The theoretical aspects of temporality in the eye movement desensitization and reprocessing (EMDR) are not generally explored by scholars, although the psychological treatment is a process, a sequence of chronological phases (history and treatment planning; preparation; assessment; reprocessing; desensitization; installation; body scan; closure; and reevaluation) that moves from trauma memories of the past to the present time to treat discomfort. The therapeutic potential of EMDR is always related to the possibility of bringing the past into the actual time, giving a new breath to event that has already occurred. A trauma that happened at that time still performs its effects at this moment. It is properly the continuity of the temporal experience the key that allows the patient to solve the maladaptive condition, turning the discomfort into an adaptive circumstance.

Although very roughly sketched, this process brings to light the main question: How does this peculiar temporality work in therapy?

This investigation is aimed at exploring EMDR therapy in the light of Husserl’s phenomenology of internal time consciousness. In the first part of the paper, after having briefly explored the temporality of memory, the authors will consider Husserl’s theory of intentionality, which grounds any discourse about consciousness and the role of attention, the act with which one can experiment the inner (experience of) time.

As a first step, it is important to compare Husserl’s thought about time and consciousness with the a-temporality of Freud’s unconscious. The fundamental divide depends on the two ideas of consciousness that lie beneath the theoretical domains of phenomenology and psychoanalysis. The goal of this investigation is to foster broader conversations about philosophy and psychology on the topic of temporality, in particular, to break down artificial boundaries between the two domains. Precisely, the aim is primarily to put the method and its results in a more complex anthropological framework to have a better understanding of the therapeutic effects of reprocessing the past.

Key words: Eye movement desensitization and reprocessing, trauma, memory, time, consciousness
understanding of the personal changing provided by the EMDR and, secondarily, to found its theoretical roots on more secure ground.\textsuperscript{[7]}

\section*{THE ROLE OF MEMORY AND THE LIVED EXPERIENCE OF TIME}

It is generally agreed that remembering, an essential component of EMDR therapy, is the first step to take the distance from the lived experience.\textsuperscript{[2,8,9]} Past events are, in several existential narratives, heavy burdens that – as philosopher Max Scheler assumed (1991: 169)\textsuperscript{[10]} – painfully weighs on\textsuperscript{[11]} the actual time, disturbing one’s life.\textsuperscript{[12]} In Homer’s Odyssey, the narration of Ulysses’ peregrinations allows the Aegean hero to take the distance from nasty events of his adventurous existence, making them unable to hurt him again. On the other hand, Homeric poems bring to light the link between suffering and memory, linguistically expressed by the term nostalgia (nostos + alghein), the pain of coming back home: Ulysses firstly suffers from it in his coming back to Ithaca. The hero’s pain is strictly involved with memory. Oblivion produced, as a sort of group therapy, by the lotus flowers only ensures the end of the psychological suffering. The myth addresses a question:

\textbf{Why is memory so crucial in reprocessing one’s life?}

Memory enables us to make a phenomenological experience: It reveals that life is part of an incessant floating of time, in which past events can be recalled into the present time and lived once again, at least on the cognitive-emotional side. Nobel Prize Ilya Prigogine argued\textsuperscript{[13]} that “memorizing has nothing to do with the reversibility of time.” It is absolutely true if we reduce life to the objective time experience.\textsuperscript{[14]} However, we would not understand why memory brings about a change in one’s life if we would not take in consideration Edmund Husserl’s phenomenology\textsuperscript{[15]} and the possibility to focus on another existential perspective where the distinction between past, present, and future is not so sharp. In a very broad sense, recalling some lived experience of life (Erlebnis) means to make both a cognitive and temporal act. Memory, in fact, allows a peculiar awareness about the past: It brings to the actual time what has already occurred and gives the possibility to go further the natural attitude to life. Phenomenologically speaking, this temporal suspension reveals the blurring borders of time. The past event comes to the now moment with implicit, obscure impressions and emotions. In Husserl’s perspective, temporality and objects (lived experiences) go along together. Or, to say it with\textsuperscript{[16]} referring to the experience of music: “The object retains its place; even so does the sound retain its time. Its temporal point is unmoved, but the sound vanishes into the remoteness of consciousness,”\textsuperscript{[16]}

