

Journal of EMDR Practice and Research

INSTRUCTIONS FOR AUTHORS

The *Journal of EMDR Practice and Research* is a quarterly, peer-reviewed publication devoted to integrative, state-of-the-art papers about Eye Movement Desensitization and Reprocessing. It is a broadly conceived interdisciplinary journal that stimulates and communicates research and theory about EMDR, and their application to clinical practice. The journal publishes experimental studies; theoretical, review, and methodological articles; case studies; brief reports; and book reviews. Examples of research areas include: randomized clinical trials; treatment outcomes with specific populations; investigation of treatment processes; evaluation of the role of eye movements and bilateral stimulation; and contribution of individual factors and personality variables to treatment outcome and/or process. Articles address theoretical issues and clinical challenges to broaden clinicians' understanding and skills; they discuss such complex issues as: strengths and weaknesses in the literature; impact of ethnicity and culture; and evaluation of client readiness for treatment.

Manuscript Submission

Submit manuscripts, in English, in MS Word format electronically at www.editorialmanager.com/emdr. Manuscripts will be acknowledged on receipt. Following preliminary review by the Editors, to ensure compliance with required elements, manuscripts will be peer-reviewed by members of the Editorial Board.

Manuscript Style

The following are guidelines for developing and submitting a manuscript. Manuscripts that do not conform to these guidelines will be returned to the author without review, and with recommendations for changes needed to complete the submission process.

1. Manuscripts must be professionally prepared in accordance with the *Publication Manual of the American Psychological Association*, 6th edition, 2009.
2. Manuscripts are generally expected to be 20-25 pages in length and double-spaced throughout; however, longer manuscripts may be considered. Brief reports will be 10-15 pages in length.
3. The title page must include authors' names, positions, titles, affiliations, full contact information (address, phone, fax, and e-mail). This information should not be included elsewhere in the manuscript, to ensure blind review.
4. The second page should contain the title of the paper and an abstract of no more than 125 words as well as 3 to 5 key words listed below the abstract. Key words should express the precise content of the manuscript, as they are used for indexing purposes.
5. All articles must contain a comprehensive literature review. For example, a manuscript describing EMDR treatment of a certain disorder would summarize the literature about the nature of that disorder, review research studies that investigated outcomes of other treatments, as well as studies that evaluated EMDR treatment of that disorder.
6. Articles that recommend a clinical approach that differs from EMDR's standard protocol or its foundational Adaptive Information Processing model (Shapiro, 2001) should explain these differences.

7. In order to promote critical thinking and an unbiased approach for the dissemination of ideas, recent advances, and current research, all articles must take an objective, scientific stance, and a respectful tone.
8. It is recommended that Case Studies comply with the following format: (1) Literature review, (2) Introduction of the case, (3) Presenting problems, (4) Client history, (5) Assessment, (6) Case conceptualization, (7) Course of treatment, including assessment of progress and outcome, (8) Discussion of treatment implications, (9) Recommendations, and (10) References.
9. Photos and line art figures should be sent as tiff (300ppi) or eps (800ppi) files.
10. Contributors are responsible for obtaining written permission from copyright owners for illustrations, adaptations, or quotes of more than 300 words.

Types of Articles

The following descriptions summarize the types of articles published by the *Journal of EMDR Practice and Research*. Authors are encouraged to use this information to assist them in writing their article, and to ensure that their manuscript meets requirements. We recognize that sometimes authors' manuscripts have dual purposes and may fall into more than one category; in such cases, the authors should ensure that their paper meets all requirements for each relevant category.

A summary chart can be found on the last page of this document.

Case Study/ Case Series

Purpose:

- Presents research investigating areas such as:
 - the effectiveness of a specific application of EMDR
 - the effectiveness of EMDR with a specific population or problem
 - the effectiveness of a new EMDR protocol
 - EMDR's mechanisms of action

Treatment provided in the study:

- Treatment can use standard EMDR procedures, or protocol variations. Procedural variations must explain how the procedure varies from standard EMDR.
- If there is a procedural variation, each treatment step must be clearly defined and replicable.
- If the theoretical model differs from Shapiro's (2001) Adaptive Information Processing model, an explanation of the differences should be provided.

