Testimony to the Texas Senate Committee on Veteran Affairs
by Christie Sprowls, PsyD
On behalf of the EMDR International Association (EMDRIA)
May 3, 2022

Introduction

Good afternoon, I am Dr. Christie Sprowls, and I am honored to be able to address issues of PTSD and veterans. I am a board licensed Psychologist in the state of Texas and have practiced in Austin since 1987. During this time, I have served as the Clinical Director for St. David’s Medical Centers Adult and Adolescent Psychiatric Services, and have been an Adjunct Professor, International Trainer, and an Executive. I have been a trainer for the EMDR Institute Humanitarian Assistance Program and have conducted trainings since 1994. I have trained in Indonesia, China, Bangladesh, 7 countries in South and Central America, Turkey, Japan, and Cuba, as well as in disaster sites closer to home, such as New Orleans, Fort Hood, and Oklahoma City. I have worked with UNICEF, the United Nations and the US Army and various agencies and NGOs. I am one of just seven authorized trainers of the EMDR Institute’s Regional Trainings and conduct EMDR trainings twice yearly in Texas.

I’m here as a content expert for the EMDR International Association (EMDRIA). EMDRIA is headquartered in Austin and has been located here since the beginning of the organization 33 years ago. EMDRIA is partnered with almost 90,000 EMDR mental health trauma experts around the world, with 13,000 US members. There is a strong presence of EMDR practitioners throughout Texas.

EMDR Therapy Global Recognition

Eye Movement Desensitization and Reprocessing Therapy is a mouthful to say. The big words sound complex, so we shorten it to EMDR therapy. While the therapy’s name is long, EMDR therapy’s effectiveness for PTSD and trauma related mental health challenges is clear and convincing. The National Center for PTSD, part of the US Department of Veteran Affairs, says this: “EMDR is a trauma-focused psychotherapy that is one of the most studied treatments for PTSD...EMDR has the strongest recommendation for being an effective treatment in most clinical guidelines for the treatment of PTSD.”
Currently, there are more than 30 randomized control trials (RCTs) demonstrating the effectiveness of EMDR therapy for PTSD. There are indications that EMDR therapy can be more cost-effective than some other approaches, with fewer sessions needed to produce positive results. There is also emerging evidence that EMDR is also effective with PTSD and comorbid mental health conditions, and for trauma related mental health injuries that may not involve a formal PTSD diagnosis.

These research findings are why EMDR therapy is recognized as an effective treatment not only by the US Department of Veteran Affairs, but also by the Department of Defense, and SAMHSA (the Substance Abuse and Mental Health Services Administration). In the US, EMDR is recognized as an effective treatment for trauma by the American Psychiatric Association (2004) and the American Psychological Association (2017).

There are many international recognitions as well. These recognitions include, among others:

- **Australian Guidelines for PTSD** (2020)
- **International Society for Traumatic Stress Studies** (2018)
- **National Institute for Health and Care Excellence** (2018)
- **The Cochrane Database of Systematic Reviews** (2013)
- **World Health Organization** (2013)

EMDR has also been endorsed as effective by many national health institutes. Among them are:

- Clinical Resource Efficiency Support Team (CREST) of the Northern Ireland Department of Health
- Dutch National Steering Committee for Health Care
- French Haute Autorite de Sante (French National Authority for Health)
- French National Institute of Health and Medical Research (INSERM)
- Israeli National Council for Mental Health
The Core of EMDR Therapy

EMDR therapy works at the intersection of neurobiology and psychotherapy. While we are still learning much about the human brain, we know that memories, spurred by some specific stimuli, can trigger a traumatic stress response. If left untreated, the unresolved memory can lead to debilitating symptoms and a PTSD diagnosis. EMDR therapy addresses how the brain and body respond to these memories in a way that allows an individual to resolve the traumatic response. It allows one to be able to remember the event without an involuntary response of fight, flight, or freeze. Resolving these memories reduces maladaptive behavior, depression or anxiety, and potential suicidal thoughts. EMDR offers the promise of healing for traumatic psychological injury.

EMDRIA has produced a 9-minute video that introduces EMDR therapy and how it is applied in treatment. It can be viewed on the EMDRIA Website under the tab About EMDR Therapy.