The German philosopher noticed that – when we listen to a symphony – we experiment both the present sound and the retention of the past music. It is rather clear that the lived experience of temporality is something different from the physical idea of time that can be imagined like an arrow.\textsuperscript{[17,18]} From this point of view, chronological phases go from the past to the future without making impossible any (real) coming back to what has already happened, nor to stop the flow of time. Although “the direction towards the future is really seen in nature” (5 and it grounds the principle of causality, the physical attitude toward time refers only “to one aspect of the problem,” as phenomenology discovered. At this point, it should be better understood why the objects of memory are so strictly implicated with time, to say that they are basically time. Time has come for us to focus on intentionality.

\section*{INTENTIONALITY AND THE TIME OF CONSCIOUSNESS}

Temporality is related to consciousness: This is the core of Husserl’s main investigation about the topic, the Phenomenology of Internal Time Consciousness (1893–1917).\textsuperscript{[19,20]} Why? It depends on the fact that consciousness stands at the very heart of one’s lived experience, it makes us aware of being deeply inside the flow of time. Nevertheless, it is important to remind that to be conscious of the living present is the condition to experiment ourselves as individuals.\textsuperscript{[3]}

Intentionality – the keyword of Husserl’s philosophy\textsuperscript{[21]} – is basically the presence of the object to the consciousness; it means that all the mental life and the mental states are strictly related to content. In other words, when I think, I primarily think of someone or about something. In other terms, it cannot be any object – for each of us – that is not an object of consciousness at the same time.\textsuperscript{[22]} Being the human consciousness basically time, every cognitive operation is deeply interwoven with temporality. This premise allows to clarify what follows:

1. Memory is an act that brings the past to the present time and enables humans to experiment the flow of consciousness
2. Each operation of consciousness is made of the same stuff of time
3. In the phenomenological perspective, when the natural experience is put into brackets, it is possible to live a more complex life experience because some aspects of the past, previously unconsidered, come to surface.

\section*{THE ROLE OF ATTENTION IN RESTORING MEMORY}

In the EMDR – the authors assume – is given a process that recalls Husserl’s theory of attention. To say it briefly, the more the attention is focused on something, the more the aspects of
past events, previously not considered, come to surface. We might also say that – as there is no consciousness that is not consciousness of something – it does not exist an intentional act that, at the same moment, is not an object of attention. To pay attention to something, in Husserl’s philosophy, means to have a broad view also of the global context in which the object intended is situated. The example of the pipe on a table, quoted by the German philosopher in Appendix XII of the phenomenology of internal time consciousness enables us to focus the main idea: When I pay attention to this pipe, I can immediately observe the inkwell beside, the knife that lies behind or I can hear the noise of a car outside the room and so forth.

On a temporal side, this cognitive act allows the possibility to focus the lived experience in the present as well in the past time. Due to the attention, the lived experience (Erlebnis) becomes something of “distinct” and “noticed” and this act of noticing and distinguishing is the act of forging an object of attention. Attention, for Husserl, plays the role of the invention, the activity of classical rhetoric which was aimed to find out new content for the discourse. When the cognitive act of attention directs itself on the past, through memory, it always unveils implicit aspects of the human experience. Previously unconsidered, they become more vivid and real. The recovery (the now moment) of a number of stored contents (the previous time) through the attentive act (what is near and all around the pipe, in Husserl’s example quoted before) is a fact of particular interest also to clarify the re-processing of EMDR.

The whole process brings to surface the intimate link between mental operations and temporality. As well as intention, the attentive act belongs to the group of mind operations known as cogitations – they refer to the act of thinking (Cogito in Latin). In any case, all of them are basically time for at least two reasons: (1) They are activities of the human consciousness and (2) processes, chronological sequences moving from a beginning to an end. A so close relationship between sense and temporality was, nevertheless, a crucial phenomenological intuition for Husserl, who moved from logics to the investigation on time and time consciousness when realized that a cognitive content cannot stand apart from temporality.

