

Transcript – 2021 Fall Webinar Series: Attachment-Based EMDR 10/15/2021  
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I'm a child and family therapist and repeated in Omaha, Nebraska, as many therapists for 11 years and for the past eight years I felt really effective because that's when they started using named

12:07:11 my clients, and for anyone on the call, who is sort of affiliated with the court system.

12:07:08 I have a real particular love for where the court system and mental mental health intersect. And my hope today is for you to get some information some cool information that could impact, where those things do cross, we're going to talk about you, Dr.

12:07:23 Which is a very specific trauma therapy. And because this is part of the healing the whole child or webinar series, we're going to talk a bit about the application of India with children.

12:07:42 And the very very special role that caregivers play in new treatment, because we have a variety of disciplines on the zoom call today is designed to simply be an overview.

12:07:52 So that all interested providers can receive a general outline of the therapy to become MD or certified takes about 12 to 18 months and fire they might I could not condense that down into today's when I was in.

12:08:08 So, if you are already in Dr train. And you came today interested in finding out very specific interventions to use with children. I have for you some wonderful local trainings and resources to teach you just that, and I'm going to link them in the next

12:08:27 few slides for you.

12:08:29 If you are looking as a clinician to become MD are trained, and we're hoping to learn where do I go to do that. I have links for you in the next few slides as well.

12:08:41 So, though attending today will not train you in Dr. It may make you want to become in Dr trained, or to explore whether in em dr trained clinicians should be added to your referral list.

12:08:55 Today is a great foundational training to take if you've heard about the NPR you want to know what it is all about and how it might benefit either your child your client or your awards at the very end I'm going to show some actual session footage of interventions

12:09:11 in gr interventions that we use with children.

12:09:15 Alright, so those are clinicians looking for intensive training opportunities. The next few slides are three.

12:09:24 So first I have here listed a great local training for those looking to become being dr trained. So Debbie Wasserman and rolling subtle are offering their next basic training in January march of 2022 and the website links right here for you.

12:09:41 On this next slide is a fantastic local training for those are the training, em, Dr. But needing more advanced training on how to do this wonderful therapy with children.

12:09:54 So I've included the attachment and trauma center Institute website link for you here, and I'm going to be demonstrating at the end interventions that come straight from this 24 hour training, you get 24 seniors in that last if you just wanted to have

12:10:10 a guidebook, you just need something to look through a resource I've included three here, a clinician guide, and a parent workbook, also from the attachment and summer institute that I found to help me learn specific EMT our application techniques to

12:10:30 use your children and their caregivers in Jericho.

12:10:34 your children and their caregivers in geography. So I've included these here for you as well.

12:10:38 Alright so now that we have all the great resources shared let's talk about today's objectives.

12:10:45 So today we're going to kind of go over the basics of being Dr. You're going to view a visual demonstration of being Dr. We're going to talk about why memory storage matters.

12:10:55 And then we're going to really dive into India with children with hearing reach owning and building resilience.

12:11:06 So even Dr.

12:11:22 has been in use for 30 years now. And it is a normally research evidence based treatment for PTSD, as well as other trauma and stress related disorders, it's one of the most effective therapies for treating trauma.

12:11:24 And it is unique in that it targets trauma memories, even ones that are stored only as body sensations. And I find that this is particularly helpful in working with highly regulated kiddos to meet a bottom up approach to the brain, where we start with

12:11:42 autonomic survival responses, versus thinking and top down approach, which actually requires the ability to put words to experience, which is not just hard for adults who have experienced trauma, but particularly for young children to do, to the bottom

12:12:13 approach of India is particularly helpful with clients who struggle to make a measurable progress with more traditional TFCV to talk therapy. It is the most intensive form of trauma therapy that I do and Mama work is very messy.

12:12:19 So it's nice that there isn't a release process that you're working through every single session. And there are adaptations that you can use with adults adolescents and even children, which is why we are here today.

12:12:32 So my question to you can show during the diagnosed with PTSD a wall, please rescue, so I can't see everybody and we won't open the chat but if you think that they can just show me a thumbs up, and if you think that they can show me thumbs down.

12:12:52 And if you're not sure.

12:12:54 Even option.

12:12:56 And if you update the server Just kidding, everybody, if you have looked ahead. You're going to go ahead and know that the answer in all caps, is yes.

12:13:06 Okay, so when we DSM, our Diagnostic and Statistical Manual was updated in 2013, and actually added an entire diagnostic section for PTSD and children ages six and younger.

