



HOW I USE EMDR ONLINE

Dr Naomi Fisher
EMDR Consultant and Facilitator (EMDR-Europe)
Clinical Psychologist
naomicfisher@gmail.com

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WHO AM I AND WHY AM I TALKING ABOUT THIS?

Clinical Psychologist

I've used EMDR since 2005, EMDR consultant since 2012 and facilitator since 2018.

I've worked in complex trauma services, primary care and IAPT, as well as in neurodevelopmental teams, private practice and with the Metropolitan police.

In 2018 I moved to France, and realised I couldn't work as a clinical psychologist there until my title was recognised.

I started working online but found that without EMDR I felt I wasn't offering such a good service.

I started experimenting with preparation techniques and then moved onto using the full 8-phase protocol.

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I LEARNT THE THINGS THAT CAN GO WRONG THE HARD WAY



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BUT PATHS WALKING



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THIS ISN'T THE ONLY WAY, OR NECESSARILY THE BEST WAY

There will be many other ways which will work too.

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BEFORE THE SESSION

- Make your life easy. Use one platform. I use Zoom.
- Don't sweat the small stuff. This isn't your clinic room, for many clients we won't be able to reproduce the same conditions. We need it to be good enough.
- You may or may not want to send out guidelines
- Clients are often anxious. Be confident that this can work and that even if it's tricky for them to get connected, it will be worth it.
- Always have a back up - phone number, Skype ID, What's App, whatever works.

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THE FIRST SESSION

- You may need to sort out technical issues. See this as part of the introductory work and establishing the space.
- It may initially feel like more of a home visit. You may meet multiple members of the family and people may wander in and out.
- Check what device they are using. Zoom can be used on any device where they can get email so many clients may use their phones. They need to be able to prop it up.
- Check their battery won't run out.
- Check who else is in the room.

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RISK

- You may not be able to create a safe space for processing in a person's home.
- You can't do physical grounding online.
- You can't stop a person from leaving if you are really concerned about their wellbeing. They can cut the connection at any time.
- You can record the sessions easily if you are worried that what you say might be mis-reported. Zoom will not record you without your knowledge. Clients may record us without our consent but this can happen in person too.
- Do your usual risk assessment, and make a plan if necessary. Know what you would do if someone becomes very distressed and you couldn't help them calm down. This will be different for each person.

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WAYS TO MAKE IT SAFER

- I encourage dissociative clients not to close their eyes when processing online. With their eyes closed, if the sound goes or their headphones break, you lose all communication.
- Enlist a co-therapist if one is available (again, this is for dissociative clients). Have their phone number so you can call or text them.
- Ask clients to find their own grounding equipment - a cushion, a squishy or stress ball, something to smell, something to remind them of where they are.
- You can always say no. If you don't feel that EMDR would be safe, then don't do it. Use your clinical judgement.

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HOW DO I DO BLS ONLINE?

- They can't follow your fingers online and you can't follow their eyes.
- Tapping together works well, and you can vary the speed. You need to add some sort of ending.
- Butterfly tapping is another alternative. You can do it yourself and they will copy you.
- My mantra with online work is Keep it Simple.
- They can download a free app (e.g. Sleep Restore Based on EMDR by Mark Grant) and then they can use headphones on their own smartphone.
- This works best if they aren't also using the smartphone to talk to you.
- There are various apps which therapists can download and share with clients. I haven't used these because tapping has worked fine.

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WHAT DOES IT LOOK LIKE?

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THERAPEUTIC CONSIDERATIONS

- Leave space and time for the transition from in-person.
- The unexpected will happen. Roll with it.
- We may find ourselves the focus of anger from clients who wish they didn't have to meet us online.
- Start with preparation techniques to see how it goes. Install a supportive team. Develop resources. You still need to do everything you would do in person - start with the safe space, the 8-phase protocol and the three-pronged approach.
- The Flash technique (Philip Manfield) is particularly good online in my experience, and you can use it if you aren't sure about full EMDR.
- Progress to trauma processing when you and they are confident.

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WHAT WILL BE DIFFERENT?

- No buffer zone - help your clients create one.
- Things will go wrong and you may well be interrupted.
- Online work is more intense - your session might feel longer.
- Give yourself a buffer zone.
- You might be very surprised at how powerful it can be.

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WHAT'S GREAT ABOUT WORKING ONLINE?

- We can offer therapy to people who can't access it otherwise.
- It enables us to be very flexible.
- Clients feel more relaxed in their own homes or own environment.
- People can be around the session without being 'in' it - particularly good for children and young people.
- It means we can continue to work and clients can continue to benefit from EMDR.

