

Rana Kalo Jaroudi on EMDR

Eye Movement Desensitization and Reprocessing

Mireia Mujika (MM): Hi everyone. Welcome to our second episode of Ways to Grow. The podcast for people who dare. And where we will learn about different disciplines that will help us heal, improve our well-being and grow. For today, I have invited Rana Kalo Jaroudi to join us to talk about EMDR which is Eye Movement Desensitization and Reprocessing. But before getting into that, let me just tell you about Rana. So, Rana is a licensed psychotherapist. A certified EMDR therapist and trained CBT therapist, CBT as in Cognitive Behavioral Therapy. She's from Lebanon and currently, she lives between Lebanon, KSA, and London. Rana earned her Master's in Clinical Psychology at the Haigazian University in Beirut, Lebanon, and trained in London for her EMDR Certification from EMDRIA, which is a professional association for EMDR practitioners and researchers to seek the highest standards for clinical use of EMDR. Rana speaks English, Arabic, and French. She has her own private practice in Beirut but she's working online right now, quite a lot, right. And you can also find her at Ayadi, which is an online therapy platform for Arabic speakers across the globe and you can go to ayadihealth.com or you can also download the app, Ayadi from Google Play or App Store. And here's a special Hi! for my friends Salma Anabtawi and Bader Shahin that work at Ayadi. So, welcome Rana. How are you today?

Rana Kalo Jaroudi (RKJ): Hi Mireia. I'm okay, thank you for having me.

MM: That's great. It's a pleasure to have you here.

RKJ: Thank you.

MM: So Rana, what is exactly EMDR and where does it come from?

RKJ: Okay. So, EMDR is an approach, a specific approach to psychotherapy, and psychotherapy, as you may or may not know, is what we call talk therapy. So, it gets the help of the science behind psychology to be able to help people with their psychological difficulties, psychological disorders, emotional difficulties, that they're going through, okay. So, it's there to alleviate their pain, their suffering but also to help them fulfill the best of who they are and the best of their capacity. EMDR is one of those approaches that was discovered or found by Francine Shapiro, some 30 years ago haphazardly, all right. It's called Eye Movement Desensitization and Reprocessing. So, it is there like any other psychotherapy approach to reach these goals, all right. But it uses specific, very specific, standardized techniques to get there. There are certain protocols that we follow to get there and that involves what we call in one of the phases, Bilateral Stimulation. If you want we can get into more details about that, so I'll explain but in very simple terms, what that all means, okay? In simple terms that everyone can understand.

The EMDR rests on a model called Adaptive Information Processing, which believes that all the dysfunctions that you are experiencing today as a human being, the difficulties that you have in the ways that you're thinking, that you're feeling, that you're behaving, come from a certain place that we call in EMDR Traumatic. Traumatic means disruptive. A certain disruptive life event that happened in your life. There are two kinds of trauma and EMDR and we all have them, so no one can say I've never been through a trauma in my life, according to EMDR. Almost no one, okay? So, these are in two groups. There are the Big T traumas, with a big huge T that involves traumas like traumas of war, traumas of violent death, seeing one, caring for someone else in front of you, all the things that come to mind readily. But then, there are the small t traumas which are actually everyday life events. And not to say that they're not important. They're very important and these can go from anything from children used to... My classmates used to mock me, okay? at school... bullying, okay, which are on two different ends of the spectrum ...to my first boyfriend, the first boyfriend that I've ever had at age 15, cheated on me with a friend of mine. So, these things happen, right? So, I was emotionally abused by my father. I was physically abused, so physically abused can be in a Big T trauma, actually section. It doesn't matter, this is just to show you that these little or bigger things that happen to us. But the key concept here, these things that happened to us changed something in us.

MM: They changed something in us.

