

Client Readiness for Processing Criteria

Important: Although all clients are appropriate for the AIP model, not all are ready for the reprocessing of memories.

AIP Case Conceptualization

- ❖ How are the client's past experiences manifesting in the present?
- ❖ What are the memories that set the foundation for the present experience?
- ❖ What was the response to stress at the time?
- ❖ What is the client's "go-to" way of dealing with stress?

Client/Therapist Relationship

The therapeutic connection is vital. Is there trust and safety in the relationship? Is the therapist confident the client is able to ask questions and state needs?

- ❖ Honest Feedback
- ❖ Ability to ask for help (call between sessions if needed)
- ❖ Are there any barriers to trust?
- ❖ Dual Attention?

Getting the Clinical Map

- ❖ Understanding Attachment Issues and Relationship Patterns
- ❖ Gender, Cultural, Ethnic Issues
- ❖ Secondary Gain
- ❖ Current stressors
- ❖ Timing
- ❖ Resources

Has the Therapist Explored Each of the Following Areas?

- ❖ Dissociation, Screened for DID (Use DES or another assessment tool)
- ❖ Addictions- Even if far in the past. Predict urges and prepare for a different response.
- ❖ Suicide or Self Harm
- ❖ Harm to others
- ❖ Stabilization, Resources, and Support
- ❖ Medical Issues
- ❖ Legal Issues
- ❖ Timing considerations- Especially for the first reprocessing session

Client Readiness for Processing Areas

Client Stability

The Mental Status Exam should be used for all clients. Special preparation is needed for clients with DD in order to maintain safety and **dual awareness** (the ability to notice our experience in the present, even as we activate a disturbing memory) during reprocessing phases. Not limited to the following indicators:

- ❖ Years of unsuccessful psychotherapy
- ❖ Depersonalization and/or derealization
- ❖ Memory Lapses
- ❖ Flashbacks and intrusive thoughts
- ❖ Somatic symptoms
- ❖ Chronic instability at home and or work

Acute Presentations: The following require caution and possibly case consultation.

- ❖ Suicide attempts
- ❖ Life-threatening substance abuse
- ❖ Self-mutilation
- ❖ Serious assaultive behavior
- ❖ Dissociative disorders

Stabilization

- ❖ Do they have adequate stabilization/ self-control strategies in place?
- ❖ Client must be able to go from disturbed to calm between sessions
- ❖ Client has adequate support system (friends, family etc.)
- ❖ Issues that may be a danger to client have been addressed
- ❖ Client is able to call for help if needed

Medical Considerations

- ❖ General physical health. Assess how stress may affect any medical conditions.
- ❖ Pregnancy (high risk?)
- ❖ Medications
- ❖ Eye pain or conditions: If they have eye pain do not use EM until cleared by physician.

Timing Considerations

- ❖ Timing of life events; Availability of Therapist
- ❖ Willingness to continue treatment, 90-minute sessions if necessary