

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

By Ignacio Jarero and Lucina Artigas

November, 2017

The present protocol is an adaptation of the standard EMDR-IGTP for early intervention (Jarero & Artigas, 2009). Jarero et al. (2011a; 2011b, 2012) used Shapiro's (2001) adaptive information processing (AIP) model in their conceptualization of the nature of ongoing traumatic events that occurred over an extended time in which there was no posttrauma safety window for traumatic memory consolidation. They have argued that acute trauma situations are related not only to a time frame but also to a *posttrauma safety period* as well. This point of view expands the horizon of the EMDR therapy-based early interventions for individuals and groups.

They believe that this type of ongoing traumatic stress situations requires a different kind of EMDR treatment approach that the used for events with a posttrauma safety period. Therefore, Jarero et al. (2014), adapted the standard EMDR-IGTP for early intervention to treat adolescent (13 to 17 years old) and adult populations living with ongoing traumatic stress with no posttrauma safety period. The adaptation changes the way that the targeted memory is selected, and it was made to allow for the identification, targeting and processing of the continuum of multiple traumatic experiences faced by this population and not only one target per session.

With the EMDR-IGTP-OTS, individual EMDR treatment can be provided in a group setting to small (3-15) or large (16-50) groups of patients who have been through *the same type of ongoing or prolonged traumatic events* (e.g., sexual abuse or severe interpersonal violence), *at-risk personnel* (e.g., agencies and NGOs staff dealing with natural disasters and violent conflicts, emergency response personnel, military on duty), *life-changing experiences with ongoing traumatic stress or extreme stressors* (e.g., refugees, internally displaced persons, long term disasters, prolonged violent conflicts or terrorism), or *diverse ongoing trauma histories with unifying circumstances in common* (e.g., chronic or severe illness; individuals, couples and families with ongoing domestic violence situations that have not been resolved and are still unsafe to some degree).

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

PHASE 1: CLIENT HISTORY

The history taken phase for each participant must be obtained on individual basis previous to the group treatment following Dr. Francine Shapiro (2001) recommendations: *“Effective treatment with EMDR demands knowledge both of how and when to use it. The first phase of EMDR treatment therefore includes and evaluation of the client safety factors that will determine client selection. A major criterion for the suitability of clients for EMDR is their ability to deal with the high levels of disturbance potentially precipitated by the processing of dysfunctional information. Evaluation therefore involves an assessment of personal stability and current life constrains”* (p.70), and also EMDR Basic training procedures and protocols.

If the participant(s) or their parents (for adolescents) reported “red flags” (e.g. signs of dissociative disorders, ongoing suicidal or homicidal ideation, self-harm, substance abuse, diagnosis of psychotic or bipolar disorder, organic mental disorder, complete lack of structural (social) and functional (family) support, and significant cognitive impairment) that may complicate treatment of the distressing event(s) that will be addressed during the group protocol, these participant(s) will not participate in the group protocol and must receive individual therapy as soon as possible.

Informed consent should be obtained during this phase and before starting any activity with participants. In the case of attending minors, their parents or legal guardians must sign the consent.

Assessment Scales should be applied at least three times: pre – treatment; post- treatment (7 or 15 days after treatment); and follow-up, three months after treatment.

If preparation activities such as mindfulness, yoga, artistic expression, etc.; are conducted prior to the EMDR therapy reprocessing; it shall be applied a first assessment, called Baseline Measure, before these activities begin.

In these cases, after the preparation activities and immediately before the beginning of the group reprocessing sessions, the second assessment must be conducted; this will be called Pre-Treatment Measure

PHASE 2: PREPARATION

For the therapeutic work with adolescents and adults, it is important to keep in mind all the preventive measures and suggestions made in the Group Protocol for children.

We recommend a ratio of 1 member of the Emotional Protection Team (EPT) for every 8-10 participants.

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

If you will be working with a small group of adolescents or adults (up to 10), the work area must be equipped with enough chairs for both the EMDR Therapy team members (EPT) and the participants.

