

# **Chapter 10**

## **How We Train You**

We do not train you to work with clients with complex trauma. We train you to work with someone who is relatively healthy, has adaptive information, knows how to notice, is embodied enough to notice, and has the emotional capacity to activate and tolerate deeply noticing present distress. We train you to work with the type of clients who rarely show up at the agencies where you work. The clients who do show at community mental health agencies typically have pervasively traumatized nervous systems, decades of severe event trauma, childhoods filled with unmet developmental needs (thus significant confusion about those needs), few adaptive coping strategies, and profound deficits in insight and adaptive information. In short, EMDR therapy was not developed using clients with the severity and acuity of trauma that many of you treat on a daily basis.

Shapiro conceptualizes EMDR therapy as a brief approach to psychotherapy. Her initial research reinforced her central assertion that EMDR therapy is effective and efficient. However, there are no brief approaches to psychotherapy adequate to treat decades of daily, severe, and pervasive wounding. EMDR therapy is an effective way to treat clients with complex trauma, but no therapy will ever be both brief and comprehensive with complex trauma. The imprints of severe trauma are deep and redundantly placed. Hundreds of thousands of years of survival instinct are organized around the imperative to attend to the lessons taught by awfulness. These lessons aren't meant to be unlearned with ease.

We have remarkably few ways to heal. EMDR therapy is one of those few ways. I cannot accept that EMDR therapy is a way that humans can heal, yet deny this treatment to the people who most need to heal simply because they do not meet the metrics of a healthy nervous system. If EMDR therapy was not developed using this population, our use necessitates finding and utilizing reasonable adjustments that allow us to retain the central qualities of what makes EMDR therapy effective. Shapiro recommends many modifications for clients with complex trauma. In fact, Francine Shapiro is not nearly the Shapiro purist that many trainers and consultants suggest. A close reading of Shapiro's (2018) book finds

her pointing to many of the territories that are identified, explored, and expanded upon here.

My goal is to help you leverage what you already know about complex trauma and to help you shape your interventions to match the unique qualities and realities of your client's nervous system. This is the essence of solid, effective, and efficient clinical practice. To do otherwise is to attempt to shove our clients with complex trauma through a machine built for someone with a completely different shape.