Integrated approach combining EMDR and family therapy (EMDR-FT)

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- Our chapter presents an integrated approach combining EMDR and family therapy (EMDR-FT) for children who have experienced some form of child abuse and developed trauma-related symptoms, like PTSD, often with comorbid symptoms.
- EMDR-FT is the umbrella term for combining individual EMDR sessions and family therapy sessions with children, parents, and the whole family.

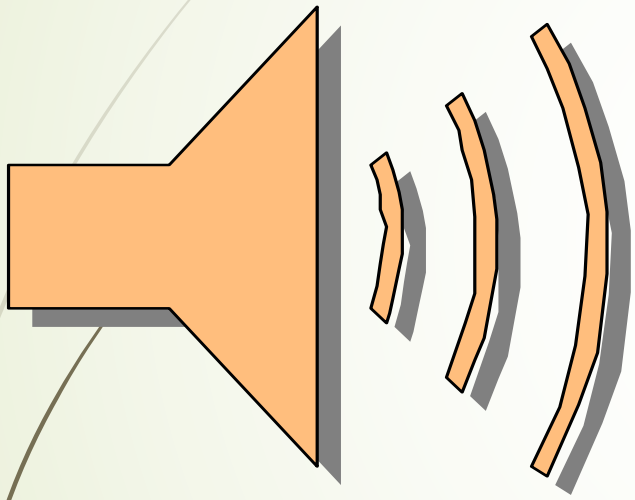
Rationale for Combining EMDR and Family Therapy

Why integrate?

Narrow-mindedness and specialisation are never a good thing, especially when dealing with psychology.

Pierre Janet, 1929

Trauma consequences: 2 types of wounds



- **Individual wound** → traumatised child
- **Relationship wound** → traumatised family structure (Catheral, 2004)

- The family context is essential when treating abused children and affects how EMDR can be used.
- Many families in which child abuse occurs are characterized by a dysfunctional family hierarchy, inappropriate boundaries between subsystems, attachment disorders, emotional instability, a poor capacity for mentalization, and a narrow window of tolerance (Morris-Smith & Silvestre, 2014).

- Norman and colleagues (2014) suggest that evidence-based *systemic* interventions aimed at improving parenting strategies and family functioning may be more effective and less expensive than attempts to treat only the extensive harmful effects of child abuse in adulthood.
- In clinical practice, integrating EMDR and family therapy (EMDR-FT) appears to improve the therapeutic outcome for abused children. This integrative approach has been reported in the literature since 2007 (Shapiro et al., 2007; Field & Cottrell, 2011; Morris-Smith & Silvestre, 2014; Silvestre & Tarquinio, 2022).
- Combining these is essential for this group, as the individual child's and family's problems can be addressed and their needs can be met optimally.

How to integrate these two paradigms ?

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Position paper

Systemic family therapy and EMDR therapy: An integrative approach

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ABSTRACT

Introduction: The objective of this article is to demonstrate the clinical effectiveness of combining systemic family therapy with EMDR therapy. To do so, we consider how current and past traumatic experiences impact the family system and the interest of taking a broader, integrative approach to treating the child and the family as a whole.
Method: Two case studies are described to illustrate the basis for establishing a two-phase approach to caring for the child and the family.
Results: Taking an integrative clinical approach improves the ability to address the complexities of family trauma and plays a role in enabling the child to construct a congruent narrative allowing for the release of negative emotions connected to a traumatic or stressful event.
Conclusion: The integrative approach of combining systemic family therapy and EMDR therapy allows for a more efficient and comprehensive strategy for addressing trauma and its impact on family dynamics and individual functioning.

1. Introduction

Integrating systemic family therapy with Eye Movement Desensitization and Reprocessing (EMDR) therapy (Shapiro, 1989) to treat psychological trauma in children and adults represents an important opening toward a broader therapeutic field. Combining the interactional dimension of systemic family therapy and the intrapsychic dimension of EMDR therapy allows for a deeper understanding of both relational and individual psychological wounds characteristic of psychological trauma, thus avoiding a situation described by Figley (2004), wherein: "Traumatologists are often blind to familial consequences and family therapists are often blind to the traumatic consequences". Family therapy addresses how trauma impacts the members, while EMDR therapy addresses how trauma impacts the child, or the individual parent if they have trouble supporting the child's emotional regulation.

The present work aims to demonstrate the clinical benefits of taking a multimodal approach to trauma psychotherapy by integrating EMDR and family systems perspectives. We begin by considering what led to the emergence of this approach to therapy that interweaves two methodologies by considering the psychological impacts of trauma on the family system. In a second step, we lay the practical foundations of interweaving two methodologies, illustrated in two case studies where the therapist translates this integrative dimension into practical clinical application.

