

## Francine Shapiro and Eye Movements during EMDR

Dear Colleagues

I wanted to correct some potential misconceptions regarding the eye movements.

Eye movements should always be the first choice of dual attention bilateral stimulation. All the research indicates superiority of eye movements to other forms of stimulation.

Trainers and facilitators should make that clear in the trainings and during supervision.

Inquiry revealed that clients have said they prefer other forms of stimulation because they think they are supposed to keep the memory vivid. They are not supposed to do that. Clinicians should clarify to clients that during the sets of eye movements they are not supposed to try to hold onto anything: Just let whatever happens, happen.

Further, it doesn't matter what memory is being accessed for processing. The eye movements should be the first choice. Memories of any incident and age, explicit or implicit, are stored in the brain, not in the body. Even when dealing with physical pain, the research demonstrating successful treatment of phantom limb pain should make clear where the memories are stored--in the brain, not the leg or arm.

Clients can close their eyes to access memories, but then the clinician should use eye movements when possible to process. Some people cannot track well or become too distracted, so other forms of stimulation are available to use. Clinicians may also find some reason to change forms of stimulation during treatment of some clients, such as to slow down processing. However, the eye movements should generally be tried first.

Eye movements allow the clinician to monitor the client's dual awareness and research backs them as most effective. Eyes open even during other forms of stimulation allow the clients to benefit from the clinician's nonverbals that should be conveying rapt attention and unconditional regard. It assists in keeping them feeling safe in the present as they process the past experience.

Our goal is to provide effective and efficient treatment customized to the need of the client. Please be alert to the fact that some clinical impressions are based on inaccurate assumptions and normalized personal experience. That's why research is important.

Warm regards

**Francine**

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