Use of EMDR Therapy for PTSD with Veterans and First Responders

Veterans returning from service to the United States have experiences that are unique. Serving in a war theater exposes one to conditions and experiences that can lead to depression, anxiety, moral injury, trauma related disorders, and PTSD. EMDR, for many veterans, is a treatment of choice.

EMDRIA has compiled and published a report on the scientific status of EMDR therapy for combat related PTSD. If you want to know more from the scholarly use of EMDR for combat related PTSD, I would encourage you to refer to that report. EMDRIA and I would stand ready to help you with a review of that literature as it would be helpful to you.

However, in addition to scholarly research, there are real life examples of the applied use of EMDR in normal clinical settings. One example of this use EMDR for veterans can be found in the Soldier Center,
located in Tennessee. The Soldier Center has conducted research into the effectiveness of EMDR and shown positive outcomes in the use of EMDR to resolve PTSD.

I trained military personnel at Fort Hood for 6 years on how to practice EMDR Therapy. This work included training psychiatrists, psychologists, social workers and chaplains how to do EMDR therapy.

Two stories stand out in my mind:

An Army Ranger came to work with me and stated that he could not sleep at night, and that if he could sleep, he would have terrifying nightmares. He shared that in the line of duty he often volunteered to check for land mines, so that his fellow soldiers would not have to risk their lives. They considered him a hero. He told me he had done this because he didn’t care whether he lived or died after surviving several deployments. We focused treatment on the combat trauma for several sessions, until one day he jumped out of his chair and said, “By God, Dr. Christie, you have given me my life back. I never believed I could heal from this trauma.” He has gone on to find employment that he enjoys tremendously and has reported that he no longer has the nightmares. He is on his feet again.

Another case I worked on was with a Colonel. He reported that he had a recurring nightmare every night along with daily flashbacks for 20 years after he served. He felt hopeless that he would ever get back to having a normal life. After 2 sessions of EMDR therapy, he came back in to see me and stated that he was no longer having nightmares or flashbacks.

These are just two examples of so many that could be included. They provide real life examples of what the research shows as an effective treatment.

Today, and every day, Veteran Centers around the US provide EMDR therapy to veterans. There are two problems we face now. First, access is limited by the availability of trained professionals who can deliver EMDR. Second, there are still some who are unaware of the availability and effectiveness of EMDR. We have training and education needs so that veterans and those who help them can know this effective treatment exists, while also ensuring that EMDR trained professionals are present to provide help.
Finally, I would note that EMDR Therapy is used broadly in Texas among law enforcement, first responders, and victims of crime. As one example, the Austin Police Department (APD), along with the Victims of Crime Office, have invested approximately $200,000 in training and support over the last several years so that officers and crime victims might have access to EMDR therapy. While it is beyond the scope or appropriateness of this testimony, if you watch the video referenced above on the EMDRIA website, you will see Carol Logan, Ph.D., psychologist for the APD, sharing general stories of the impact EMDR therapy has had on officers in Austin, and their general reaction to the therapy. Additionally, other LEO departments throughout Texas, including Dallas, are exploring, or have begun work to do something like Austin’s program.

**Conclusion**

Texas is looked to by many states as a leader on several policy fronts. We have one of the largest military/veteran populations in the US, (2nd as reported in 2017 in active duty and reserves, and 1.45 million veterans as reported in 2020). Considering the sacrifices our Veterans have made, it is incumbent on us as Texans to ensure that we are a leader in doing our part to provide necessary services for them. Effective treatments such as EMDR therapy are necessary, and in fact, crucial as a component of serving Texas Veterans.

PTSD can be challenging to treat even with an effective treatment available. Coordinated systems and continuums of care can maximize the effectiveness and lower overall costs of PTSD treatment. EMDRIA strongly recommends that, as the Committee and the Legislature consider future legislation and programming, that EMDR therapy be part of the core treatment identified for use. As you consider future legislation or policy proposals, budgets, and programming, or in exercising oversight, EMDRIA stands ready to help you. We want to ensure Texas builds its leadership in serving Veterans as we fulfill our mission to create global healing, health, and hope.
Thank you for your time today, and I look forward to any questions or providing further information that may help you in your important work.