



THE 4th EMDR ASIA CONFERENCE

**“Empowering EMDR Asia :
Reaching the Unreached”**

**Bangkok, Thailand
3rd -5th January 2020**

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Welcome Message from President of EMDR Thailand Association *Ann Parichawan Chandarasiri*



Welcome to Thailand, The 'Land of Smiles'. Visiting Thailand is an enjoyable affair, supported by friendly and enthusiastic professionals no matter where you go. Bangkok is the capital city and centre of political, commercial, industrial and cultural activities. It is also the seat of Thailand's revered Royal Family. Thailand embraces a rich diversity of cultures and traditions. Its shape and geography ranges from the mountains and forests of the North through the tropical islands and long coastline of the South. Thailand is also a natural gateway to Indochina, Myanmar and Southern China.

With our proud history, tropical climate and warm hospitality, we are delighted to welcome you all to the 4th EMDR Asia conference, which is going to be the enriched experiences of learning, sharing and networking among the EMDR visitors.

...Let's celebrate the 2020 season's greetings in Bangkok, Thailand....

Ann Parichawan Chandarasiri
President of EMDR Thailand Association



Welcome Message from EMDR Asia President *Matthew Woo*

On behalf of EMDR Asia, I would like to warmly welcome EMDR professionals and practitioners from all over the world to this beautiful place of Thailand.

We hope that this conference in 2020 gives us many networking opportunities to enhance our competencies in this specialisation field of EMDR in its scope and application to mental health issues and concerns.

I also would like to take the opportunity to applaud the coming together of many trainers in Asia to find common ground in enhancing the standards of training. The consolidation of training criteria and syllabi has been progressive and requires many hours of discussion, to which I am really appreciative.

I look forward to this conference as a meeting together of the best minds in Asia in discussing key ideas and enhancing important concepts, testament to the significant legacy the late Dr Francine Shapiro has left behind.

Matthew Woo
EMDR Asia President

Welcome Message from EMDR Asia Core committee *Mrinalini Purandare*



On behalf of the core-executive committee of the board of EMDR Asia, I would like to convey our best wishes to the organizers of 4th EMDR Asia conference, Jan.2020, to be held in the beautiful city of Bangkok, Thailand.

This conference is being organized after EMDR community lost Dr. Francine Shapiro in June 2019. We all who were present during EMDR Asia first conference at Bali in 2010 still remember her towering presence amongst us. She urged EMDR Asia community to conduct more and more research and to create pool of data supporting efficacy of EMDR Psychotherapy.

The 4th EMDR Asia conference will provide platform for like minded researchers, academicians and practitioners to exchange ideas and create a network of support system so that we grow together and carry forward the vision of our mentor Dr. Francine Shapiro.

Our heartfelt thanks to the organizing and scientific team of EMDR Asia. Special thanks to the host team, EMDR Thailand. This team is working tirelessly to ensure that the delegates of the conference will have enriching learning experience and comfortable stay.

Wishing 4th EMDR Asia conference, Bangkok, 2020 a grand success.

Mrinalini Purandare
On behalf of the core-executive committee
of the EMDR Asia board



**Greetings from Chair, Training,
Standards and Accreditation
Committee, EMDR Asia**
Sushma Mehrotra

EMDR is becoming established as a mainstream psychological therapy in the Asian region. From the beginnings made about a decade and a half ago in applying EMDR in healing trauma in the Asian region, it is coming into its own. As with every region, there is a felt need for customizing a technology by geography. Towards this end, we have made a beginning. The Training, Standards and Accreditation (TSA) Committee is working on the gradual process developing uniform standards for professional ethics, methods, accreditation criteria and a framework to facilitate inter-country cooperation and exchange. In the near future, we will be developing a strong training team, coordination mechanism and accreditation process along with the uniform standards.

EMDR Asia has been fortunate to receive unconditional support from international training associations and senior trainers from USA & Europe . The Associations and the individual trainers have been extremely generous in providing training, supervision, material and their precious time. It is with a deep sense of gratitude that I take this opportunity on behalf of the TSA Committee and indeed, EMDR Asia, to thank EMDR Institute, Trauma Recovery/HAP, Trauma Aid and EMDR Global Alliance profoundly. The mentoring, guidance and patience have gone a long way to establishing EMDR in Asia.

The 2020 EMDR Asia Conference is going to be a landmark event in the journey. I look forward to the scientific deliberations and interactions. New beginnings beget new hope. With this event early in the New Year, I hope you enjoy the event too.

Thank you friends.

Sushma Mehrotra



Greetings from EMDRIA

Carol Miles

As the current president of the EMDR International Association in the US (EMDRIA), I am honored to participate in this conference and join with others in welcoming you to the 4th annual EMDR Asia conference. EMDRIA continues to support and to learn from its EMDR Asia colleagues. I am delighted to join you in Bangkok and to honor EMDR Asia's many achievements and growth.

As a clinical social worker I have been taught that relationships are the vehicle for change. This conference presents a tremendous opportunity for researchers and EMDR therapists from different backgrounds to learn and share with one another. This conference is like a river with many streams joining together. What a wonderful opportunity to create relationships within ASIA and throughout the world!

We commend the work of EMDR Asia and unite with you in your work to expand EMDR therapy globally and to continue the spread of healing, health and hope. We look forward to continuing to develop our relationships with all of your community and working toward our future common endeavors.

Carol Miles
President of EMDR International Association



KNOWLEDGE TO HEAL...
COMPASSION TO CARE.

Trauma Recovery
EMDR HUMANITARIAN ASSISTANCE PROGRAMS



Greetings from Trauma Recovery ***Carol Martin***

On behalf of Trauma Recovery, EMDR Humanitarian Assistance Programs, our board, staff and volunteers, it is with pleasure that I congratulate you for organizing this distinguished gathering of clinicians and scholars at the Fourth EMDR Asia Conference. I am honored to be a part of this Conference and to learn from the experiences and wisdom that each of you bring to this Conference.

In the three years since the last Asia Conference, there have been many changes, most notably, the loss of Francine Shapiro, who was the founder and honorary President of Trauma Recovery/HAP until her death. Francine is the inspiration for our work and the work of many attending this Conference. For 25 years since the creation of Trauma Recovery/HAP, she was dedicated to bringing hope and healing, through EMDR therapy, to those who have suffered the loss of a loved one or have witnessed the decimation of their community, either through war or a natural disaster. This is the humanitarian work that Francine actively embraced. She was delighted, when three years ago at the last Asia Conference, Trauma Recovery, Asia was established, built on the many years of work of clinicians in Asia.

Trauma Recovery, Asia embraces the legacy of humanitarian work with knowledge and passion. It is through the commitment and caring of dedicated volunteers that there is expanded access to EMDR therapy. It is our mutual mission of building capacity to address the needs of those who are suffering by providing education, training and intervention through EMDR therapy. There is a collaboration that developed through mutual respect and the belief that we can help to advance the efforts of peace, tranquility and increased community resiliency through our work.

I applaud your efforts to bring together clinicians from all over the world to continue efforts to learn and share.

Carol Martin
Executive Director of Trauma Recovery



Greetings from EMDR Europe Association *Isabel Fernandez*

Dear Friends,

It is with great pleasure that I endorse on behalf of EMDR Europe Association, the next EMDR Asia Conference.

This conference traditionally combines great scientific content with a tremendous opportunity to share the latest developments of EMDR therapy among different Regions of the world.

EMDR therapy is increasingly guiding our daily practice. In our EMDR community, we provide care in all areas of mental health and well-being, we discover new procedures and work with high standards in clinical practice, which are provided in a safe and effective manner: we are at the core of modern and scientific discoveries.

The legacy of Francine Shapiro is always guiding us to improve the standards of EMDR therapy by ongoing research and understanding of the potential of the Adaptive Information Processing model.

This Conference will be the common ground for participants coming from all the world to share the State of the Art of EMDR therapy in improving the functioning of our clients.

EMDR Asia has a great team working to make this a truly memorable conference.

Isabel Fernandez

EMDR Europe Association President



Greetings from Trauma Aid Europe ***Derek Farrell***

Dear participants of the 4th EMDR Asia Conference,

Welcome to this beautiful city of Bangkok, Thailand (the City of Angels and Immortals), for what I hope, will be a wonderful experience for you, rich in information, new knowledge, and an opportunity to reconnect with old friends and colleagues and establish new ones.

We are living in difficult times; the global burden of psychological trauma is increasing. This will be exacerbated further due to climate change, scarcity of the earth's resources, and geopolitical conflict. The need to address vulnerable populations continues unabated. EMDR Therapy must play its part in this. Trauma Aid Europe, predominantly through its sister organisation – Trauma Aid Germany, has been an active agent in South East Asia in Trauma Capacity Building. This has involved proud partnerships with the EMDR Therapy communities in Thailand, Cambodia, Indonesia, Myanmar, China and Vietnam. Much has been achieved with these projects – yet much more is needed further still.

This conference presents a wonderful opportunity to witness the immense talent and richness of resources of our EMDR Asian colleagues, alongside other international guests in showcasing contemporaneous EMDR Therapy as an evidence-based psychological treatment intervention.

The future is indeed bright here for EMDR Therapy in Asia. As President of Trauma Aid Europe, I am proud to be here, and to have played some small part in its journey.

I wish you a wonderful conference. May the road rise up to meet you. May the wind be always at your back. May the sun shine warm upon your face, and rain falls upon your fields. Enjoy.

Best,

A handwritten signature in black ink, appearing to read "Derek Farrell", enclosed within a simple rectangular border.

