



SAVE THE DATE: 6-8 JUNE 2013
VENUE: IN & AROUND CICG (see details below)

EMDR Europe and the NGO Forum for Health, in collaboration with the UN Institute for Training and Research (UNITAR), present a Special Conference Program

HELP TO ALLEVIATE THE GLOBAL BURDEN OF TRAUMA

New Opportunities for Governments, UN Agencies and Civil Society

While the 14th EMDR Europe Conference for member-psychologists will be held in Geneva between 6 and 8 June under the title

EMDR Uniting Nations: Promoting Peace Within and Between People

a number of attending professionals have agreed to share their expertise, on a *pro bono* basis, in the Parallel Track Programme for Representatives of the Humanitarian, Developmental and UN Communities in Geneva.

Day One is introductory in nature and does not presume any prior knowledge about trauma, psychology or EMDR.

Day Two is more interactive, with experts making brief presentations (not more than 3 to 5 slides) followed by discussion. It aims to address issues that stakeholders may have an interest in:

- in the morning, health and medical professionals, personnel managers, health insurance experts and people interested in EMDR training;
- in the afternoon, representatives of humanitarian, developmental and UN organizations and country delegations who, in the context of their work, will be faced with problems of trauma, often on a large scale, due to violence, disasters or abuse.

Day Three offers further opportunities for individual networking.

Four keynote presentations are offered to Participants of the EMDR Conference and the Parallel Track.

As mentioned in the original invitation, those without UN ID or badge will need to register at: <http://www.unitar.org/event/node/126641>

For more information, please contact: Alina Soltani (Alina.SOLTANI@unitar.org), Shahida Mohamed (shaahy@bluewin.ch), Eskedar Bekele (eskedarabebe@yahoo.com), or Pilar Meza (pilarmeza@gmail.com).

PROGRAMME

Day One: Thursday 6 June (CICG)

12:30 – 14:00

Michel Meignant, Psychotherapist and Film Director: **La Legende d'EMDR** (movie in French/English), followed by brief comments

14:00 – 14:05

Udi Oren, President EMDR Europe Association: **Welcome**

14:05 – 14:25

Kelly O'Donnell, NGO Forum for Health: **Making a Difference with EMDR—Civil Society and WHO's Global Mental Health Action Plan**

14:25 – 14:45

Rolf Carrière, UNICEF Country Director (ret.): **Scaling Up What's Needed, Wanted, and Works**

14:45 – 15:20 **Break**

15:20 – 15:40

Udi Oren, President EMDR Europe Association: **Introduction to EMDR—What's so Remarkable about this Trauma Therapy?**

15:40 – 16:00

Emre Konuk, President EMDR Turkey: **Challenges and Responses in the Syrian Refugee Crisis—A Current Example**

16:00 – 16:20

Derek Farrell, President EMDR Europe HAP: **EMDR's Humanitarian Assistance Program—Track Record and Future Plans**

16:20 – 17:45 **Panel Discussion with Audience**, chaired by Sally Fegan-Wyles, UN Assistant Secretary-General and UNITAR Executive Director *a.i.*

17:45 – 18:00 **Break**

18:00 – 20:00 **Opening of the 14th EMDR Europe Conference** (Joint Session with Conference and Parallel Track Participants)

18:00 – 18:30

Udi Oren, President EMDR Europe Association: **Welcome and Presentation of David Servan-Schreiber Award**

18:30 – 19:30 **Keynote**

Mukesh Kapila, Professor of Global Health and Humanitarian Affairs (Manchester University), Special Representative, Aegis Trust for the Prevention of Crimes against Humanity, former UN Resident Coordinator in Sudan, former Under-Secretary-General IFRC: **Against a Tide of Evil: Can Trauma Healing Stop the Intergenerational Transfer of 'Evil'?**

19:30 – 20:00 **Q&A**

20:00 – 21:00 **Get-Together Drinks**

Day Two (morning): Friday 7 June
(Room B, CCV, across from CICG)

