

Ethics & Supervision in EMDR Therapy

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EMDRIA Certified Therapists & Approved Consultants

Objectives

- To define competency as an EMDR therapist and identify strategies for maintaining competency within the AIP model and 8 phases of EMDR therapy.
- To discuss the ethics surrounding informed consent as an EMDR therapist and evaluate the unique issues that may present within the AIP model and 8 phases of EMDR therapy.
- To identify issues surrounding boundaries as an EMDR therapist and to identify methods to address boundary issues that may come up within EMDR therapy.
- To assess the use of technology in the 8 phases of EMDR therapy and how best to utilize it within AIP model.
- Identify the differences between supervision and consultation within EMDR Therapy
- Identify 5 major components of ethical issues that may arise in supervisory relationships
- Identify 2-3 examples of ethical dilemmas within the supervisory context of EMDR therapy

Ethics & EMDR Therapy

Definition of EMDR

- Definition of EMDR Therapy
 - <https://cdn.ymaws.com/www.emdria.org/resource/resmgr/Definition/EMDRIADefinitionofEMDR.pdf>
- EMDR as an evidence-based treatment
 - 20 controlled studies supporting the use of EMDR therapy
 - Francine Shapiro Library
 - American Psychiatric Association (2004)
 - American Psychological Association (2017)
 - International Society for the Traumatic Stress Studies (2018)
 - U.S. Department of Veteran Affairs and Department of Defense (2017)
 - World Health Organization (2013)
 - Substance Abuse and Mental Health Services Administration (SAMHSA) (2011)

PTSD versus Trauma Based Diagnosis

- Understanding trauma
- Trauma-focused care vs Trauma-informed care
- Adverse life experiences (not exclusive to “big T trauma”)
- AIP Model and looking for links to past experiences
- Advocating for the use of EMDR therapy
 - Dealing with resistance from supervisors/administration

Competency

- As defined by professional ethics
- “Practicing within scope”
 - What does this mean?
 - Education, training, license, certification, consultation, supervision, professional experience
 - Do no harm

“Adequate training means greater likelihood of success- and less likelihood of harm” -F. Shapiro

Approved Consultant

- * At least 3 years post basic training
- * Additional 20 hours of consultation (focused on learning the skills of being a consultant)
- * Additional 12 hours of EMDRIA-Approved education
- * At least 300 EMDR sessions with 75 clients
- * 3 letters of recommendation (including one from primary consultant)
- * Fees to EMDRIA (see www.emdria.org)

Certified EMDR Therapist (EMDRIA)

- Successful completion of an approved Basic Training Program
- 20 hours of consultation with any EMDRIA-Approved Consultant
 - ⇒ Although you may use a combination of consultants, one primary consultant must complete approximately 10 of the hours to write you a letter of recommendation upon completion of your hours; simple signature verification suffices on rest of the hours.
 - ⇒ Only 10 of these hours can be completed in the group format
 - ⇒ Up to 15 of these hours can be completed with a consultant-in-training as long as they are working with an Approved Consultant
- 12 hours of EMDRIA-Approved special topics courses or other approved continuing education (e.g., Annual Conference, ICM or other provider)
- Two years of professional licensure in your field (or be on post-Masters licensure track) and completion of at least 50 EMDR sessions with 25 clients; both requirements must be attested to via a notarized statement
- Additional 2 letters of recommendation from a colleague (does not have to be EMDR-specific)
- Fee to EMDRIA (see www.emdria.org); Renewal period every 2 years (additional 12 hours of EMDRIA-approved continuing education plus fee)

Certificate of Basic Training

- Part 1 & Part 2 Basic Training Courses (6 days)
- 10 hours of supplementary consultation (any combination of group or individual hours can be completed)

