

Consultant Day

Panel Discussion: Challenges, Dilemmas, and Opportunities in EMDR Consultation
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Panel Questions:

1. Working with consultees who are not getting the standard protocol. How do you handle it? (Laura Steele)

a. Talking Points:

- i. Every consultation session – restate that the 8-phases of treatment provide a comprehensive view of the clients presenting problems and experiences that have contributed to the current symptoms, as well as those needed to bring the client to a new state of psychological health (*Shapiro, 2007*).
- ii. The eight-phases of EMDR provide a systemic way to explore and process negative experiences that are contributing to the current dysfunction (*Shapiro, 2007*).
- iii. Regardless of experience, I find it helpful to focus on reviewing the AIP model, and 3-pronged approach.
- iv. Case conceptualization is grounded in the Adaptive Information Processing (AIP model). The AIP model is used to explain clinical problems and the link to the past, predict successful treatment effects, and guide clinical practice (*Shapiro, 2007; Shapiro, & Liliotis, 2010*).
- v. Additional focus on phase one and two each consultation session is helpful in developing clinical skills necessary for new clinicians (exploring presenting problem, identifying strengths/limitations, support systems, building therapeutic relationship, etc.).

2. How can EMDR Consultants consider different types of learning to guide consultees? (All Panelist)

a. Talking Points:

i. Annie:

1. It is intimidating to come into this field, so being inviting and making it comfortable is important. This is a skill that we have to acquire.
2. Consider what type of consultation is best (i.e. one on one or group consultation)
3. During the initial meeting, ask how the consultee learns. This will help you understand your consultee's way of learning through discussion (*Rydberg, 2024*).

ii. Jenay:

1. Since your consultees come from diverse backgrounds and with various years of experience in the field, it is essential to know the different learning styles (*Alkooheji, & Al-Hattami, 2018*).

- a. This can also produce a lot of anxiety for individuals who are learning EMDR as well as consultants in training starting out.
 2. Understanding the four different learning styles (i.e. visual, auditory, reading/writing, and kinesthetic) and how to implement them helps you cater to the needs of your consultee.
 3. It is helpful to utilize creative methods to enhance learning (i.e. podcast, books, videos, role plays/demonstrations, etc...)
 - iii. **Laura:**
 1. Reminding therapists that in addition to having different learning styles, we all bring different experiences to the learning process.
 2. Consultation is a part of the journey and it is important for everyone to focus on what they need at each step of the way (demonstrations, feedback, books, resources, etc.)
3. **What are some strategies to support consultees and clients including the impact of racism/historical trauma, and presenting problems concerning ethnicity, race, and culture? (Jenay)**
- a. Talking Points:
 - i. Ensure that you gather information about a person's race, identity, culture and lived experiences during Phase 1.
 - ii. It is important to acknowledge what it can feel like to have these discussions when the individuals have different backgrounds and identity markers. As consultants, it is important to learn into the discomfort rather than ignore it (*Lipscomb, & Ashley, 2021*).
 - iii. 6 tips to increase your comfort with exploring race and culture (*Archer, 2020; Ashley, & Lipscomb, 2020*).
 1. Acknowledge the impact of racial & historical trauma/issues
 2. Maintain a posture of cultural humility and anti-racism
 3. Use cultural and identity based questionnaire
 4. Validate their experiences to ensure they feel seen
 5. Learn ways to adapt your interventions/strategies to various groups of people
 6. Seek supervision/consultation
4. **What are some tips for working with consultees that work from non-profit organizations and might have inconsistency in attendance from clients or limit the number of sessions for treatment? (Annie)**
- a. Talking Points:
 - i. Pick three to six stable clients and use EMDR consistently.
 - ii. Do not try to do EMDR with all of your caseload.

5. How to support the continued growth as a consultant and the development of a growing mindset? What were some helpful things for you in your development as a consultant? (All Panelist)

a. Annie:

- i. Create opportunities for consultants to be in the active role of providing learning to participants in the basic training through learning management system. For example, answering questions of participants, being in breakout rooms with participants to monitor and take moments to gain confidence by asking questions.
- ii. Encourage the CIT should do other things to enhance their own learning like providing a mini training in their community or virtually for free
 1. (*Leads, 2016*)

b. Laura

- i. Ongoing engagement and networking with other therapists (Consultation groups, study groups, etc).
- ii. Participate in continuing education as a lifelong learning.

c. Jenay:

- i. Having opportunities to shadow more experienced consultants
- ii. Being part of a team of consultants & CITs at various levels