

# Chapter 36

## The Canaries in the Coal Mine

Much of what I suggest in working with clients with complex trauma is that we work in memory territories that are tolerable for the client. How do we know for sure that working in a particular memory territory is a bad idea today? We can't know for sure. We can generally know, for instance, that attachment wounds are difficult memory territory for most people who carry them. But there isn't a lot that we can know for sure. This chapter points out several helpful indicators that can shape your decision about the tolerability and resolvability of a particular memory on a particular day.

### What a VOC of One Means From the AIP Lens

The core of the AIP model is that we are always connecting stuck information into right-now adaptive information. Said differently, we are connecting information that is stored in your nervous system to other information that is already stored in your nervous system. How can we check for the presence of the needed adaptive information prior to working on a target? While not a perfect indicator, the validity of cognition (VOC) in Phase Tree is a clue. If the client reports a lot of distress in the memory but reports a VOC of one, this loosely translates to: "There is no part of me that believes that the positive belief might be true related to this memory." While it is possible that the client may be underestimating the amount of adaptive information or that a different positive cognition might be present enough to eventually resolve that memory, a VOC of one is often worth additional exploration. A VOC of one does seem to be a canary in the coal mine, indicating an absence of the very adaptive information that may be needed for this memory to resolve. While I may not abandon a memory in Phase Three, a VOC of one provides a compelling reason why a memory didn't resolve in the subsequent reprocessing phases when the client was able to activate tolerably and notice deeply in the session. It's always possible that the client simply does not have enough of the needed adaptive information for a memory to resolve. This information about this absence is coming as a gift. We need

to use it to help the client develop it by using parts work, promoting different relational experiences in real life, or doing more reprocessing of targets in adjacent but different memory networks where the client can endorse a VOC that is higher than one.

## Quickly Checking Who Is Responsible Prior to Working on the Memory

Guilt, shame, blame, and responsibility are a lot of what gives trauma its tar-like stickiness. You are likely to be aware prior to the reprocessing phases of EMDR therapy which of your clients blame themselves for everything that has ever happened to them. This blame is typically a protective response to protect the system from harder truths. The problem in EMDR therapy is that we cannot connect a lie to a lie. The nervous system will not allow it in EMDR therapy.

When the client and I are exploring a memory related to childhood sexual abuse, I may ask the client, “Who is the bad person in the memory?”

The client may say, “I am.”

“But how old were you in this memory, and how old was he?” I ask.

“I was five, and he was about fifty,” she says.

I ask, “When you get in touch with your most grown-up parts, the parts of you that pays bills and puts gas in a car, what percentage of those parts know that a child isn’t responsible for what a grown-up does to a child?”

If the client says “zero” or “nearly zero,” I am highly unlikely to suggest that the client works on that memory today in EMDR therapy, but we may work in different memory territories where the client does have some of the needed adaptive information present. Or I may continue to try to support adaptive information related to who is responsible for abuse in childhood during this session if the client is willing to engage in that exploration.

## Assessing for Preparedness to Work on an Attachment Wound Memory

Events have a beginning, middle, and end. Attachment wounds are about everything. As indicated earlier, be careful starting with attachment wounds before good attachment resources are in place or until adequate parts work has been done. But if the wounding is pervasive enough, there may not be any other accessible targets that don’t intersect with the existential abandonment and loneliness of childhood.

Much of the healing that happens in EMDR therapy around attachment wounds occur on a bridge of empathy where information from the most resourced client parts metabolizes the memory information brought by the child parts. How does EMDR therapy work when the most grown-up parts deeply hate, resent, and blame the child parts for what was done to it or for what the child parts did to try to get their needs met? It doesn't. If the most grown-up client parts and the client's kid parts share the same lies, it is unlikely that EMDR therapy around these targets will be productive. Parts work, perspective-taking exercises, psychoeducation, cognitive interventions, and working in different but adjacent memory territories in EMDR therapy can all be helpful.

As explained in the parts work sections, the following questions are helpful to assess if enhanced attachment resources may be needed:

- When you were young, who was really and consistently there for you?
- When you think about yourself at five, six, or seven years old, how do you feel about yourself? Do you feel a deep empathy, or do you blame or resent that child?
- Can you notice what happens in your body when you imagine the most grown-up parts of you being in the same room with the child parts of you?
- Can you notice what happens in your body when you imagine the most grown-up parts of you giving a hug to a child part of you?

## When Clients Want to Work With the Biggest Monsters First

In many thousands of EMDR reprocessing sessions with my clients, I remember four sessions as the most distressing, intense, and dysregulated sessions I have ever observed in EMDR therapy. Two of those four were with clients who insisted on working with their touchstone memories during the first or second reprocessing sessions. In both cases, I clearly and strongly recommended that we start somewhere else. Both were prepared to start work in EMDR therapy. Both had attachment resources in place. I gave sound reasons why working on memories that large are likely to cause more problems than they solve and why it makes better sense to start with some smaller things first. I used the Marathon metaphor and the Boat and the Whale metaphor. Both insisted that they were prepared to work on a memory this size. They were not. In addition to a

horrible response in sessions, both reported significant decompensation in the days following those difficult sessions.

If I had to do it again, I wouldn't change much. I told both of these clients at the beginning of their therapy with me that I'm not confused about whose therapy this is. I explained that therapy is a collaborative process and that their input is essential. I also communicated clearly what my concerns were with their plan. What I did not tell you in the story above is that I have probably had hundreds of sessions with other clients who indicated that they wanted to work in memory territory that I believed was probably too big to start with in EMDR therapy. Do you know what happened in those cases? Nothing dramatic. In many cases, my intuition was right, and the client agreed after a few sessions to pivot to more tolerable areas for a while. In other cases, the clients cleared their memories in a session or two.

I am discussing this topic in this section because EMDR therapy often does not play well with agendas that are too heavy. When either the client or the therapist brings too strong or too heavy of an agenda, the agenda may force us to look at the world through a straw and prevent access to the broader view that may be needed for actual healing to occur.

## Why Overactivation Is a Problem in EMDR Therapy

In EMDR reprocessing phases, we need distressing content to come, but it needs to come into awareness in tolerable pieces and at digestible rates. It is important to recognize that distress with clients with complex trauma doesn't want to come into awareness at measured rates. It is crucial to realize that many of our clients have a baseline traumatic load that significantly impairs their window of tolerance. Activating, but not overactivating, memory content is a skill that we need to develop in clients who present at sessions with very narrow windows of tolerance.

On the most fundamental level, we are always connecting stuck information with existing adaptive information in EMDR therapy when client are working effectively. The more activated a client is, the more salient and true the maladaptive beliefs feel. Also, many forms of adaptive information "live" in the most adult or grown-up parts of the client's system. These are the parts that, hopefully, understand fundamental truths like children are not responsible for what grown-ups do to them. A lot of adaptive information is stored in our neocortex, the part of the brain that tends to get muted when people with complex trauma get overactivated.

In short, overactivation can billow oxygen into the maladaptive fires at the very moment oxygen is being deprived of the parts of the brain that the distress most needs to connect with and be metabolized into. Overactivation typically makes adaptive information less accessible to the system.

Noticing is a bright yellow line in the center of the EMDR therapy road. It's the big center wheel of the metaphorical EMDR therapy tricycle. It is difficult for anyone to notice deeply on the edge of panic. It is difficult to notice distress when distress appears everywhere. Overactivation impairs the most active of the active ingredients essential to recovery in EMDR therapy.