

Interview with Francine Shapiro June 2014

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On the occasion of the 25th anniversary of EMDR psychotherapy in 2014 and also the fact that in 2013 EMDR was recommended by several organizations, among them The World Health Organization (WHO 2013) as one of two most successful methods treating posttraumatic disorders (PTSD), I have had the opportunity and pleasure to make an interview with the founder and creator of EMDR psychotherapy.

Dr. Francine Shapiro developed Eye Movement Desensitization and Reprocessing (EMDR), a scientifically supported treatment for trauma and other adverse life experiences. Numerous organizations, including the World Health Organization (WHO) have designated EMDR psychotherapy as a frontline treatment for PTSD. She also founded the [Humanitarian Assistance Programs](#) (HAP), a nonprofit organization that offers treatment and training for worldwide populations that are underserved.

Status of the EMDR psychotherapy today?

Dr. Francine Shapiro: EMDR psychotherapy around the world is a help for organisations for treating trauma across the life span of children and adolescents and adults and EMDR psychotherapy is recognized internationally in many international and global associations as a scientific supported and effective treatment for trauma and now the attention has turned to the use of EMDR psychotherapy for other disorders and a lot of researches is beginning to emerge, that validate it in the treatment of a wide range of psychological disorders.

Looking back 25 years - what visions did you have? And where do you think we are today?

Dr. Francine Shapiro: At the time that I first began to develop it, there were actually no empirical supported treatment for trauma. I began to work with combat veterans and sexually abused victims etc. and saw how for instance with

Vietnam veterans they were still suffering ten years after the war had already ended. When I worked with them and found that we were able to resolve their problems within a very short period of time, my dedication then was to get EMDR psychotherapy out as far and widely as possible and the hope was, that it would be widely recognized and used all over the world to eliminate what is clearly needless suffering, that is people suffering for decades, when it was something that could be so rapidly dissolved. So this we certainly have accomplished and over the time the working being more extensively and seeing how the wide range effects in many types of symptoms and many types of disorders, the whole began that it will be empirically validated in all of those areas and the research is just beginning. As I have seen here at the EMDR Europe conference, a great deal of research is going on and the results are showing great success, so I expect the same thing to happen.

How soon did you know this was a very important approach?

Dr. Francine Shapiro: Well immediately upon working with the Vietnam veterans, who were the first population. When I was developing the procedures, it seemed certainly that it would be quite useful, but it needed to be tested with a clinical population to see if it could work with PTSD.

I was invited in to work at a Veteran Centre and again with these Vietnam veterans that has been troubled for so long. So seeing that their ten years of pain and guilt and shame and fear was resolved so quickly with a matter of a few sessions, it became clear that there were something very important here and it was my duty to get it out as far and wide as possibly

What makes you feel the most proud looking at these 25 years?

Dr. Francine Shapiro: All of the humanitarian assistance work, that is going on internationally. The fact that there are so many other people, that recognize the power and not only recognize it, but feel the desire, the duty to bring it out to those who need it all over the world. That so many countries now have humanitarian assistance projects where volunteers are going out and doing pro bono treatment for those in need, not only after natural manmade disasters, but in remote and under developed areas, where there is usually no psychological help. So this is the most heart warming for me to see, that people are not only

honoring what the EMDR psychotherapy can do, but feel that they also want to make sure that everyone who is in need is able to be helped.

Are you still practising EMDR psychotherapy on a daily basis?

Dr. Francine Shapiro: Not on a daily basis. It is more that people will send me research questions or ideas and I help them put together research or put them together with other people doing research.

What was your best experience using EMDR psychotherapy?

Dr. Francine Shapiro: The work with the Vietnam combats is what gloves for me the most, because we have people, who went to serve their country and suffered for so many years without help and it was a surprise for me.

The Vietnam war was going on when I was in college and I did not know anybody who went to war. It was more the backdrop information. So walking into a Centre and finding all of these men, who was still suffering so intensively so long after the war had ended and to see in the treatment how the guilt was still there. For instance, one man who is fine with his name being known, because he wants to encourage others to get help. His name was Eric Smith. I saw how much the pain was there, not because of fear for himself but rather of fear for whom he might have hurt or who he could not save.