Data collected in the study:

- Administration of psychometric measures is expected (e.g., BDI, BAI, CAPS, PAI, IASC, TSI, BASC). Behavioral data, physiological, and qualitative data may also be collected.
- Where appropriate, diagnostic assessment is recommended.
- In clinical cases, it is recommended that measurement be conducted on several occasions, with baseline measures to show if the problem persists over time without treatment. However measurements at only pre and post may be acceptable if the clinical problem has a historical context and there is a follow-up report.

Results:

- Any claims for evidence arising from case study data must be framed according to standard scientific procedures, and generally would be considered at most only preliminary evidence.

Style:

- The paper can be written up as a research study: (1) Literature review, (2) Method (with subsections on participants, measures, treatment, procedure, etc), (3) Results, (4) Discussion, and (5) References.
- It can also be written using the case presentation style: 1) Literature review, (2) The case (Presenting problems, Client history, Pre-treatment assessment/diagnosis), (3) Treatment provided (Case conceptualization, Course of treatment, Progress, Outcome), (4) Discussion (Treatment implications, Recommendations, Limitations), and (5) References.

Some Single Case Examples:

Grey, E. (2011). [A pilot study of concentrated EMDR: A brief report](#). *Journal of EMDR Practice and Research*, 5(1), 14-24.

Phillips, K. M., Freund, B., Fordiani, J., Kuhn, R., & Ironson, G. (2009). EMDR treatment of past domestic violence: A clinical vignette. *Journal of EMDR Practice and Research*, 3(3), 192-197

Wesson, M., & Gould, M. (2009). [Intervening early with EMDR on military operations: A case study](#). *Journal of EMDR Practice and Research*, 3(2), 91-97.

Some Case Series Examples:

Gauvreau, P., & Bouchard, S. (2008). [Preliminary evidence for the efficacy of EMDR in treating generalized anxiety disorder](#). *Journal of EMDR Practice and Research*, 2(1), 26-40.

Jarero, I., Artigas, L., Montero, M., & Lena, L. (2008). [The EMDR integrative group treatment protocol: Application with child victims of a mass disaster](#). *Journal of EMDR Practice and Research*, 2(2), 97-105.

Ribchester, T., Yule, W., & Duncan, A. (2010). [EMDR for childhood PTSD after road traffic accidents: Attentional, memory, and attributional processes](#). *Journal of EMDR Practice and Research*, 4(4), 138-147.

Rost, C., Hofmann, A., & Wheeler, K. (2009). [EMDR treatment of workplace trauma: A case series](#). *Journal of EMDR Practice and Research*, 3(2), 80-90.

Vignettes

Purpose:

- Presents a short case that is of interest

Treatment provided in the case:

- Treatment uses standard EMDR procedures.

Data:

- If appropriate, SUD and VOC measures should be reported.
- No administration of psychometric measures is required, but if appropriate, diagnostic assessment is recommended.
- Behavioral data, including a description of the pre-existing nature of the problem and long-term follow-up is recommended

Results:

- Evidence collected in this manner is not considered sufficient for any generalized claim of treatment effectiveness.

Style:

- A brief report with a short current and adequate literature review
- The following format is preferred: (1) Literature review, (2) The case (Presenting problems, Client history, Pre-treatment assessment/diagnosis), (3) Treatment provided (Case conceptualization, Course of treatment, Progress, Outcome), (4) Discussion (Treatment implications, Recommendations, Limitations), and (5) References.

Some Vignette Examples:

Fernandez, I. (2008). [EMDR after a critical incident: Treatment of a tsunami survivor with acute posttraumatic stress disorder](#). *Journal of EMDR Practice and Research*, 2(2), 156-159.

