Expert Strategies for Working with Anxiety

An EMDR Approach for Healing Generalized Anxiety Disorder

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Dr. Buczynski: Because anxiety can arise for so many different reasons, having an approach that is tailored to the source can make for powerful change.

Dr. Laurel Parnell is about to walk us through an EMDR approach that shows how we can work with a client's attachment history to help them manage anxiety.

But first, let's get a brief rundown of some the most common causes of anxiety – and we'll look specifically at why anxiety that comes from an insecure attachment can call for different, maybe even unique, treatment methods . . .

Dr. Parnell: There are so many causes for anxiety.

Some people are just wired for anxiety; it's a genetic predisposition. They have anxious families, anxious parents. Everybody runs higher with anxiety. And you'll see this with clients with OCD. Many family members have OCD or OCD symptoms.

And then there's anxiety that's caused because of traumas. They don't have that genetic predisposition. They've had some horrible things happen to them, and then they develop anxiety or anxiety disorder, panic disorder.

Often with adults who were abused in childhood, they develop anxiety disorders, typically panic attacks, things like that. Phobias are very common, have roots in childhood traumas or traumas in general.

Also, I'm seeing — and I'm more aware of this now — that often you'll get clients with generalized anxiety disorder, and it comes from *insecure attachment.* Perhaps they were hospitalized as children. They weren't held. They had trauma or anxiety or parents who had too much stuff going on. So, it's linked to some kind of insecure attachment because of all kinds of different problems.

So that needs a different treatment. It really needs that developmental repair that I talk about in my *Attachment-Focused EMDR* book – it can create an ideal mother, maybe ideal family, and then go back and redo the developmental stages.[1]

Because what they don't have is this sense of being able to relax into loving arms where they can let go and then get regulated by a mother who herself is grounded and loving and calm. They never had that kind of regulation as babies and as children. So they need to kind of recreate that, reinstall that in their nervous system as a template.

For people with that kind of generalized anxiety disorder, I'm finding more and more that I get a good developmental history with everybody anyway, and if anxiety is what they're presenting with, and I hear they never had security growing up – especially those early developmental months and years – I'm thinking we need to go back and repair that.

Dr. Buczynski: So what might this look or sound like in session with a client?

I asked Laurel to walk us through the kinds of cues she generally picks up on in clients whose anxiety might stem from insecure attachment . . .

Dr. Parnell: If I hear a client say, *I've had anxiety all my life. I've never been able to calm myself down. I have a really hard time self-soothing or any of that* – and maybe they don't have big traumas, but they've always had this anxiety.

And then I find out that their mother was very anxious. Maybe she was traumatized. You might hear this with children of Holocaust survivors or children whose parents were traumatized.

Maybe the parents were present but the parent was traumatized or anxious, or perhaps the mother had a post-partum depression or the child had something medically happen. And I'm hearing this in the history. I'm thinking we need to do the repair from early on.

Dr. Buczynski: Now often, doing this kind of "repair from early on" entails Laurel working together with her client to create the mother the client needed . . .

Dr. Parnell: A mother who is calm and loving and kind and attuned and connected to them. And so they'll create in their imaginations the mother that they needed, and then she'll imagine the mother, and then we'll add bilateral stimulation to really help install her more fully, tap her in more fully.

And then if the client is ready, we'll go back to imagine being in the womb of this mother, and she loves you, and she *wants* you, and she's calm, and she's *peaceful*, and you feel *safe*.

Imagine a child whose mother was being abused by the father in utero. They need to go back and create a

mother who is calm and peaceful and safe, and the baby is in a safe environment in which the baby is getting her needs met.

So then we'll imagine that. She'll imagine that, and I'll add bilateral stimulation.

And then I'll ask, *Do you want to go forward and imagine being born to this mother and then imagine the ideal birth to a mother who is calm and peaceful and supported?* And then add bilateral stimulation.

We'll imagine that — a healthy attachment, the skin-on-skin, the eye contact, the welcoming, the sense of support all around them. Maybe the father is there as a loving father figure who is looking at the child, connected to the mother, so we have this full, loving, connected attachment. And then maybe that's the session.

And then the next session, we pick it up. And where are they now? Do we want to go forward into the next phase of development? Maybe going home from the hospital or the first weeks and months of life, again, with a calm mother who is able to attach and provide them with what they need.