Chairs must have an accessory (paddle) to place the paper and the colored pencils (crayons), to be used during the protocol. The chairs can be arranged in a circle and the EPT members will sit distributed around it.

If there are not suitable chairs or there are a larger number of participants, tables can be placed in rows as in a classroom or in a horseshoe shape.

It is important to have a board or flipchart (a tripod with a large white paperboard) with the appropriate implements for writing in them; also it is important to have several boxes or small packages of tissue and a box of 6-8 crayons (they are better than colored pencils because their resistance) for each participant.

The Emotional Protection Team (EPT) members welcome the participants, saying hello in a culturally appropriate manner, in order to establish rapport.

The EMDR-IGTP Team Leader, introduce him/herself and all the EPT members

Say: *My name is _____ (state name). I want to introduce you to our Emotional Protection Team (EPT): She is _____ (state name) and he is _____ (state name and introduce each member of the EPT). We are here to help you with the emotional aspects of the experience you are currently living. Thank you for giving us this opportunity to serve you.*

Ask to turn off electronic devices:

Say, *“We would appreciate if you take this opportunity to turn off any electronic devices, in order to enhance the proper functioning of the group work today... Thank you.”*

Explain the Adaptive Information Processing System (AIP) to the participants and ask about the symptoms they have had. This explanation must be simple, using a comparison between the Digestive System and the AIP.

Say, *“We can digest a light meal with no problem, but when we eat heavy food like _____ (give examples of traditional food), is hard to digest and causes symptoms like _____ (ask the participants for examples)...”*

Yes, in the same manner, heavy information such as the experiences you are currently living, is difficult for the brain to digest and causes symptoms, for example, what type of symptoms have you noticed since the day of the event until now?”

It is important not to force anyone to talk.

When everyone had spoken, the Leader normalizes symptoms by saying the following:

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

“All the symptoms you have mentioned are normal examples of your brain’s processing system trying to assimilate the experience you are living.”

Assessment Scales

If there has not been applied any assessment Scale yet:

Say, *“Please answer this questionnaire (or questionnaires). If you have any doubt, a member of the Emotional Protection Team can help you.”*

Teach Self-Soothing Exercises

Say, *“The following exercises you will learn are going to help you to feel better. During the exercise, the EPT members will take care of everything, so you are welcome to relax and close your eyes if you would like to do so.”*

One of the EPT members leads the following exercises:

a) ABDOMINAL BREATHING

Say, *“Imagine you have a balloon inside your stomach which inflates when you inhale and deflates when you exhale...focus all your attention in this exercise. If anything distracts you, gently return to the exercise.”*

Do this exercise from 3 to 5 minutes.

b) CONCENTRATION EXERCISE

Say, *“When you inhale and exhale mentally repeat: I know I am inhaling...I know I am exhaling ... focus all your attention in this exercise. If anything distracts you, gently return to the exercise.”*

Do this exercise from 3 to 5 minutes.

c) PLEASANT MEMORY

Say, *“Remember a moment when you felt happy or peaceful...Once you have found this memory, put your right hand on the center of your chest...Now, allow those good feelings and positive physical sensations expand throughout your body. Focus all your attention in the good feelings and sensations... If anything distracts you, gently return to the exercise.”*

Do this exercise from 3 to 5 minutes.

Use the Five Steps Technique for asking the participants to open their eyes:

**EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR
ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).**

Say: *"We are in five and you are in that pleasant memory ... Now, we are in four and you start returning to this space ... We are now in three and you can feel the ground with your feet and the chair with your thighs and back ... Now we are in two and when you are ready open your eyes ... Now we are in one and we can stretch pleasingly."*

Note: At the beginning of each group reprocessing session, they must practice these three exercises. It only takes around 15 minutes.

END OF THE SELF-SOOTHING EXERCISES.

NOW TEACH THE BUTTERFLY HUG (BH).

The BH is a self-administer Bilateral Stimulation (BLS) method (like the eye movement or tapping) to process traumatic material for an individual or for group work.