Competency as an EMDR Therapist

- EMDR Therapy Training Requirements
- EMDRIA Approved Training Programs
- Certification Criteria:
 - 1) EMDRIA Approved Training
 - 2) License/Certification
 - 3) 2 yrs experience in field of license; at least 50 EMDR sessions with 25 clients
 - 4) 20 hrs consultation with EMDRIA Approved Consultant in EMDR
 - 5) Letter(s) of recommendation from EMDRIA Approved Consultant(s)
 - 6) 2 letters of recommendation re: use of EMDR therapy
 - 7) 12 hrs EMDRIA credits
 - 8) EMDRIA Code of Conduct

Maintaining Competency

- Not one and done
- Continuing education and consultation
- Working with special populations
 - Dissociative disorders
 - Childhood sexual abuse
 - Substance use and addictions
 - Children
 - Veterans and first responders
 - LGBTQ
 - Cultural diversity
 - Physical and Developmental disabilities

Diversity and Cultural Competency

“EMDRIA believes that cultural competence includes a deep and evolving appreciation of the role that cultural forces play in the well-being of all people, both constructive and destructive. We encourage culturally competent clinicians to pursue knowledge and understanding regarding the general importance of culture as well as cultural awareness specific to service to each client; and to further adapt and maintain EMDR therapy skills that are culturally sensitive and effective.”

EMDRIA's statement on Diversity and Cultural Competency:

<https://www.emdria.org/page/diversitystatement>

“As trauma-informed EMDR therapists, we have tools to liberate our clients from the restrictive effects of socially experienced dehumanization” M. Nickerson

EMDR Therapy as a Culturally Competent Model

- Client-centered
- Not dependent on language
- Use with interpreters
- Ability to use non-verbal communication (art)
- Use in group settings
- Memories can be kept private
- Multiple memory components (cognitions, emotions, body states)
- Simple assessment tools
- No homework
- Brain biology in AIP model
- Respects inherent healing mechanisms
- Adapts BLS methods
- Builds on existing resources/beliefs
- Mindfulness strategies valued across cultures
- Therapist attunement/non-intrusiveness
- Clients identify the problem(s)
- Use with range of ALEs

(Nickerson, 2017)

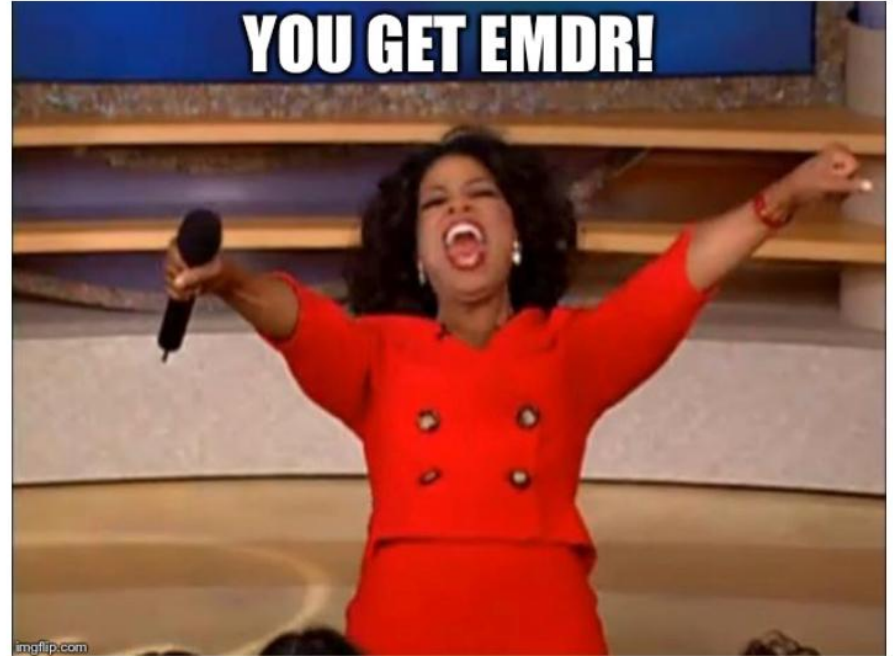
Competency in Client Safety

- What are the risks associated with EMDR therapy?

