

The Eye Movement Integration™

By: NBCCH Staff

The Eye Movement Integration(tm) (EMI) method for treating phobia, anxiety and PTSD originated with the work of Milton H. Erickson, M.D., the renowned hypnotist, in what he referred to as "breaking habitual sets." Robert Dilts, a student of Dr. Erickson's work, introduced habitual set or eye movement pattern interruption interventions in 1980-1981.

The eye movement pattern interruption and reprocessing approach was further developed by Steve Andreas, M.A., and Connirae Andreas, Ph.D. in 1989-93, when they conceived the use of directed eye movements and therapeutic dissociation as a way to reduce the anxiety associated with phobia, PTSD and critical incident stress. It was the Andreas' who coined the phrase "Eye Movement Integration(tm) ." EMI, as developed by the Andreas, utilizes Erickson's pattern interruption and adds an innovative application of the Neuro-Linguistic Programming eye movement cues described by Richard Bandler and John Grinder (1979)². The fundamental NLP idea underlying eye movement cues is that they disclose which parts of the brain are being activated as the eyes move in various directions at any given moment in time (Bandler and Grinder reported that as people move their eyes, the patterns can indicate the kind of thinking, or mental processing, they are doing.

Eye Movement cues are not only indicative of mental processing, they can also be considered a means by which these brain functions are activated. Therefore, by directing the client to move the eyes in specific directions while holding an idea or mental image in mind, she/he is altering (reprocessing) the way the mind/brain represents the information.

The therapist can direct client's eye movements by giving verbal instructions, or nonverbally, with hand gestures or by using an instrument, such as a pencil, as a target. As a result, each point to which the eyes are directed corresponds to a somewhat different mode of mental processing.

The Eye Movement Integration(tm) procedure invites the client to hold the internal mental representation of the problem or anxiety provoking content in mind as an imagined dissociated imagined mental scene which is being projected in space (an imaginary movie screen) while visually following the moving "target" of the therapist's hand or short instrument with the eyes. The therapist moves the target repetitively to different points in the client's visual space, thereby linking together various brain processing capabilities. When the client finds alternative and more positive processing modes, accompanied by favorable perceptual, cognitive and physiological shifts, increasing levels of comfort and resourceful response occur.

Simultaneously, there are a number of other change-producing elements integrated into the Eye Movement Integration(tm) process. A positive mind set is created as the therapist establishes rapport and explains the potential benefits of the procedure. Additionally, the client is instructed to deliberately think about the problem representation and content, which seems to provide a sense of self-control while concurrently creating a therapeutic double bind or paradoxical intervention.

Moreover, the EMI procedure directs the client to think about the problem representation as if he/she is an objective, cognitively resourceful and secure "observer" watching the anxiety provoking representation on a imagined movie or TV screen. Therefore, the client is not associated or revivifying the memory of the problem content, but is, instead, observing it from a third party position³ where new understanding can occur. Dissociation can also modify the quality, or submodalities (Bandler, 1984) of the client's internal mental representations. These qualitative alterations can occur in the visual (new perspective), auditory (new thinking) and kinesthetic (reduced anxiety and increased sense of competency) modalities. A few examples are: the visual representation can become smaller, acquire a frame, lose focus, change from color to black and white, or from a movie to a still photograph, etc.; auditory changes can occur in tone, tempo, and volume, etc.; the kinesthetic sensations can become warmer or cooler, soft or hard, tight or loose, etc. The temporary perceptual shift from associated to dissociation along with the sub-modality changes mentioned above, often lead to alternative understanding(s) while reducing the client's presented problem response(s) to an appropriate and comfortable emotional level.

Finally, change occurs during the EMI procedure because there is a five-way division of attention as the client is being asked to concentrate on the numerous facets of the intervention collectively. First, the client is being encouraged to wrap him/herself in a sense of competence/security which is remembered, accessed and anchored from a past personal experience. Second, he/she is being asked to watch an imagined "younger" self going through a representation of the problematic experience on an imagined movie screen. Third, to bear in mind a desired positive belief and any positive learning the client discovers and wants to preserve into the future. Fourth, the client is being instructed to follow the therapist's finger, or target, as it is being moved across the plane of the client's face. Fifth, the client is being asked to scale his/her level of discomfort as a Subjective Unit of Distress (SUD) repeatedly.

Eye Movement Integration is a seemingly simple method that can produce significant change for the clients of psychotherapists and hypnotherapists who are interested in time-limited psychotherapy. However, specialized training with a qualified trainer should be acquired, before attempting this procedure.

¹See the four volume collected works of Milton H. Erickson, M.D., for discussions concerning breaking habitual sets or patterns, and the use of dissociation, eye movements and other minimal behavioral cues.

For information about training in the EMI method, contact:
American Hypnosis Training Academy <http://www.ahtainc.com> or NLP
Comprehensive, <http://www.nlpco.com>