Derek Farrell

President of Trauma Aid Europe



Greetings from Trauma Aid Germany

Ute Sodemann

The development of EMDR Therapy in Southeast Asia has been the major task and effort of TraumaAid Germany, the humanitarian branch of EMDR, since we started the project in Aceh in 2007. I am extremely proud of all the therapists, who have worked with us to build EMDR therapy. Their motivation to continue learning and networking in the Mekong projects has been very impressive. Today the Indonesian, Thai and Cambodian therapists from the front row take over all the necessary supervisions for the trainees in EMDR in Myanmar. They have become a great family and support each other.

The EMDR Congress in Bangkok Thailand would not have been possible without the continued support of the first group of EMDR trainers and all the therapists trained in the three countries.

I would also like to thank all the teachers from the different countries in Asia, Europe and USA, specially our chief trainers, who worked continuously to make this event happen now. The Trauma Aid team, my dear colleagues, have been working together with me during more than ten years. I thank them for the intensive learning experience and their great friendship.

On behalf of TraumaAid Germany I wish the 4th EMDR Asia conference in Bangkok a great success.

Dr. Ute Sodemann
President of Trauma Aid Germany



**Greetings from
President of EMDR Association
United Kingdom and Ireland.
*Lorraine Knibbs***

Dear Participants of the 4th EMDR Asia Conference,

A very warm welcome to the amazing city of Bangkok, Thailand and such an exciting, stimulating conference.

It is said that visitors come to Bangkok as a gateway to start their journey to reach Asia and the East.

The world lives in unprecedented times and reaching those who are globally affected by psychological trauma and advancing their recovery remains important as ever.

On behalf of the EMDR Association United Kingdom and Ireland, we wish you every success and prosperity for the conference and beyond.

Warm regards,

Lorraine Knibbs
President of EMDR Association
United Kingdom and Ireland

**Greetings from Chair of the EMDR
Association of Arab Countries
committee**
Mona Zaghrout-Hodali



Congratulations - on your fourth EMDR Asia Conference and 10th year since the beginnings of EMDR Asia in 2010.

Establishing an International Association of 16 countries, with many different languages, cultures, and standards of practice is an outstanding achievement and one from which other Associations, including the EMDR Association of Arab Countries in its early stages of development, can learn. Drawing together different practitioners, establishing common professional standards, accreditation and training, and promoting and developing EMDR is a remarkable task in itself and we in the EMDR Association of Arab Countries committee thank EMDR Asia for the being able to draw on your experience and expertise.

The EMDR Asia Conferences reflect this work and the international work of EMDR. We wish you every good wish for the 2020 EMDR Asia conference and the future of EMDR. And we highly recommend the 4th EMDR Conference to others worldwide.

Mona Zaghrout-Hodali
Chair of the EMDR Association of Arab Countries committee

Welcome Message from EMDR Asia President Elect *Tri Iswardani Sadatun*



Dear colleagues from all EMDR Associations,

It is such a great pleasure to welcome you to The Fourth EMDR Asia Conference in the beautiful city of Bangkok. I feel fortunate to witness the rapid growth of the EMDR Asia organization.

Ten years ago, our late beloved Dr. Francine Shapiro attended the First EMDR Asia conference and also inaugurated the birth of EMDR Asia organization. Building Bridges Between East and West was the first EMDR Asia theme (Bali, 2010). In a brief period, we had successfully constructed a sturdy bridge where colleagues and trainers from all over the world came across to Asia to conduct many collaborative works, including EMDR training, consultancies, and disaster response projects. This conducive condition attuned with the second EMDR Asia Conference theme: "Activating Resource through Collaboration" (Manila, 2013). As the organization grew stronger, EMDR Asia started applying EMDR therapy simultaneously with a particular aim of creating peace in the region, as reflected in the third EMDR Asia conference theme: "Treating trauma through EMDR for Peace" (Shanghai, 2017). This ultimate goal of creating peace is still a significant challenge. The global world is now facing the collective trauma issue, which also happens to people in Asia, but yet, not too many people who are traumatized get the opportunity to be treated professionally. Hence here we are now, EMDR Asia is trying to reach as many trauma populations in this region to receive a proper treatment with EMDR therapy.

On behalf of EMDR Asia, I express my sincere gratitude for your presence. I believe we will establish a lot of new collaborations between practitioners and researchers from across Asia and beyond. I hope to see practitioners from other regions to join us in learning, exchanging, and networking. Let us empower EMDR Asia to reach the unreached with EMDR therapy. I wish you a happy time in learning and sharing in the spirit of humanity.

Tri Iswardani Sadatun
EMDR Asia President Elect



Greetings from President of Royal College of Psychiatrist of Thailand *Nawaporn Hirunviwatgul*

Dear Participants of the 4th EMDR Asia Conference,

It is a great honor for me to welcome you all to the fourth EMDR Asia conference. I myself was introduced to EMDR several years ago and a chance to participate in Mekong III Project. It was such an eye-opening experience and EMDR is such a unique way of healing.

I believe you all are aware of how important knowledge about trauma and its healing methods are. In Thailand we also take this trauma topic seriously. The Royal College of Psychiatrist of Thailand, which I am currently the president, emphasize this issue to Thai psychiatrists and our residents by integrating stabilization and trauma-informed care into our residency trainings.

However, I know there are still much more for us all to learn. So, I am very pleased to see, today, so many colleagues, residents, friends and professors who have traveled from all around the world to this conference.

I believe it is a great opportunity for everyone here to be able to enhance our knowledge and skills so that we can then help others in need and make the world the better place. And I also think that Thailand is so lucky to have the opportunity to be the host.

Welcome again, to this conference and I hope you all will enjoy it and have a great time in Thailand.

Nawaporn Hirunviwatgul
President of Royal College of
Psychiatrist of Thailand

COMMITTEES

Scientific Committee

Chair: Dr. Matthew Woo
Co-chair: Dr. Tri Iswardani Sadatun, Dr. James Marid Kaewchinda

Organizing Committee

Chair: Dr. Ann Parichawan Chandarasiri
Co-chair: Dr. Sombat Tapanya

Symposia Committee

Chair: Dr. Masaya Ichii
Co-chair: Dr. Daeho Kim
Co-ordinator: Dr. Mrinalini Purandare

Scientific Committee

- | | |
|--|-----------------------------------|
| Dr. Ad de Jongh (the Netherlands) | Dr. Masaya Ichii (Japan) |
| Dr. Ann Parichawan Chandarasiri (Thailand) | Dr. Matthew Woo (Singapore) |
| Dr. Arne Hofmann (Germany) | Dr. Mingyi Qian (China) |
| Dr. Chris Lee (Australia) | Dr. Mowadat Rana (Pakistan) |
| Dr. Derek Farrell (UK) | Dr. Mrinalini Purandare (India) |
| Dr. Emre Konuk (Turkey) | Ms. Pamela Brown (Australia) |
| Dr. Gary Quinn (Israel) | Dr. Rosalie Thomas (USA) |
| Dr. Helga Matthess (Germany) | Mr. Sigmund Burzynski (Australia) |
| Dr. James Marid Kaewchinda (Thailand) | Dr. Sombat Tapanya, (Thailand) |
| Dr. Jim Knipe (USA) | Dr. Sushma Mehrotra (India) |
| Dr. Jinsong Zhang (China) | Dr. Akiko Kikuchi (Japan) |
| Dr. Joom Ki Kim (South Korea) | Dr. Udi Oren (Israel) |

THE 4th EMDR ASIA CONFERENCE PROGRAM AT A GLANCE

The 4th EMDR Asia Conference 2020 “Empowering EMDR Asia: Reaching the Unreached”

Pre-conference Workshop: 3rd January 2020

- Pre-conference workshops
- Welcome and Opening ceremony

Conference Day 1: 4th January 2020

- Conference
- Chao Phraya River Cruise

Conference Day 2: 5th January 2020

- Conference
- Closing ceremony

EMDR Board Meeting and Manual Review: 6th January 2020

Post-conference Trainers/Consultants Training: 7th – 8th January 2020

Venue:

King Chulalongkorn Memorial Hospital,
Bhumisiri Mangkalanusorn Building, 12th and 13th Floors

Address:

1873 Ratchadamri Rd., Pathum Wan District,
Bangkok, 10330, Thailand

Organizer:

EMDR Thailand Association

12th Floor, Phor Por Ror Building, King Chulalongkorn Memorial Hospital
1873 Rama 4 Rd., Pathumwan, Bangkok 10330, Thailand

Phone: +66 2 256 5242 or +66 2 256 5183

Email address: emdr.traumateam@gmail.com

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

PRE-CONFERENCE WORKSHOP: 3rd JANUARY 2020

Registration (Floor 13 Hall)					
Floor 12	Room 2 (1201)	Room 3 (1208)	Room 4 (1209)	Room 5 (1216)	Room 6 (1204)
Chair	Matthew Woo	Marid Kaewchinda	Sombat Tapanya	Ann Parichawan	Tri Iswardani
09:00-10:30	Pre-conference Workshop 1 EMDR Therapy & Borderline Personalty Disorder <i>Dolores Mosquera</i> Session 101	Pre-conference Workshop 2 EMDR & Treatment Resistant Depression <i>Arne Hofmann</i> Session 102	Pre-conference Workshop 3 Psychotraumatology & Stabilization Techniques" <i>Derek Farrell</i> Session 103	Pre-conference Workshop 4 EMDR with Children & Youths <i>Ana Gomez</i> Session 104	Pre-conference Workshop 5 The Healing Space- From the Vulnerable Child to the Authentic Essence <i>Brurit Laub</i> Session 105
10:30-11:00 Coffee Break					
11:00-12:30	Pre-conference Workshop 1 EMDR Therapy & Borderline Personalty Disorder <i>Dolores Mosquera</i> Session 101	Pre-conference Workshop 2 EMDR & Treatment Resistant Depression <i>Arne Hofmann</i> Session 102	Pre-conference Workshop 3 Psychotraumatology & Stabilization Techniques" <i>Derek Farrell</i> Session 103	Pre-conference Workshop 4 EMDR with Children & Youths <i>Ana Gomez</i> Session 104	Pre-conference Workshop 5 The Healing Space- From the Vulnerable Child to the Authentic Essence <i>Brurit Laub</i> Session 105
12:30-13:30 Lunch (Floor 13)					
13:30-15:00	Pre-conference Workshop 1 EMDR Therapy & Borderline Personalty Disorder <i>Dolores Mosquera</i> Session 101	Pre-conference Workshop 2 EMDR & Treatment Resistant Depression <i>Arne Hofmann</i> Session 102	Pre-conference Workshop 3 Psychotraumatology & Stabilization Techniques" <i>Derek Farrell</i> Session 103	Pre-conference Workshop 4 EMDR with Children & Youths <i>Ana Gomez</i> Session 104	Pre-conference Workshop 5 The Healing Space- From the Vulnerable Child to the Authentic Essence <i>Brurit Laub</i> Session 105
15:00-15:30 Coffee Break					
15:30-17:00	Pre-conference Workshop 1 EMDR Therapy & Borderline Personalty Disorder <i>Dolores Mosquera</i> Session 101		Pre-conference Workshop 3 Psychotraumatology & Stabilization Techniques" <i>Derek Farrell</i> Session 103	Pre-conference Workshop 4 EMDR with Children & Youths <i>Ana Gomez</i> Session 104	Pre-conference Workshop 5 The Healing Space- From the Vulnerable Child to the Authentic Essence <i>Brurit Laub</i> Session 105