RKJ: Change... And I will explain how. This events that changed something in us, are considered by an EMDR therapist, a small t trauma or a big t trauma. So, not every adverse life experience is trauma. What could have been a trauma for you, might not have been, even if it's the same event a trauma for me, all right? We don't know why, it mainly depends also on biological predisposition, certain temperaments, environmental factors that were either resourceful or we're working against you. But for some reason, this situation that you've lived could have spanned for a few years, could have lasted five minutes, it doesn't matter... if it didn't get processed in a healthy, adaptive way in your brain... If it didn't do that, this is going to lead to a change in emotion and to a change in the way you believe what you believe about yourself as a person and what you believe about the world.

MM: Okay, let me do a recap here because I think we're saying very important things. So, let me see. Then, EMDR believes that all the dysfunctions we have come from trauma, right and then therefore, trauma is a disruptive event that happened in our lives. And then, you were mentioning that we have two groups of trauma, so we have the big Ts like violent deaths or all those things that come to mind readily, as you mentioned. But then, we have the small t traumas that are not so obvious but maybe are as painful like you said, for example, being bullied at the school, okay. And then, these traumas or these adverse life experiences if they were not processed in a healthy way, will change something in us, so they change how we feel, how we think about ourselves and the world around us, and how we behave.

RKJ: Yeah. So, if your father, let's say, let's assume left home when you were five. You never came back, you never heard from him, okay? As a child, the child part of you, even if you're 40 years old today, that child part who did not process did not know how to process (your brain. It's not about you, it's not that about your strength or your weakness). If your brain did not process this loss in an adaptive way meaning your five-year-old thought that if my dad left that means... that must mean that I'm unworthy, I'm undeserving... Otherwise, my dad would have stayed. And we internalized these beliefs and for the longest time we think that we're past this experience, we're okay with that....

MM: We are not.

RKJ: Exactly. How do you know that you're not and then the therapist will tell you, so this qualifies as trauma and that's very important for everyone to know, how do you know that you are not over it? That you have not successfully processed that? Is when anything that can give you the same, a familiar feeling or touch upon this negative belief triggers you...

MM: Triggers you emotionally?

RKJ: Exactly. Or behaviorally or physically, okay. So, might be as simple or as may be stupid as I'm watching a movie and there is this scene in the movie for example, where a father blah, blah, blah and I start to cry or I get very angry or I get agitated or I feel numb or I feel tense or I feel angry and I suddenly pick up a fight with my boyfriend. You know that there is a wound out in there that hasn't closed well. So, anything, it doesn't have to be the same theme, so it doesn't have to be a movie or a life event that has exactly the same thing, it can be just remotely familiar. But it touches on that wound that hasn't healed, it's going to trigger you. And when you're triggered, what happens, it's going to, of course, like in all classical psychology, it's going to show in the way you react or you behave. Therefore, it's going to affect your personal relationships, your internal relationship with yourself, your relationship at work with your co-workers, with your boss, with everyone else, okay. So, there are three components: How you feel, what you think or what you believe, and then, how you behave.

MM: And e....

RKJ: And EMDR is there to correct that by going to the source. This is the problem. Yep I'm wasting...

MM: What is that source?

RKJ: Exactly where is that source and that's the difference. If you want, you can talk about it later because I also use different techniques or different approaches. My therapy.... But that the difference between EMDR, let's say, let's skip for example, and CBT? CBT works on you developing better or healthier coping skills when you reframe or restructure the way you think you're behaving, you're reacting, but at that level. So, your boss says that it triggers me how...

My God... How can I see it differently? How can I react differently? Whereas, an EMDR therapist will say but Mireia, how is it? Why is it you think that your boss is always triggering you the same way or your partner or when it comes to this subject? Okay? Other people think you're overreacting. Let's go to the source of all of this, so, where did it start from? But then there is the whole process, if you want, I can describe it for you, so exactly what happens in your EMDR, so the stages...

MM: So, actually my next question was coming in that sense. So what can we expect to happen in a session with you where you are doing EMDR?

RKJ: Okay, so a lot of people think because they've seen it either in movies, I've read about it that when they think of EMDR, they refer to a certain part of a certain phase, oh yes, exactly which is the eye movement which is you following the therapist's hands. Now, there are many other tools than the hands with you, there's just one phase of EMDR protocol. EMDR protocol has eight phases.