Say, *"Cross your arms over your chest, so that the tip of the middle finger from each hand is placed below the clavicle or the collarbone and the other fingers and hands cover the area that is located under the connection between the collarbone and the shoulder and the collarbone and sternum or breastbone. Hands and fingers must be as vertical as possible so that (the fingers must point toward the neck and not toward the arms). Now interlock your thumbs (to form the butterfly's body and antennas) and the extension of your other fingers outward will form the butterfly's wings.*

Close your eyes or keep them partially opened, focusing on a spot ahead. Next, alternate the movement of your hands, like the flapping wings of a butterfly.

Breathe slowly and deeply (abdominal breathing), while you observe what is going through your mind and body (thoughts, images, sounds, odors, feelings, and physical sensations), without changing, judging or pushing your thoughts away. You can pretend what you are observing is like clouds passing by."

Do this exercise for one minute only.

Say: *"Please slowly stop the Butterfly Hug."*

The Team Leader asks the participants how they are feeling:

Say: *"I would like to know how you are feeling now"*

SUBJECTIVE UNITS OF DISTURBANCE SCALE (SUDS)

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

Now the participants shall be familiarized with the Subjective Units of Disturbance Scale (SUDS):

Say: *“The disturbance is characterized by unpleasant or annoying emotions and/or physical sensations. For measuring them, we will use the Subjective Units of Disturbance Scale (SUDS). This Scale has values from 0 to 10, with 0 being no disturbance, and 10 being the maximum disturbance we can feel.”*

One of the EPT members draw on the board or flipchart a horizontal line with a 0 on the left end and a 10 on the right end, with the numbers 1 to 9 distributed along the line. Also, you can draw three faces representing the intensity of the emotions: one for 0, one for 5 and one for 10.

The EPT members deliver white sheets of paper and crayons to each participant.

Say, *“Please write your name and age in the upper left side of the paper... Now, write down what I am going to dictate ... (Dictate the day, month, year, and the time of the day, morning or afternoon).”*

Say, *“Now, turn the sheet of paper to the other side, with a dark crayon draw one vertical line and one horizontal line in the middle of the paper to divide it in four equal parts... Ready? ... We are going to mark each part of the paper with the letters A, B, C and D. This letters must be small and on the upper left corner of each part (show how to do it)”*

Note: One of the EPT members draw the four equal parts and the letters on the board or flipchart.

PHASE 3: ASSESSMENT

The Team Leader says, *“Please, with your eyes close or partially close, run a mental movie of the whole event from right before the beginning until today, or even looking into the future ... open your eyes when you finish.”*

When all the participants have finished, the Leader says, *“From the whole mental movie, please choose the hardest, painful or distressing moment...Now observe which emotions and body sensations produces that memory AT THIS MOMENT.”...*

Important Note: For all the Next Group reprocessing sessions, we will say:

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

“Please, with your eyes close or partially close, run a mental movie of the whole event from right before the beginning until today, or even looking into the future ... open your eyes when you finish.”

When all the participants have finished, the Leader says: *“From the whole mental movie, please choose to reprocess any memory that is disturbing AT THIS MOMENT.”*

PHASE 3: continuation...

The Leader continues, *“Take **WHATEVER EMERGES** from your head to your neck, to your arms, to your hands and finger; and now, take one or more crayons and **DRAW** it in the Square with the word A.”*

When 90% of the participants has finished drawing in Square A:

Say, “Please leave your crayons and lower your hands to your thighs ... look at your drawing ... Now observe your body ... On a scale where 0 is no disturbance and 10 the maximum disturbance you can feel, how much disturbance are you feeling now? ...Write this number in the lower right corner of the square.”

One of the EPT member’s writes “SUDS” in the lower right corner of the square on the board or flipchart.

Note: Not always in the first drawing is represented the highest emotional or sensory impact. Sometimes it is not present until the second or the third drawing.

PHASE 4: DESENSITIZATION

Once 90% of the participants have finished:

Say: “Please leave your crayons aside and do the Butterfly Hug...observe what is happening to you...without judging or trying to change it...Stop when you feel in your body that had been enough and lower your hands to your thighs.”

Note: This takes about 2 or 3 minutes.

