

# Exploration of Music-Based Experiences in the EMDR Therapy Sessions

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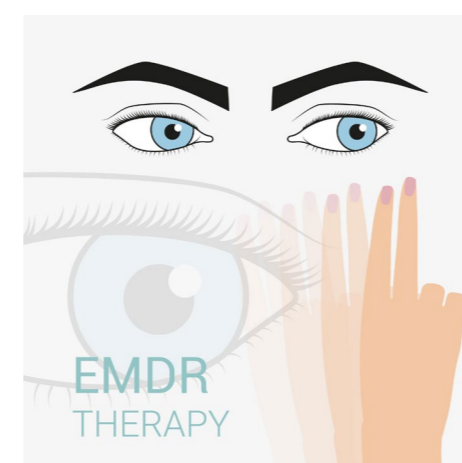
## Background

EMDR (Eye Movement Desensitization and Reprocessing) is a trauma therapy approach developed in 1987 by Francine Shapiro. It focuses on traumatic memories and stress symptoms, and employs AIP-Adaptive Information Processing model with focusing on external stimuli while concentrating on disturbing material, or what is called Dual Attention (DAS) and/or Bilateral Stimulation. Originally developed as the eye movements, bilateral stimulation later included tactile (electronic devices, tapping) and auditory stimulation (beeping tones through the headset). In recent years, expressive arts therapists started incorporating movement/dance, visual arts, and music. However, there is a limited research on the uses of music in EMDR

## Current State of Research on EMDR, arts, and music

On expressive arts therapies as Dual Awareness/Bilateral Stimulation:

- Art therapy, writing therapy, dance/movements, therapeutic yoga and drumming (Davis et al., 2023)
- Art therapy with auditory and tactile Dual Attention/Bilateral Stimulation (Tripp, 2007)

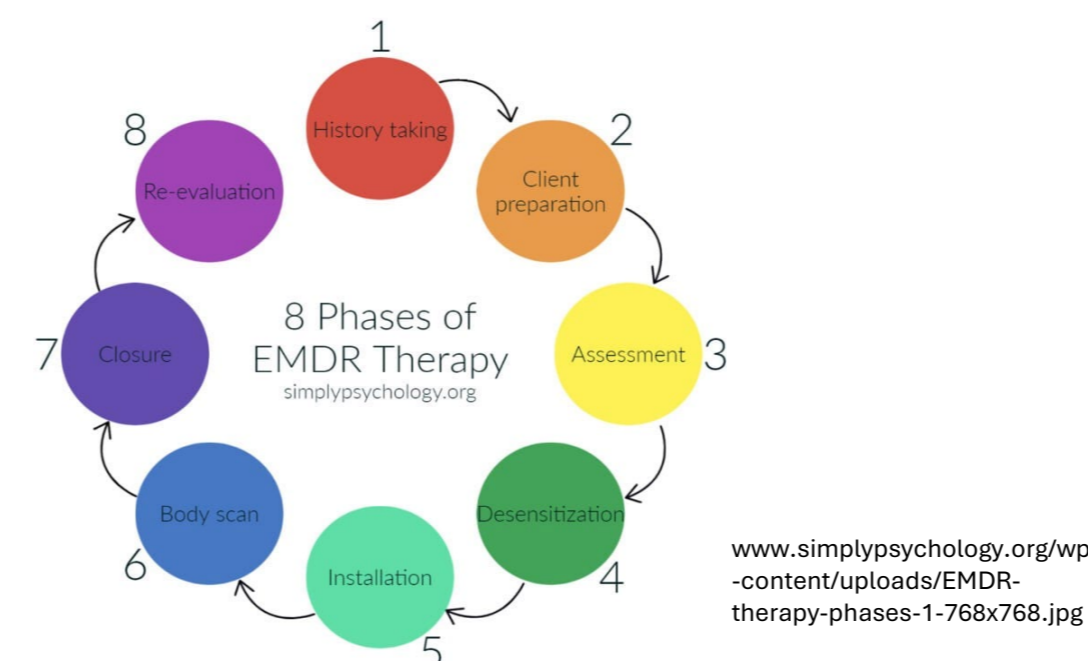


<https://www.simplypsychology.org/wp-content/uploads/EMDR-Therapy.jpg>

On using music in EMDR:

- Client-preferred musical genre (New Age, jazz, rock, classical) in the management of acute pain (Hekmat et al., 1994)
- Emotionality of loss-related memories: eye movement vs music vs recall only (Hornsveld et al., 2010)
- Music as a cultural facilitator in EMDR groups for Middle Eastern refugee children (Hurn & Barron, 2018)
- Songs for grounding, suggested drumming and movement (Mbazzi et al., 2021)
- EMDR+ protocol: auditory + eye BLS, plus client-preferred key- and reward-songs (Grifoni et al., 2023)

## Phenomenological Study on Music Therapists' Experiences of Using Music in EMDR Work



## Results

Four themes were identified with additional sub-themes:

- **Music for resourcing:** use of voice (chanting, singing, toning, humming), client-preferred music listening (GIM, instrumental, songs); clients' choice of songs +Bilateral Stimulation; therapist's instrumental improvisation
- **Music for reprocessing/desensitization:** improvisation + BLS, music cueing of every set; pre-recorded music listening (GIM or client-preferred); movement to music (recorded or improvised, musical cueing), silence
- **Unique effects of music for EMDR:** support and safety (grounding, comfort, support, regulation, rapport, safety); more efficient reprocessing (less time, music adds grounding); deeper level of experience (emotional release, promotional of emotional and physical movement)
- **Importance of music therapy training:** from not seeing differences to having more tools and ideas (instruments, voice, recorded vs. live music), creativity and flexibility (think outside the box), to integration of knowledge including neuroscience of music, benefits and safe uses, importance of volume, appropriateness, equipment

Interviewed six EMDR-trained music therapists

- Five American and one Canadian music therapists
- Music therapy clinical experience between 3.5 and 20 years
- EMDR clinical experience between 1 and 5 years

## Conclusions and Discussion

- Music can be an important component of all EMDR phases
- More research is needed on clients experiences with music
- Research is needed on how music affects the brain during EMDR sessions
- Possibility of music-specific training for non-music therapists

## References

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