Husserl assumes that any attentive act actualizes the subjective experience of time. Many details of which a person was not aware at the moment of the past experience (the vision of a pipe in the example quoted before) are discovered ex novo. It is important to underline that attention does not modify memory: It makes the representation of a past lived experience more rich and complex than one could have ever expected. In the language of neurosciences, we could also say that attention facilitates neural connections to past memories, memories which have been forgotten, removed, or unconsidered. This act is particularly valuable for grasping how EMDR works in making adaptive connections to maladaptive events. The patient can experiment the fullness of the now moment, its being a chronological process in which the past is implicated with the future.

### NONCONSCIOUS, UNCONSCIOUS, AND PRE-CONSCIOUS

Husserl’s investigations about the power of memory as well as the EMDR method are theoretical approaches that throw light on the temporality of memory: To remember does not only makes a mental representation but means to re-generate the past, in the actual moment. How is possible to argue it on a theoretical side?

A valuable insight comes from D. N. Stern interpretation of the present moment, in the light of Husserl’s thought. The American phenomenologist and psychotherapist make a crucial distinction between unconscious and non-conscious. The present time is properly related to the second term: It consists of a non-conscious moment part of the inter-subjective experience, differently from the Freud unconscious, which is related to the psychic resistance of the subject. This temporal continuity is a peculiar trait of consciousness.

To say “I” means to have a perception of the past time, to be aware of the actual time and to have a clear expectation about the future. Consciousness – in a phenomenological perspective – always works, also when we are not aware of it. This passage should be underlined because of the importance that it plays in the investigation of trauma and temporality. When trauma occurs, a part of it can be unsolved, unprocessed, and totally or partially removed. In that fragment of one’s life, temporality and mind contents are mixed together. The human subject stores, in the past, a number of details of which he/she are not conscious; however, all these contents are at the consciousness because of intentionality: Whatever is all around the pipe, on the table, was part of the experience of the pipe, although my memory did forget it. Italian metaphysician and phenomenologist Melchiorre assumes that it would be more correct to talk about “pre-conscious” because of the retentional unity that belongs to consciousness: A sort of original tension between consciousness and pre-consciousness.

Any attentive act of the mind that orients to the past, as well as memory in EMDR, enables the updating of implicit, un-conscious mind content and changes the past in actual time. The images of the trauma produce relevant effects also on the temporal experience of the patient, who can definitively remove the past only because he/she can effectively get back to that moment of his/her life.
To briefly conclude: Freud’s idea of consciousness makes a distinction between what is consciously lived by the subject and what is removed. In Husserl’s perspective, in a very rough term, also the implicit, removed, frozen emotion/experience that follows a trauma deal directly with consciousness. For this, it is easy to realize why psychoanalysis can never end, as Freud supposed, if the trauma that fills the unconscious memory does not get to consciousness, to time. At this point of the paper, a further step is required. We need to discuss the two opposite temporal perspectives; the one of EMDR, strictly implicated with the existential flow theorized by Husserl and the one of Freudian psychoanalysis that denies the possibility of any temporal stuff of unconscious memories.

TEMPORALITY AND THERAPY:
DIFFERENCES BETWEEN
PSYCHOANALYSIS AND EMDR

The unconscious, for Freud, is not implicated with time until it gets to consciousness. In the Analytic findings for Wilhelm Fliess (1897), Freud denies that it refers to any chronological aspect. The first reference to this topic was already given the year before (Etiology of hysteria, 1896). The attitude of the father of psychoanalysis toward the temporality of the unconscious is ambiguous: In the Interpretation of dreams (1899), in fact, Freud opens to this possibility by assuming that “unconscious desires always remain in act” and “nothing can be terminated, nothing has passed of forgotten” in it in the following essay, the unconscious (1901), he definitely denies the chronological implication of unconscious content. Further clarification of the absence of temporality in the unconscious may be found in Beyond the pleasure principle, a sort of criticism to Kant’s theory of time as an a priori. In Note on the mystic writing Pad (1924), Freud goes further. Time representation, he assumes, is the consequence of the discontinuity between conscious and unconscious. The idea of an unconscious space-time link is further explored in New advice on technique (1927). Despite a position never theoretically clarified by Freud seems inclined to deny any ontological consistence. For some aspects, the EMDR method, on a psychological side, seems to express a sharp criticism to the Freudian doctrine.

