



EMDR Therapy and the Adaptive Information Processing (AIP) Model

This monthly newsletter was created primarily for our colleagues trained in Eye Movement Desensitization and Reprocessing (EMDR) who work with military, veterans, and their families. The purpose of EMDR and the Military-in-Action Newsletters is to promote continued dialogue regarding the efficacy and current developments with EMDR and its use with these special populations.

ATTENTION RESEARCHERS: If you are interested in doing research that addresses EMDR topics related to the military and you need additional funding, consider applying for the \$25,000 EMDR Research Grant Award.

\$25,000 EMDR Research Grant Award Details:

<https://emdrresearchfoundation.org/research-grants/25000-emdr-research-grant-award/#>

If you need access to expertise for a research project, don't hesitate to apply for the \$1,000

EMDR Studies



EMDR Study

Laub, B., Weiner, N., & Bender, S. (2017).

[A dialectical perspective on the adaptive information processing model and EMDR therapy.](#)

Journal of EMDR Practice and Research, 11(2), 111-120. doi:10.1891/1933-3196.11.2.111.

ABSTRACT:

Context:

This article proposes a dialectical perspective on the adaptive information processing (AIP) model (F. Shapiro, 1995, 2001) with application to eye movement desensitization and reprocessing (EMDR) therapy. Dialectical principles may contribute to a more detailed understanding of the way the AIP system works as well as adding new therapeutic guidelines. Our dialectical perspective is based on 2 propositions. The first is that the movement of the AIP system toward integration consists of 2 dialectical movements: horizontal and vertical. The horizontal movement is between various opposites of the individual such as danger versus safety, dependence versus independence, worthlessness versus self-worth. The vertical movement relates to whole/part shifts in which a whole becomes a part of the next higher whole. The synergetic flow of both dialectical movements is depicted as a spiral of the AIP system. The second proposition suggests that the AIP system operates through cycles of differentiation and linking. These cycles separate the condensed and fragmented memory network into parts, enabling new links to occur. Differentiation and linking are also discussed in relation to dialectical attunement and mindful dual awareness. Using clinical vignettes, we illustrate how this perspective can supply the EMDR therapist a map of the client's associative processing, enhance attuned therapeutic presence, and promote effective dialectical interweaves when processing is stuck.

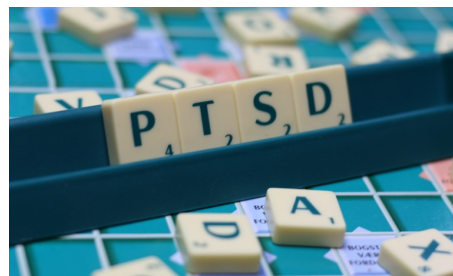
EMDR Study

Hase, M., Balmaceda, U. M., Ostacoli, L., Liebermann, P., & Hofmann, A. (2017).

[The AIP model of EMDR therapy and pathogenic memories.](#)

Frontiers in Psychology, 8.

doi:10.3389/fpsyg.2017.01578.



ABSTRACT:

Context:

Eye Movement Desensitization and Reprocessing (EMDR) therapy has been widely recognized as an efficacious treatment for post-traumatic stress disorder (PTSD). In the last years more insight has been gained regarding the efficacy of EMDR therapy in a broad field of mental disorders beyond

PTSD. The cornerstone of EMDR therapy is its unique model of pathogenesis and change: the adaptive information processing (AIP) model. The AIP model developed by F. Shapiro has found support and differentiation in recent studies on the importance of memories in the pathogenesis of a range of mental disorders beside PTSD. However, theoretical publications or research on the application of the AIP model are still rare. The increasing acceptance of ideas that relate the origin of many mental disorders to the formation and consolidation of implicit dysfunctional memory lead to formation of the theory of pathogenic memories. Within the theory of pathogenic memories these implicit dysfunctional memories are considered to form basis of a variety of mental disorders. The theory of pathogenic memories seems compatible to the AIP model of EMDR therapy, which offers strategies to effectively access and transmute these memories leading to amelioration or resolution of symptoms. Merging the AIP model with the theory of pathogenic memories may initiate research. In consequence, patients suffering from such memory-based disorders may be earlier diagnosed and treated more effectively.

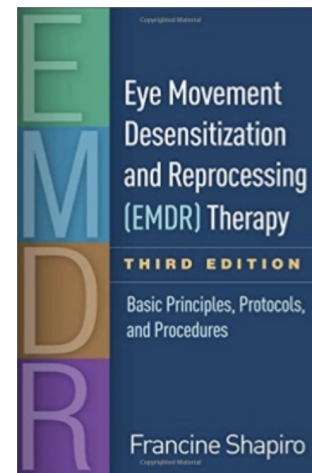
From the EMDR Book Shelf

NEWLY REVISED TEXT by Francine Shapiro

Shapiro, F. (2017).

[Eye movement desensitization and reprocessing: Basic principles, protocols, and procedures \(3rd Ed.\).](#)

New York, NY: Guilford Press.



The authoritative presentation of Eye Movement Desensitization and Reprocessing (EMDR) therapy, this groundbreaking book—now revised and expanded—has enhanced the clinical repertoires of more than 100,000 readers and has been translated into 10 languages. Originally developed for treatment of post-traumatic stress disorder (PTSD), this evidence-based approach is now also used to treat adults and children with complex trauma, anxiety disorders, depression, addictive behavior problems, and other clinical problems. EMDR originator Francine Shapiro reviews the therapy's theoretical and empirical underpinnings, details the eight phases of treatment, and provides training materials and resources. Vivid vignettes, transcripts, and [reproducible forms](#) are included. Purchasers get access to a Web page where they can download and print the reproducible materials in a convenient 8½" x 11" size.

New to this Edition:

- Over 15 years of important advances in therapy and research, including findings from clinical and neurophysiological studies.
- New and revised protocols and procedures.
- Discusses additional applications, including the treatment of complex trauma, addictions, pain, depression, and moral injury, as well as post-disaster response.
- Appendices with session transcripts, clinical aids, and tools for assessing treatment integrity and outcomes.

EMDR therapy is recognized as a best practice for the treatment of PTSD by the U.S. Departments of Veterans Affairs and Defense, the International Society for Traumatic Stress Studies, the World Health Organization, the U.K. National Institute for Health and Care Excellence (NICE), the Australian National Health and Medical Research Council, the Association of the Scientific Medical Societies in Germany, and other health care associations/institutes around the world.

What's New?



CREATE A FUNDRAISING PAGE!

You have the opportunity to create a fundraising page in which your network can easily donate to the EMDR Research Foundation in honor of a family member, friend, colleague, yourself, or through a special event or occasion like a wedding, graduation, or running in a 5K race!

[More Details on Creating a Fundraising Page](#)

SEE OUR UPDATED TOOLKIT!

EMDR Early Intervention and Crisis Response: Researcher's Toolkit
Version 03.2 018 © 2 014-2 018

Rosalie Thomas, Ph.D., R.N. with
formatting/design work by Katy Murray,
MSW, LICSW

[View Our New Researcher's Toolkit](#)



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