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

PRE-CONFERENCE WORKSHOP: 3rd JANUARY 2020 (cont.)

	Welcome & Opening Ceremony
17:00-17:30	Registration (Floor 13 Hall)
	Rabieng Rommanee (Floor 14)
17:30-17:45	Welcome Cocktail
17:45-18:00	Opening Address: Matthew Woo (President of EMDR Asia)
18:00-18:15	Welcome Address: Nawaporn Hirunviwatgul (President of Royal College of Psychiatrist of Thailand)
18:15-18:45	Thai Traditional Welcome Dance
18:45-19:15	Keynote Address 1: Arne Hofmann "EMDR – A Successful Treatment for Depression" (Chair: Tri Iswardani Sadatun)
19:15-19:45	Keynote Address 2: Carol Martin "Trauma Recovery Network" (Chair: Sushma Mehrotra)
19:45-20:15	Thai Cultural Show

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

CONFERENCE DAY 1: 4th JANUARY 2020

Floor 12	Room 1 (1210)				
09:00-09:30	Keynote Address 3: Ute Sodemann “The Promotion of EMDR in SE Asia” (Chair: Ann Parichawan Chandarasiri) (Session 211)				
09:30-10:00	Keynote Address 4: Tri Iswardani Sadatun “Future Direction of EMDR Asia for Collaboration, Challenges and Strategies to Reach the Trauma and Specific Population in Asia” (Chair: Matthew Woo) (Session 212)				
10:00-10:30 Coffee Break					
Floor 12	Room 2 (1201)	Room 3 (1208)	Room 4 (1209)	Room 5 (1216)	
Chair	Marid Kaewchinda	Mrinalini Purandare	Matthew Woo	Sushma Mehrotra	
10:30-10:45	Conceptualization and Treatment of Abuse in Eating Disorders and Obesity Using EMDR Therapy Half Day Workshop (120 min) Natalia Seijo (Session 221)	Resonant Cognitive Interweaves: From the Gestalt Empty Chair to the Healing Power of Music and Lyrics Full Day Workshop (240 min) Donald deGraffenried (Session 231)	EMDR for Victims of Gender Violence Half Day Workshop (90 min) Dolores Mosquera (Session 241)	Flash Technique Group for Parents with Parenting Stress of Children with Special Education Needs Standard Paper (30 min) Maggie Poon (Session 251)	EMDR with Children & Adolescents EMDR & Childhood Trauma
10:45-11:00					EMDR & Peak Performance
11:00-11:15				Understanding Client’s Belief System Helping Treatment Process Extended Paper (45 min) Plaktin OM (Session 252)	EMDR & Personality Disorders
11:15-11:30					
11:30-11:45				EMDR in Various Cultural Contexts & Special Populations	
11:45-12:00			EMDR and Spirituality Standard Paper (30 min) Mowadat Hussain Rana (Session 253)		
12:00-12:15			EMDR in The Treatment of Trans-generational Trauma Short Paper (15 min) Khadija Tahir (Session 242)		
12:15-12:30				Effectiveness of EMDR on Children with School Phobia from Developing Country Short Paper (15 min) Nithya Hariya Mohan (Session 243)	EMDR & Depression / Grief & Mourning
					EMDR & Addictions
12:30-13:30 Lunch (Floor 13)					

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

CONFERENCE DAY 1: 4th JANUARY 2020 (cont.)

Floor 12	Room 2 (1201)	Room 3 (1208)	Room 4 (1209)	Room 5 (1216)	EMDR with Children & Adolescents EMDR & Childhood Trauma
Chair	Sombat Tapanya	Mrinalini Purandare	Tri Iswardani Sadatun	Ann Parichawan	
13:30-13:45	EMDR and children: An integrative Psychotherapy Approach Half Day Workshop (120 min) Michel Silvestre (Session 222)	Resonant Cognitive Interweaves: From the Gestalt Empty Chair to the Healing Power of Music and Lyrics Full Day Workshop (240 min) Donald deGraffenried (Session 231)	Improving Care By Building Trauma-informed Organizations Mini Workshop (60 min) Leoniek Kroneman (Session 244)	Integrating EMDR Therapy and Play Therapy with Children Half Day Workshop (135 min) Ann Beckley Forest (Session 254)	
13:45-14:00					
14:00-14:15					
14:15-14:30					
14:30-14:45					
14:45-15:00		The Efficacy of EMDR Psychotherapy in the Treatment of Depression and Co-morbid Anxiety Standard Paper (30 min) Mauna Gauhar (Session 245)			
15:00-15:30 Coffee Break					EMDR & Personality Disorders
15:30-15:45	EMDR and Children: An Integrative Psychotherapy Approach Half Day Workshop (120 min) Michel Silvestre (Session 222)	Resonant Cognitive Interweaves: From the Gestalt Empty Chair to the Healing Power of Music and Lyrics Full Day Workshop (240 min) Donald deGraffenried (Session 231)	Using EMDR with Indian Males with Personality Disorders: An Approach that Focuses on Attachments and Early Life Experiences Standard Paper (30 min) Chintan Naik (Session 246)	Integrating EMDR Therapy and Play Therapy with Children Half Day Workshop (135 min) Ann Beckley Forest (Session 254)	EMDR in Various Cultural Contexts & Special Populations
15:45-16:00					
16:00-16:15	Traumatic blood Contact between Mother and Daughter: Condition for Anorexia of the Female Adolescent Standard Paper (30 min) Lorenzo Bracco (Session 223)	Development and Use of EMDR Protocol to Improve Psychological Well-being, Optimism, Forgiveness and Altruism in College Going Students Short Paper (15 min) Usha Verma (Session 232)	EMDR to Enhance Recovery from Addiction: Preventing Relapse Cycle Standard Paper (30 min) Nuzhat-e-Rahman & Shaheen Islam (Session 247)		EMDR & Depression / Grief & Mourning
16:15-16:30					
17:00-17:30 Transport Arrangements Room 1 (1210)					
17:30-19:00 Transportation to Cruise					
19:00-21:00 Chao Phraya River Cruise					
21:00-22:00 Transportation to Conference Venue					

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

CONFERENCE DAY 2: 5th JANUARY 2020

Floor 12	Room 1 (1210)				
09:00-09:30	Keynote Address 5: Sushma Mehrotra “Milestones and Sharing the Experience of Growth of EMDR in Asia” (Chair: Matthew Woo) (Session 311)				
09:30-10:00	Keynote Address 6: : Rosalie Thomas “A Tribute to Francine Shapiro” (Chair: Mrinalini Purandare) (Session 312)				
10:00-10:30 Coffee Break					
Floor 12	Room 2 (1201)	Room 3 (1208)	Room 4 (1209)	Room 5 (1216)	EMDR in Various Cultural Contexts & Special Populations
Chair	Atara Silvan	Masaya Ichii	Ean Nil	Naysim Hong	
10:30-10:45	EMDR for The Treatment of Dissociative Disorders Mini Workshop (60 mins) Adithy (Session 321)	The Trauma Counselor Trainings: Promoting the Community-based Psychological Care and Services in Myanmar Standard Paper (30 min) Sithu Pe Thien (Session 331)	The Adaptation Assessment Phase of EMDR: Case Study with Social Phobia Extended Paper (45 min) Phul Sophearith (Session 341)	Eye Movement Desensitization as a Strategy to Reduce Trauma Symptoms of Terrorism Acts Survivors Standard Paper (30 min) Edward Andriyanto Sutardhio (Session 351)	EMDR in Various Cultural Contexts & Special Populations
10:45-11:00					
11:00-11:15		Research Finding from Local Results of Mekong I Project in Thailand: Effectiveness of EMDR Therapy for the Unreached Traumatized People Short Paper (15 min) Nawanant Piyavhatkul (Session 332)		EMDR-IGTP and Mass Disasters: The Need of an Effective Intervention for Psychological Distress in Disaster Prone and Resource Scarce Areas, A Study in Indonesia’s Context Standard Paper (30 min) Jackie Viemilawati & Fuye Ongko (Session 352)	EMDR & War / Terrorism/ Refugees/ Torture / Mas
11:15-11:30		EMDR Therapy in Bringing Psychological Well-being to survivors of natural disaster Extended Paper (45 min) Mrinalini Purandare (Session 333)			Case Series: EMDR Processing of OCD Symptoms Standard Paper (30 min) Dr. Matthew Woo (Session 342)
11:30-11:45	Giving a Simple Structure to Complex Trauma : How to Treat Complex Trauma More Effectively Mini workshop (60 min) Tri Swasono Hadi & Tara de Thouars (Session 322)	EMDR-IGTP in Alleviating Subjective Unit of Disturbance of University Students with Shared Traumatic Memory Short Paper (15 min) Pingkan C. B. Rumondor (Session 334)	Exam Anxiety among Graduate Students: Use of EMDR to Address Relevant Childhood Trauma Short Paper (15 min) Rakibul Hasan & Shaheen Islam (Session 343)	The Need for Trauma Therapy of Man-made Trauma Victims Compared to Victims of Natural Disaster, a Health Professional Survey Standard Paper (30 min) Walid Abdul-Hamid (Session 353)	EMDR & Dissociation/ Complex Trauma
11:45-12:00					
12:00-12:15			Modified EMDR with Case of Encephalitis Standard Paper (30 min) Seema Hingorrany (Session 344)	EMDR for Gender-based Violence in Aceh: A Case Study Short Paper (15 min) Yulia Direzkia (Session 354)	EMDR & Humanitarian Assistance Programmes
12:15-12:30					

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

CONFERENCE DAY 2: 5th JANUARY 2020 (cont.)