Royle, L. (2008). [EMDR as a therapeutic treatment for chronic fatigue syndrome \(CFS\)](#). *Journal of EMDR Practice and Research*, 2(3), 226-232.

Clinical Practice Articles

Purpose:

- Provides instruction on the application of EMDR
- The paper may examine application of the procedure (e.g., history taking, cognitive interweaves) or describe how to provide treatment to a specific population or presenting problem

Treatment Described:

- Treatment can use standard EMDR procedures, or minor protocol variations. Procedural variations must explain how the procedure varies from standard EMDR.
- If the theoretical model differs from Shapiro's (2001) Adaptive Information Processing model, an explanation of the differences should be provided.
- Clinical examples are used to illustrate the described treatment

Data:

- This is not a study, and no data is collected and reported.

Evidence:

- Any claims of effectiveness must derive from published research. No evidence derives from the author's own anecdotal experiences or from clinical information shared in the article.

Style:

- Organization of the paper is determined by content. However the following organization is generally recommended: (1) Literature review summarizing (a) nature of presenting problem; (b) general treatment of presenting problem; (c) EMDR introduction; (d) EMDR treatment of presenting problem. (2) Description of proposed application; (3) Instruction in the application with clinical examples; (4) Discussion of related issues.

Some Examples of Clinical Practice Articles:

de Jongh, A., ten Broeke, E., & Meijer, S. (2010). [Two method approach: A case conceptualization model in the context of EMDR](#). *Journal of EMDR Practice and Research*, 4(1), 12-21.

Harford, P. M. (2010). [The integrative use of EMDR and clinical hypnosis in the treatment of adults abused as children](#). *Journal of EMDR Practice and Research*, 4(2), 60-75.

Reicherzer, S. (2011). Eye movement desensitization and reprocessing in counseling a male couple. *Journal of EMDR Practice and Research*, 5(3), 111-120.

Solomon, R. M., & Rando, T. (2008). [Utilization of EMDR in the treatment of grief and mourning](#). *Journal of EMDR Practice and Research*, 1(2), 109-117.

Clinical Q&A

Purpose:

- Answers a specific question related to clinical challenges and treatment application

Treatment Described:

- Treatment generally uses standard EMDR procedures.
- Clinical examples may be used to illustrate the described treatment

Data:

- This is not a study, and no data is collected and reported.

Evidence:

- Any claims of effectiveness must derive from research citations. No evidence derives from the author's own anecdotal experiences or from information presented in the article.

Style:

- Organization of the short article is determined by content.
- A brief report with a short current and adequate literature review

Some Examples of Clinical Q&A's:

Gelinas, D., & Lipke, H. (2007). [How do I get started with EMDR?](#). *Journal of EMDR Practice and Research*, 1(1), 62-65.

Morrow, R. D. (2008). [EMDR target tracking](#). *Journal of EMDR Practice and Research*, 2(1), 69-72.

Spector, J., & Kremer, S. (2009). Can I use EMDR with clients who report suicidal ideation?. *Journal of EMDR Practice and Research*, 3(2), 107-108.

Comparative Research Studies

Purpose:

- Compares two or more (treatment) conditions (e.g., EMDR versus exposure therapy; e.g., eye movements versus bilateral tones)
- Tests hypotheses to answer specific questions relating to areas such as:
 - the effectiveness of a specific application of EMDR
 - the effectiveness of EMDR with a specific population or problem
 - the effectiveness of a new EMDR protocol
 - EMDR's mechanisms of action

Treatment provided in the study:

- Treatment conditions may be standard EMDR procedures, protocol variations, experimental procedures, other treatment procedures, or waitlist conditions, etc.
- Each treatment step must be clearly defined and replicable.
- If the theoretical model differs from Shapiro's (2001) Adaptive Information Processing model, an explanation of the differences should be provided.

Data collected in the study:

- Administration of psychometric measures is expected (e.g., BDI, BAI, CAPS, PAI, IASC, TSI, BASC). Other data (e.g., behavioral, physiological, qualitative) may also be collected.
- Where appropriate, diagnostic assessment is recommended.
- Appropriate statistical analysis should be conducted.

