Trauma-Responsive Preparation for Online EMDR

By Jen Marchand & Rebecca Hogg

Due to COVID-19, many practitioners are looking for clear recommendations to safely and immediately shift into online service delivery. As the coronavirus speeds up, we are being called on to slow down. We hope that these recommendations help you to slow down and find your grounding as you make this transition. This recommendation sheet is based on our experiences offering online EMDR, and the recent guidelines published by EMDRIA.

To access our free video where we demonstrate how to provide visual, auditory and tactile BLS online using the technologies mentioned in this recommendations sheet, follow this link: https://vimeo.com/398125255

Navigating the Transition from In-Person to Online Work

- First and foremost, name that this is a transition and will take an adjustment for both you and your client.
- It is okay to be learning and to learn alongside your client. Many of you did not plan to shift to online work, but have done so to maintain continuity of care while meeting recommendations to self-isolate and observe social distancing. Collaboratively navigating this transition together can strengthen rapport and empower your client to be an active participant in their recovery process.
- The transition may feel abrupt as it is in direct response to an unforeseen crisis. To smooth the transition, it may be helpful to move back into resourcing and preparation phase to give you and your client time to adjust and become comfortable with the online setup.
- If your last in-person session was in the middle of reprocessing a target, you can contain the incomplete target before moving back into resourcing.
- Feel reassured that the rapport you have built with your client will carry over, but note that it may feel different.
- Eye contact, for example, may not align perfectly from screen to screen, and you will not be able to read all of your client’s body language. At the same time, it is important to consider how the online setup allows you to see your client’s face and posture clearly and close-up, which will allow you to monitor their autonomic state without it feeling invasive or intrusive.
to their personal space. Similarly, the slight misalignment of eye contact can feel non-threatening and comforting to clients, and may even allow them to directly observe your face and take in your non-verbal cues of safety and support without it feeling threatening.

- You can take your time in the resourcing and preparation phase until you and the client both feel comfortable with the new set-up, and you feel comfortable and confident with the technology. In this phase, there are many options and tools available to enhance the therapeutic process, strengthen positive memory networks, build skills, install resources, prepare for the future.

### Co-creating a Therapeutic Space

It may be helpful in the first session to explore this new setup collaboratively with your client. As the therapist, you may be used to setting up the therapy space in a certain way. As the client is in their own space, you can invite them to co-create your "online meeting space" by having them think about what they need to feel comfortable, safe, nurtured, and grounded. In this setup, they have a different level of control over their space, which for some clients, adds an additional layer of safety.

Some examples of material your client can gather and set-up for the session may be:

<table>
<thead>
<tr>
<th>Tissues</th>
<th>Stress ball</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tea</td>
<td>Bells or chimes</td>
</tr>
<tr>
<td>Water</td>
<td>Lotion/creams</td>
</tr>
<tr>
<td>Cushions</td>
<td>Flowers</td>
</tr>
<tr>
<td>Blanket (can be weighted)</td>
<td>Mints or gum</td>
</tr>
<tr>
<td>Oils</td>
<td>Water bottle</td>
</tr>
<tr>
<td>Stones</td>
<td>A drum or instrument</td>
</tr>
<tr>
<td>Nice seating</td>
<td>A book or journal with pens and markers</td>
</tr>
<tr>
<td>Stuffed animals, animal figurines or cards, images of animals that evoke nurturance or power</td>
<td>A comfortable space for their pet(s), if applicable</td>
</tr>
<tr>
<td>An image of someone or something that evokes calm or protection</td>
<td>Any other object based on what the client wants and needs</td>
</tr>
</tbody>
</table>

- The client will need to have their charged phone available so that you can call if connection drops (test that you can reach them during your first session).
- The client should also have agreed upon emergency numbers and support persons saved as contacts in their phone.

### Visual Background of the Client

- Invite your client to consider the background of their set-up, and what they would or would not feel comfortable with you seeing. Is there private
information about them that they might like to remove from their background before starting the session?

- Are there windows where people can see the client and into their space, or any other distractions that may interrupt the session?