9:30 – 12:00

EMDR Trauma Therapy: Issues of Special Interest to Health & Medical Professionals, Human Resource Managers, and Health Insurance Companies

Brief Summary Presentations plus Discussion; Brief Break half way through.
Chair: Eva Muenker-Kramer

Udi Oren: **Trauma, Psychological First Aid, and EMDR Training**

Lucas Ostacoli: **EMDR and Health**

Paul de Bont: **EMDR for Psychosis**

Ferdinand Horst: **EMDR for Panic Disorders**

Arne Hofmann: **EMDR for Depression and Phantom Limb Pain**

Herman Veerbeek: **EMDR for Anger and Revenge**

Ad de Jongh: **EMDR for Fears**

Eva Zimmermann and Tim Dunne: **EMDR for Humanitarian Expatriate and Local Workers**

Isabelle Meignant: **The EMDR Case to Health Insurance Companies**

12:00 – 12:15 **Break**

12:15-13:00 **Keynote** (Joint Session with Conference and Parallel Track
Participants—in CICG)

Sushma Mehrotra, President EMDR India: **EMDR in Asia—Needs, Challenges and the Way Ahead**

13:00 – 15:00 **Lunch Break**

Day Two (afternoon): Friday 7 June
(ITU, across from CICG)

15:00 – 17:30

EMDR Trauma Therapy: Men, Women and Children in Situations of Disasters, Violence and Abuse

Brief Summary Presentations plus Discussion; Brief Break half way through.
Chair: Helga Mathess

Mariasandra Mariani: **EMDR after Kidnapping in Algeria Desert**

Isabel Fernandez: **EMDR in Mass Disasters**

Ute Sodemann: **HAP Training after Natural Disaster**

Antonio Onofri: **Using EMDR with Refugees and Torture Victims**

Susana Roque Lopez: **An EMDR Camp for Abused Children in Colombia**

Norah Desroches: **EMDR in Haïti after Earthquake**

Parichawan Chandarasiri: **EMDR Training after Tsunami in Thailand**

Udi Oren: **EMDR for Soldiers and Veterans**

Derek Farrell: **EMDR for Children Abused by Clergy**

Eva Muenker-Kramer: **Treating National Trauma and Wounded Memory**

Tim Dunne: **A Traumatic Accident and More**

17:30 – 18:30 **Break**

18:30 – 19:30 **Keynote** (Joint Session with Conference and Parallel Track
Participants—in CICG)

Mark van Ommeren, Chief, Mental Health in Emergencies, World Health
Organisation: **WHO Guidelines for Mental Disorders and Problems Specifically
Related to Stress**

Day Three: Saturday 8 June (CICG)

10:00 – 16:00

Further individual networking opportunities and follow up.

16:00 – 16:30

France Haour, Co-chair, EMDR Europe Research Committee: **Presentation of
Francine Shapiro Award**

16:30 – 17:30 **Keynote** (Joint Session with Conference and Parallel Track
Participants—in CICG)

Karl Heinz Brisch, Specialist in child, adolescent, and adult psychiatry and
psychotherapy; psychosomatic medicine; neurology; and psychoanalysis: **Trauma,
Attachment Disorders and EMDR**

18:00 **Closing:** Udi Oren, President EMDR Europe Association

Background:

The impact of trauma, for human and world development as well as for world peace, can hardly be overestimated. Whether due to human-made or natural disasters (or even 'normal' distressing life events), current levels of trauma and the residual and often devastating effects of past traumas are staggering, easily running into the tens of millions of people. Effective large-scale trauma interventions, including innovative therapy approaches, could significantly help to alleviate the immense and insidious inner suffering. Such interventions could also increase social, economic and cultural productivity through enhanced individual growth, creativity and wellbeing. And they could also help interrupt the intergenerational transmission of violence and abuse.

