



EMMA GERASIMATOS



DEPTH ENQUIRY

Depth Enquiry™ is a powerful therapeutic approach for resolving trauma and underlying shame. It is generally a fairly relaxing yet transformative experience.



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Firstly, we identify your most troublesome negative core belief – things like ‘I’m not good enough’, ‘I’m unloveable’, ‘I’m broken’ and so on. Negative core beliefs often originate from a trauma of some type and are then easily activated in day to day life and result in a greater than appropriate emotional response to a situation.

For example, my core negative beliefs have always been around ‘not mattering’ and shame so a lot of my work has been around making myself a priority, learning what I want and need and then building a real appetite for finding what I need and want (both internally and externally). When negative core beliefs are triggered, I can experience a big emotional response that is not in keeping with the trigger itself. Since working on these core beliefs using depth enquiry I have noticed feeling and knowing I really matter in most all aspects of my life. The shift has been both subtle and enormously impactful. Since working on this core belief using depth enquiry, there are other changes that are related to where the core belief originated that I won’t go into here, but believe me, they are all good!

I can’t write about client’s experience but I can confirm that many clients have experienced very significant shifts through this work, often enjoying much greater impact than talking therapy alone.

So back to how it works. After identifying the negative core belief we identify an associated image, a snapshot in time, possibly when you first experienced this negative core belief or a moment in time when it was triggered significantly. This is the starting point for the work. There is no need to go into story, to share the ins and outs of the original trauma(s).

The client relaxes, closes their eyes, if this is comfortable for them, listens to binaural beats on headphones and then lets their mind go wherever it goes. As the therapist I stay connected and support you to maintain present focussed awareness of any thoughts, images, bodily sensations, memories and emotions by asking questions. There is no right or wrong way to be a client, all that is required is to notice what is happening and share what is comfortable to share.



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The brain processes experiences previously locked in the emotional memory storage centre of the brain and they start to move into the 'normal' memory centre of the brain. This means we can recall events or experience a trigger to our negative core belief without re-experiencing the emotion previously associated with them.

Generally, after 4-8 sessions, the emotional sting of the memory and the associated negative core belief has gone and is replaced by a more helpful core belief – this happens naturally, it is not 'put in' by the therapist, it is not hypnotherapy – the healing occurs with the client, and as is in line with my philosophy, the client finds their own answers. Some have referred to the depth enquiry process as being like 'awareness on steroids'.

Clients can feel a little spacey after a session, and sometimes experience some more dreams, new awarenesses or notice new types of perspectives or ways of seeing things. It's helpful but not necessary to journal and record these. It is very rare that clients would experience a worsening of their symptoms, and I am on hand if this were to happen (I have never heard of this happening). Depth Enquiry can be undertaken via Zoom online, the client just needs to purchase an app with the beats on it, I think it's currently \$12.

Depth enquiry can have the effect of expanding our window of tolerance; the space which we have for our stress levels to rise and fall without tipping over into hyperarousal (panic, anger etc) or under into hypoarousal (disassociating, numbing out).

Amanda Gruhn developed Depth Enquiry during the course of her work with clients suffering from PTSD (Post Traumatic Stress Disorder) and a wide range of trauma-related symptoms and I received training from the fabulous Amanda in 2019 and have taken a lot of the following information from her webpage www.depthenquiry.com.

Depth Enquiry builds on EMDR (Eye Movement Desensitisation and Reprocessing) principles and is further informed by the theories and approaches of Bessel van der Kolk, Pat Ogden and Peter Levine.

Since 2011 Amanda worked to meld these perspectives into a deep and safe method of therapeutic inquiry; one that retains as its underpinning the holistic tenets of Gestalt psychotherapy.



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How does it differ from EMDR?

Depth Enquiry feels more holistic, more fluid, more embodied, more relaxed.

There are several ways in which Depth Enquiry differs from EMDR.

The therapist:

- Encourages the client to stay in the developing process for the entire Depth Enquiry session.
- Encourages an experience of depth, by directing the client to notice thoughts, feelings, memories and physical sensations.
- Supports and encourages a sense of fluidity, movement and process.
- Uses reflective listening and channels the client further into the depth of the experience.
- Encourages the client to put experiences into language.
- Refocuses the client towards what they sense are missed experiences, and directs them to deepen into these missed experiences.

Some background on EMDR

EMDR (Eye Movement Desensitisation and Reprocessing) is a well established technique for the relief of PTSD (Post-Traumatic Stress Disorder). EMDR involves the therapist guiding the client through a number of reflective stages, while invoking eye movements in the client (usually by the client following a wand or pencil held by the therapist, and swung gently in a rhythmic way). These eye movements invoke bilateral stimulation of brain centres that hold dysfunctionally stored memories.

EMDR unlocks these fixed, dysfunctional and traumatic memories, and enables them to be released into long-term memory, where they have less impact on the client's well-being. The client's reactions to potentially traumatising stimuli in the environment become markedly less severe.



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Two useful terms: The ANP and the EP

Current thinking is that a traumatic event splits the healthy personality into (at least) two parts.

1. The Apparently Normal Part (ANP) continues to adapt to the demands of daily living and is motivated to appear normal, in order to remain connected to others and to the world.
2. The Emotional Part (EP) holds the trauma and continues to relive it. When the experiences of the EP enter into the awareness of the ANP the person experiences symptoms of trauma.

The ANP does not want the EP's experience. To maintain stability, the ANP resists and avoids the EP's experience. The EP appears to push for expression. The person suffers flashbacks from the EP, and negative thoughts ("I must be crazy", "I'm unworthy") from the ANP. The process continues whenever there are reminders of the original trauma.

(The full model specifies at least two parts: the above model is a simplification but is still useful in describing the re-traumatising processes.)