- Phase 2 work and resourcing
- Special populations
- Advance topic trainings in EMDR therapy

Practicing EMDR therapy skills

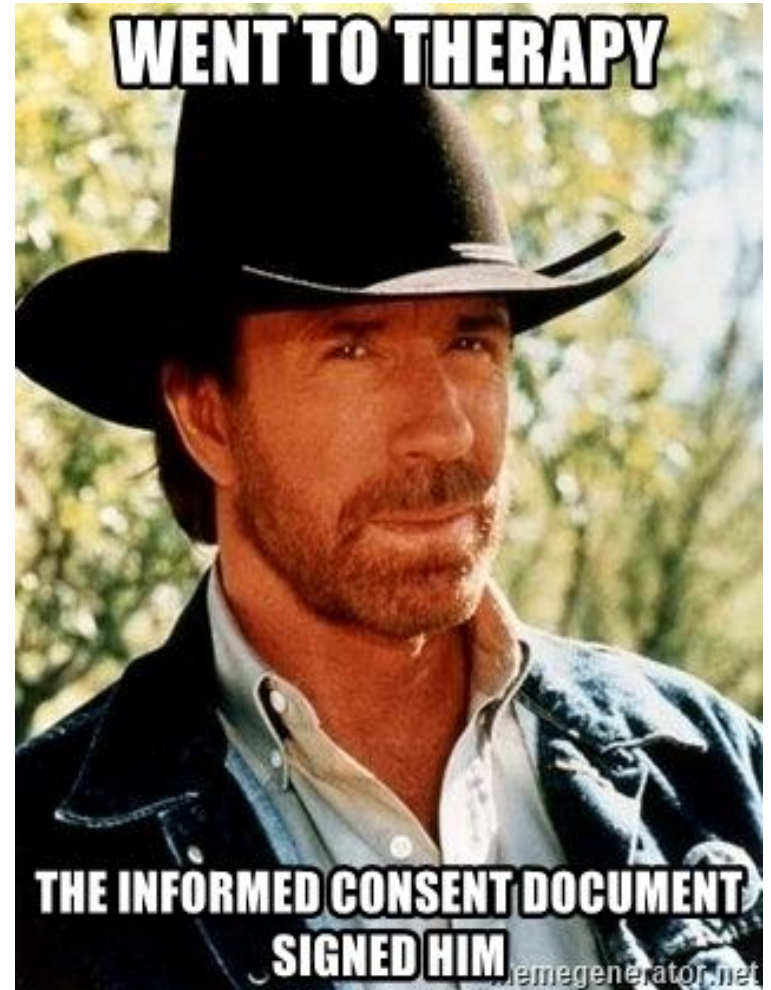
- Guidelines
- Safety
- Boundaries
- Informed consent



Case Discussion of Competency

Informed Consent

- As defined by professional ethics
- Informed consent and the AIP model



Informed Consent - Good Will Hunting



Informed Consent

- How to explain EMDR therapy to clients
- Issues to include when discussing EMDR therapy with clients
 - What to expect from trauma treatment
 - Phases of trauma treatment and 8 phases of EMDR therapy
- Cultural competency
 - M. Nickerson: *Cultural competence and healing culturally based trauma with EMDR therapy*

Informed Consent

- Special considerations when working with traumatized clients and dissociation
 - Where there is trauma, there is dissociation
 - Consent with parts work
- Ongoing consent throughout the 8 phases
- Special population considerations

Informed Consent with Children and Adolescents

- How to talk to caregivers about EMDR therapy
- How to include caregivers in EMDR therapy
- Dealing with client or caregiver pressure to rush the process
- EMDR therapy as an approach to psychotherapy