MM: Eight phases? Okay

RKJ: Eight which include assessing the client and the assessment phase can go from two sessions up to, I've heard of people preparing for over six months with very complex trauma and dissociation, so, I'm taking you to the other extreme. And then, there is building on resources, helping stabilize the client, knowing that they'll be able to soothe themselves. There is the reprocessing phase which involves the eye movement and then, there's the stabilizing phase and the resource installation.

1. History & Treatment Planning
2. Preparation
3. Assessment
4. Desensitization
5. Installation
6. Body Scan
7. Closure
8. Reevaluation

MM: Okay. So, this is very interesting. So, which one is the desensitization phase?

RKJ: Okay, so it actually goes hand in hand. It's going to be a bit tricky for you to understand but you know what would be useful for you, for other people to understand that desensitization is about how it makes you feel... what kind of reaction it brings out physically, and emotionally? So, if you say, for example, and I'm going to give you a real-life example. I have a phobia of cats,

okay? So, if I put the cat in front of you, even if I show you a picture of the cat, you're going to get very aroused. So, your heart is going to beat fast, you're going to go into a fight-flight mode or you're going to be sweaty or you're going to run away. Desensitization, so we have for this a score. So, I'll ask you how much are you, right now, disturbed by the cat image or freight? So, disturbance is any kind of negative emotion, score it from zero to ten. Zero is nothing, ten is the maximum you would say it's a ten...

RKJ: Okay, roll up to EMDR. The goal would be so, it's to desensitize you to that object or to that event or to that particular image and to bring down that number from 10 ideally to zero and in some cases to one, when it involves that or loss or supporting. Reprocessing part is helping your brain process that information that it did not process successfully, helping you do that in a healthy way.

MM: Okay, so to process it in a healthy way?

RKJ: Exactly.

MM: The process of information...

RKJ: Exactly. No process the information that goes there, what, where's this fear coming from? That's reprocessing. So, what happened back then for you to be that afraid of cats and not a ten, not a five, not a four, not a one.

MM: I see and what happens exactly in our brain that the movement can actually...? Well, you said that the movement is only one technique but there are several techniques with it.

RKJ: No, not technique. It's called Bilateral Stimulation. So, we're helping what we're doing is that we're just nudging your brain, we're helping it just connect or wire up between the two hemispheres. So, it first started as an eye movement, so follow my hand and then, now we have tools because we used to get cramps with our arm, moving our hands, all day long. It got very tiring so they came up with light bulbs or you just follow the light that is the speed and the control is up to the therapist. We can do tapping.... We can do... You can put some headphones where there is an Auditory Stimulation. I use a lot the tactile stimulation, so I make you hold buzzers and it goes, you know in your hands. So, there are many things that do Bilateral Stimulation. So, your brain is wiring between the two hemispheres. It was very much, also research has linked a lot of similarities to what happened in REM sleep or that sleep phase where our eyes are moving right-left, right-left and where we know that our brain is processing things that happen to us during the day and trying to make sense of it. All the while, while you're doing the Bilateral Stimulation, so it's dual attention you're doing that. But at the same time, you're holding in your head, in your mind, the image let's say of the cat or the image, one specific image of your father raising his hand coming down at you, for example, or the image of that text message that you got from your boyfriend telling you that he was dumping you. So, it

has to be a specific image that you hold, the specific feeling, the specific emotion that happened, while at the same time you're paying attention, your brain is paying attention.

MM: So, in other words, it's just rewiring our brains?

