

Utilizing Anti-Oppressive Practice and Neurodivergent Affirmative Approaches in Teaching EMDR Therapy



EMDRIA Trainer Day
Practical Strategies and Tools to Enhance the
Learning Experience During EMDR Training
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Roshni Chabra

- Licensed MFT in California
- EMDRIA Approved Consultant/Certified Therapist
- EMDR Trainer, Institute for Creative Mindfulness
- Co-owner, Chief Clinical Officer and MET(T)A (Mindfulness EMDR Treatment Template for Agencies) Protocol Agency Director at StartAgain Associates, Inc.
- Founder and President of the Lavender Healing Collective, a group practice dedicated to prioritizing the mental health of BIPOC LGBTQ+ communities
- Over 20 years of experience in the mental health field
- Has served various populations including LGBTQ+ youth and adults, couples, families, probation and foster youth, as well as neurodivergence, sexual violence, addiction, complex trauma, chronic pain and illness.
- Worked in the Rape Crisis Movement for five years providing direct services to survivors as well as taking on a leadership/management role
- Worked in Wraparound for eight years

Francine Shapiro

- “Can we learn from each other without prejudice so that the wisdom of the field can be united to treat each client as a whole person?”
- “No person is expendable, and no one is without worth. Can we make our treatments so comprehensive and so robust that no one will be lost?”

Shapiro, 2002, p. 6

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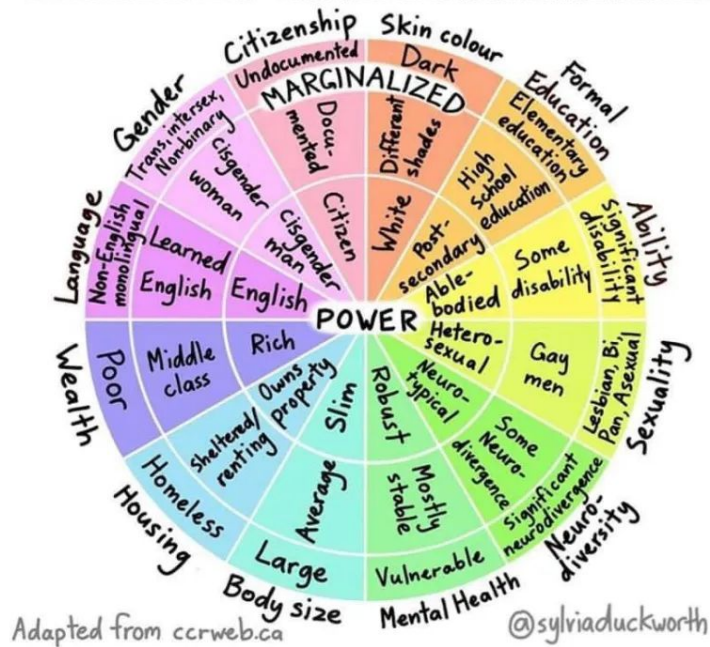
Oppression: The systematic, institutionalized, pervasive and routine mistreatment of and discrimination against individuals because of their membership in groups identified by gender, race, religion/faith, socioeconomic status, sexual orientation, ability, neurodiversity, body size, language, tribal affiliation, and other differences—groups on the “downside of power.”



Preston, Tiombe, et al. Dismantling Oppression Group
California Coalition Against Sexual Assault

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WHEEL OF POWER/PRIVILEGE



Anti-Opressive Practice

- “Dynamic process based on the changing complex patterns of social relations.”
- “The driving force of anti-oppressive practice is the act of challenging inequalities.”

Anti-Oppressive Practice

- A form of social work practice which addresses social divisions and structural inequalities in the work that is done with people whether they be users (“clients”) or workers.
- Aims to provide more appropriate and sensitive services by responding to people’s needs regardless of their social status.

Morgaine & Capous-Desyllas, 2020, p. 21

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Anti-Oppressive Practice

- Indicates an explicit evaluative position that constructs social divisions as matters of broad social structure, at the same time as being personal and organizational issues.
- It looks at the use and abuse of power not only in relation to individual or organizational behavior but also in relation to broader social structures.
- These factors impinge on people’s life stories in unique ways that have to be understood in their socio-historical complexity.

