The ERF Board of Directors offers the July edition of our clinical newsletter as a special tribute to the legacy of Francine Shapiro and her passion for research, especially research on mitigating the effects of childhood trauma. It is fitting to note that the World Health Organization (WHO) has recently endorsed EMDR as an effective and evidence-based treatment for children who have experienced trauma.

Dr. Shapiro’s Memorial Fund

In honor of the memory of Dr. Francine Shapiro, the EMDR Research Foundation has established a Francine Shapiro Memorial Fund. Anyone wishing to donate can do so here.
In our efforts to promote continued dialogue regarding the efficacy and current developments in EMDR therapy, we focus on several recent studies with applications for children in distress, e.g., refugees, domestic violence victims, attachment disorder, etc.

As the EMDR Research Foundation Board of Directors work to create more research opportunities for our community, we hope you join the conversation with your suggestions for upcoming newsletters.

EMDR Study

The current study evaluated the eye movement desensitization and reprocessing integrative group treatment protocol (EMDR-IGTP) delivered within a novel psychosocial program for child refugees. One Libyan and seven Syrian children, aged 6 to 11 years 10 months (five boys), received four 3-hour sessions, with IGTP in the second session. The study investigated whether IGTP would be valuable for child refugees whose trauma symptoms failed to reach Child and Adolescent Mental Health Service thresholds. In addition, the project aimed to identify cultural hurdles that may hinder access to Western psychological approaches. Qualitative data were collected from eight children, two therapists (an eye movement desensitization and reprocessing [EMDR] practitioner and a family care worker), and a focus group of four Arab interpreters. The qualitative design involved children completing rating scales at the beginning and end of each session and the Subjective Units of Disturbance (SUD) scale for traumatic memories before and after EMDR-IGTP. Therapists reflected on outcomes in a post intervention report, and the interpreters discussed cultural challenges in a focus group. IGTP appeared to lead to reduced internal distress and perceived increases in emotional awareness for children. Therapists’ reports affirmed reduced disturbance and highlighted the cultural sensitivity of IGTP. The interpreters’ focus group emphasized the challenges of language, the stigma of mental illness, and the differing levels of communicative control across cultures. Future studies of IGTP, embedded within psychosocial programs for refugee children, need to utilize experimental research designs including culturally sensitive outcome measures.

EMDR Study


Purpose: This review discusses the efficacy of trauma-specific interventions among juvenile offenders.

Method: The reviewers conducted a comprehensive search of trauma intervention studies completed in the United States in peer-reviewed journals, highlighting their methodological rigor by using the risk of bias tool for quantitative studies and Wu, Wyant, and Fraser’s guidelines for qualitative studies.

Results: Sixteen studies met the inclusion criteria; fourteen studies used quantitative and two used qualitative research designs. Nine studies reported medium to large effects on post-traumatic stress disorder (PTSD) symptoms and five assessed externalizing behavioral problems. Eye movement desensitization and reprocessing therapy demonstrated the most rigor and had the largest reductions on PTSD symptoms followed by trauma-focused cognitive behavioral therapy. Art therapy was the most rigorous qualitative study, but the intervention did not focus on reducing trauma symptoms.
**Discussion:** Overall, most interventions were effective in reducing participants’ PTSD symptoms, but little is known about their effects on externalizing behavioral problems.

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**EMDR Study**


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**ABSTRACT:**

**Objective:** This study was conducted to examine and compare the effectiveness of cognitive behavioral therapy (CBT) and eye movement desensitization and reprocessing (EMDR) in child victims of domestic violence (child physical abuse and/or witnessing parents’ conflicts).

**Method:** A total of 139 girls and boys, aged 8-12 years, were randomly assigned into CBT (n = 40), EMDR (n = 40), or control groups (n=59). All children received up to 12 individual treatment sessions over 4-12 weeks. Blind assessment was done before and 2 weeks after the treatment and on a variety of teacher-parent-rated and self-report measures of posttraumatic symptomatology, depression, anxiety, and behavior problems.

**Results:** CBT and EMDR were effective in ameliorating psychological sequelae of victims of domestic violence on the measured variables (p =.001). Comparison of the treatment and control groups suggested moderate to high practical significance in treatment groups vs. controls.