The distinction made by Stern between non-conscious and unconscious underlines a fundamental divide between Husserl’s phenomenology and psychoanalysis. The first one, based on the temporality of consciousness, cannot conceive any act of the mind outside the temporal domain. In the Freudian perspective, on the opposite, temporality is only given by a consciousness that recalls the Cartesian ego (an “I think”) more than the barycenter of the human experience as it is achieved by Husserl (“I think of” or “about” something). The same divide – the author argues – seems to belong to psychoanalysis and EMDR, a psychological approach that assumes, although intuitively, the Husserlian approach to human consciousness, for what concerns temporality and intentionality. The different attitude toward consciousness, in fact, reflects also on the therapeutic role of time in the treatment. If Freud explains the impossibility to define how long a therapy does take, because of the absence of temporality in the unconscious process, in the EMDR, the distance between the trauma and the beginning of the therapeutic process is a crucial aspect of it. It is very well known that trauma effects on the patient can be completely solved if they are afforded in the 48 h that follows the event. However, it is interesting to note that Freud himself explicitly tributes to attention the capacity of making sense to memory and regenerating temporality.

TEMPORALITY OF THE 8 PHASES
OF EMDR

Temporality is the stuff of the EMDR technique, as we briefly sketched in the previous paragraphs. Trauma memory is strictly related to representation and temporality, because both of them are implicated with consciousness, that is basically time and makes sense to the lived experience. Attention, in updating the lived contents (the term Erlebnisse for Husserl), completes them and puts them in the existential streaming, without removing it as psychoanalysis does. If compared to psychoanalysis, EMDR seems more anthropologically founded because of these two reasons:

1. EMDR recognizes de facto to consciousness a chronological texture so that all the cognitive-emotional contents are implicated with time and nothing cannot stay out of consciousness, also the neglected/forgotten/excluded ones, typical of any trauma situation
2. Secondarily, time is a therapeutic ingredient of the treatment.

After a section much closer to philosophy about the possibility of re-opening already occurred events, at this point of the investigation, we can explore the proper temporality of the different phases of the EMDR, according to the phenomenological frame of Husserl’s thought. This process – we will see – confirms the strict implication – sketched before – between cognitive acts and temporality, sense and time, in the line of Husserl phenomenological mainstream.

Phase 1

History and treatment planning – present time and past time – are sharply distinguished when the therapy begins. The patient meets the therapist because the disturbance is at the very heart of his/her everyday life: The present moment is an incessant now of pain and sufferance that makes the person unable to think of the future. Since the first session, the therapist addresses the client to his/her personal story to focus the problem. The past is evoked, not as a sequence of
details but a sort of global picture in which some events are more meaningful for the patients and become the target of the following therapy. At this phase, the client does not explore the flow of time because of the awareness of the present moment. The natural attitude to the living experience still prevails.

**Phase 2**
Preparation – After having established an alliance with the clinician, the patient is invited to learn some techniques to control the emotional disturbance: They may be useful both during the session and in everyday life. These practices – from the eye movement to breathing – are basically exercises of self-awareness and self-consciousness: Through the lens of Husserl philosophy, they seem to be cognitive acts that allow the patient to have a different point of view about himself/herself and the life experience. They play the same role of attention, primarily because they focus on the non-conscious implications of an event. We saw before that life-flow cognition does not deal with the natural attitude; it is something more complex and related to the inner subjective experience. This is a preparation phase also for leaving the natural attitude to the world of life and assuming a new point of view.