12:30-13:30						Lunch (Floor 13)					
Floor 12		Room 2 (1201)		Room 3 (1208)		Room 4 (1209)		Room 5 (1216)		<div>EMDR in Various Cultural Contexts & Special Populations</div> <div>EMDR & War / Terrorism/ Refugees / Torture / Mas</div> <div>Training / Supervision / Consultation issues in EMDR</div> <div>EMDR & Dissociation / Complex Trauma</div>	
Chair		Marid Kaewchinda		Sombat Tapanya		Sithu Pe Thien		Rosalie Thomas			
13:30-13:45		<div>EMDR and Emotional Processing: Working on Severe Emotion Dysregulation</div> <div>Half Day Workshop (135 min)</div> <div>Anabel Gonzalez (Session 323)</div>		<div>EMDR Digital Protocol (EMDR-DP): A Virtual Reality Approach Processing The Preparation Phase</div> <div>Half Day Workshop (135 min)</div> <div>Jörg Albers (Session 335)</div>		<div>Support Returning to Work after Reprocessing of Power Harassment Memory by EMDR</div> <div>Standard Paper (30 min)</div> <div>Masaya Ichii (Session 345)</div>		<div>Reaching Clients Hidden and Struggling in Conservative-religious Communities & Families</div> <div>Half Day Workshop (135 min)</div> <div>Bryan Shen (Session 356)</div>			
13:45-14:00						<div>Eye Movement Desensitization and Reprocessing Therapy for Female Client with Vaginismus</div> <div>Standard Paper (30 min)</div> <div>Supanee Siri-Apawiwat (Session 346)</div>					
14:00-14:15											
14:15-14:30											
14:30-14:45											
14:45-15:00		<div>Mental Health Nurses Willingness to Pay for EMDR Therapy Training</div> <div>Standard Paper (30 min)</div> <div>Iain McGowan (Session 347)</div>									
15:00-15:30						Coffee Break					
15:30-15:45		<div>EMDR and Emotional Processing: Working on Severe Emotion Dysregulation</div> <div>Half Day Workshop (135 min)</div> <div>Anabel Gonzalez (Session 323)</div>		<div>EMDR Digital Protocol (EMDR-DP): A Virtual Reality Approach Processing The Preparation Phase</div> <div>Half Day Workshop (135 min)</div> <div>Jörg Albers (Session 335)</div>		<div>Successes and Challenges of Capacity Building EMDR Training Programmes in Humanitarian Projects: A Lebanese Experience</div> <div>Extended Paper (45 min)</div> <div>Lina Ibrahim (Session 348)</div>		<div>Reaching Clients Hidden and Struggling in Conservative-religious Communities & Families</div> <div>Half Day Workshop (135 min)</div> <div>Bryan Shen (Session 356)</div>		EMDR & Humanitarian Assistance Programmes	
15:45-16:00											
16:00-16:15											
16:15-16:30						<div>Reflection on Action: Supporting Clinicians in Their EMDR Training and Application</div> <div>Standard Paper (30 min)</div> <div>Atara Sivan (Session 349)</div>				<div>EMDR Case Studies EMDR in the treatment of Fears</div>	
16:30-16:45											
Floor 12						Room 1 (1210)					
17:00-17:30						General Body Meeting					
17:30-18:00						Closing Address : Carol Miles as EMDRIA President “The Multiple Levels of Partnership between EMDRIA and Asia”					
18:00-18:30						Special Address : Suttipong Wacharasindhu (Dean of Faculty of Medicine, Chulalongkorn University)					
18:30-18:45						Vote of Thanks by President-elect : Tri Iswardani Sadatun					
18:45-19:00						Vote of Thanks by Secretary of EMDR Asia : Mrinalini Purandare					

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE



Special Session

Topic: *Immediate Stabilization Protocol*

by Gary Quinn

Room 6 (1204) Session 361

Date: 5th January 2020 Time: 13.30-15.00

Gary Quinn, MD, Director of the EMDR Institute of Israel.

Dr. Quinn is a psychiatrist who specializes in Crisis Intervention, the treatment of Anxiety and Depressive Disorders, and the treatment of Post-Traumatic Stress Disorder.

Dr. Quinn has conducted numerous trainings in Israel. He has been senior trainer in Europe, Asia, Africa, and the US. He has participated as a trainer for HAP (Humanitarian Assistance Programs) in Turkey, Thailand, Romania, Cambodia, and Zimbabwe. Dr. Quinn is currently an EMDR Institute, Inc. Trainer of Trainers of Asia.

Dr. Quinn has volunteered in medical hospitals after terrorist attacks and treated patients in bomb shelters and after the Tsunami in Thailand. He developed the Emergency Response Protocol (ERP) to treat victims of trauma with EMDR within hours of the incident when suffering from speechless terror with multiple rapid flashbacks.

THE 4th EMDR ASIA CONFERENCE PROGRAM OUTLINE

POSTER PRESENTATION

Poster Area: Floor 12

Inclusion of Psychotraumatology for Sustainable EMDR Practice
Shaheen Islam (Session 261)

Clients' Experience of Difficulties During EMDR Therapy and How They Cope with Them
Ohnma Win Pe, Khin Yadana Soe and Ramaswamy Deepti (Session 262)

Psychotrauma in Psychosis: Is EMDR an Answer?
Rasham Rana (Session 263)

Efficacy of EMDR among College Students with Internet Addiction
Sandheesh P.T. (Session 264)

Use of EMDR in PTSD Survivors in Terrorist Attacks and Bomb Blasts
Abdul Nasir (Session 265)

EMDR Increases Resiliency: A Case Study of Complex Trauma Client after Short Treatment
Naysim Hong (Session 266)

Reaching the Unreached: An Outreach to Tribal Settlements
Sany Varghese, Gincy Mathew, and Mary Mathew (Session 267)

The Magic of Absorption Technique
Mahjabeen Haque (Session 268)

EMDR on Vicarious Trauma and Posttraumatic Growth in the Helper of Abused Children and Family
Payongsri Khanthikul (Session 269)

The Need for a Cross-cultural Adaptation of the EMDR Group Protocol Intervention for Trauma
Affected Children and Adolescents: Reflections from the Sri Lankan Context
Rekha Aththidye (Session 270)

EMDR Expedition can Highly Promote School Students Academic Performance
who have History of Grade Failure and Dropout
Maksuda Begum (Session 271)

Effect of Eye Movement on Memorization of Threat Words
Masaya Ichii (Session 272)

Effect of EMDR Therapy: A Report of Fifty-two Thai People with Psychological Trauma
Soontaree Srikosai (Session 273)

Processing Grief of Untimely Loss of Loved One Verses due to Prolonged Illness with EMDR Therapy
Sonali Tanksale (Session 274)

KEYNOTE ADDRESS

Title: *“EMDR – A Successful Treatment for Depression”*

Keynote Speaker: **Arne Hofmann** (Chair: Tri Iswardani Sadatun)

Date: 3rd January 2020 Time: 18:45 - 19:15



Severe depression is one of the most common mental disorders and affects between 15-20 % of the general population in their lifetimes. Although many pharmacologic and psychotherapeutic interventions exist that are considered to be effective in depression, the treatment results are often less than satisfactory. High relapse rates (ranging at 50% after two years), unsatisfactory remissions and suicidal risks are among the major problems.

EMDR is internationally recognized as one of the most effective tools to treat posttraumatic stress disorder (WHO 2013). Increasingly scientific studies show that stressful life events play a major role in depressive disorders. In recent years therefore EMDR has come into focus as a new intervention tool in the treatment of depressive patients.

The European EDEN study group has conducted research on EMDR and EMDR since 2007, published 5 controlled studies (three of them RCTs) and treated at least 500 depressive patients using a specific EMDR protocol. The studies have shown that EMDR is at least equal to CBT treatment in depression but seems to result in more complete remissions than other interventions. The keynote will discuss the possibilities to include EMDR in the routine treatment of depression.

Dr. Arne Hofmann MD is specialist for psychosomatic medicine and head of the EMDR-Institute in Germany. He learned EMDR in 1991 and has introduced it in the german-speaking countries. Dr. Hofmann is co-founding board member of EMDR Europe and a member of a German national guideline commission on the treatment of PTSD.

He is teaching, researching and publishing in the field of psychological trauma and EMDR. He has been teaching at the Universities of Cologne, Boston University and the Peking University. He co-founded the European EDEN research group that has up to now published 5 controlled studies that have shown that EMDR is highly effective in the treatment of depression. For his work he has received several awards and the Order of Merit of the Federal Republic of Germany.