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CASE STUDY (ALL IDENTIFYING DETAILS HAVE BEEN CHANGED)

- Mary, woman in her mid-30s.
- Was planning training for her multi-national company on their policy on sexual assaults when she started having flashbacks. 'a heavy feeling on my chest'. She was in a role where junior employees brought their concerns to her, including those around sexual harassment and assault.
- Had had experiences which she had not considered previously assault - but which included being locked in a room for several days by an ex-partner. When organising the training she had a sudden realisation that she had been assaulted and raped.
- Now felt that she wouldn't be able to work and kept thinking of the assaults.
- Lived in central Africa, and had no access to EMDR locally.
- Described herself as 'very artistic' and loved to draw.

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ASSESSMENT AND RISK

- Mary reported no dissociation and had no history of childhood trauma. She had a supportive family whom she was in close contact with. She was able to draw a safe place (on an island), and we installed that successfully.
- She was able to find a confidential space to do the processing (in a room at work) and her life was stable.
- She was highly motivated to engage.
- Our internet connection was good enough although sometimes we couldn't use video and had to work just with audio.
- I therefore felt comfortable with going forwards and using EMDR online with her.

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A TRIANGULAR TEAM

- We installed a supportive team. She chose three women. An assertive woman she had known from work, another nurturing colleague, her mother 'who makes me feel I have all the time in the world'.
- Spontaneously she visualised the three women standing in a triangle.
- During the installation she said that the triangle was a shield, and having those women on her side meant that she could take off her armour. She said she had a feeling of power and energy in her hands, and that she could lift off the 'crown of disappointment' she felt she wore and let it go.



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STARTING EMDR PROCESSING

- We used a time line to make a map of the work we would be doing. She reported several traumatic periods in her adult life, including a relationship which was abusive (and during which she was sexually assaulted).
- We agreed to start by processing the most distressing memory.
- I was led by her in choosing which memory to start with.
- She chose to process the memory of supporting a junior employee after he had been sexually assaulted. Image was seeing his face when he came to tell her what had happened. We used tapping.
- NC was 'I am powerless'. PC was 'I did my best'. Used tapping to process. During the processing the PC changed to 'I was a good friend'. SUDS came down to zero from ten.

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I WANT MY GLOW BACK



- The next week she came back with a story board that she had drawn about all the events in her life which she felt were important.
- She drew herself going through her life, gradually collecting traumatic experiences into a backpack, which got bigger in each picture.
- She also drew a glow inside herself which she felt was diminishing as her life continued.
- I asked her to go through the story board and we did some BLS on each page - a bit like a frame by frame but using her drawings. We turned each page and then I tapped whilst she either just looked at the page or told me the story of that part of her life.
- At the end she said 'My glow was when I had all these dreams I wanted to reach. Following the dreams means letting go of other things'.

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ENDING

- She went back to edit the training document which had triggered her in the first place, and found that it was no longer threatening and didn't upset her. The flashbacks had gone.
- She felt she had discovered that the answers to the questions she had about her life went way back, but that she had the power to live her dreams in her every day life.
- She said she had reconnected with who she was and what was important to her.
- She felt we had unpacked things she had been carrying for years.
- She was able to continue working but also made a plan that in ten years time she wanted to be doing something different and working for herself.

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POWERFUL THERAPEUTIC WORK IS POSSIBLE ONLINE

- You can create a therapeutic environment online, and it may even feel more powerful than your clinic room.
- It will be different, but this isn't always a bad thing.
- This is a time of great uncertainty and anxiety for everyone.
- In the short term, our work is likely to be helping our clients stabilise and manage their anxiety. We can use preparation and stabilisation techniques.
- We can then progress to doing full EMDR online.
- If we face our anxieties, we can help our clients face theirs.

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PROCESSING THE BACKPACK



- Next session she came back with a new picture, of her backpack. It was huge and heavy, and it had all her traumatic experiences inside it.
- We processed the backpack. NC was 'I am broken'. PC was 'I can put this down'. SUDS were 10.
- We took several sessions to process the backpack and she drew it again every time, slightly differently.
- Things poked out of the backpack, her feelings and sensations, and we processed them as they came.
- During the processing the backpack grew bigger and then started to shrink. She ended with the image of a small suitcase and said that she felt that this was what she needed to carry with her for now. SUDS were 0.
- Bubbles started to surround the small suitcase with the word 'Live' in them. We installed that.



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OUTCOME

- PTSD: IES-R: Assessment: 34, First session: 29, Final session: 0.
- Depression: PHQ-9: First session: 6, Final session: 1
- Anxiety: GAD-7: First session: 1, Final session: 0.

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THANK YOU AND GOOD LUCK

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