Then the Leader says, *“Now observe how you are feeling and draw it in Square B.”*

When 90% of the participants have finished drawing in Square B:

Say, “ Please leave your crayons aside and lower your hands to your thighs ... look at your drawing ... Now observe your body ... On a scale where 0 is no disturbance and 10 the

**EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR
ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).**

maximum disturbance you can feel, how much disturbance are you feeling now? Write this number in the lower right corner of the square."

One of the EPT member's writes "SUDS" in the lower right corner of the square on the board or flipchart.

Once 90% of the participants have finished:

Say: "Please leave your crayons aside and do the Butterfly Hug while observing what is happening to you...without judging or trying to change it...Stop when you feel in your body that has been enough and lower your hands to your thighs."

Then the Leader says, "Now observe how you are feeling and draw it in Square C."

When 90% of the participants have finished their drawings in Square C:

Say, " Please leave your crayons aside and lower your hands to your thighs ... look at your drawing ... Now observe your body ... On a scale where 0 is no disturbance and 10 the maximum disturbance you can feel, how much disturbance are you feeling now? ...Write this number in the lower right corner of the square."

One of the EPT member's writes "SUDS" in the lower right corner of the square on the board or flipchart.

After they have written the number:

Say, "Please leave your crayons aside and do the Butterfly Hug while observing what is happening to you...without judging or trying to change it... Stop when you feel in your body that has been enough and lower your hands to your thighs."

Then the Leader says, "Now observe how you are feeling and draw it in Square D."

When 90% of the participants have finished their drawings in Square D:

Say, " Please leave your crayons aside and lower your hands to your thighs ... look at your drawing ... Now observe your body ... On a scale where 0 is no disturbance and 10 the maximum disturbance you can feel, how much disturbance are you feeling now? ...Write this number in the lower right corner of the square."

One of the EPT member's writes "SUDS" in the lower right corner of the square on the board or flipchart.

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

After they have written the number:

Say, *“Please leave your crayons aside and do the Butterfly Hug while observing what is happening to you...without judging or trying to change it...Stop when you feel in your body that has been enough and lower your hands to your thighs.”*

Right after, the Leader says: *“Observe carefully all your drawings ... Choose the drawing that disturbed you the most ... Now turn the paper to the other side... observe your body ... on a scale where 0 is no disturbance and 10 the maximum disturbance you can feel ... write in the upper right corner, how much disturbance you are feeling NOW.”*

One of the EPT member’s writes “SUDS” in the upper right corner of the other side of the paper on the board or flipchart.

Note: The EPT must be aware that the participants do not make the mistake of just copying the SUD of the most disturbing drawing, but write the SUD of the disturbance they are feeling NOW ... AT THE PRESENT MOMENT.

PHASE 5: FUTURE VISION

Say, *“Now, draw how you see yourself in the future.”*

Then say, *“Write a word, phrase, or a sentence that explains what you drew; the **TITLE OF THE DRAWING.**”*

Right after say, *“Leave your crayons aside...Now look at your drawing and what you wrote about it and do the Butterfly Hug while observing what is happening to you...without judging or trying to change it...Stop when you feel in your body that has been enough and lower your hands to your thighs.”*

Note: This Phase allows us to identify adaptive or non-adaptive drawings and cognitions that are helpful in the evaluation of the participant at the end of the group protocol. Therefore, is NOT necessarily about visualizing happy or successfully managing an anticipated future event.

When everybody has finished, the Leader asks the EPT to gather all the drawings and the crayons.

These must be kept in a big envelope with the date and the time of the day (morning or afternoon). At the end of all group sessions, the sheets of each participant must be stapled in chronological order, in order to facilitate data collecting for evaluation and statistical purposes.