KEYNOTE ADDRESS

Title: *“Trauma Recovery Networks”*

Keynote Speaker: *Carol Martin* (Chair: Sushma Mehrotra)

Date: 3rd January 2020 Time: 19:15 - 19:45



Carol R. Martin has been the Executive Director of Trauma Recovery, EMDR Humanitarian Assistance Programs, a non-profit organization committed to bringing trauma-informed therapy to the underserved, both in the U.S. and in Third World countries for nearly a decade. Carol has more than a 30 year history working with non-profit and educational organizations. Her prior positions include, Vice-President for Development of Save the Children, Westport, CT; Vice-President for Institutional Advancement and CEO of the Foundation, Southern Connecticut State University, New Haven, CT; Vice-President for Advancement, F.I.T., New York, NY and Director of Development and Alumni Affairs, Yale University School of Epidemiology and Public Health. She has also provided counsel to a number of organizations such as L'Envol - a Hole in the Wall Gang Camp and Mother's Voices – an AIDS advocacy organization among many.

Carol has a B.A. in Sociology and Psychology from the University of Michigan and a postgraduate degree from the University of Nice, France. She current serves on the Board of the Rotary Foundation of New Haven, the United Way of New Haven and on the Area Cooperative Education Foundation.

KEYNOTE ADDRESS

Title: *“The Promotion of EMDR in SE Asia”*

Keynote Speaker: **Ute Sodemann**

(Chair: Ann Parichawan Chandarasiri)

Date: 4th January 2020

Time: 09:00 - 09:30



Ute Sodemann was born during the Second World War in Southwestern Germany. From 1960 to 1967 she studied sociology and political science at Freiburg University, Thai Language and SE-Asian Studies at Chulalongkorn University in Bangkok and SE-Asian Studies at the London School of Oriental and African Studies. After her Ph.D in Freiburg she became a lecturer at the South Asia Institute in Heidelberg and took part in an interdisciplinary research project in Thailand in the early 70's. In 1974 she left her academic career and joined terre des hommes Germany, a Children's aid organisation operating worldwide. From 1977 she was for 16 years tdh's Regional Coordinator for South America based in Bogota/Colombia and subsequently for another 10 years tdh Program Manager at their headquarter in Germany until her retirement in 2003. That is when Ute Sodemann embarked on another long venture and became involved in trauma therapy training programs. An assessment of the Post-Tsunami-situation in Aceh/Indonesia in 2006 was followed from 2007 to 2010 by the first extensive EMDR training project there with the support of trainers and supervisors from Germany. Ute Sodemann had become a member of Trauma Aid Germany in 2005 and became President of Trauma Aid in 2010. The Aceh project was so successful in demonstrating the effectiveness of EMDR that it was followed from 2010 onwards by three Mekong EMDR training projects in Indonesia, Cambodia, Thailand and later Myanmar, each lasting 3 years. In between another training project under the auspices of Trauma Aid Germany was carried out in Haiti and in 2008 a new package of EMDR and TPSS+ training courses for social workers in a refugee context was launched and is being monitored and evaluated in Northern Iraq.

KEYNOTE ADDRESS

Title: *“Future Direction of EMDR Asia for Collaboration, Challenges and Strategies to Reach the Trauma and Specific Population in Asia”*

Keynote Speaker: *Tri Iswardani Sadatun* (Chair: Matthew Woo)

Date: 4th January 2020

Time: 09:30 - 10:00



Dr. Tri Iswardani Sadatun, MSc, Psy, is Clinical Psychologist and Senior Lecturer in Faculty of Psychology, University of Indonesia. EMDR Europe Accredited Trainer, chair of HAP Asia, past vice president of EMDR Indonesia, founding member and past treasurer of EMDR Asia. Her current research focuses on trauma focused interventions and trauma-based addiction. She has been in private practice since 1992 and serves as EMDR practitioners since 2007, has several structural positions in the Indonesian Psychological Association as Chairperson of the Community Service Division and Competency Development and past chairperson of Community Service and Business Development. Her expertise on trauma recovery is well known in Indonesia and often seconded by National Disaster Response Agency, National Narcotic Agency, National Counter-terrorism Agency, and Disaster Victim Identification (DVI), in critical situation, including airplane crash incident, accident at work, terrorism and natural disaster.

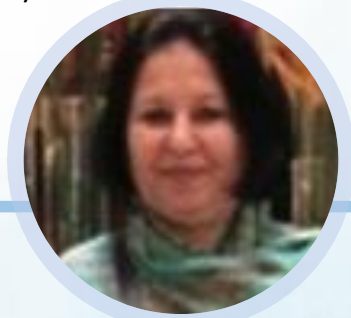
KEYNOTE ADDRESS

Title: *“Milestones and Sharing the Experience of Growth of EMDR in Asia”*

Keynote Speaker: **Sushma Mehrotra** (Chair: Matthew Woo)

Date: 5th January 2020

Time: 09:00 - 09:30



Dr. Sushma Mehrotra :With M.Phil and PhD in Clinical Psychology, she was associated as a full time faculty member at SNTD Women’s University from 1990-2004. Dr. Sushma Mehrotra has over 18 years of professional experience and expertise at policy and intervention level in program planning and design, implementation, evaluation of developmental projects. She has worked for the National Programs for HIV prevention in India as well as in Timor Leste and associated closely with WHO (South East Asia Regional Office), UNICEF, The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), International Planned Parenthood Federation (IPPF), Bill and Melinda Gates Foundation, Grant Management Solutions (GMS) USA, CARE International. Some of the short term consultancies included for PSI Myanmar, Save the Children Bangladesh, Dohrabji Tata Trust India and Engender Health. She has been the founder president of EMDR association of Asia (2010-2017) .She is also an International trainer for EMDR and offers voluntary services to Trauma Recovery/Humanitarian Assistance Program (HAP), USA.

Currently she is Chair of Training, Standards & Accreditation Committee of EMDR Asia and leading the team of EMDR Asia Trainers in the process of establishing EMDR Asia Therapy training, standards and accreditation as well as to initiate Manual and curriculum development based on international standards in collaboration with other international teams. She is a well-established international Asian trainer for EMDR training and is Founder President of EMDR India (2013-2017). She is being invited to Philippines, Sri Lanka, Uganda, Afghanistan, Indonesia, China and Bangladesh to train mental health professionals for EMDR, besides training EMDR therapy in India. She is also past President of Bombay Psychological Association. She is also a board member of Durbar Mahila Samakhya Committee (DMSC), Global Initiative of Stress and Trauma (GIST-T), The Global Working Group of Trauma Recovery/EMDR Humanitarian Assistance Program, EMDR Global Alliance and Initiative Change Collaborative (ICCo). She is practicing as an independent Clinical Psychologist currently and has her own private practice.

KEYNOTE ADDRESS

Title: *"A Tribute to Francine Shapiro"*

Keynote Speaker: Rosalie Thomas

(Chair: Mrinalini Purandare)

Date: 5th January 2020

Time: 09:30 - 10:00



Dr. Rosalie Thomas is a licensed psychologist in Washington State. She has served as Board Member, Treasurer and President of the EMDR International Association and is a founding board member of the EMDR Research Foundation. She currently serves as co-facilitator of the EMDR Global Alliance, and co-chair of the EMDRIA Conference Committee. Dr. Thomas is a Facilitator and Trainer for the Trauma Recovery/ Humanitarian Assistance Programs and is a Facilitator and Regional Trainer for the EMDR Institute and a Trainer of Trainers for EMDR Asia. Dr. Thomas has participated in EMDR therapy trainings throughout the United States and Canada, Bangladesh, Japan, India, Sri Lanka, China and the Philippines. She is the principal author of the EMDR Early Interventions Researcher's Toolkit. Dr. Thomas was recipient of the Francine Shapiro Award in 2007, the Outstanding Service to EMDRIA Award, and, along with Dr. Sushma Mehrotra, was co-recipient of the Trauma Recovery/ Humanitarian Assistance Program's Liz Snyder Award for Humanitarian Service in 2016.

KEYNOTE ADDRESS

Title: *"The Multiple Levels of Partnership Between EMDRIA and Asia"*

Keynote Speaker: **Carol Miles**

Date: 5th January 2020

Time: 17:30 - 18:00



Carol Miles MSW, LCSW, a clinical social worker specializing in individual, and family psychotherapy, maintains a private practice in Covington and New Orleans, Louisiana, USA, with adolescent and adult clients. She also provides training and consultation for therapists developing skills in Eye Movement Desensitization and Reprocessing Therapy (EMDR Therapy).

A graduate of LSU School of Social Work, Carol specializes in Clinical Social Work, with over 30 years of experience as a social worker in clinical, administration, and marketing with the public and private sectors. Among her areas of expertise are working with clients who have eating disorders and trauma. She is certified in EMDR Therapy (Eye Movement Desensitization and Reprocessing Therapy) by EMDRIA (EMDR International Association) and has additional training in DBT (Dialectical Behavioral Therapy). Carol has often presented at state wide conferences and to general audiences on topics ranging from Eating Disorders, Assertiveness, EMDR Therapy, DBT and Developing a Private Practice. She has taught as an adjunct professor at the Tulane School of Social Work since 1998.

