



EMDR, Mindfulness and Addiction: A Pivotal Moment

We are in the midst of a pivotal moment in the history of psychotherapy. The world of trauma theory and trauma recovery has grown and moved out into all of the work that we do. Ever since the diagnosis of PTSD finally entered the DSM in 1980, thought leaders like Bessel van der Kolk and Peter Levine have helped spur further research and practice of trauma informed therapy throughout the continuum of care. Meanwhile, mindfulness based therapies have gone through clinical trials, were stripped of their original Buddhist ethical elements in many cases (with those elements now returning), and have been practiced in all manner of therapeutic venues. Mindfulness has now become a central staple of the practices of hundreds of therapists. In addition, the world of addiction treatment is going through a reboot, where these trauma informed principles, mindfulness practices and long standing traditional treatment models are all in play.

How does that play out for MFT's, particularly those working with addictions? In some cases, therapists of many different theoretical orientations have either added a trauma focused therapy to their tool kit, such as Somatic Experiencing or EMDR therapy. Others have found themselves moving further into trauma therapies as primary modes of practice. In any case, an increasing number of clinicians are looking at their cases through the trauma prism, and are finding in EMDR therapy and other modalities a way to heal those trauma related symptoms and long standing difficulties. As one of the most researched therapies over the last almost 30 years, EMDR has gone from the gold standard for single incident trauma to a cohesive and holistic therapy that can be a central aspect of the treatment for complex trauma and co-morbid disorders, including addictions.

Whether EMDR therapy and trauma resolution is possible with those afflicted with addiction has been a long standing debate, mostly the result of a misunderstanding of how the therapy works. Many people associate the therapy only with the fast moving reprocessing stage, which can be seen out of context as too overwhelming for a recovering addict. In fact, EMDR therapy calls for a great deal of stabilization and preparation in the first two phases of its 8 phase protocol developed by Dr. Francine Shapiro. Those phases are well served by mindfulness practices, particularly those that help clients to get either an initial or a deeper connection to their bodies and the workings of their minds. The retraining of the brain and body to maintain non-judgmental present time awareness is crucial in helping prepare clients for living a sober life, as well as preparing them to reprocess trauma.

In the general population we often speak of needing to help our clients reprocess their trauma to have lasting gains. Certainly in the addiction world, daily we see childhood trauma and the trauma created by a life of active addiction. We are standing at the crossroads of a great opportunity — using EMDR and other modern trauma therapies in conjunction with the ancient technology of mindfulness to conceptualize our cases and then provide meaningful and lasting care to those who are suffering. Indeed, a pivotal moment.

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