Why case studies are useful publications in the EMDR scientific literature

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Within research there are many types of single case experimental designs. Although such experiments involve only one participant, they do not limit a research or clinician to studying just one individual\(^1\). As figure 1 highlight currently within UK health care’s evidence based culture the hierarchy of evidence dictates that Cochrane Systematic Reviews and National Institute of Clinical Excellence (NICE) guidelines favoured above single case experimental designs. In the early 20\(^{th}\) century publications in academic psychological journals seldom used anything other than small samples (one to five subjects) when presenting research findings with sample sizes, control groups and statistical analysis seen as superfluous\(^2\).

The value of a case study is that it provides a unique example of real people in real situations and enables readers to understand more clearly than simply by presenting them with abstract theories or principles\(^3\). It is definitely better to be deeply interesting rather than accurately boring\(^4\). Case studies can penetrate into situations that are not always susceptible to numerical analysis.

Criticisms of case study designs indicate that they lack generalizability and are strongly influenced by the person collecting the data. Nonetheless case studies can be informative, insightful, and can generate further questions worthy of investigation.

EMDR therapy is a complex multi-faceted psychological treatment intervention. It has progressed from a technique to a distinct therapy in its outright with a robust theoretical underpinning. What is fascinating about EMDR therapy is that it contains both art and science. It has both a wonderful simplicity and a complex subtly in its approach. Its subsequent application is becoming increasingly diverse as our understanding of Adaptive Information processing (AIP) widens beyond that of simple PTSD. Its immersion into the international community with its diverse cultures, languages, customs and traditions contributes further in understanding the nuances and characteristics of this therapeutic paradigm.

As an Academic and Clinician I frequently end up in discussion with fellow EMDR clinicians who recount their work with a particular client. Of regular occurrence is the continued sense of awe and respect for colleagues working with difficult, challenging clients, in difficult, challenging situations, yet who consistently obtain positive results in the course of their EMDR therapy work. When this

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clinician is advised to write their case up for publication an all too frequent glaze emits from their eyes. ‘Oh I can’t do that’, a regular retort. But why not?

The teaching and learning potential from a single case study should never be under-estimated. This is more striking in countries were English is not the primary language. Case studies prove of extreme importance in the myriad of international EMDR humanitarian projects in assisting our international colleagues in not only grasping the core elements of EMDR therapy but also its subtle nuances.

The Journal of EMDR Practice and Research outlines a really helpful structure for writing a case study for publication. It provides a ten point structure and suggests a useful word limit of between 2,500 and 3,000 words.

A salient starting point is to consider from the very outset what you, the writer, would like the ‘take home message to be from your case study. Try stick to no more than three salient points.

The literature review should contain information that provides the reader with pertinent material so as to make sense of the case study itself. The literature needs to be up-to-date preferably within the last 10-years. If there is an exception to this, for example using a seminal work, then this should be clearly articulated. Remember that a good case study integrates both theory and practice so therefore the theory has to be contextualised.

When presenting your client ensure that the AIP model features clearly. This should also give orientation to your overall EMDR/AIP target sequence plan. Best practice is to ‘stick to the EMDR protocol’, however if for some reason you need to deviate from this then you must be prepared to justify this. With regards to international readership where English is not the first language case studies written in English should be much clearer about the sequential steps that were taken during EMDR therapy treatment with the client. If psychometrics has been used ensure that they are recognised and conventionally accepted. If not, then their inclusion would again require some justification and therefore a rationale should be included. Towards the end of your case study be clear about what you want the take home message to be for the reader. Don’t be afraid to make this explicit. Often readers welcome this.

Once the case study is written it is often advisable to ask a ‘critical friend’ to review it. Sometimes their perspective might be challenging but remember that the case study through their eyes may yield a helpful perspective.

The art of writing a good case study is not about intelligence, it is about application. In the EMDR community we always need a lot more EMDR therapy case studies being published. Those EMDR clients, supervisee’s, and trainee’s will always have something to teach us. If so, then don’t be afraid to share it. As the supermarket strap line says ‘every little helps’.

Dr Derek Farrell – 08-04-2014