Additionally, she is an EMDRIA Approved Consultant and EMDRIA Approved Provider of EMDR Therapy. She has been a member of EMDRIA since 2008, shortly after being trained in EMDR Therapy in New Orleans through the EMDR Humanitarian Assistance Program (now called Trauma Recovery). As a volunteer for EMDRIA, she served as a member of the Conference Committee for many years and founded and chaired the University Special Interest Committee. She is currently the Regional Co-Coordinator of South Louisiana. In 2017 she was elected to serve on the EMDRIA Board of Directors 2017-2021, becoming its President in 2019.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 1

EMDR Therapy for Borderline Personality Disorder (Session 101)

Presenter: **Dolores Mosquera** (Chair: Matthew Woo)

09:00 -17:00 Full-Day workshop Room 2 (1201)



Dolores Mosquera, is a psychologist and psychotherapist specializing in severe and complex trauma, personality disorders, and dissociation. She is an accredited EMDR Europe Trainer and supervisor. Dolores is the director of the Institute for the Study of Trauma and Personality Disorders (INTRA-TP) in A Coruña, Spain—a 3-clinic private institution initially founded in 2000. She collaborates with two different Domestic Violence Programs, one focused on Women Victims of DV and another one on Males with Violent Behavior. She belongs to the Spanish National Network for the Assistance of Victims of Terrorism, and also collaborates with an organization aiding victims of emergencies, accidents, violent attacks, kidnapping and other traumatic incidents.

Dolores has extensive teaching experience leading seminars, workshops, and lectures internationally. She has participated as a guest speaker in numerous conferences and workshops throughout Europe, Asia, Australia, and North, Central, and South America. She has published 15 books and numerous articles on personality disorders, complex trauma, and dissociation, and is a recognized expert in this field. She also teaches in several Universities, and collaborates supervising Clinical Psychologists in postgraduate training programs in Spain. She received the David Servan-Schreiber award for outstanding contributions to the EMDR (Eye Movement Desensitization and Processing) field in 2017, and was made a Fellow of the International Society for the Study of Trauma and Dissociation in 2018, for her important contributions to the trauma and dissociation field.

Abstract:

The DSM-5 establishes the criteria for the Borderline Personality Disorder (BPD) diagnosis, which includes frantic efforts to avoid real or imagined abandonment, identity disturbance, impulsivity, potentially self-damaging behaviors, affective instability due to a marked reactivity of mood, suicidal ideation and a history of –or risk of– suicide attempts, chronic feelings of emptiness, difficulties to control anger and dissociative symptoms. This compound of symptoms offers a glimpse into why Borderline Personality Disorder (BPD) has a reputation for being one of the most challenging disorders to treat.

Since Borderline patients may generate strong countertransference issues in clinicians, these must be taken into consideration in working with this population. In addition, EMDR may mobilize intense affect in patients. The combination of these two important factors makes it essential for clinicians to pay close attention to affect phobias –both in themselves and their BPD patients–and develop the ability to recognize the defensive responses that arise. Affect phobias will be crucial in selecting and applying treatment strategies EMDR therapy with BPD.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 1

EMDR Therapy for Borderline Personality Disorder (Session 101)

Presenter: **Dolores Mosquera** (Chair: Matthew Woo)

09:00 -17:00 Full-Day workshop Room 2 (1201)

Abstract: (cont.)

This workshop helps understand Borderline pathology from the perspective of the Adaptive Information Processing model, as well as develop a sound case conceptualization of BPD cases. Through the use of educational videos and lecture, we will highlight:

- How to adapt EMDR treatment for this specific population
- How to establish the connecting thread between the client's symptoms and their early childhood environments, characterized by a high rate of attachment disruptions and severe traumatic events.
- How to identify and when to address the common defenses that come up during EMDR procedures.
- How to continue processing within the window of tolerance.

Program:

- Brief review of BPD and trauma.
 - Understanding DSM criteria from the Adaptive Information Processing model and a trauma perspective.
- Identifying and managing common relational dynamics in the therapeutic relationship with the Borderline Patient.
 - Case examples and video fragments
- Case conceptualization and target selection
 - The relevance of Adaptive Information in BPD.
 - Identifying core BPD targets.
 - How to go from symptoms to target.
- Adapting EMDR procedures for BPD.
 - Relevant aspects to take into account in BPD during Phases 3-7.
 - Successful application of the Standard EMDR Protocol.
 - Common difficulties and solutions.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 2

EMDR and Treatment Resistant Depression (Session 102)

Presenter: **Arne Hofmann** (Chair: Marid Kaewchinda)

09:00 -15:00 Full-Day workshop Room 3 (1208)



Dr. Arne Hofmann, MD, is specialist for psychosomatic medicine and head of the EMDR-Institute in Germany. He learned EMDR in 1991 and has introduced it in the german-speaking countries. Dr. Hofmann is co-founding board member of EMDR Europe and a member of a German national guideline commission on the treatment of PTSD. He is teaching, researching and publishing in the field of psychological trauma and EMDR. He has been teaching at the Universities of Cologne, Boston University and the Peking University. He co-founded the European EDEN research group that has up to now published 5 controlled studies that have shown that EMDR is highly effective in the treatment of depression. For his work he has received several awards and the Order of Merit of the Federal Republic of Germany.

Abstract:

EMDR is internationally recognized as one of the most effective tools to treat posttraumatic stress disorder (WHO 2013). Increasingly studies show that stressful life events play a major role in depressive disorders. In recent years therefore EMDR has come into focus as a new intervention tool in the treatment of depressive disorders and the specific protocol has been developed to work systematically with unipolar depressive disorders, the EMDR DeprEnd protocol.

This protocol has been developed in the research that has been conducted by the European EDEN study group since 2007, and applied to at least 500 depressive patients using the EMDR DeprEnd protocol.

The EMDR DeprEnd protocol focuses episode triggers (Criterion A or not), belief systems and psychological states related to depressive disorders.

In the workshop protocol will be introduced and partly trained, parts of it in small group exercises. Also practical cases will be presented and, as time permits, discussed.

Learning objectives:

- How EMDR can be of use in a case of unipolar depressive disorders
- How to do treatment planning with the AIP model in a case of depression
- How to use the DeprEnd protocol with your depressive patients

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 3

Psycho-traumatology and Stabilization Techniques (Session 103)

Presenter: **Derek Farrell** (Chair: Sombat Tapanya)

09:00 -17:00 Full-Day workshop Room 4 (1209)



Dr. Derek Farrell is a Principal Lecturer in Psychology at the University of Worcester (UK) where he is Course Director of a MSc EMDR Therapy programme (the world's first such programme). He is an EMDR Therapy Europe Accredited Senior Trainer and Consultant, a Chartered Psychologist with the British Psychological Society, and an Accredited Psychotherapist with the British Association of Cognitive & Behavioural Psychotherapies (BABCP). He is Past-President of the EMDR UK & Ireland Board, President of Trauma Aid Europe, Past Co-Vice President of EMDR Europe Board and current Chair of the EMDR Europe Practice Committee. He has been involved in a number of Humanitarian Trauma Capacity Building programmes in Pakistan, Turkey, India, Cambodia, Myanmar, Thailand, Indonesia, Lebanon, Poland, Palestine and Iraq. His PhD in Psychology was researching survivor's experiences of sexual abuse perpetrated by clergy and consequently has written several publications on this subject matter. In Geneva 2013, Derek was the recipient of the 'David Servan Schreiber Award' for Outstanding Contribution to EMDR Therapy. In addition, Derek was also shortlisted for the prestigious Times Higher Education Awards (2017) for International Impact due to his Humanitarian Trauma Capacity Building work in Iraq with the Free Yezidi Foundation and the Jiyan Foundation for Torture and Human Rights. In 2018 Derek was awarded the 'Trauma Aid Europe Humanitarian Award' in Strasbourg, France.

Abstract:

Although exposure to psychological trauma is inevitable in life not all experiences result in PTSD for individuals. Many, however, who experience repeated, chronic and multiple traumas are more likely to experience pronounced trauma symptoms, consequences and impact on levels of functioning. In addition, there are major fundamental distinctions between first and emerging health economies in the provision of Trauma-Informed Care regarding the availability, and subsequent access to, mental health specialists trained in empirical trauma treatments and allied non-mental health professionals and paraprofessionals.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 3

Psycho-traumatology and Stabilization Techniques (Session 103)

Presenter: Derek Farrell (Chair: Sombat Tapanya)

09:00 -17:00 Full-Day workshop Room 4 (1209)

Abstract: (cont.)

This presentation will explore trauma treatment interventions from six perspectives:

- Psychoeducation
- Trauma Stabilisation
- Trauma Confrontation
- Intensive Trauma Treatment Interventions
- EMDR Group Interventions
- Resilience & Post-Traumatic Growth

Meta theories as to why psychological therapy treatment works supports the importance of clients receiving relevant information to account for their symptoms and experiences. Consequently, this presentation will explore this regarding Psychological First, Second and Third Aid concerning clinical practice, research and development, and teaching and learning perspective. The presentation will utilise country case studies, particularly those in major conflict areas and emerging health economies. In the words of Nelson Mandela – Education is the most powerful weapon, which you can use to change the world.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 4

Complex Trauma, Attachment, and Dissociation: Treating Children with Emotion Dysregulation and Constriction Using EMDR Therapy (Session 104)

Presenter: **Ana Gomez** (Chair: Ann Parichawan Chandarasiri)

09:00 -17:00 Full-Day workshop Room 5 (1216)



Ana M Gómez, MC, LPC She is the founder and director of the AGATE Institute in the U.S. She is an EMDR Institute, and EMDR-IBA trainer of trainers. She is a psychotherapist, author, and an international speaker on the use of EMDR therapy with children and adolescents with complex and developmental trauma as well as attachment wounds and dissociation.

Ana is the author of *EMDR Therapy and Adjunct Approaches with Children: Complex Trauma, Attachment and Dissociation* and several books, book chapters and articles on the use of EMDR therapy with children and adolescents. Ana was the recipient of the 2011 "Distinguished Service Award" from the Arizona Play Therapy Association and the 2012 Sierra Tucson "Hope Award."

Ana has developed numerous programs and protocols that include the "EMDR-Sandtray Protocol" and the "The Systemic, EMDR-Attachment Based Program to Heal Intergenerational Trauma & Repair the Parent-Child Attachment Bond."