12:13:23 In fact, according to the DSM and for those of you like me, who get 16 I didn't have to justify this on the witness stand. Children can be diagnosed with PTSD as early as 12 months old.

12:13:36 The other thing I want to do now with the DSM five dead.

12:13:41 In 2013, it added caregiver and child related losses as a main source of trauma for this population. So it's really acknowledging and coming around to just how important a parent child attachment is ok so now that we're all clear that this can be diagnosed

12:13:58 in children and adolescents, let's talk about how each other.

12:14:05 Alright so let's talk about the advocacy of em Dr. So the Department of Defense Department of Veterans Affairs practice guidelines that place in Dr in their highest treatment category recommending it for all trauma populations, at all times, the APA Practice

12:14:22 guidelines, think that a combination of medications SSRI cognitive behavioral therapy and EMGRR their recommended first line treatment for PTSD, and even the who has ruled in that transaction CVT an EMT or, or the own psycho therapies that they recommend

12:14:43 for children, adolescents and adults with PTSD.

12:14:48 So, I would like to talk real quick about em dr what it is not. It is not hypnosis, your conscious mind that you're doing this intervention.

12:15:13 therapy or CVT cognitive behavioral therapy, specifically MDR different from CVT is not involved detailed descriptions of the trauma. There is not a direct challenging of beliefs.

12:15:21 We do not practice exposure therapy and do, and again same homework. And we know that those are all things that can really shut down a client or a kiddo.

12:15:31 Alright so let's talk about what it is mean dr his brain work more specifically memory work. It is completed in an eight phase process using bilateral stimulation to help you remember what that is.

12:15:45 Bruce can put Prince Harry he's going to be my, my poster board for that today. and it has the goal. Ultimately, of correcting mixed up thoughts, and we when we think about kids that are driving next step behaviors, which helps us achieve our goal of

12:16:02 adaptive information processing, which I call corrective thoughts that we to corrective behaviors.

12:16:28 There are eight seasons and here they are in Jersey, you don't have to commit this to memory to make it easy, we're actually going to watch these being demonstrated today.

12:16:22 And we're going to discuss not only how it works in the office. But the very important role. Each of you may play in this process. In the course of either your work, your advocacy and your your caregiving.

12:16:36 So the eight pieces of treatment began with a history taking preparation where we assess a trauma memory or preparation or prepare for trauma work assessment where we actually break down the trauma memory we're going to reprocess D sensitization where

12:16:54 we use bilateral stimulation to reprocess installation. That's where we installed that positive adaptive information that we were missing a body scan where we check to make sure we're not still scoring sensation, and then closure, where we wrap it up

12:17:11 send them back out to the world, every session begins with ongoing, the evaluation to make sure that the therapy is working. Now you will notice that it says, eight interweaving phases of VM Dr.

12:17:38 The work is never linear, and you will always encounter natural defenses that require a step back to a previous phase in the process. Okay, that's nice and well and good but I only linear thinkers who thinks in a linear fashion.

12:17:43 So I'm going to kind of show you the way it's sort of lays out in my work.

12:17:48 Okay, I view my work in two parts. Right. So I will argue the first part as returning work. This is where we are doing work with the central nervous system.

12:18:01 Regulation work.

12:18:03 The second part I view as repair work this, we're doing with the memory network system. And

12:18:13 so we have history taking just to get a sense of what this is, this might be one of the four sections.

12:18:20 Returning preparation work that takes up to six months, and its ongoing throughout.

12:18:25 So, this is the phase where I want everybody on this call to know you actually may be supporting your status directly impacted by the work of primary caregivers by providers, and even by the points down below.

12:18:42 This is sort of what we're going to watch. First, when I see how this thing is works. This takes about six to 12 months. And if you look on the side, it's all building cumulatively towards resilience in this trial for this.

12:19:01 Alright, so here are the days and this is going to be began. While we may take a look that we're going to start in the bottom.

12:19:12 So we're in here my little red circles here.

12:19:18 I'm actually doing video below. And these red phases assessment de sensitization, and installation, we're going to actually come back and do good Tony education here in a second habit space presentation.

12:19:36 What we're going to talk about the central nervous system so first we're going to just quickly watch a demonstration, because I feel like that's the best way to get a sense of how EMZR works.

12:19:46 So we're going to look at the word care, and it's mama work in action. So in this video you're going to see assessment desensitization and installation.