct **But Without Emotionally Relevant Connection / Relation / Perspective**



- **Challenge To Work Towards Integration** (Prerequisite For Effective Reprocessing)

➔ Psychodynamic Perspective

Cognitions Should Address The Activated Implicit Memories & Intrapsychic Interactions:

- **Ego State /EP (Dissoc. structure)** ↔ ***Present Day Self***
- Attachment Memory / IWM** ↔ ***Present Day Self***
(re-enactment attachment style ANP with EP)
- **Keep both neural networks open via Cognitions for
adequate top down message**
- **Ego State = bottom up message** ↔ **Present Day Self =
top down message**

Psychodynamic Perspective

- **NC** ⇒ **IWM With Related Self - Image**
- **PC** ⇒ **Statement Of Present Day Self / ANP**
 - Work On “Relation” To Ego State / EP
 - Present Day Self Often Relates To Ego State Internally As Learned From Attachment Figure
 - Quality Of Relation Between NC And PC Reflects Internalized Attachment Pattern
 - Enhance internal attachment quality via **Attunement Of PC Towards NC**
 - Go into Dialogue = Give Answer That Helps And “Makes Sense” To Ego State

Psychodynamic Perspective

Develop Cognitions As True Interaction Of

- ➔ **Ego State And Present Day Self**
- ➔ Diverging Representations Of Self (IWM)
- ➔ Diverging Attitudes Rel. Attachment History

*Use Cognitions As Internal Dialogue
For
Multidimensional Reprocessing*

➔ EMDR DIALOGUE PROTOCOL

Approach: Solve Problem Where It Is Created

➤ **PC = Direct Explicit Answer Of Present Day Self /ANP**

In 2nd Person Singular To NC

➤ **Cognitions** ➔ **Internal Dialogue**

➤ **Reprocessing Starts In Phase 3 With Developing Cognitions!!**

➤ **DIALOGUE PROTOCOL** : Reprocessing Is Explicitly Shared Mission Of The Ego State & Present-Day-Self

EMDR DIALOGUE PROTOCOL

Positive Cognition

***Formulated As Direct Statement In The 2nd Person
Singular***



- ***Positive Information From Prefrontal Cortex “Top Down” To The Motivational Systems***
- ***Intrapsychic Attachment Work Between Present Day Self & Traumatized Self (Ego State)***
- ***Intrapsychic Reparation Of The (Subtle) Dissociation***

EMDR DIALOGUE PROTOCOL

- **DIALOGUE PROTOCOL** Consequence Of Psychodynamic Understanding Of Phase 3
- **PC = Central Piece Of Inner Dialogue And Healing Process In Complex Trauma Issues**
- Direct Answer Of Present-day-self (PC) “**Relates**” In True Sense To The Ego-state (NC)
 - Activates & Enhances Integrative Capacity Of Present-Day-Self
 - Activates & Enhances Intrapsychic Relational Interaction (Healing Dissociation Of Positive Self Image)
 - Enhances Simultaneous Activation Of Both Neural Networks

EMDR **DIALOGUE PROTOCOL**

The **DIALOGUE PROTOCOL Enhances**

**Adaptive Information Processing And Works Towards
Integration Simultaneously On Three Different Levels**

- **The Experience Of The Past**
- **The Dissociative / Ego State Structure**
- **The Attachment Disorder On Intrapsychic Level**

The Detailed Steps ...

1.Step:

To Start, If No Ego-state Work Done Before:

“Let Us Assume For This Moment, That Two Parts / Sides Of Yourself Are Present Here Right Now:

One Part Is The One That Went Through This Experience In The Past And The Other Part Is The Person That You Are Today”.

The Detailed Steps ...

2.Step: Find Worst Image And The NC

“The Younger Part /The Part That Went Through The Experience : Can You Say What Is The Worst Image/Moment Of That Experience”.

...

“What Negative Thought Or Belief Does The Affected (Younger) Part Have About Her-/Himself, What Negative Belief / Opinion About Yourself Belongs To That Image / Moment?”

The Detailed Steps ...

3.Step :

Therapist: “Good, And Now I’d Like The Younger *Part To Listen For A Moment To The Answer / Evaluation That The Adult Part Of Today Will Offer*”.

The Detailed Steps ...

4.Step: Finding The PC

“And Now, Can You, The Person That You Are Today, Please Formulate An Evaluation / Alternative View, Thought / Opinion About The Experience And Your Younger (Affected) Self From Your Perspective Of Today. Ideally, Please Use A Phrase In Direct Speech “You Are...you Have.”

(PC Contains Information About Relational Capacity Of Present-Day-Self Towards Ego-State)

The Detailed Steps ...

