

It's a Kind of Magic: EMDR and the Transpersonal

For EMDR Now

Mark Brayne, November 2016

As a fellow EMDR Junkie reading EMDR Now (and we know who we are...), I wonder what your favourite criteria are for measuring how well a client is reprocessing their trauma.

You will certainly be checking how smoothly the SUDs scores are coming down and VoC heading upwards. I guess you might also be using the IES-R or PCL-5 (my favourite) for testing how explicit PTSD symptoms are resolving.

But I suspect you also know that sweet, ineffable moment when you *really* know this is working, the tipping point when something magical takes over.

You've identified the perfect target that speaks to the essence of the client's presenting dysfunction. Phase Three assessment is elegantly done, and Phase Four Desensitisation is trundling along nicely, when suddenly the client startles, opens their eyes (almost all my clients prefer buzzers and headphones to Eye Movements) and says, "That's Weird".

Sometimes the word they use is "bizarre", or "strange." But most often, it's "Weird", and usually something left-field and unexpected – an energetic shift of symbol or narrative which catapults the client at warp speed towards resolution of the target, a moment that makes EMDR different from any other therapy I, for one, have ever practised.

The ex-war-reporter client sexually abused at 10 who finds himself piloting an attack helicopter and blowing up his prep school down to the last building, and – yes, I'm afraid - machine-gunning all the priests whom he's lined up on the altar. Go with THAT!

Or the proud City banker broken by her brother's early death of cancer who suddenly finds angels dancing around his death bed and taking him, smiling, to a place of peace and rest, freeing her from years of grief with the message that "I'm OK now, you can let go."

Successful EMDR is so often a non-rational right-brain experience of metaphor and meaning that in my own practice, as a transpersonally-trained psychotherapist (CCPE 2000), I've come to see our bilaterally-stimulated therapy as in many ways the ultimate transpersonal psychotherapeutic approach.

Viewed with nervousness by some who fear that the transpersonal requires faith in a religious deity, what the term actually means is simply 'beyond the personal', reflecting (in the useful Counselling Directory definition) the core aim of exploring human growth, helping people discover a deeper and more enduring essential self that exists beyond the conditioned ego.

To me (an atheist, by the way), the transpersonal puts at the heart of our work an awareness that, made up as we are of between 55 and 80 trillion individual cells, and with more potential connections in our brains than there are atoms in the visible universe, we human beings are literally stardust, products of billions of years of evolution, and, as long as we breathe, programmed to heal - physically and psychologically.

Allowing this transpersonal dimension to underpin our therapy opens the way to EMDR working (thanks Freddie) as a Kind of Magic, breaking the energetic spells that have trapped clients in the emotional dysfunctions of their past. Weird indeed, and even - in the Findhorn Foundation's useful definition of a miracle as a simple but existential shift of perception - miraculous.

So, what does this embracing of the transpersonal mean in terms of technique?

Above all, it means allowing and exploring with our clients the use of metaphor, imagery, creative imagination and dreams, within the essential containing framework of EMDR's **Harry-Potter-And-Dumbledore-In-Big-Cheesy-Relationship** eight Standard Protocol phases (History, Preparation/Resourcing, Assessment/Activation, Desensitisation, Installation, Body Scan, Closure and Re-evaluation).

The scene can be set for transpersonal EMDR by *tapping in*, as Laurel Parnell puts it, a Phase Two team of Nurturing, Protector and Wisdom Figures, activating the client's evolutionary connection with what Carl Jung identified as the shared archetypes of humankind's collective unconscious. You never know when they'll come in useful for interweaves, or spontaneous appearance in the client's healing narrative.

A best friend, or a loving grandmother can work very well. But as soon as we allow for the lion Aslan, a Centaur, Merlin, a teddy bear, Luke Skywalker or a beloved pet dog, we're giving our clients permission and encouragement to work on the widest transpersonal territory. Superman, the Dalai Lama and Gandalf, by the way, take commission...

Then, when a target is desensitising well and we're into reprocessing, there are wonderful transpersonal interweaves and ways of selecting targets to add to our what Jim Knipe calls our EMDR Toolbox.

We might work for example directly with a dream narrative. Get the client to relate their dream to you, write it down, read it back aloud, and ask them which freeze-frame image holds the most energy. Then, with their eyes closed, quite simply add BLS. The client's nervous system, brain and body will take us where we need to go.

We might work transgenerationally, inviting the client to drop (or float if you prefer) back along their timeline all the way to their own birth and beyond.

With openness, courage and a willingness on our therapist's part to be led into the strangest dimensions, we encourage explicit curiosity about parents' and grandparents' behavioural and emotional programming, allowing space for dialogue with ancestors and

even imaginal re-resourcing to help these figures - with BLS - to create the safe and nurturing attachment context our client had needed but didn't have in his or her earliest moments, months and years.

Laurel Parnell, whose work I particularly appreciate, first identified EMDR as a Transpersonal therapy in a 1996 research paper, and talks in her influential book *Attachment-Focused EMDR* of how one can re-imagine – and tap in with BLS - a childhood with the good-enough, even ideal mother or father.

Of course, we can't change what actually happened in our clients' childhoods. But once we recognise that the only place that childhood still exists is in the client's nervous system in this very here-and-now moment, and explicitly invite a reworking of that narrative, the impact on our clients' wellbeing, sense of safety and self-compassion can be both weird and miraculous.

Working with ideas from NLP and Jim Knipe, we might explore the *positive intent* of split-off Emotional Parts and Ego States.

With what in transpersonal therapy we call the Transfer of Consciousness, we can invite the client (again, with eyes closed) first to witness and observe that rejected, dissociated Part or feared dream image as a separate shape, noticing its demeanour, dress, expression, its Being.

We then ask the client to imagine their conscious awareness, or visual perspective, gently crossing the space between themselves and the shape, so that they are looking back out on theirs observing self with the shape's eyes, with access to its thoughts, feelings and physical sensations.

To deepen the process, we might add some gentle BLS – not EMs, but rather buzzers or knee taps – and then directly ask the shape, “What do you observe as you look at [the client]. And what is your positive intent towards him/her? If you had a message for him/her, what might that be?”

Add some more BLS, then let the client report back. It can be quite amazing what happens, as the awareness dawns - and with it the compassion for that split-off part of Self – that the dysfunction was, all along, an attempt to survive, and help the client, even in the most self-destructive manner, whether simple depression or cutting and suicidal ideation.

Before you let them leave the session, don't forget, by the way, gently to bring the client back out of that altered split-off Part state and back in their body in the room and the present ...

EMDR is amazing enough even without venturing beyond the Standard Protocol. But anticipate and celebrate the Weird, adding and allowing for the Transpersonal, and your practice can be truly unleashed.

There's a book to be written about all of this, but I do hope there's some inspiration in what you've read here. References would fill the rest of this EMDR Now edition, but if you'd like to know more, please do get in touch directly, either via www.emdrfocus.com or www.braynetwork.com.