

EMDR And The Military In Action

A monthly newsletter to keep you informed.

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

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Citations of the Month- Sexual Assault

Posmontier, R., Dovydaitis, T., & Lipman, K. (2010, August). [Sexual violence: Psychiatric healing with eye movement reprocessing and desensitization](#). *Health Care for Women International*, 31(8), 755-768. doi:10.1080/07399331003725523.



Sexual violence, which affects one in three women worldwide, can result in significant psychiatric morbidity and suicide. Eye movement desensitization and reprocessing (EMDR) offers health care providers the option of a brief psychiatric intervention that can result in psychiatric healing in as few as four sessions. Because health care providers often hear stories of sexual violence from their patients, they are in an ideal position to make recommendations for treatment. The purpose of this article is to introduce health care providers to the technique of EMDR, review safety and appropriateness, and discuss clinical and research implications.

Spokes, T., Hofmeyr, M., & Hopkinson, P. (2011, August). [Reducing distress following assault in the workplace](#). *Nursing Times*, 107, Online Issue 9; *Nursing Times.Net*. Retrieved from <http://www.nursingtimes.net/reducing-distress-following-assault-in-the-workplace/5033506.article> on August 9, 2011

Background: Nurses working in inpatient mental health settings report high rates of assault and psychological morbidity. Psychological debriefing is the main form of post-incident support, yet its efficacy has been widely questioned. Aim: To determine whether eye-movement desensitization and reprocessing (EMDR) therapy is effective in reducing the psychological distress experienced by nurses

after an assault at work. Method: Four participants experiencing post-traumatic stress symptoms following a workplace assault completed between three and five sessions of EMDR. A multiple-baseline, case series design was used, and quantitative and qualitative outcome data were collected. Results: The results showed a clinically significant reduction in the level of emotional distress associated with traumatic memories, avoidance and intrusion symptoms between the pre and post-treatment data collection points for all participants. There was also an increase in the strength of belief in positive coping cognitions concerning the event following EMDR therapy in all participants. These improvements were maintained at one-month follow-up for three of the four participants. The study results did not show a reduction in general psychological distress. Conclusion: The value of EMDR as a form of post-incident support lies in its alleviation of specific post-traumatic stress symptoms, rather than in improving general psychological wellbeing. The data must be interpreted with caution, but the positive outcomes suggest the need for further case series research, or a more controlled design with a larger sample.

Randomized Clinical Trials:

Rothbaum, B. O. (1997, Summer). [A controlled study of eye movement desensitization and reprocessing in the treatment of posttraumatic stress disordered sexual assault victims.](#) Bulletin of the Menninger Clinic, 61(3), 317-334.

Eye movement desensitization and reprocessing (EMDR) is a new method developed to treat PTSD. This study evaluated the efficacy of EMDR compared to a no-treatment wait-list control in the treatment of PTSD in adult female sexual assault victims. 21 subjects were entered and 18 completed. Treatment was delivered in 4 weekly individual sessions. Assessments were conducted pre- and post treatment and 3 months following treatment termination by an independent assessor kept blind to treatment condition. Measures included standard clinician- and self-administered PTSD and related psychopathology scales. Results indicated that subjects treated with EMDR improved significantly more on PTSD and depression from pre- to post treatment than control subjects, leading to the conclusion that EMDR was effective in alleviating PTSD in this study.

Rothbaum, B. O., Astin, M. C., & Marsteller, F. (2005, December). [Prolonged exposure versus eye movement desensitization and reprocessing \(EMDR\) for PTSD rape victims.](#)

Journal of Traumatic Stress, 18(6), 607-616. doi:10.1002/jts.20069. This controlled study evaluated the relative efficacy of Prolonged Exposure (PE) and Eye Movement Desensitization and Reprocessing (EMDR) compared to a no-treatment waitlist control (WAIT) in the treatment of PTSD in adult female rape victims (n = 74). Improvement in PTSD as assessed by blind independent assessors, depression, dissociation, and state anxiety was significantly greater in both the PE and EMDR group than the WAIT group (n = 20 completers per group). PE and EMDR did not differ significantly for change from baseline to either post treatment or 6-month follow-up measurement for any quantitative scale.

EMDR In The News

Steinhauer, J. (2013, Nov 7). [Reports of Military Sexual Assault Rise](#)

[Sharply](#). The New York Times.

[The Invisible War documentary](#)

Special Notes

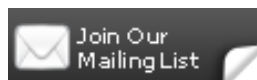
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