RKJ: It's just pushing it because EMDR strongly believes the science behind it and the idea is that your brain can heal, as well as, the same capacity for healing as your physical body. Okay, you just need to just push it in that direction or help it do that which is I think is fantastic because it does that and when you just probe it or give it that little push, it's going to do the healing by itself or alone and which you will get to see in a typical reprocessing session or bilateral stimulation session. You start with one image. The therapist literally does nothing, okay of his guiding the session your job as a patient, as a client is to just notice what your mind is showing you. So, it can be images, scenery, different memories, emotions, physical sensations, anything. You just notice what's going on in your mind. When I stop doing the set, when I stop the set, all you need to do is tell me where your mind was? You're going to say, oh I remember, how those kids were laughing and how there's one in particular who was sticking out his tongue. I'm just going to give very light examples. And then, I would say oh okay, so go continue with that Mireia, you would continue with that and then, you would say it's funny. But I also remember how... When I was 12, my mom, so we've moved from the school setting, your brain has moved through the school setting and how my mom once embarrassed me or ridiculed me in front of my cousins by saying that I always get this wrong or okay. And then, you say oh, but that's really irrelevant. But I'm remembering blah, blah, blah or I'm feeling this or I'm feeling like there's a lump in my throat. So, anything that is associated with that initial memory your brain is going to, bring it up during the session, okay and you will continue with that until you get to a successful resolution of what we have called the trauma.

MM: Now that we're talking about the body.. here in this podcast, we're very interested in the connection between the body and mental health. So, sometimes we have forgotten about the body but you're saying also that these physical sensations that we may have from that trauma can actually help also in the healing of our trauma, right. So, the body is...

RKJ: It's the first vehicle where you can sense that you are not well and I think that the first thing we notice as human beings is what's happening in our bodies. Usually when I ask someone, so how do you know that you're anxious? You're saying you've been very anxious lately, how do you know that? the first thing they say is physically.... First thing they mention is physical sensations and these are very important, right? So, once you start to get uncomfortable in any therapy session, be it EMDR or CBT or anything else, you're going to feel that either you're becoming restless, agitated, turns numb, you're feeling they often describe it how does it feel? So, if I ask them how does that memory feels and that's a huge component in the EMDR. How is it feeling right now in your body? When you remember what happened 20 years ago or last week or 10 ten days ago? How does it feel in your body? That's a major question and they

need to describe it, okay. So, it feels like there is this big rock on my chest, it feels like there is a lump on my throat, it feels like I can't breathe, it feels like there is this weight, or I have a headache, I have tension in my shoulder...

MM: So, that's the body telling us.

RKJ: Exactly. I'm not okay. I'm not well. I'm dealing with things. I'm processing things. It doesn't always mean that I'm not okay, it can mean also that you are starting to pay attention to what's going on wrong with you that's why you're realizing what's not okay, how your body is feeling? So, it's okay. Accept it and go with it.

MM: Exactly. Listen to your body.

RKJ: Exactly and don't be afraid, just go with it till the end because it gets better.

MM: Exactly, look inside. So, I'm going with it. That's great and how long or how often do you normally do an EMDR session with a patient? So, let's say that now I go to you and I will, so I have something to process from my childhood. Let's say, I have this trauma, something happened so how long would I need to see you?

RKJ: Okay. Mireia, can I just make it clear here because it's very important? People often come to me not knowing that they have things. It's important to know that and for people to understand that when they come to me they do know that they have things that they need to take care of from their past. They come with present-day complaints like I'm not feeling well. I have fed ex all the time. I'm getting dizzy, I'm anxious, I fight a lot with my partner, I can keep up healthy relationships, trouble at work, all kinds of difficulties. All kinds. Okay, I'm depressed. I have low moods, I have shifts in mood. So, it's a big array of problems or difficulties. They come with that and then, together we see if there are things to process. So, typically it goes like any psychotherapy, I would recommend once a week. Our sessions are longer, so if in regular psychotherapy or 45 to 50 minutes. In EMDR, it can go from 60 minutes up to 90 minutes, all right? But we don't have to stick with that once a week, all right? We need to be flexible. So, if the patient is in town for a limited period of time I might see them twice a week, just so as to get the work done faster. Okay? There is no right or wrong. It's up to the clinician to judge.

MM: Okay, that's great. So, well who, then, is the client or the patient that would most benefit from a process of EMDR?