Results:

- Claims for evidence arising must be framed according to standard scientific procedures.

Style:

- The paper should be written up as a research study: (1) Literature review, (2) Method (with subsections on participants, measures, treatment, procedure, etc), (3) Results, (4) Discussion, and (5) References.

Some Examples of Comparative Research Studies:

Arabia, E., Manca, M. L., & Solomon, R. M. (2011). [EMDR for survivors of life-threatening cardiac events: Results of a pilot study](#). *Journal of EMDR Practice and Research*, 5(1), 2-13.

Hornsveld, H. K., Landwehr, F., Stein, W., Stomp, M. P. H., Smeets, M. A. M., & van den Hout, M. A. (2010). [Emotionality of loss-related memories is reduced after recall plus eye movements but not after recall plus music or recall only](#). *Journal of EMDR Practice and Research*, 3(4), 106-112.

Jarero, I., Artigas, L., & Luber, M. (2011). The EMDR protocol for recent critical incidents: Application in a disaster mental health continuum of care context. *Journal of EMDR Practice and Research*, 5(3), 82-94.

Kristjánsdóttir, K., & Lee, C. W. (2011). [A comparison of visual versus auditory concurrent tasks on reducing the distress and vividness of aversive autobiographical memories](#). *Journal of EMDR Practice and Research*, 5(2), 34-41.

Other Research Studies

Purpose:

- Collects information to answer specific questions
- Uses scientific methodology to explore areas such as:
 - Experiences of EMDR clients
 - Experiences of participants in EMDR trainings
 - Experiences of EMDR clinicians

Data collected in the study:

- Survey data, qualitative data. Other data (e.g., behavioral, psychometric) may also be collected.
- Appropriate statistical analysis should be conducted.

Results:

- Claims for evidence arising must be framed according to standard scientific procedures.

Style:

- The paper should be written up as a research study: (1) Literature review, (2) Method (with subsections on participants, measures, procedure, etc), (3) Results, (4) Discussion, and (5) References.

Some Examples of Other Research Studies:

Dunne, T., & Ferrell, D. (2011). An investigation into clinicians' experiences of integrating EMDR into their clinical practice. *Journal of EMDR Practice and Research*, 5(4), 177 - 188.

Farrell, D., Dworkin, M., Keenan, P., & Spierings, S. (2010). [Using EMDR with survivors of sexual abuse perpetrated by Roman Catholic priests](#). *Journal of EMDR Practice and Research*, 4(3), 124-133.

Ricci, R. J., & Clayton, C. A. (2008). [Trauma resolution treatment as an adjunct to standard treatment for child molesters: A qualitative study](#). *Journal of EMDR Practice and Research*, 2(1), 41-50.

Review Articles

Purpose:

- Provides a summary of a specific body of literature with the purpose of integrating and synthesizing the findings

Treatment provided in the study:

- None

Data collected in the study:

- Examines the findings in published material
- A meta-analysis or other statistical analysis could be conducted

Style:

- Organization of the review article is determined by content.

Some Examples of Review Articles:

Bergmann, U. (2010). [EMDR's neurobiological mechanisms of action: A survey of 20 years of searching](#). *Journal of EMDR Practice and Research*, 4(1), 22-42.

de Jongh, A., & ten Broeke, E. (2009). EMDR and the anxiety disorders: Exploring the current status. *Journal of EMDR Practice and Research*, 3(3), 133-140.

Gunter, R. W., & Bodner, G. E. (2009). [EMDR works . . . But how? Recent progress in the search for treatment mechanisms](#). *Journal of EMDR Practice and Research*, 3(3), 161-168.

Korn, D. L. (2009). [EMDR and the treatment of complex PTSD: A review](#). *Journal of EMDR Practice and Research*, 3(4), 264-278.