**Phase 3**
Assessment – The patient, at this point of the treatment, experiments a deep cognition of the now and can realize how temporality is related to his/her living experience. The directionality of time, as a condition in which is built-in the arrow of time, leaves the ground to a more blurring chronological texture. Consciousness of the now moment has nothing to do with other punctual experiences of the present time, in which now is a point, a fragment in one’s life. At this step, the therapist asks the clients how he/she feels. Negative cognitions (“I’m unlovable”) are scored, by the patient, using the 1-to-7 Validity of Cognition scale. Phenomenologically speaking, this phase gives the person a fully understanding of her/his function: Cognitive, emotional, and relational in the present moment.

Reprocessing – Each target is processed when the disturbing past is compared to the safe present. If the patient was “in danger” before, then he/she is “safe now.” This awareness of the continuity of the floating life experience is a fundamental achievement to re-connect disturbing memories and events. The patient is probably in the condition to say, as Augustinus of Hippo wrote in his Confessions (11, XIV, 17): “For what is time? Who can easily and briefly explain it? Who can even comprehend in thought or put the answer into words? Yet, is it not time that in the conversation, we refer to nothing more familiarity or knowingly than time? And surely we understand it when we speak of it, we understand it also when we hear another speak of it. What, then, is time? If no one asks me, I know what it is. If I wish to explain it to him who asks me, I do not know.”

**Phase 4**
Desensitization – The complete resolution of the target reveals, on a temporal perspective, a further step in the phenomenological experience of the time. Precisely, the patient learns to get back to the past and to come back to the present. Eye movements participate in making faster and more vivid a number of memories related to the target. Here is properly given the act of attention and the possibility to catch implicit, unconsidered, neglected aspects of it. Eye movement emphasizes the attentive act because it involves visual and emotional senses. The different associations can hurt again the patient. In some cases, he/she suffers for the 1st time the consequences of trauma, totally removed at the moment of the event. On a chronological point of view, the relationship between past and present in this phase is more advanced if compared with Phase 3. It is not the difference of the temporal states to be experimented, nor the floating of them. What the therapist notices are the experience of the retention, the presence of the past that can be continually modified by the mind. It is important to precise that this modification does not mean “to change” past memories but to refresh them with new and unexpected details provided by the act of memorizing. In other terms, on temporal side, retention gets the (recent) past in the present, on a cognitive side, trauma memory opens up in the flow of consciousness.

**Phase 5**
Installation – A positive belief replaces, at this point of the therapy, the negative one. The goal of the treatment has been reached. On a temporal side, the patient experiments the relationship between the present and future.[29] At first glance, it would seem that the now moment plays the main role because the installation of positive belief highlights the present time (“I’m now in control”) and the therapist makes an objective evaluation of it with the validity of the cognition scale. The control of the situation, nevertheless, is oriented to forthcoming life experience; it is oriented to the future.

**Phase 6**
Body scan – Body sensations associated with the negative beliefs of the patient – anxiety, fear, etc. – disappear when the positive belief has been reached and installed. This attentive act is mainly emotionally involved than cognitive implicated. On a temporal point of view, the patient experiments the floating of his/her existence: The now moment is not focused, it is part of a process or, more properly, of a re-processed human condition in which the well-being – an emotional state – prevails on the temporal-being.

**Phase 7**
Closure.

**Phase 8**
Reevaluation – Closure is a phase that belongs both to the single session and the end of the treatment. It basically refers
to the capacity, for the patient, to be in control. Self-calming techniques may be useful to reach this goal. Reevaluation marks the end of the relationship between patient and therapist after the clinician has checked the success of EMDR. Temporally speaking, these phases restore the natural attitude of the living experience. Not now, nor the past are separated in the patient’s perspective. Connection has been established; life flows again.

**CONCLUSIONS**

Due to the strict implication with the internal consciousness of time, EMDR presents some aspects of interest for philosophy, especially to sketch the phenomenology of memory. This paper invites the readers to realize how close is the idea of existential time in Husserl and the peculiar temporality that grounds a psychological treatment such as the EMDR.

**REFERENCES**