Recent researchⁱ has opened up important new, cost-effective possibilities in the field of trauma therapy, although these positive developments are not yet well known. EMDR, now also recognized by WHO, gives cause for optimism that evidence-based trauma treatment can be scaled up. For example, its rapid effectiveness is measured in hours and (consecutive) days, not weeks and months—a huge operational advantage in resource-poor conflict and disaster situations. EMDR is minimally intrusive and minimally dependent on verbalization of the trauma experience—two more plusses that help lower the access barrier to services and increase the cultural relevance for treatment. Finally, EMDR has good potential as a community-based primary care intervention using well-trained and well-supervised paraprofessionals, a comparative strength that makes greater outreach possible.

This special event will bring together speakers who are experts in mental health, development and humanitarian issues. They will present and discuss issues, innovations and their implications, highlighting the potential of using EMDR. This event is of particular relevance now via its support of the WHO's Global Mental Health Action Plan which calls for a scaling up of care for people experiencing adverse life events including trauma. The event is also a reflection of the current efforts to include a trauma target in the post-2015 MDGs.

WHO Recommendation, Case Studies and Testimonial:

- *"Individual or group cognitive behavioural therapy (CBT) with a trauma focus or eye movement desensitization and reprocessing (EMDR) should be considered for children, adolescents and adults with posttraumatic stress disorder (PTSD)"ⁱⁱ. WHO 2013.*
- *Following the Marmara earthquake in Turkey, "five 90-minute sessions was sufficient to eliminate symptoms in 92.7% of those treated, with reduction in symptoms in the remaining participants."ⁱⁱⁱ*
- *"Three 90-minute sessions of EMDR eliminated post-traumatic stress disorder in 90% of rape victims."^{iv}*
- *"In this study, the EMDR-IGTP was applied during three consecutive days to a group of 20 adults during ongoing geopolitical crisis in a Central American*

country in 2009. Changes on the IES [Impact of Event Scale]--were maintained at 14 weeks follow-up even though participants were still exposed to ongoing crisis."^v

- *"EMDR assists survivors in the immediate aftermath of violent trauma by breaking through the walls of denial, shock, grief and anger...Ideal for those who have been unable to forget past traumatic life events, as it allows for a rapid processing of even deeply rooted memories, giving individuals control back of their lives and their emotions."* Dusty Bowencamp, RN, Disaster Mental Health, American Red Cross.

Organizational Sponsors:

--**EMDR Europe HAP** is a network of EMDR National organizations associated with almost 10,000 EMDR clinicians throughout Europe. The EMDR Europe HAP programs have been developed over many years in response to disasters and conflict situations. Current projects involve countries throughout Asia, Africa and within Europe itself. These projects provide training for mental health workers, EMDR psychological treatment for local populations and EMDR clinical supervision and consultation in support of the training participants—all on a *pro bono* basis.

--**NGO Forum for Health**, a coalition of some 25 health-related organizations, is actively involved in promoting the right to health and quality health care for all people, including the integration of mental health and psychosocial support into global and national health priorities, and humanitarian and developmental efforts.

--**United Nations Institute for Training and Research (UNITAR)** is a training arm of the United Nations System, reaching out to some 27,000 beneficiaries annually by conducting more than 400 capacity development and research activities around the world. The mission of UNITAR is to deliver innovative training and conduct research on knowledge systems in order to develop capacities of its beneficiaries in the fields of Environment; Peace, Security and Diplomacy; and Governance, in line with its mandate of serving member states.

Registration:

Space is limited, so please be sure to register early at the following registration link: <http://www.unitar.org/event/node/126641>. For more information, please contact Shahida Mohamed (shaahy@bluewin.ch) or Pilar Meza (pilarmeza@gmail.com). A member of our team will contact your organization to respond to any question you may have.