Abstract:

This presentation will focus on practical and creative strategies for working with children with severe dysregulation or constriction of the affective system. These include children exhibiting insecure patterns of attachment, developmental and complex trauma and dissociative symptoms. Strategies directed to titrate amount of trauma and keep children within manageable and tolerable levels of activation to optimize their integrative capacity will be demonstrated. How to work with children with sensitized sympathetic and parasympathetic systems, as well as children with avoidant, disorganized and anxious attachment strategies and dissociative symptoms will be addressed. Considering that children with developmental and complex trauma present with attachment injuries inflicted when lower brain areas were still maturing, their capacities for affect regulation can be compromised (Ogden & Gómez, 2013). The use of strategies that work directly with subcortical brain regions and the body, will be addressed. The "Multifactor model of preparation" (Gomez, 2010) will be presented as well as "portals" to access memory networks containing traumatogenic material with children that rapidly become dysregulated, emotionally constricted and dissociative.

A wide range of interweaves will be presented. This includes the "reparative interweave" which is directed to heal the attachment system and assist children in meeting unmet attachment needs. In addition, clinicians will learn how to use strategies from the EMDR-Sandtray protocol (Gómez, 2013) to access implicit material and provide distance from the memories of trauma and hardship. This facilitates the exploration, accessing and processing of such memory systems while staying within the child's window of tolerance.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 5

The Healing Space - From the Vulnerable Child to the Authentic Essence (Session 105)

Presenter: **Brurit Laub** (Chair: Tri Iswardani Sadatun)
09:00 -17:00 Full-Day workshop Room 6 (1204)



Brurit Laub is a clinical psychologist in private practice, retired from 35 years work at a community mental health center in Israel. She is a certified hypno-therapist and a supervisor in psychotherapy, family therapy and EMDR. In 1995 she learned EMDR and in 1998 became an EMDR Institute facilitator, and later an EMDR Europe accredited consultant. She developed a Resource Connection Envelope (RCE) and presented it in Israel and in EMDR conferences abroad. She developed with Elan Shapiro the EMDR R-TEP (Recent Traumatic Episode Protocol) and co-presented it in numerous conferences in Israel and abroad. She is Co-recipient of the David Servan-Schreiber award for contribution to EMDR from the University of Lorraine, Metz. She developed with Nomi Weiner a dialectical model for psychotherapy and presented it in workshops in Israel. The model was adapted to EMDR therapy and presented in Israel, NYC and in EMDR conferences (Edinburgh-2014, Philadelphia -2015 and Shanghai - 2017). The Healing Space was presented at the European EMDR conference in Strasbourg, 2018. She co-authored "Co-Therapy with Individuals, Families and Groups" (1994) and "Innovative Interventions in Psychotherapy" (2006). She also co-authored several articles on the dialectical model and on EMDR R-TEP.

Abstract:

The Healing Space procedure contributes to EMDR adaptive processing and to post traumatic growth. It is inspired by the dialectical perspective (Laub & Weiner, 2007) which regards the movement between opposites (Yin-Yang) as essential for integration. This perspective proposes that the expanding associative processing moves towards the transformation of non-adaptive themes and of the self. The transformation of the self consists of a deepening connection to a sense of wholeness to ourselves, to others, and to the universe. In the Healing Space a compassionate relationship with our vulnerable child is developed paving the way to the emergence of our whole authentic essence.

PRE-CONFERENCE DAY

3rd JANUARY 2020

PRE-CONFERENCE WORKSHOPS 5

The Healing Space - From the Vulnerable Child to the Authentic Essence (Session 105)

Presenter: **Brurit Laub** (Chair: Tri Iswardani Sadatun)
09:00 -17:00 Full-Day workshop Room 6 (1204)

Abstract: (cont.)

Repairing attachment wounds through inner child work is used in various therapeutic approaches as well as in EMDR therapy. The Healing Space procedure begins by focusing on the vulnerable aspects of the child so as to facilitate the dialectical movement between opposites (such as: helplessness- strength, sadness-happiness). The therapist models to the client how to contain and accept the child's feelings. The dialectically attuned therapist resonates with the child's denied feelings, recognizes and legitimizes them and tries to make them accessible. The more the client contains the child's vulnerability, the more opposites are accepted and a sense of wholeness develops. This is often accompanied by a spontaneous emergence of the client's authentic essence. The therapist identifies and validates the essence and makes it accessible so that the client can easily connect to it.

In the preparation phase Healing Space often softens protective parts which sometimes hinder processing. During processing it helps the client contain the child's overwhelming negative feelings and move towards integration. At the end of a session it can provide an empowering resource.

The Healing Space procedure will be demonstrated with video clips and practiced in pairs.

CONFERENCE DAY 1

4th JANUARY 2020

KEYNOTE ADDRESS

Room 1 (1210)



Title:

“The Promotion of EMDR in SE Asia”

Keynote Speaker: Ute Sodemann

Time: 09:00 - 09:30 Session 211

Chair: Ann Parichawan Chandarasiri

Title:

“Future Direction of EMDR Asia for Collaboration, Challenges and Strategies to Reach the Trauma and Specific Population in Asia”

Keynote Speaker: Tri Iswardani Sadatun

Time: 09:30 - 10:00 Session 212

Chair: Matthew Woo



CONFERENCE DAY 1

4th JANUARY 2020

Room 2 (1201)

Half-Day Workshop (120 minutes)

Presenter: *Natalia Seijo*

Topic: *Conceptualization and Treatment of Abuse in Eating Disorders and Obesity using EMDR Therapy*

Time: **10:30 – 12:30** Session: **221**

Chair: **Marid Kaewchinda**

Abstract: Child sexual abuse appears to be one of the risk factors for both obesity and eating disorders, especially in Anorexia and Bulimia Nervosa. This trauma-based approach appears to be particularly important for women victims of child sexual abuse, who tend to develop poor self-esteem and eating disorders more frequently than men. Opydo-Szymaczek, J.; Jarząbek-Bielecka, G.; Witold Kędzia, Borysewicz-Lewicka, M. (2018). It has been scientifically proven that one-third of abused children suffer from eating disorders in adolescence and even adulthood. According to statistics, 12% of these children suffer from anorexia, 37% from bulimia, and more than 50% from nonspecific eating disorders. Those who suffer from anorexia want to avoid all future sexual contact, provoking rejection and displeasure. Those who suffer from bulimia feel, more than anything else, anger towards the abuser and adopt this attitude with the idea of not being sexually attractive by somatizing through the body and weight. Among the long-term consequences, i.e. more than two years after the child sexual abuse (CSA) has stopped, there is a large number of cases that develop a posteriori food pathologies. Through EMDR therapy, cases of eating disorders with abuse trauma can be conceptualized so as to work with them; they are often the most serious cases due to the trauma they present at their origin.

Half-Day Workshop (120 minutes)

Presenter: *Michel Silvestre*

Topic: *EMDR and Children: An Integrative Psychotherapy Approach*

Time: **13:30 – 16:00** Session: **222**

Chair: **Sombat Tapanya**

Abstract: Trauma with children creates individual and family wounds. EMDR with children will therefore be about integrating the treatment of the child's wound within the context of the family wounded relationships. It will require adaptation of the generic EMDR protocol to fit the child developmental perspective, to take into consideration attachment issues and the family's emotional regulation capacities and resiliency.

CONFERENCE DAY 1

4th JANUARY 2020

Room 2 (1201)

Standard Paper (30 minutes)

Presenter: **Lorenzo Bracco**

Topic: ***Traumatic Blood Contact between Mother and Daughter: Condition for Anorexia of The Female Adolescent***

Time: **16:00 – 16:30** Session: **223**

Chair: **Sombat Tapanya**

Abstract: My new theory is that *Anorexia of the Female Adolescent*, in addition to the girl's psychological causes, needs a biological condition: "Different mother/daughter blood types (O, A, B, AB) and traumatic contact between the two blood types during pregnancy and/or birth". In my collection of data (more than 100 cases in 25 years): only the girls having a different blood type (O, A, B, AB) from the mother are suffering from anorexia and from the patient's history we could think of a mother/daughter blood contact during the pregnancy. There are no exceptions in my data. My theory facilitates early diagnosis by limiting observation, for Anorexia risk, to only daughters with a different blood type than that of the mother. Recognizing this biological condition for *Anorexia of the Female Adolescent* allows us early diagnosis, predictive hypothesis and right view of mother/daughter relationship, that is not conflicting but is simply perturbed by an immunological alarm. The Trauma, resulting from the contact between incompatible blood types, causes the mutual alarm that perturbs the mother/daughter relationship. So we are able to reduce the mortality rate and the consequences of anorexia by providing a theory that allows us to have early or even predictive diagnosis and to be able to use EMDR to solve the consequences on the mother/daughter relationship of the Trauma caused by contact between incompatible blood types. Not only anorexia but also relationship between mother and daughter can be fruitfully treated with EMDR by treating both: a reframing from conflict to alarm.

CONFERENCE DAY 1

4th JANUARY 2020

Room 3 (1208)

Full Day Workshop (240 minutes)

Presenter: *Donald F. deGraffenried*

Topic: *Resonant Cognitive Interweaves: From the Gestalt Empty Chair to the Healing Power of Music & Lyrics*

Time: 10:30 – 16:00 Session: 231

Chair: **Mrinalini Purandare**

Abstract: What do Francine Shapiro, Stevie Wonder, Fritz Perls, Ray Charles, Bill W. , Gloria Gaynor and George Harrison have in common? This one-day workshop seeks to answer this question and to explore the dynamic and creative power of cognitive interweaves as manifested via the Gestalt empty chair and thru the interpersonal resonance of music and lyrics. This workshop will also explore the power of spiritually oriented cognitive interweaves.

Donald F. deGraffenried will provide a comprehensive review of the concept of the cognitive interweaves drawing from the revised and expanded Part II EMDR Therapy Manual and when it can be helpful to use one or more interweaves with your client.