5.Step

Therapist: “ Now I’d Like The Adult Part To Stay Present And Listen Again To The Younger Part”.

The Detailed Steps ...

6.Step Ask For VOC:

“And Now, I’d Like The Younger Part To Decide, How True And Plausible The Words, He/She Just Heard (Repeat PC), Feel To Her/Him Now, When Thinking Of The Image And Of The Words She/He Said About Her-/Himself....

1 Means : I Do Not Believe Her/Him At All, Is False

7 Means : I Do Believe Her/Him Fully, Is True“

(VOC Information About Relational And Attachment Quality Of Younger Self Towards Adult Self)

The Detailed Steps ...

- ***Precondition For Successful Reprocessing
Intrapsychic Attachment Quality “Good Enough”
Giving Feeling Of Connectedness / Support &
Safety***
- ***The Adult Part Must Have Sufficient Empathy And
Affect Tolerance On Her/His Side To “Hold”
Relation***

The Detailed Steps ...

7.Step: Therapist Speaks

Activation Of Affect And SUD:

“Now Can The Younger / Affected Part Tell, What Feelings Are There, When Thinking Of The Image.. And Those Words...”

Sud:

“How Upsetting / Disturbing Does He/She Find These Feelings (Right Now). 1 Means Not Distressing At All, 10 Means Extremely Distressing”.

The Detailed Steps ...

8.Step:

Activating Body Sensations:

“And Where In The Body Do You Both Feel This Now?”

“The Adult Part Will Now Come Along With The Younger Part And Stay Present. Both Of You, Think Now Of ... And Follow My Fingers.

(Alternatively: Both Parts Look Through The Eyes And Follow My Fingers...)

The Detailed Steps ...

Difference to Standard Protocol:

- Do not read the exact words from your sheet (will be supplied)
- Remember: this is a dialogue – also inner (younger) parts involved (therapist is role model)
- Use a language that is adequate also for younger parts and that is natural, like asking normal questions

The Detailed Steps ...

If Cognitive Interweaving Necessary:

- **As Much As Possible, Use The Present-day-person As Inner Helper:**
- *“Stay Present With Your Younger Part, Go With Her / Him And See How You Can Help...”*
- *“What Could The Adult Say To/Do For Younger Part?”*
- *“What Kind Of Support Would Be Helpful / Useful For The Younger Part Right Now?”*

Style Of Cognitions **DIALOGUE PROTOCOL**

Formally Correct, Cognitions Are A **Dialogue!**

- **NC And PC Can Have Several Aspects:**

- 1. Aspect Of PC Is Supportive With Empathy, Appraisal And Esteem:**

“You Are Lovable, Everything Is Ok With You, I am so sorry for you... ” = Attachment Healing, Affect Regulation

- 2. Aspect Is Informative, Factual, Valuing The Situation:**

“You Did What You Could; You Made The Best Out Of It; We Are Free Today; I Will Protect You/Us Today; You Can Rely On Your Own Thoughts / Feelings; It Was The Responsibility Of The Others, I will take care of our protection today...”

Style Of Cognitions **DIALOGUE PROTOCOL**

Specialty with psychodynamic Dialogue Protocol:

Keep It Flexible With The Phrasing!

*Remember: This Is Part Of Emotional Reprocessing
And Very Dynamic, So No “Formula”, “No Bones”,
No “Abstract Terms” Are Required Or Helpful!*

Style Of Cognitions **DIALOGUE PROTOCOL**

- No discussions with client about “correct” formulations!!
- No “Showing of the List”!
- You filter the Cognitions out of what Client says – let it stand!
- If needed: add suggestions for positive information about IWM between Younger Part and Present Day Self
- Ask for acceptance and fine tuning. That’s all.

Why Does It Work?

- **Cognitions Dialogue Between The Two Parts
Enhances & Supports Intrapsychic Emotional Relation
(Attachment Healing)**
- **Both Neural Networks Explicitly Activated With
Interactive Direct Speech**
- **The (Subtle) Dissociation Is Directly Addressed And
Helps Client Stay Present**

Conclusions

DIALOGUE PROTOCOL :

*Supportive For Successful Reprocessing In Complex Trauma
& Attachment Issues*

*Support for internal affect regulation while working with
intensive affective load*

Thus

EMDR can be used earlier in treatment of Complex Trauma

*EMDR More Effective And Efficient In The Treatment Of
Complex Trauma*

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DIALOGUE PROTOCOL Papers:

- EMDRIA Deutschland e.V. ● Rundbrief Nr. 19
3/2009
- Journal of EMDR Practice and Research, Vol 5,
Nr 3, 2011