RKJ: Okay, so it's just anybody who feels they are facing difficulties. So, these difficulties like we said can be anything from psychological disorders like clinical disorders, I have depression, I have anxiety, I have PTSD, I have phobias. Okay, so these are clear-cut to everyday life problems. Okay, exactly, and get angry very fast, I can control my temper. I'm fighting a lot with my partner, we have difficulties, I can't find a proper career or I'm just going through a crisis right now, I'm going through a divorce, I have been led off work, I'm trying to change work, anything that you

can think of or just I want to work on myself, which we call self-growth or self-development. I think I'm doing okay but I want to tap into my potential and make myself even better.

MM: Yes, okay perfect. So, you have a good range of people who would benefit from EMDR. And for example, I always ask our guests is that we have this friend whose name is Mike, he's 38 years old and he suffers from burnout at work. So, how could you help him?

RKJ: Okay. So, Mike is 38?

RKJ: So, Mike would come in and of course, I would assess. Of course and that's one of the most important parts of any psychotherapy is to assess. Really get to know the person that is sitting in front of you because therapy is a relationship. It's not the technique that you do on something and then that's it, they're gone. It's a relationship. It's a collaboration. So, I tell people just allow the time for me to I need to get to know you, all right. Of course and allow that trust and that comfort to happen, to understand the concept of confidentiality of safety, all right. So, when Mike comes, I will ask a bunch of questions and I will let him talk about himself in general. Then, I will see what is causing it? I will try together to assess what is causing this burnout? Is it because he doesn't know how to create a work-life balance, so he lacks some skills? If he does, I will teach him how to get those skills. What does work-life balance look like? Does he not know how to take care of himself? Self-care means indulging or giving ourselves the time to do things that will nourish our body and our minds like good sleep, good hygiene, good proper nutrition, giving time to our relationship, to activities, anything that brings us joy and brings us comfort, all right. Third approach can be so why are you... Why is this happening to you, Mike? Do you have internal rules where you believe that if I don't do that much, either I'm going to be judged or it's going to be brought back, I don't deserve belief...? Exactly, a schema that you've probably carried from somewhere in your life, and then if that is the case then, let's go to what made you have this belief in the first place? And let's try to correct it, meaning I'm okay, I'm good enough, I'll take, I'll give that much but I'll also take that much.

MM: Exactly. So, there are different ways to deal with that. Very good. And for these sessions, you will use EMDR? You will also use other techniques or other....?

RKJ: No, I would definitely use a cocktail of everything. EMDR is not the only therapeutic approach that I use. Of course, I'm completely fascinated by it but I also use a lot of CBT. I use a lot of mindfulness and positive psychology. So, while for example, CBT tries to repair what is not going well? That's not to say what is broken, for example, or what is the leak? Positive psychology and mindfulness also try to focus on... Okay, what is it that you're doing right? What are your strengths? Let's be aware of your strength because most people you would, you might be surprised by this are not aware of the strength. There is this huge bias, okay. So, either we ignore them or we've learned not to realize that we have them. So, get in touch with these strengths, work on enhancing them or how am I going to use them more or more intensely, so

that's positive psychology. CBT: What are the practical tools that I can use for my anxiety, for my depression, for my coping skills, for dealing with other people? And then, there is EMDR: if I feel that there are small T traumas or big T traumas.

MM: That's very good.

RKJ: It's a mixture.

MM: It's a cocktail, I like that word. It's a cocktail of things. So, what fascinates you the most about EMDR?

RKJ: What fascinates me the most and it fascinates me every time I'm in therapy. Every time is the power of the mind to heal itself. Really, if you've never, if you haven't been through it, you wouldn't really grasp the intensity or the beauty of this until you experience it. It is knowing that the mind starts to pop up these things which can be uncomfortable or it can move very fast in a way that we haven't seen before in other forms of therapy where you thought that it would take years to work through a certain experience. In EMDR it can take just a few sessions for all these things to come to the surface which can be overwhelming. But still contained in a safe place with a professional person dealing with it and that is absolutely fascinating.

