

Eliciting Cognitions in EMDR

General Thoughts about Cognitions

1. NCs in EMDR are an articulation of the meaning of the emotion which is activated when a memory network containing dysfunctional material is opened.
2. Purpose of identifying the NC *before* reprocessing:
 - a. Helps to open the memory network and connect the presenting event with other related traumata.
 - b. Helps to establish the PC, thus creating a basic roadmap for the processing.

AIP and Negative Beliefs about Self

1. Unprocessed or maladaptively processed experiences can lead to distorted conclusions about the self because these conclusions are based on inaccurate *information* which is connected with disturbing affects that was available at the time the experience was encoded.
2. When adaptive information is missing, *informational plateaus* are created where maladaptively information is stored.

Characteristics of Good NCs

1. Links to the presenting complaint; i.e. the past is re-manifesting in the present
2. Self-referencing
3. Generalizable
4. Childlike perspective
5. Core irrational belief (meta-perspective)
6. Resonates with client's associated affect
7. Not a restatement of the affect.
8. Not a description of the event.

Categories

1. Standard EMDR Categories (Francine Shapiro)
 - a. Responsibility/Defectiveness - "*The cause of the problem stems from me.*"
 - i. Self-Worth/Shame
 - ii. Action/Guilt - "What does that say about you?"
 - b. Safety/Vulnerability
 - c. Power Control
2. Barry Litt's Schema
 - a. Being vs. Nothingness
 - i. I don't exist.
 - ii. I'm invisible
 - iii. I don't matter.
 - b. Merit
 - i. I'm not good enough.
 - ii. I don't measure up.
 - iii. I'm a failure.
 - iv. I'm bad.
 - v. I'm responsible.
 - c. Safety
 - i. I'm gonna die.
 - ii. I'm not safe.
 - iii. I'm trapped.

Eliciting NCs

1. Magic Questions - Kiessling
 - a. "What does that say about you as a person?"
 - b. "What quality does a person possess who...?"
 - c. "What type of people...?"
 - d. "In your worst moment, what do you believe about yourself when you think of the experience?" (WE I Manuel)
2. The same disturbing event may harbor several NCs. Generally, the NC with the higher SUD is reprocessed first. However, one must also consider the NC of a particular target in relation to the broader target sequencing plan.
3. Clients who are "in their head," i.e., without insight into feelings, won't necessarily develop useful NCs easily. Rule of Thumb: If there's no corresponding body sensation, you probably haven't hit a useful NC.
4. In the early days of EMDR, much attention was given to articulating the NC with great exactitude. Then came emphasis on correct articulation of emotion. The current trend in EMDR and many other psychotherapies is for awareness, activation, and resolution of body sensations stored with disturbing memories.
5. Well-articulated NCs and emotions provide a useful channel into these sensations.
6. Choosing between two: "Which words are most connected to the disturbing feelings you have when you think of the incident? (state NC #1 i.e., 'I am not safe') or (state NC #2 i.e., 'I am inadequate.')"

Selection Criterion of PCs – Andrew Leeds

1. It affirms a positive self-referencing belief.
 - a. *However, sometimes PCs are sometimes not self-referencing, such as:*
 - i. "It's over"
 - ii. "She was incapable of love." *Add a self-referencing phrase to this type.*
 - b. It is not a negation of the negative belief. PCs organize thinking, feeling, and behavior in new ways.
 - c. Avoid magical thinking in PCs: "My father loves me." Better: "I am loveable now."
2. PCs focus on the client's desired *direction* of change. "I'm learning to love myself" may reprocess into "I love myself now." Accept a diminutive form during assessment.
3. The more generalizable to other areas of concern, the better
4. It elicits a positive affective resonance.

Other Considerations in eliciting PCs

1. Adaptive perspective to BOTH past incident AND presenting complaint
2. Initially acceptable/somewhat believable as a desired goal
3. Along a polar continuum from NC
4. NOT a negation of the NC ("I am NOT weak" would be "I am strong")
5. NOT magical thinking or absolute ("It didn't happen" "I will always be safe")
6. Useful questions
 - a. "When you bring up that picture (or experience) what would you prefer to believe about yourself instead?" (Shapiro)
 - b. "What words would you rather have when you think about that incident?" (Leeds)
 - c. "If you were quite self-actualized about this incident, what would you believe about yourself instead?"
 - d. "What would feel liberating to believe about yourself when this incident comes to mind?"

Integration Activity

Role play a Phase 3 Assessment with you being one of your clients. Tell the "therapist" what the target is and if it fits into a larger targeting sequence plan. Discuss the experience, then reverse roles and repeat.

References & Further Reading

- An EMDR Primer: From Practicum to Practice, Barbara Hensley Ed, Springer, 2009.
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- Core Belief Clusters, Roy Kiessling, <http://www.emdrconsulting.com/wp-content/uploads/2013/09/CORE-BELIEF-CLUSTERS.pdf>.
- Eye Movement Desensitization and Reprocessing : Basic Principles, Protocols, and Procedures, Francine Shapiro, Gilford Press, 2001.
- Healing the Heart of Trauma and Dissociation with EMDR and Ego State Therapy, Barry Litt, in "EMDR in Couples Therapy: An Ego State Approach," Carol Forgash and Margaret Copeley (Eds.) New York: Springer, 2007.