



Recovering from the Holidays with EMDR

by Constance Wilkinson

Sure, we all love the ho-ho-ho-holidays. Even though we know we may be triggered by them, we go charging straight into them anyway, replete with festive food, festive lights, shiny wrapping paper and decorations, bright lights, chocolates and all, hoping for the best, fearing the worst... and winding up afterward with a mildly traumatic smattering of both.

What else can we do?

We can prepare for the usual roundup of holiday stressors by making a plan of action before anything happens, or we can just let whatever happens, happen, sort of Zen-like, and deal with it after the holidays are done. Certainly by New Year's, whatever could happen has happened, and we are left to deal with the end of year detritus. We move on and make our New Year's resolutions.

But what will those be?

Sometimes the road forward begins with a road back, taking the road less traveled, as poet Robert Frost said, and that making all the difference.

This time of year is a time for reflection, and for making changes grounded on what we let ourselves notice, letting one part of ourselves notice some things that another part of us might really rather not see.

Everyone experiences painful events throughout their lifetimes; everyone experiences trauma of some flavor or some duration or some depth. This is the nature of the human experience. It is normal; it is unavoidable.

We are all subject to birth, old age, illness, death; we are all subject to impermanence; we all suffer. We cannot choose our painful experiences, but we can choose our response. Often, the best response is to allow ourselves to choose awareness, and from that, to choose to take action.

One way of choosing to cope with painful experiences is working with those experiences through a method of therapy called EMDR.

EMDR is an unusual and effective treatment for symptoms of PTSD, post-traumatic stress disorder. Unusual in that, like aspirin, while we know that it does work, we don't really know how that happens.

It is also unusual in that, unlike talk therapy, the method requires certain specific kinds of brain stimulation: bilateral tapping, bilateral eye movements, alternating sounds.

Effective in that it works to relieve severity and frequency of PTSD symptoms: flashbacks, numbing/avoidance, and hyperarousal (such as hypervigilance, anxiety, panic, irritability, angry outbursts.)

I first heard about EMDR when I was in graduate school, studying clinical counseling psychology at Lesley University. One of my colleagues told his story of recovering from a traumatic event, the suicide of a friend, by seeing a therapist who used EMDR. He called it "the finger waggle."

He said it was amazing how something so peculiar as using his eyes to follow the fingers of his therapist, as she moved them from side to side, could actually provide a sense of emotional relief from an event that had bothered him for many years. But it did.

This intrigued me, so I signed up to take the next two-day EMDR Institute training in Cambridge, organized by Francine Shapiro, Ph.D., who developed the EMDR technique in 1987. On the first day, the EMDR trainer outlined the protocol for the technique.

Later, we therapists split up into pairs and practiced on each other. To do this, we needed to identify a minor traumatic event we wanted to work on. I found that part all too easy. Besides being in graduate school, I was also working at a residential school where the young patients often became violent toward the staff: screaming, kicking, spitting, punching, and tantruming.

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The incident I chose to work on with EMDR was an incident where one of the teens in the program escalated suddenly, then physically slammed me, hard, into the wooden door of the kitchen. That memory was vivid and painful in my mind. Thinking about it made me wince; it was like remembering being in a car crash.

My partner followed the technique we had been taught. At a certain point, I needed to hold the image of the event in my mind, and then follow a series of passes, from right to left at eye level, being made physically by my partner a foot in front of me. He made a group of 12-24 passes. Then there was a pause. Then he did another group of passes. Paused. And repeated this process a number of times.

Pretty strange, I thought. How is this going to work? Why would it? How could it?

EMDR stands for "Eye Movement Desensitization and Reprocessing," and that's what this process did for me in that training session. In a matter of half an hour, this painful personal memory had somehow been transformed into an event that I still remembered, but remembered at a distance. It no longer triggered an emotional reaction. It was remarkable, and I suddenly understood the sense of relief my colleague must have felt, which had struck him so profoundly.

In turn, I used the EMDR process on my partner, and was surprised – as he was – when, part way through the protocol, tears began to well up in his eyes as he was processing his traumatic event, an argument with a lover from long ago. He told me that he'd had no idea he was still carrying such a deep emotional burden.

As things continued on, we worked the memory through to its end and by then his tears had stopped. Relief had started, and the look on his face showed the change that had happened.

That was back in early 2000. I took the Level Two training by the end of the year. I've been using EMDR as a central clinical tool in my practice of psychotherapy ever since. It's not my only tool: I also use expressive arts, clinical hypnotherapy, TFT, CBT, whatever seems the best fit for the person.

When the holidays roll around, I think about making changes in my life. To me, it's a crucial holiday task, making an honest heart-felt assessment and asking two important questions about my life:

What do I want less of? What do I want more of?

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