MM: It is, indeed. I read a lot about... what about healing in general, right. And I remember this book where the writer was describing how Vietnam Veterans were coming back home and they couldn't cope with the trauma that they had, right. Obviously, they were saying: "my body survived but I'm dead inside". And the writer was describing how actually these people that had plenty of therapy. But then, finally, they went, the Veterans, they went to EMDR and after 10 sessions they were starting to actually live again, right. So, I was fascinated by that fact and you're saying it here again, that sometimes it can be so much faster than...

RKJ: It can... If you, I don't know if you would like me to share a personal experience. Not so long ago, so I was in Beirut. I was very close, I don't know if any of your listeners are aware of that. That was a huge explosion that happened in Beirut. I was very... I was near the explosion site with my daughter and okay. So, it was extremely traumatic. Although I'm a person who has lived the Lebanese war, so it's not that it's the first time I witness or I experience such violence but instead, okay so I was traumatized and I knew that month later when I thought that I was okay but I was still starting very easy. I was feeling excessively emotional. If anyone would talk about the blast, I would get all agitated and maybe sometimes tearful, okay. I knew that I needed to take care of that so while I probably could have done it to myself but it's much better to be with someone. So, I went to my therapist, my teacher for that, and the two sessions I was again myself, meaning I could really breathe into that experience and not be terrified by it every time.

RKJ: Amazing. Yeah, that's great. I see, it's incredible.

MM: And so you have also joined the ranks of Ayadi as we were saying before and Ayadi, as we were saying it's an online therapy platform for the middle east from the middle east and another we're talking also a little bit about Lebanon. So, the mission of Ayadi is to bring mental health support to this region. So, how would you describe right now the status of mental health within the Arab culture or the Arab regions?

RKJ: So, I think first allow me to say that I think that Ayadi is amazing. It's fantastic, really fantastic endeavor because it was long overdue, all right? So, about the mental health in the Arab region or middle-eastern region, in essence, I truly believe that it's not any different in essence from what other people have across the globe, right? So, we are human beings, we usually experience the same stuff, same feelings, have the same reactions, but what probably and I'll touch upon is that the small differences come also with the burden of stigma. So, there's still a lot of stigmas in this part of the world. Not that we're the only ones to have that many stigmas, other countries or parts, regions have that too. But it's what... Stigma is what makes it harder for people to reach out for help, okay? So, I would want to, but stigma creates a barrier because we internalize certain thoughts or beliefs and it makes it harder for me to reach for professional help and actually go to a clinic. And I'll tell you, so, therefore, from this point of view, Ayadi is a blessing because it has made it much easier for these people who haven't crossed this barrier yet to reach out for help. In privacy... In privacy from... In the privacy of their own room, sometimes people call me from their cars, to connect with me. So, at least they have this available. Well, I think it's very important. They don't have to go physically to be seen. Probably if that's still regarded as taboo, behavior at the clinic. So, this is what it offers. Stigma in our region also is burdened or I think it gets heavier with the presence of social norms or things, certain thoughts, ideas that we grow up to like "shoulds" and "shouldn'ts", what is correct, what is not correct, and that we have these things. You have a lot of in the middle-eastern region or in the Arab region, also this is good, this is not good, a good girl doesn't do that, other thing. Plus, there is a factor that weighs in heavily which is religion. So, religion and family. Religion, it's not that it's haram what we say haram or it's forbidden to do that in religion, no it's not. But people who resort to religion will tend to make you feel guilty for not, for example, going to your God for support or for help and we see that all the time like "keep faith, God is here for you, it's nothing, it will go, keep your faith, keep up the prayers..." And that... Not that there's something wrong with that, it's okay. That's a resource. Being spiritual, being religious is resourceful but I don't like it when it becomes a burden or it makes you feel ashamed for asking for a different kind of help, okay. There's also the stigma of, if you go seek professional help that means that you're weak. There's weakness and that's all over the world. That's not just here, okay. "You're strong, you're right, I know you can do this, snap out of it"... No, it doesn't work that way. It has nothing to do with strength or weakness. There are a lot of barriers to cross but I really truly believe that we are on the right path and we are going away, we are getting there.