At 19 years old he was drafted and made the leader of his platoon and to save his platoon, he had to call in artillery and the artillery landed what he thought was too close to a native village, and so he was haunted for years after, because he might have killed – the bombs might have killed children. The guilt of this, the pain of this is what was causing all of the PTSD symptoms to the point that shortly before I meet him, he had actually tried to commit suicide. And yet when we started working together within such a short number of sessions, even after the first and the second session you could see the cloud lift from him, and the awareness was there in terms of he did save lives, he did do the best he could recognizing the impossible situation he was in, and was able to connect with the fact, that he was a worth while human being again. His heart healed, his mind healed and that has been with me all these past 25 years.

So looking into the future, what is, using the EMDR psychotherapy, the most important challenges?

Dr. Francine Shapiro: The recognition by the world help organizations that EMDR is a psychotherapy. It is having people recognize, that it is not a technique and it is not only for trauma but recognizing its usefulness across the diagnostic spectrum. The idea of the AIP model is, that unprocessed memory is basis of a wide range of disorders and now there is all of this independent research that is coming up, that shows how the adverse life experiences are the

basis for these disorders. So seeing the research supporting the model and seeing all of the research that is now validating what EMDR therapist has seen in their own practices over these past years. The research that is coming out with panic disorder, phobias, obsessive compulsion disorders and also the somatic form of disorders and also depression and bipolar disorder. Seeing the fact that even what people use to think was primarily genetic is not really. The recognition now, even that psychoses - the adverse life experience foundation of psychoses, of bipolar disorder and all the rest. So seeing that the research is validating the use of the AIP model and seeing, that the research also is validating the use of the EMDR psychotherapy with these disorders will mean, that people will no longer have to live their whole life on medication but can be released from their sufferings. That is what I see for the future and because of all of the dedicated researchers, and there are many throughout Europe, the contribution has been enormous. What they are doing is that they are opening the doors for treatments to people all over the world.

We see the research with phantom pain. So we have landmine victims all over the world and accident victims and war victims who are needlessly suffering and knowing that the EMDR psychotherapy can eliminate the pain where no other therapy has been reported to be able to do that. We are seeing, that the principles and the procedures for EMDR psychotherapy are different than psychodynamic therapy, it is different from cognitive behavioral therapy and the positive

treatment effects that are being reported, have not been reported in other forms of therapy, so we look at the potential different neurobiological basis and that is also now the subject of research to identify what has not been identified in any form of therapy, that is, what is going on in the brain

What are your best recommendations to EMDR practitioners according to professional development or branding?

Dr. Francine Shapiro: To focus on ongoing consultation and supervision and to make sure, that people continue to use the procedures and make sure that they are being used appropriately and also to participate in gathering data. Get the standardized measures that are available for the population you are treating. Give the measures follow ups and see for yourself, that you are getting the treatment effects that you would like to see. Pool the data, have networks of therapist and then move them towards publications. Every clinician, every group of clinicians can assist in opening the doors of treatment. For instance there was a meta-analysis of all the phantom pain articles that had been published and in the EMDR therapy there is only 5, they were case reports but they were included and the authors of the meta-analysis described the treatment outcome for each of the different studies and each of the different treatments and only in the EMDR publication was it reported a complete elimination of pain. So every individual clinician can make that type of contribution and groups of clinicians can do it. So if the Denmark association took it upon

themselves to assist the clinicians in gathering data and moving towards publications, this would be a very big service

Further comments, ideas or recommendations to the EMDR Association in Denmark

Dr. Francine Shapiro: My recommendation to the Danish EMDR Association is to make available the refresher courses, the supervision courses and to assist clinicians in using the best practices and also taking a hand and empowering assisting the clinician to gather the data and to move it towards publication. This might be in mainstream journals, English language journals or also in the journal of the EMDR. Every bit, every publication help to guide us and it helps to validate.

References

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