2. Development of this multimodal integrative approach

Initial training as a systemic family therapist at the Mental Research Institute (MRI) in Palo Alto, California, and at the Family Therapy Institute in Los Angeles allowed one of the authors to become familiar with the fundamental concepts of family therapy (Minuchin, 1998). Learning about EMDR in 1994 during the first training session organized in Aix-en-Provence, France enriched and transformed his professional practice.

In short, Eye Movement Desensitization and Reprocessing (EMDR) is a form of psychotherapy first developed in the 1980's by Dr Francine Shapiro, an American psychologist and educator. It is a neuro-emotional integration therapy based on the Adaptive Information Processing (AIP) model (Shapiro, 1995, 2001) and is organized around an eight-step protocol associated with alternating bilateral ocular, auditory or tactile stimulation (Silvestre, 2015). Since its introduction in 1989 with the publication of a randomized controlled trial evaluating its effects with trauma victims (Shapiro, 1989), numerous publications have attested to the efficacy of EMDR in treating trauma-related symptoms, specifically those associated with posttraumatic stress disorder (PTSD) (Bisson & Andrews, 2012b; Van Etten & Taylor, 1998; Bradley et al., 2005; Maxfield & Hyer, 2002; Shapiro, 2012a, 2012b). Beyond its therapeutic efficacy, EMDR psychotherapy has proven

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JMS & MS, psyhologist

2- Individual
Intrapsychic
thinking
EMDR

1- Family dynamics
Interactional thinking
Relationship +/- containing
Attachement
Safety

Points of Interest for EMDR-FT

Phase 1, 2 & 3, History Taking, Preparation (Diagnostic Assessment)

- When possible the whole family is invited to the initial assessment interview.
  - To assess safety, family dynamics, quality of attachment, and available resources.
  - Once safety is established they can determine who needs standard individual EMDR therapy and what is needed to restore and heal family dynamics using the stabilization techniques, narrative, and daily family attachment rituals (Morris-Smith and Silvestre,2014).
  - The therapist can formulate an integrative treatment plan, thinking multidimensionally at the child and family levels
  - To address not only the family narrative and dynamics (**Synchronic dimension)**
  - But also the child's functioning and symptoms **(Diachronic dimension)**

Safety: Risk assessment

- If domestic violence has occurred, work with the family only begins after the perpetrator has been removed from the family or has undertaken the necessary psychological work to allow amelioration to become possible.
- The perpetrator needs to have taken responsibility for their behaviour and to show empathy towards the victim's suffering before any work could be possible with the couple and before considering it with the children.

Treatment Planning

The therapist can decide whether:

- *Integrated* treatment plans (EMDR-FT) can be applied because the family is intact enough, enabling the therapist to work flexibly with the family, the parents, and the child, interweaving these different elements as therapy progresses.
- *Parallel* treatment plans are needed for the parents and the child.
- *Separate* treatment plans are needed for each member of the family before future family interventions can be considered.

Abuse by Someone Outside of the Family

The goals for treatment with EMDR-FT are:

- Restoration of the quality of attachment (parents–children).
- Increase the parents' ability to manage and regulate affect in the family; trauma treatment (EMDr)
- Trauma treatment for the abused child
- Respect for each other's integrity and separate needs.
- Restoration of the family dynamics (boundaries, daily attachment rituals, communication skills…).

Abuse by a Family Member

Treatment aims with EMDR-FT for the remaining family (without the perpetrator):

- Safety for the child and the remaining family.
- Restoration of the quality of attachment.
- Respect for each other's integrity.
- Restoration of a congruent family hierarchy with adequate boundaries for responsibilities, power, and control.
- Trauma treatment for the child and other family members who are victims.
- Building and restoring a positive self-image and self-esteem.
- Catching up on the developmental delays of all children.

Contraindications for EMDR- FT

- If there is insufficient current safety in a family because domestic violence is ongoing.
- EMDR-FT could be problematic in extremely chaotic families with severe adult mental health disorders.
- EMDR-FT is also contraindicated if parents are unwilling or unable to cooperate.
- Finally, EMDR-FT is not possible when children are trapped in unresolvable, 'frozen' family situations, where no changes are possible and where parents do not take responsibility for their past behaviour.

Concluding Remarks

- This work integrating individual EMDR therapy with a family therapy approach (EMDR-FT) requires the therapist to have knowledge and expertise in several areas: individual trauma treatment, family dynamics, recognition and treatment of disturbed attachment patterns, and skills to deal with dissociative symptoms and behaviours.
- By involving the family system in the trauma treatment and making the implicit explicit, the therapist helps the dysfunctional family to develop a healthier family narrative.
- This integrated approach creates favourable conditions for processing the traumatic memories and enables the child to take new steps towards a healthier future.

Concluding remarks…

- **EMDR:**
  - a zoom lens, works on a very precise target
  - individual work on a personal trauma,
  - narrow context, diachronic dimension
- **Family therapy:**
  - a wide lens, works on a larger context
  - group work on traumatised relationships
  - complex interactional approach, synchronic dimension