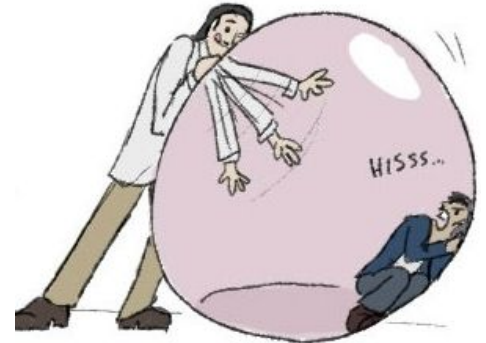
Case Discussion of Informed Consent

Boundaries

- As defined by professional ethics

Physical Touch and EMDR Therapy

- “Social workers who engage in appropriate physical contact with clients are responsible for setting clear, appropriate, and culturally sensitive boundaries that govern such physical contact” (NASW, 2013)



Don't have sex with your clients.

Boundaries - What About Bob?



Boundaries

- Transference - describes a situation where the feelings, desires, and expectations of one person are redirected and applied to another person. Most commonly, transference refers to a therapeutic setting, where a person in therapy may apply certain feelings or emotions toward the therapist
- Countertransference - redirection of a psychotherapist's feelings toward a client or, more generally, as a therapist's emotional entanglement with a client

Transference - The Sopranos



Transference

- Special population considerations
 - Childhood sexual abuse
 - Children of addicted parents
 - Attachment
- Romantic feelings
- Dependence/need for care
- Anger/Betrayal

Countertransference

- Boundaries and self-disclosure
- Triggers
- Difficult clients
- Doing your own work
- Self-care



Confidentiality

- HIPAA (Health Insurance Portability and Accountability Act of 1996) is United States legislation that provides data privacy and security provisions for safeguarding medical information
- Importance of maintaining confidentiality
- When to break confidentiality
- Limitations of confidentiality

Confidentiality - Mad Men



Dual Relationships

- Specialization as an EMDR therapist and referrals from family, friends, coworkers, the cashier at Kroger



Working with Therapists as Clients

- Guidelines
- Special considerations
- Potential dual relationships
- Managing contact in the therapy community
- Therapy versus consultation

Case Discussion of Boundaries

EMDR Therapy and Technology

- Assessing the use of technology in the 8 phases
 - Communicating between sessions
 - Scheduling remote sessions
 - Using online resources
 - Consultation questions/requests for referrals and confidentiality
 - Social media (friend requests; mutual connections)
 - HIPPA compliance of technology



Case Discussion of Technology in EMDR Therapy

Lunch Break!

EMDR Therapy and Supervision

Supervision vs. Consultation

- **Supervision** - quantitative and qualitative evaluation of the supervisee's performance; professional guidance to the supervisee; approval of the supervisee's intervention plans and their implementation; the assumption of responsibility for the welfare of the supervisee's clients; and assurance that the supervisee functions within the limits of their license
- **Consultation** - a collaborative relationship between two mental health professionals. The consultant values the integrity and independence of the individual who is consulting with them. It is the applicant's client, and the applicant maintains primary responsibility for the decisions involving treatment. Therefore, the consultant only advises regarding the utilization of EMDR and never makes demands of the applicant beyond his/her (the consultant's) domain.

Types of Supervision

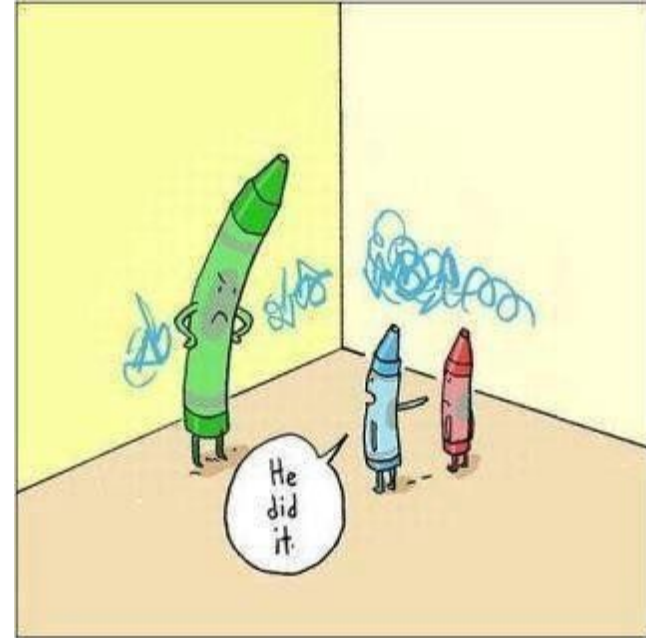
1. Administrative
2. Educational
3. Supportive