Some people will go through their whole lives very quickly. Some people will slowly, slowly, session after session, fill in what they needed developmentally.

Dr. Buczynski: And according to Laurel, it's this early attachment repair that can lead to a dropping down of anxiety. Because you see, what it's doing is, it's essentially helping them change the way their nervous system processes anxiety.

Dr. Parnell: They then can call up in their imagination this calm, soothing, loving mother figure, and then between sessions, they can tap her in.

They're feeling anxious; they can call up the image of this loving mother figure and tap themselves like this or tap the sides of their legs and really take in her calming presence — maybe the smell associated with her or the sound of her voice or a look in her eyes is really loving. And then they can calm themselves between times and begin to reinforce this.

Some people had loving parents but their mother had an anxiety disorder also. And so when they're being held by their mother, their mother is infusing them with all of this physical anxiety. So to imagine and create a template of something that is different from that, that can help put into their nervous system something different.

Dr. Buczynski: So we've just explored one way that EMDR can help people manage anxiety – by helping them to imagine and install stronger attachment bonds.

Now, this idea stood out to Dr. Rick Hanson. Here are some of his thoughts.

Dr. Hanson: That's such an interesting question. So, first, even though I've said that it's important to not get stuck on needing to have relationships, on the other hand obviously it's incredibly useful to have a very richly internalized, including a very felt experience of loving, nurturing, caring, supportive, encouraging, protective figures inside that we can draw upon. I think about the classic structure, going back to transactional analysis, so the inner child – nurturing parent/ critical parent; or the updated version in trauma of victim/perpetrator/ protector and different language around that; or we could say the inner being, the beleaguered self and the inner attacker or nurturer.

And the issue for a lot of people – certainly for me as well with my own background – is a weak inner nurture. I think of the inner nurture, for many people, is sort of a little bit like a very weak fairy godmother compared to Godzilla – Oh, don't hurt little Ricky! Over time, you kind of build up that inner nurture through repeated installation of those kinds of experiences.

But you're right: is doing that is difficult for someone? I think, first, paradoxically, if we lower the importance, we can increase the benefit.

And that's the general principle applied to a lot of situations. If we make them less of a big deal, if we lower the perceived stakes, then people are more willing to take chances and take risks and open the possibilities.

So that's the first thing – which would mean, in this case, looking for any port in a storm. I think of five levels of feeling cared about. Let's start from the bottom and move up.

First, any experience of being included: Are you part of anything? A team at work, fans of a sports team, people who care about the environment, mindfulness practitioners – are you included in any way?

Second is: Are you seen; are you understood? Even at the most basic level of someone taking your order in a restaurant. That's a form of caring – that you are actually seeing, even if they don't empathize with you perfectly, they still try to see, they're trying to understand.

Third level: Appreciation – are you respected; are you valued; are you honored? Is someone grateful to you for something you've done? That too counts as caring, even if it's not everything.

And then are you liked; is there friendliness? I think of the banter I experience with the guys at the deli I get my salad or sandwich at – and we're not best friends or anything but there's a friendliness there; there's an easygoingness.

And then, ultimately: Are you loved? So, looking for any kind of caring, including at a low level, for people who are reluctant to do this, can I think be really, really useful. And then there's the last point about it: in terms of installing those experiences, Laurel obviously is a master of EMDR and other forms of bilateral stimulation in terms of installation, and I just want to point out that people that are not trained in those technologies have other ways of installing an experience as a lasting change of neural structure or function, such as simply staying with the experience, opening to it in the body and feeling like it's sinking in. So there are many ways to do installation, including I'm a major fan of EMDR.

Dr. Buczynski: As Rick outlined, there are 5 levels of being cared about: Are you included? Are you seen and understood? Are you appreciated? Are you liked? And are you loved?

Laurel's approach to anxiety with EMDR aims to reinstall these levels step-by-step. But as Rick shared, there are many other methods that can serve the same important purpose.

In the next bonus, we'll look at the impact of anxiety on relationships – and how we might actually use it to *strengthen* a relationship.

1. Parnell, L., & Siegel, D. J. (2013). Attachment-focused EMDR : healing relational trauma. W.W. Norton & Company.