**Conclusion:** Both CBT and EMDR can help children to greatly recover from the outcomes of domestic violence in comparison with control group. Moreover, structured trauma treatments are strongly recommended and can be used for children.

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**EMDR Study**


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**ABSTRACT:**

The study aim was to investigate Eye Movement Desensitization and Reprocessing (EMDR)
EMDR therapy on children with post-traumatic disorder (PTSD) in traffic accidents. The research population consists of children 7-11 years old in Tehran city who are surviving serious traffic accidents in 2014 that after screening 20 patients selected as sample who had the highest prevalence PTSD and divided into two groups of 10 patients randomly that the first group, called control group and second group was experimental group. The tools used in the study were anxiety depression scale and 42- DASS stress scale that had good convergent and discriminative validity and reliability by Cronbach’s alpha for the subscales depression, anxiety and stress at an acceptable level 0.91, 0.84 and 0.84 calculated, respectively. At first, 42- DASS test performed in the experimental and control group and then experimental group treated by Eye Movement Desensitization and Reprocessing therapy (EMDR), re-test in both groups was performed, and the results were analyzed. However, there is no significant difference between the two groups in terms of anxiety. As a result, it stated that EMDR therapy has been effective on depression and stress in children with post-traumatic stress disorder (PTSD).

**EMDR Study**


**ABSTRACT:**

This case series study investigated the effectiveness of an integrative eye movement desensitization and reprocessing (EMDR) and family therapy model, specifically the Integrative Attachment Trauma Protocol for Children (IATP-C), for improving traumatic stress, attachment relationships, and behaviors in children with a history of attachment trauma; specifically, adopted children with a history of maltreatment and foster or orphan age care. Of the 23 child participants, one family dropped out at 6 months, and 22 completed treatment in 6-24 months. Mean treatment length was 12.7 months. Statistical analysis demonstrated significant improvement in scores on children’s traumatic stress symptoms, behaviors, and attachment relationships by the end of treatment. Statistical analysis of secondary measures showed significant improvement in mothers’ scores related to symptomology and attitudes toward their child. Gains were maintained for the 15 families who complied with completion and returning of follow-up measures. Limitations of the study include the lack of a control group and small sample size. Future directions include controlled efficacy studies with larger sample sizes as well as exploration of application of the model to a similar population of children in other cultures and to children who are not residing in permanent placements.

**Literature Review**
EMDR Study


**ABSTRACT:**

**Objective:** The aim of this review is to examine the efficacy of EMDR treatment on children and adolescents with posttraumatic stress disorder symptoms through comparison with other established trauma treatment or no treatment control groups.

**Method:** It was conducted a literature search concerning the effects of EMDR treatment on symptomatologic pictures derived by Post-Traumatic Stress Disorder diagnosis in children and adolescents by analyzing digital databases like PsycINFO, MEDLINE, Google Scholar and Cochrane Library and with a traditional research method, targeting revisions and articles.

**Results:** Results show efficacy of EMDR especially according to the number of sessions. Fewer EMDR sessions are associated with the best outcomes.

**Conclusions:** These findings support the use of EMDR for treating symptoms of PTSD in children, although further replication and comparison are required.

**What's New?**

**Newly Released International Society for Traumatic Stress Studies' PTSD guidelines.** EMDR therapy was given a strong recommendation for the treatment of PTSD in adults and children.

The new International Society for Traumatic Stress Studies' guidelines on the prevention and treatment of post-traumatic stress disorder (PTSD), and position papers on complex PTSD, have recently been published. An international committee of experts was established in 2015 to update guidelines published in 2009 by reviewing the latest evidence from clinical research trials. The guidelines and position papers are intended to assist clinicians providing prevention and treatment interventions for children, adolescents and adults with, or at risk of, developing PTSD and Complex PTSD. Professor Julian Ford, ISTSS President, said, "The excellent work of the ISTSS Treatment Guidelines Committee will make a real difference to people affected by traumatic events" The new guidelines and position papers are available to download from the ISTSS website.

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EMDR Fidelity Rating Scale (Version 2)

Deborah L. Korn, Psy.D.
Louise Maxfield, Ph.D.
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Rosalie Thomas, Ph.D., R.N. with formatting/design work by Katy Murray, MSW, LICSW

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