Observation: It may happen that some participant(s) shows maladaptive/catastrophic concerns about the future in the Phase-Five Future Vision Drawing and/or title of the drawing. In that case, before the next group reprocessing one of the EPT members may

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

approach and ask the participant(s) in private and individually to do the following during the next group protocol:

Say, *"In the next group session, please run a mental movie from today to the future ... and when you have finished, choose to reprocess the most catastrophic situation you can imagine."*

PHASE 6. BODY SCAN:

The Leader says, *"Remember the drawing that disturbed you the most ... Close your eyes and observe your body from your head to your feet...Notice if you feel any pleasant or unpleasant sensations...When you have finished, do the Butterfly Hug while observing what is happening to you...without judging or trying to change it... Stop when you feel in your body that has been enough and lower your hands to your thighs."*

PHASE 7: CLOSURE

The Leader says, *"Choose your favorite self-soothing exercise and do it now."*

Do this for about two - three minutes.

After this, say, *"Breathe deeply and open your eyes."*

Then, the participants are invited to share their reprocessing experiences. The EPT members normalize the reprocessing experiences explaining these are normal and answer questions.

Say, *"If you would like to do so, please share your experiences during the reprocessing. What did you experience?"*

PHASE 8: REEVALUATION AND FOLLOW-UP

It is important to mention that the EMDR-IGTP do not rule out the EMDR individual treatment, because it is a therapy protocol and also a screening tool. Therefore, EMDR clinicians do not have to choose between group or individual administration when facing a large amount of people needing treatment. We recommend to first use the EMDR-IGTP and administer individual EMDR treatment only to those who require additional support based on the protocol's Phase 8 (Reevaluation and Follow-up) recommendations.

Authors clinical observations has showed that one or two applications of the protocol are not enough to achieve the best clinical results, therefore they suggested **six applications** in an intensive EMDR treatment format (twice a day in consecutive days) with fidelity to the

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

protocol and using validated measures to obtain reliable results. The applications that follows the first, shall begin with the Phase 2 self-soothing exercises.

Follow-Up Recommendations

At the end of all the group interventions, the EPT will identify participants needing additional support. This assessment will be determined by taking into consideration: the client history, the reports made by the participant's relatives or friends; the results obtained in the scales; the entire sequence of drawings with their SUD scale ratings (specially the last ones written on the side of the sheet of paper where they wrote their name); the Future Vision drawing and title; the body scan; and the EPT report.

The members of the team, or mental health professionals trained as EMDR Psychotherapists, can continue treating those who require individual follow-up attention, using this adapted EMDR-IGTP for ongoing trauma in smaller groups or with the EMDR-Protocol for Recent Critical Incidents (EMDR-PRECI; Jarero et al., 2011a).

References

EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL ADAPTED FOR ONGOING TRAUMATIC STRESS © (EMDR-IGTP-OTS).

Artigas, L., & Jarero, I. (2014). The Butterfly Hug. In M. Luber (Ed.). *Implementing EMDR Early Mental Health Interventions for Man-Made and Natural Disasters* (pp. 127-130). New York, NY: Springer.

Jarero, I., & Artigas, L. (2009). The EMDR Integrative Group Treatment Protocol. *Journal of EMDR Practice & Research*, 3(4), 287–288.

Jarero, I., & Uribe, S. (2011b). The EMDR protocol for recent critical incidents: Brief report of an application in a human massacre situation. *Journal of EMDR Practice and Research*, 5(4), 156–166.

Jarero, I., & Uribe, S. (2012). The EMDR protocol for recent critical incidents: Follow-up Report of an application in a human massacre situation. *Journal of EMDR Practice and Research*, 6(2), 50-61.

Jarero, I., Artigas, L., & Luber, M. (2011a). The EMDR protocol for recent critical incidents: Application in a disaster mental health continuum of care context. *Journal of EMDR Practice and Research*, 5(3), 82–94.

Jarero, I., Artigas, L., Uribe, S., García, L.E., Cavazos, M.A., & Givaudán, M. (2014). Pilot Research Study on the Provision of the EMDR Integrative Group Treatment Protocol with Female Cancer Patients. *Revista Iberoamericana de Psicotraumatología y Disociación*, 6(3), 1-17. ISSN: 2007-8544.

Shapiro, F. (2001). *Eye movements desensitization and reprocessing. Basic principles, protocols, and procedures* (2nd ed.). New York, NY: Guilford Press.