MM: Of course. I was going to say that one of the guests that we had before, so she said that for healing, many times what we actually need is just a witness. A witness or a... somewhere that we can actually talk and witnesses our pain and that's it and sometimes that is enough, right? So...

RKJ: Yes, it's very true. We need a physical one. Someone can show where we can immediately see the compassion, the empathy, the support that they're showing us and that's huge.

MM: Yes, something that I think that happens quite a lot as well is that people decide to talk to a friend instead of talking to a professional, right? And these friends, most of the time, unfortunately, they are not prepared, they are not... They're not trained to help us with our psychological issues.

RKJ: That's a very important point actually, that I forgot to mention. So, aside from religion and Ayadi, there is also this in our kind of culture, there's also a big dependency on what we think that the family can or cannot do for you, okay. So, we live in close-knit families that are extended, that are involved and often there's this misconception of what you need to go to a therapist for if you have me, you have your brothers, you have your sisters, you have your cousins? Talk to them, they're amazing, they can... No, it's not the same. Thank god for them because that's support and that can be a pillar. But they can do what a professional person will spend years of their lifetime educating and training themselves can do for you.

MM: It's completely true. But as you said everything is going on the right path?

RKJ: Hope so. I truly hope so.

MM: So, yes and I think it's not only in their averages. I think around the globe, many people are doing this great effort so that our mental health in general, gets much better. So, that's great. So, in order to finish our interview actually, so I wanted to ask you what book or other resources would you recommend to a person that is interested in EMDR?

RKJ: Okay. So, in EMDR itself... What I would suggest because you were mentioning that you and in your podcasts are very interested in what happens also to the body or to that body, or the connection which is the holistic approach so for this one, there is one called, "The Body Keeps the Score", okay and you can note that down because it's really a very, it's a very important book. And what I can do, there's one called "Getting Past Your Past" by Francine Shapiro as well. What I could do is, I could just send you and you can upload them, a list of some books that are easy for people to read or to understand and to get self-help from.

MM: That would be great. Listen to ways, waystogrowpodcast.com and there you will find all the recommendations that Rana has made for us. The book that you were mentioning, "The Body Keeps the Score" was mentioned already by another guest. I think we love this book.

RKJ: Okay but I'll make sure then to give you a different one. I'll give you a different variety.

MM: No, but it's great. This one, I think it's good that people see that actually, this book can work marvelously

RKJ: There are different books from different... So, if you people are interested in different things, there is a very old book but it's still, it's classic, it's called "Feeling Good". So, it shows you, it teaches you about the cognitive distortions that we indulge in, how to correct them, how to view, reframe our narratives.

MM: Beautiful runners, so that would be great. So, yeah listeners just go to that website. I repeat again, waystogrowpodcast.com and you will find all our recommendations.

MM: Well okay, Rana. So, thank you so much for this express course on EMDR. I would say that my main takeaway from today is that the disruptive events that happened to us in the past may have caused a trauma on us that we're not even aware of it. But it is affecting the way that we live, the way that we think, the way we relate to ourselves, to others and to the world around us and EMDR can help us with all that. Listeners I hope you enjoyed this episode and that we are helping you find your own way. And if you like our podcast, please remember to follow us. Rana again, thank you so much. Thank you very much.

RKJ: So, I hope that I have covered the essentials.

MM: Oh, yes you have definitely covered the essentials and I think we have a great understanding now of what EMDR is and how it can help us. So, thank you again. Thank you.

RKJ: Thank you Mireia for hosting me and I think you're doing amazing work.

MM: Thank you. Thank you again, Rana and the listeners, see you in two weeks. Be well.

List of Authors, Books and Resources

'The Body Keeps the Score'

'Feeling Good'

'Getting Past Your Past' by Francine Shapiro

<https://ayadihealth.co/>