Clifford, 1995, p. 65

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Anti-Oppressive Practice Embodies

- Person-centered philosophy
- Egalitarian value system concerned with reducing the deleterious effects of structural inequalities upon people's lives
- Methodology focusing on both process and outcome
- A way of structuring relationships between individuals that aims to empower users by reducing the negative effects of social hierarchies on their interaction and the work they do together

Morgaine & Capous-Desyllas, 2020, p. 21

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Five Key Concepts of Anti-Oppressive Practice

- Engaging in critical self-reflection
- Assessing participants' experience of oppression
- Empowering participants
- Working in partnership
- Maintaining minimal intervention

Dalrymple & Burke, 2006; Danso, 2009, as cited in Morgaine & Capous-Desyllas, 2020

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Systemic Oppression

- “Policies and practices entrenched in established institutions, which result in the exclusion or promotion of designated groups. It differs from overt discrimination in that no individual intent is necessary.”
- “Inequalities rooted in the system-wide operation of a society that excludes substantial numbers of members of particular groups from significant participation in major social institution (Alberta Civil Liberties Research Centre, 2021).”

Mcleod, 2021

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Neurodivergent

The term “neurodivergent” describes people whose brain differences affect how their brain works. That means they have different strengths and challenges from people whose brains don’t have those differences. The possible differences include medical disorders, learning disabilities and other conditions. The possible strengths include better memory, being able to mentally picture three-dimensional (3D) objects easily, the ability to solve complex mathematical calculations in their head, and many more.

Neurodivergent isn’t a medical term. Instead, it’s a way to describe people using words other than “normal” and “abnormal.” That’s important because there’s no single definition of “normal” for how the human brain works.

The term “neurodivergent” came from the related term “neurodiversity.” Judy Singer, an Australian sociologist, coined the word “neurodiversity” in 1998 to recognize that everyone’s brain develops in a unique way.

Like a person’s fingerprints, no two brains — not even those of identical twins — are exactly the same. Because of that, there’s no definition of “normal” capabilities for the human brain.

Lipscomb & Ashley, 2021

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Neurodivergent Affirmative Teaching

- Difference as a strength
- Everyone learns differently
- The trauma of learning as a neurodivergent training
- The difference between fairness and 'the same'

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Neurodivergent Affirmative Teaching

- Offer accommodations in logistics email as well as at the beginning of the first AND second day
- Closed captioning
- Encourage trainees to create a learning environment for themselves and work to do the same
- Allow trainees to turn off their video for a short period of time as long as they notify Practicum Facilitator or Trainer
- Allow trainees to ask questions (allow time) in chat or by raising their hand to increase and check for learning
- Familiarize yourself with neurodivergent burnout
- Make it okay to make mistakes by modeling self compassion
- Affirmations about learning and the challenges inherent in learning EMDR Therapy
- Flexibility: be willing to make adjustments

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Adaptations

- Spend more time providing psychoeducation on the front end
- Trainer transparency regarding positionality and social location
- Create a safer space for the trainees
- Spend more time to get the client used to how this method will impact the client's experience with EMDR (e.g. feeling overwhelmed)
- Provide follow up at the end of session and afterward. Preparation for leaving includes sensitivity to external world and racialized reality.

Lipscomb & Ashley, 2021

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EMDR Therapy as a Complete Psychotherapy to Promote Healing on a Systemic Level

- “An open system such as EMDR allows for the synergistic effects of additional therapy methods and relationship stances” (Norcross & Shapiro, 2002, 349).
- “The naming and acknowledgment of systemic oppression allows EMDR therapy to become a powerful instrument of both individual and community healing” (Levis & Siniego, 2017, p. 93).
- “It is the therapist's understanding of the sociopolitical and cultural realities within which therapy exists that allows EMDR therapy to become an agent of social change” (Levis & Siniego, 2017, p. 93)

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THANK YOU!!



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