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An Introduction to Eye Movement Integration Therapy

Eye Movement Integration (EMI) therapy is a practical approach which uses guided eye movements to access and integrate information associated with trauma. The technique was perfected by Danie Beaulieu in the 1990's. EMI takes place in a structured session in which an EMI facilitator guides client's gaze through a series of movements in order to create a new perspective on traumatic events and/or bring about rapid relief from post-traumatic symptoms.

Traditional talking therapies have long failed to capture the emotional and sensory experience of trauma situations, often leaving clients with a cognitive understanding of trauma but little assistance with emotional arousal and confusing associations. This leaves the client in a state of activation and causes the typical post-trauma symptoms e.g. jumpiness, tearfulness, avoidance of situations, flashbacks and inability to sleep/relax. Talk therapies generally target the thinking brain (*the frontal lobes*) but simply can't fully reach the core of the client's torment; the emergency pathway or fight or flight system (*the limbic system*).

In order to understand how EMI works, a quick review of how traumatic memories are formed is warranted. In ordinary circumstances, information from all senses (eyes, ears, nose, body) is sent via a gateway system (*the thalamus*) to the appropriate areas of the brain, assigned associations and stored as memories (*the hippocampus*).

Distressing memories are processed in a different manner. Given the need to react and process a large amount of information during a trauma; the emergency pathway is evoked and information is sent straight to the emotional /survival centre (*the amygdala*) of the brain. This triggers the fight or flight response and a cascade of adrenalin prepares the body to deal with what is happening. While this is a very effective way of ensuring survival, excessive stimulation of the flight or flight system (*the amygdala*) impairs the formation of clear memories in the memory centre (*the hippocampus*). As such, trauma memories are stored as fragmented pieces of information and the client is left with a confusing array of symptoms. In order to bring about symptom relief, the various aspects of the trauma story need to be consolidated and processed via the correct channels.

EMI seems assist with processing trauma memories in the correct way. The eye movements, as facilitated by the EMI practitioner, appear to direct the client's attention to parts of memory that have been neglected, thus releasing information; both positive and painful. The movements cross the client's line of sight from top to bottom and left to right reaches all areas of the memory field. This also helps gather and process information stored across the left and right hemispheres of the brain and involves the 'top', thinking of the brain (*the frontal lobes*) and 'centre', survival brain (*the limbic system*).



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Once the client is able to fully comprehend the trauma in it's entirety; emotionally, physically and cognitively, the memories can be incorporated into a new, adaptive perspective on past and current life. From a physiological perspective, EMI appears to be associated with calming the survival system (*the limbic system*). This is often why clients report significant relief from post-traumatic arousal and an overall sense that 'the trauma is in the past'. Indeed, in a small pilot study; a single EMI session was shown to reduce trauma symptoms by 48% and a course of EMI reduced symptoms by 83%.

Quick facts on EMI:

- It is not hypnotherapy; you are conscious at all times;
- EMI is a neurotherapy which may only be practiced by HPCSA registered psychologists;
- EMI is based emerging brain-trauma research (developed in the 1990s);
- An EMI session is preceded by a intake session to determine suitability of the problem and how EMI may be used for a particular trauma;
- EMI is useful in treating symptoms that can be traced back to an incident or period of the client's life. It appears less effective for treating personality difficulties, acute addiction and relational problems.
- An EMI session may take between 1.5- 2 hours and the EMI practitioner will guide the client through the entire process
- EMI session may also be used positively to access inner resources that clients have been unable to work with previously;
- Clients do not appear to re-visit trauma episodes with the same intensity and symptomology following an EMI session. In most cases, the event/s simply becomes another long-term memory.

Reference material: Beaulieu, D (n.d.) *Eye Movement Integration Therapy*. Accessed 12 may 2011; www.academieimpact.com/pdf/EMI_article.pdf

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