

When EMDR and positive psychotherapy interweave in Sunflower Protocol EMDR

Positive psychology (Seligman et Csikszentmihalyi, 2000) is "the study of the conditions and processes that contribute to the optimal development or functioning of individuals, groups and institutions" (Gable and Haidt, 2005). From its birth, some EMDR practitioners have taken this perspective and incorporated it into their practice (Lendl et Foster, 1997 ; Korn et Leeds, 2002 ; Popky, 2005 ; McKelvey, 2009 ; Regourd-Laizeau, Martin-Krumm, et Tarquinio 2012).

Positive psychotherapy led by Tayyab Rashid (Rashid et Anjum, 2007, Seligman, Rashid et Parks, 2006, Rashid, 2015) is also developing. It consists in helping the patient to identify his available resources in order to cope with the situations he is facing. During the fourteen sessions, the different areas of positive psychology are swept aside to achieve an increase in well-being. They show the effects on depressive symptoms (Seligman, 2013). The encouraging results (Csillik et al., 2012) have led us to integrate EMDR whenever possible by applying for faster and deeper integration.

This EMDR protocol called « Sunflower EMDR Protocol » is inspired by Rashid's positive psychotherapy. Focused on resources, the positive and bright sides of the patient, this protocol helps to stimulate latent resources and promotes the growth of resource networks increasing the possibilities of integrating adaptive information to overcome difficulties or even develop a life more fulfilled by integrating positive psychology. Slow alternating bilateral stimulations reinforce anchoring to facilitate integration and cognitive weaving. According to Regourd-Laizeau (2013), it seems that resource networks are only effective from a threshold of critical development. The EMDR practitioner identifies the resource network, then develops it through suggestions with bilateral stimulations and allows it to grow and be operational. It may develop the size and strength of networks by giving the patient concrete, cognitive, emotional elements that allow him to develop an integration. This can help us understand how post traumatic growth (Tedeschi et Calhoun, 2004) is related to EMDR reprocessing.

Many cases illustrate the effects of this protocol and design many tracks of future studies to test differences on efficiency, on speed and depth of the work between EMDR protocol, positive psychotherapy and Sunflower Protocol EMDR.

Bibliographie

Gable S.L., Haidt J. (2005). What (and why) is positive psychology ? *Review of General Psychology*, 9, 2, 103-110.

Korn D., Leeds A. (2002). Preliminary evidence of efficacy for EMDR resource development and installation in the stabilization phase of treatment of complex posttraumatic stress disorder, *Journal of Clinical Psychology*, 58, 12, 1465-1487.

Lendl J., Foster S. (1997). *EMDR performance enhancement for the workplace : A practitioners' manual*. San Jose, CA : Performance Enhancement Unlimited.

McKelvey A.M. (2009). EMDR and positive psychology. In Shapiro, R. *EMDR Solutions II : For Depression, Eating Disorders, Performance, and More*, Norton Professional Books, 242-261.

Rashid T., Anjum A. (2007). *Positive psychotherapy for children and adolescents*. In J. R. Z. Abela & B. L. Hankin (Eds.), *Depression in children and adolescents : Causes, treatment and prevention* (pp. 250–287), New York, Guilford Press.

Rashid T. (2015). Positive psychotherapy : A strength-based approach, *Journal of Positive Psychology*, 10, 1, 25-40.

Regourd-Laizeau M., Martin-Krumm C., Tarquinio C. (2012). Interventions dans le domaine du sport : le protocole d'optimisme, *Pratiques Psychologiques*, 18, 189-204.

Regourd-Laizeau M. (2013). *Psychologie positive et EMDR : Questions et perspectives*. Thèse de doctorat Université de Lorraine.

Seligman M.E.P., Rashid T., Parks A.C. (2006). *Positive psychotherapy*, *American Psychologist*, 61, 774-788.

Tedeschi R.G., Calhoun L.G. (2004). Posttraumatic growth: Conceptual foundations and empirical evidence, *Psychological Inquiry*, 15, 1, 1-18.