(NASW, 2013)

Supervision and Liability

- Responsibility and accountability
- Apply ethical standards to supervisory relationship
 - Competency
 - Cultural competency
 - Dual relationships
 - Confidentiality
 - Reporting
 - Liability
 - Shared liability of client services
 - Negligent supervision
 - Conduct of supervisees
 - Vicarious liability
 - Importance of understanding liability/responsibilities



(NASW, 2013)

Interdisciplinary Supervision

Guidelines for Supervising Non-EMDR Therapists

- Phase 1 - History Taking
 - Trauma informed versus trauma focused
 - Case conceptualization
- Phase 2 - Preparation
 - Resourcing
 - Grounding
 - Mindfulness

Scope of Practice in Supervision

- Competency as an EMDR Therapist
- Consultant-in-Training
- Approved Consultant Criteria:
 - EMDRIA Approved Training
 - Licensure
 - 3 years post EMDRIA Approved training
 - 300 EMDR sessions with at least 75 clients
 - 20 hours of consultation-of-consultation by an AC
 - Letter of recommendation from AC(s)
 - 2 letters of recommendation re: EMDR therapy
 - 12 hours EMDRIA Credits
 - Professional Code of Conduct

Contracting for Supervision and Consultation

- Purpose
- Considerations
- Examples of contracts



Competency as a Consultant

NASW Code of Ethics 3.01(a)

“Social workers who provide consultation should have the necessary knowledge and skill to supervise or consult appropriately and should do so only within their areas of knowledge and competence”

Case Discussion of Supervision versus Consultation

Boundaries in Supervision and Consultation

NASW Code of Ethics 3.01(b)

“Social workers who provide supervision or consultation are responsible for setting clear, appropriate and culturally sensitive boundaries”



Boundaries in Supervision

Boundaries with supervisees/consultees

Dual relationships in the EMDR community

Self-disclosure in Supervision and Consultation

Where to draw the line



Safety in Supervision and Consultation

- Special considerations
- Special populations
- Dissociation

Case Discussion of Boundaries in Supervision

Supervision with Alternative Practice

Appropriateness for EMDR therapy

- Special populations
 - Dissociation
 - Children
 - Substance use

EMDR therapy as a therapeutic approach to treatment

- “My client isn’t ready for EMDR therapy”
- “My client isn’t appropriate for EMDR therapy”
- “I haven’t started EMDR therapy with my client”

Feedback in Supervision & Consultation

Providing feedback to supervisees/consultees

Expectations from supervisor/consultant for recommendations to EMDRIA

Tools for evaluation

- Case presentation
- Outcome measures
- Video
- Live consultation



Current Issues with EMDR Consultation

Consultation Packet:

https://cdn.ymaws.com/www.emdria.org/resource/resmgr/ct_ac_forms_2017/consultation_packet_2019.pdf

Concerns from Consulees

- Consultants as “Gatekeepers”
- Standardization of evaluation
- Letters of recommendation
- Consulees “shopping around” for consultants

(Leeds, 2019)

Questions, Comments?

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Resources

NASW Code of Ethics:

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>

APA Code of Ethics: <https://www.apa.org/ethics/code/>

EMDRIA: <https://www.emdria.org>

Ohio Counselor, Social Work, Marriage & Family Therapist Board: <https://cswmft.ohio.gov/>

Institute for Creative Mindfulness: www.instituteforcreativemindfulness.com

International Society for the Study of Trauma and Dissociation <https://www.isst-d.org/>

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