ⁱ See, for example, the special issue of European Review of Applied Psychology, *Recent advances in EMDR research and practice* (Volume 62, issue 4, pages 191-260, October 2012); and Francine Shapiro, *Getting Past Your Past* (Rodale, 2011). Here below is a one-pager on EMDR HAP by Francine Shapiro.

ⁱⁱ WHO (in press). *WHO mhGAP guidelines on conditions specifically related to stress*. Geneva, WHO 2013.

-
- iii Konuk, E. et. al.(2006). The effects of eye movement desensitization and reprocessing (EMDR) therapy on post-traumatic stress disorder in survivors of the 1999 Marmara, Turkey, earthquake. *International Journal of Stress Management*, 13(3), 291-308
- iv Rothbaum, B. (1997). A controlled study of eye movement desensitization and reprocessing in the treatment of post-traumatic stress disorder sexual assault victims. *Bulletin of the Menninger Clinic*, 61, 317-334.
- v Jarero, I., & Artigas, L. (2010). The EMDR integrative group treatment protocol: Application with adults during ongoing geopolitical crisis. *Journal of EMDR Practice and Research*, 4, 148-155.

‘Getting Past the Past’: Providing the Opportunity for Peace and Conflict Resolution Through the Treatment of Traumatic Memories

Recent research has revealed the profound and lasting effects of traumas and other adverse life events across the lifespan. The aftereffects of trauma can be transmitted across generations, resulting in ongoing cycles of violence and pain that affect individuals, families and societies. For those people and organizations working in countries in need of significant conflict prevention, mediation, reconstruction and reconciliation, these unhealed memories can present a grave challenge. The evidence is clear that even with the best of intentions, those attempting to reach across the table are hampered by the negative reactions that automatically arise because of earlier experiences of violence, pain and humiliation. The very sight of those on the other side of the divide and/or the mere mention of the conflict by those attempting to mediate disputes can trigger these unhealed memories that are stored in the brain and contain the negative emotions, thoughts and physical sensations encoded at the time of the event. These involuntary reactions hamper the ability to be rational, pragmatic and open to new ways of thinking.

Because the “past is present,” these unprocessed memories of traumas have resulted in generations of ongoing hostility. The stories of violence, oppression and human rights abuses told to children often result in “vicarious traumatization,” where children feel as though the experience is happening to *them*. Those who have been traumatized carry internal wounds that can result in flashes of anger and pain that can prevent reconciliation and cause a variety of other societal problems such as addictions and domestic violence. These effects are also seen in victims of natural disasters and domestic abuse. All of these disturbing events can affect productivity and the ability to learn and participate in reconstruction programs and development opportunities.

EMDR therapy has been designated an effective form of trauma treatment by a wide range of organizations, including WHO, the American Psychiatric Association, French National Institute of Health and Medical Research, and the UK National Institute for Clinical Excellence. More than 20 randomized controlled studies have demonstrated that trauma can be rapidly healed with EMDR therapy even without the need for disclosing the trauma in detail. While the unconscious memory associations caused by trauma can be the basis of conflict and destructive behaviors, with EMDR therapy these problems can be rapidly and permanently resolved. For all these reasons, EMDR is a most effective, affordable and appropriate therapy now available to treat trauma—whether in the context of peacemaking, peacekeeping or peacebuilding.

The EMDR Europe Humanitarian Assistance Programs (HAP) is a global network of volunteer EMDR educator/clinicians who travel anywhere there are caregivers striving to stop emotional suffering and prevent the psychological aftereffects of trauma and violence,

including those stemming from widespread gender-based violence and terrorist attacks. HAP projects worldwide have taught local clinicians how to provide both individual and group treatment in the aftermath of wars and both natural and man-made disasters. All projects are conducted by professionals who collaborate with local agencies and experts. Trainings are customized to local needs. The primary goal is to train clinicians worldwide to build sustainable mental health structures that will meet not only the pressing present needs, but also serve future generations. For more information, please contact: <http://www.emdrhap.org> or <http://www.emdr-europe.org>.