**Visual Background of the Therapist**

- Consider the background of your set-up, and what you would or would not feel comfortable with the client seeing. Is there private information about you that you would like to remove from the background? If possible, share your actual background instead of a virtual background to increase authenticity and a sense of being connected to a real person in a real space.

- If possible, choose a background that is visually appealing without it being too busy or over-stimulating. You may notice that this supports dual-attention by allowing your client to gaze into the space around you during the session and during reprocessing., providing a visual anchor.

- Orient your client to your new visual background and where you are at to the extent that you are comfortable (you do not need to give your client a tour of your space, you can choose to keep the frame how you have it set up).

- If the background is the same or similar to your in-person sessions, that may add consistency (perhaps use an image, plant or shelf or objects from your office to provide consistency and familiarity).

- Keep your background consistent throughout your online sessions if possible. The boundaries of the screen and consistency may act as a container for your online meeting space, a space where the session and the material brought up is effectively held and contained.

- You may notice that the frame around your client's head and upper body increases the level of attention and decreases distraction, and the client may notice the same - there can be a high level of focus during online sessions!

**Types of BLS**

- Once you set up the technological framework and have co-created the online meeting space, it may be helpful to try different forms of bilateral stimulation to see what is most helpful and preferred by the client.

- You can test these by strengthening resources that you have already installed (such as calm state), or you could guide your client through new resources, such as nurturing or protective figures, etc.

- You could try any of the following:
  - Therapist-guided client-administered cross tapping (modified butterfly hugs fully guided by the therapist)
  - Eye movements (slow and short sets) with your hand across the screen (ensuring the eyes cross the centerline)
  - Inviting the client to open RemotEMDR or BilateralStimulation.io into whichever telehealth platform you are using, so that you can guide visual BLS while the client follows across the screen
  - Screen sharing other eye movement options, such as Easy EMDR
  - Share free Audio/auditory BLS with clients so they can start and top BLS with therapist guidance
You can decide which options you want to offer for the client to try.

**Recommended Resources, Tools and Protocols**

Here are some recommended methods that can be used while offering online EMDR and enhancing stability in preparation phase:

- Stabilizing techniques like the COME BACK Tool developed by Jennifer Marchand (connection, orientation, movement, exhale, balance, anchor, centering, and kindness/selfcompassion): [https://vimeo.com/400402595](https://vimeo.com/400402595)
- Jim Knipe, Ph.D.’s Constant Installation of Present Orientation to Safety (CIPOS) and back of the head scale
- FLASH by Philip Manfield, Ph.D.
- ASSYST by Ignacio (Nacho) Jarero, Ph.D., Ed.D.
- Laura Parnell, Ph.D.’s "tapping in" scripts from her book “Tapping In”

**Trust the Process and the Relationship**

Lastly, we would like to state that the AIP model reinforces that we all have a natural, physiological system designed to help us digest and process through difficult material. Because it is part of us, we can all access it, whether we are in person or online. In EMDR, we trust the innate healing capacities of the client, and EMDR is a tool to help them reconnect with their own abilities to learn from and let go of the past, and to transform pain into meaningful growth by linking it up with the positive material. It is a natural process and so long as we are responsible with the technology to protect data, and stay aware and collaborative, I truly believe we can meet the needs of our clients online.

We honor your courage as you navigate this transition and respond to the needs of your clients in this uncertain and dynamic time!

Sincerely,

Jennifer Marchand, MA, CCC, CTTS, RCAT

Trauma-Focused Counselling and Consultation Services
[www.trauma-focusedcounselling.com](http://www.trauma-focusedcounselling.com)
jenmarchand@trauma-focusedcounselling.com
Certified Canadian Counsellor
Certified EMDR Therapist
Certified Trauma Treatment Specialist
Registered Canadian Art Therapist

Rebecca D. Hogg, MA, LPC, RPT

Canvas Counseling & Wellness
[www.canvascw.com](http://www.canvascw.com)
rebecca@canvascw.com
Licensed in Texas and Florida
EMDR Trained, pursuing certification
Registered Play Therapist
Circle of Security Parenting Facilitator
APSATS Trained