Theoretical Contributions

Purpose:

- Discusses theoretical considerations; proposes a theoretical perspective
- If the theoretical model differs from Shapiro's (2001) Adaptive Information Processing model, an explanation of the differences should be provided.

Treatment provided in the study:

- None

Data collected in the study:

- Examines the findings in published material

Style:

- Organization of the article is determined by content.

Some Examples of Theoretical Contributions:

Bergmann, U. (2008). [The neurobiology of EMDR: Exploring the thalamus and neural integration](#). *Journal of EMDR Practice and Research*, 2(4), 300-314.

Greenwald, R., & Shapiro, F. (2011). [What Is EMDR? Concluding Commentary by Greenwald and Response by Shapiro](#). *Journal of EMDR Practice and Research*, 5(1), 2-13.

Solomon, R. M., & Shapiro, F. (2008). [EMDR and the adaptive information processing model - Potential mechanisms of change](#). *Journal of EMDR Practice and Research*, 2(4), 315-325.

Stickgold, R. (2008). [Sleep-dependent memory processing and EMDR action](#). *Journal of EMDR Practice and Research*, 2(4), 289-299.

Other Contributions

The Journal has occasionally published other contributions. Authors are encouraged to contact the editor to ascertain if the proposed article might be of interest to the Journal as we are always open to worthwhile exceptions. Please note that the Journal does not publish opinion papers.

Some Examples of Other Contributions:

- A minor revision of a valuable published chapter:
Shapiro, F. (2007). [EMDR, adaptive information processing, and case conceptualization](#). Journal of EMDR Practice and Research, 1(2), 68-87.
- An interview:
Luber, M. & Shapiro, F. (2009). [Interview with Francine Shapiro: Historical overview, present issues, and future directions of EMDR](#). Journal of EMDR Practice and Research, 3(4), 217-231.
- Articles with a unique purpose:
Errebo, N., Knipe, J., Forte, K., Karlin, V., & Altayli, B. (2008). [EMDR-HAP training in Sri Lanka following the 2004 tsunami](#). Journal of EMDR Practice and Research, 2(2), 124-139.

Lee, C. W., & Schubert, S. (2009). [Omissions and errors in the Institute of Medicine's report on scientific evidence of treatment for posttraumatic stress disorder](#). Journal of EMDR Practice and Research, 3(1), 32-38.

Maxfield, L. (2009). [EMDR milestones: The first 20 years](#). Journal of EMDR Practice and Research, 3(4), 211-216.

Russell, M. C., & Friedberg, F. (2009). [Training, treatment access, and research on trauma intervention in the armed services](#). Journal of EMDR Practice and Research, 3(1), 24-31.

Description of Types of Articles

Summary Chart:

Type of Paper	Purpose	Number of Participants	Number of Conditions	Treatment Provided	Data collected	Statistical Analysis	Makes Claim re Effectiveness
Comparison Research Study	Test hypothesis, compare conditions	16 or more	2 or more	Experimental condition/s	Psychometric data Physiological data Qualitative data Behavioral data *	Yes	Yes, if appropriate
Single Case Study	Evaluate treatment	1	1 or more	Standard EMDR or variation	Psychometric data Physiological data Qualitative data Behavioral data *	Not required	Yes, if appropriate for the case only
Case Series	Evaluate treatment	2 or more	1 or more	Standard EMDR or variation	Psychometric data Physiological data Qualitative data Behavioral data *	Recommended	Yes, if appropriate with limitations
Vignette	Share a Case	1 or more	1	Standard EMDR	SUD, VOC, Behavioral data *	N/A	No
Clinical Practice	Clinical instruction	0	0	Standard EMDR or minor variation	N/A	N/A	No
Clinical Q&A	Answer a clinical question	0	0	Standard EMDR	N/A	N/A	No
Review Paper	Synthesize literature	0	0	N/A	Findings in literature	Possible	Yes, if appropriate
Theoretical Paper	Propose a theory	0	0	N/A	N/A	N/A	No

Note: * If appropriate, diagnosis is recommended