In addition this workshop will explore resonance, biofields and how these transpersonal ways of experiencing the client work will shape and enable the discovery of uniquely individualized musical and spiritual cognitive interweaves.

CONFERENCE DAY 1

4th JANUARY 2020

Room 3 (1208)

Short Paper (15 minutes)

Presenter: *Usha Verma Srivastava*

Topic: *Development and Use of EMDR Protocol to Improve Psychological Well-being, Optimism, Forgiveness and Altruism in College Going Students*

Time: **16:00 – 16:15** Session: **232**

Chair: **Mrinalini Purandare**

Abstract: In this era of natural and manmade disasters, EMDR has been used for alleviation of various psychopathological symptoms and healing scarred souls, since very long. But this also is the era of growth of technologies, positive revelations and growth of human potential that allow individuals and communities to thrive.

There have been a number of protocols used for preparing clients, who are suffering from psychopathological symptoms, before the actual treatment or EMDR processing begins. It helps them in affect management, in developing safe and calm place; strengthen their resources and ego state.

The purpose of this study is to develop and use an EMDR protocol with normal population to increase their potential in terms of psychological well being, optimism, forgiveness and altruism.

In this protocol butterfly hug is paired with neutral auditory stimulus (white noise) and with neutral visual stimulus (white screen). The rationale for this is to engage their visual tactile and auditory senses during the process.

Fifty college going students (age 16-20 years) were firstly assessed for psychological well being, optimism, forgiveness and altruism. Then they were taught the protocol and used it daily in a group for 20 days (except Sundays). The students were then again assessed for above mentioned variables and the results were statistically analysed.

CONFERENCE DAY 1

4th JANUARY 2020

Room 4 (1209)

Half Day Workshop (90 minutes)

Presenter: *Dolores Mosquera*

Topic: *EMDR for Victims of Gender Violence*

Time: 10:30 – 12:00 Session: 241

Chair: **Matthew Woo**

Abstract: Some people find themselves repeatedly involved in harmful relationships in which both abuse and maltreatment occur. Many of them struggle to walk away from the relationship, set boundaries, or protect themselves adequately. While in some cases victims are aware that the relationship is harmful, potentially dangerous, and must come to an end, in others, they are unable to assess the risks.

Several authors have hypothesized that the victim's behavior occurs, among other reasons, because of the intense emotions of guilt and learned helplessness that become activated. This could be explained, on the one hand, as part of the invalidation process to which they are subjected by their perpetrators and, on the other, as a result of the victim's own learning history.

There are two concepts that will be important to differentiate clearly: responsibility and vulnerability. Although the perpetrator is the only one responsible for the mistreatment, the victim may have vulnerabilities that come from her personal history. It will be essential to work on these vulnerabilities to prevent her from becoming involved again in harmful relationships. In some cases, it will be necessary to strengthen the victim's resources so she can leave the relationship. This will include offering psychoeducation on prototypical abusive behaviors and types of perpetrators, so that they can identify their partners as such and protect themselves from the strategies they use to retain victims by their side. At the same time, they may need to be guided through the complex process of leaving such a relationship. In other cases, it will be essential to overcome the traumatic bond generated with the perpetrator, which may involve working with apparently positive aspects such as idealization or the addictive component of the relationship.

In this presentation, we will take a look at the different problem areas in which it is usually necessary to intervene. Cases will be presented from an EMDR perspective, both in terms of case conceptualization and treatment.

CONFERENCE DAY 1

4th JANUARY 2020

Room 4 (1209)

Short Paper (15 minutes)

Presenter: *Khadija Tahir*

Topic: *EMDR in The Treatment of Trans-Generational Trauma*

Time: 12:00 – 12:15 Session: 242

Chair: **Matthew Woo**

Abstract: Trans-generational trauma refers to the trauma that passes through generations. It has been observed that not only do the individuals experience trauma themselves, they may also pass the symptoms and behaviours of trauma survival on to their children, who then might further pass them along the family line. The history of this case study dates back to 1949, when a teenage girl living with her grandparents in a foreign country is sexually abused by her grandfather. The abused youngster grows into a restless traumatized adult marrying and divorcing five times, she raised four very bright but physically and emotionally disturbed children. Finally she died an early death caused by physical self-neglect. In the year 2019 the third child Mr. Mohammad, now a successful professional in his mid-forties enters the therapist's office requesting EMDR therapy for anger outbursts and destructive relationship with his daughter.

Short Paper (15 minutes)

Presenter: *Nithya Hariya Mohan*

Topic: *Effectiveness of EMDR on Children with School Phobia from Developing Country*

Time: 12:15 – 12:30 Session: 243

Chair: **Matthew Woo**

Abstract: A specific phobia is any kind of anxiety disorder that amounts to an unreasonable or irrational fear related to exposure to specific objects or situations. As a result, the affected person tends to avoid contact with the objects or situations and, in severe cases, any mention or depiction of them. School refusal describes the disorder of a child who refuses to go to school on a regular basis or has problems staying in school. Children may avoid school to cope with stress or fear for a vast number of reasons.

The present study analyses the significant pattern of symptoms related to school refusal including behavioural, emotional deregulation, tantrums, somatization and arising familial conflicts. EMDR therapy was administered on children from diverse socio cultural backgrounds. Stabilization methods were used to bring the children in window of tolerance. Following this standard EMDR therapy facilitated of accessing and processing of traumatic memories and other adverse life experience to bring them to an adaptive resolution. On successful treatment with EMDR therapy the affective distress is relieved, negative beliefs are reformulated and physiological arousal is reduced. The paper discusses about the effectiveness of the EMDR on children with school phobia from developing county. Case study methodology and purposive sampling has been used.

CONFERENCE DAY 1

4th JANUARY 2020

Room 4 (1209)

Mini Workshop (60 minutes)

Presenter: *Leoniek Kroneman*

Topic: *Improving Care by Building Trauma-Informed Organizations*

Time: **13:30 – 14:30** Session: **244**

Chair: **Tri Iswardani Sadatun**

Abstract: Large numbers of children are exposed to potentially traumatic events such as physical and sexual abuse, natural disasters, domestic and community violence. Frontline staff such as police, child welfare and health care workers encounter these children on a regular basis. In addition, it is increasingly recognized that frontline professionals are frequently exposed to traumatic stressors in the line of duty, including witnessing or experiencing violence and hearing details of trauma experienced by victims or youth offenders. Research extensively shows the negative outcomes when trauma goes untreated, both for youth and professionals, stressing the importance of increasing awareness and access to treatment for both groups.

Trauma-informed care consists of four core tenets (4 Rs): 1) Realizing the widespread impact of trauma, 2) recognizing the signs and symptoms of trauma among clients and staff, 3) responding by integrating knowledge about trauma into practice and policy, and 4) proactively resisting retraumatization (SAMHSA, 2014).

Trauma-informed care is essential for agencies that serve populations selected based on adverse experiences (e.g., child welfare involved children and families) or belong to groups where such experiences are particularly likely (e.g., juvenile offenders; families experiencing poverty). Although various models and approaches exist and empirical studies are limited, preliminary support for efficacy of the trauma-informed approach exists (e.g., Bailey et al., 2019; Hodgdon et al, 2013; Kroneman, et al., 2015) and also shows improvement of work climate and workplace satisfaction.

Adopting a trauma-informed approach raises awareness about trauma and its impact on children's development, improves access to care and enhances treatment efficacy by for instance a better accessible and embedded EMDR treatment.

Factors contributing to successful implementation and common pitfalls will be discussed during the workshop. Examples from different organizations in the US and Netherlands (juvenile detention centers, mental health hospitals and police) will be shared. Participants will understand why and how to adopt a trauma-informed approach and, by doing so, may reach the unreached and improve their treatment efficacy.

CONFERENCE DAY 1

4th JANUARY 2020

Room 4 (1209)

Standard Paper (30 minutes)

Presenter: *Mauna Gauhar*

Topic: *Efficacy of the Eye Movement Desensitization and Reprocessing (EMDR) Psychotherapy in the Treatment of Depression and Comorbid Anxiety*

Time: 14:30 – 15:00 Session: 245

Chair: **Tri Iswardani Sadatun**

Abstract: This pilot study explored the Efficacy of Eye Movement Desensitization and Reprocessing (EMDR) Psychotherapy in treating depression and comorbid anxiety. Twenty diagnosed participants were randomly assigned to two Experimental and two Delayed Treatment (DT) Control Groups. Experimental Group I and DT control group I received five participants each with primary diagnosis of Depression. Experimental Group II and DT Control Group II received five participants each with depression and comorbid anxiety. Participants were offered a total of 12 EMDR sessions. Instruments used for screening and diagnosing were DSM 5 Self-Rated Level 1 Cross Cutting Symptoms Measure Adult (American Psychiatric Association [APA] 2013), Clinically Useful Depression Outcome Scale (Zimmerman, Chelminski, McGlinchy & Posternak, 2008), Clinically Useful Anxiety Outcome Scale (Zimmerman, Chelminski, Young & Dalrymple, 2010), Dissociative Experience Scale- II (Bernstein & Putnum, 1986), Impact of Event scale (Horowitz, Wilner, & Alvarez, 1979), World Health Organization Quality of Life Inventory (Bonomi, Patrick, Bushnell & Martin, 2000). Participants selected negative cognitions associated with disturbing events that reduced functioning as targets for EMDR treatment. Paired and independent sample t-tests were conducted to compare data within and between groups. Results showed significant improvement in depression and anxiety symptoms at 95 % confidence level. The results of the study supported the efficacy of EMDR treatment for reducing depression and anxiety. Three months follow up with the participants showed that treatment effects were maintained.

CONFERENCE DAY 1

4th JANUARY 2020

Room 4 (1209)

Standard Paper (30 minutes)

Presenter: *Chintan Naik*

Topic: *Using EMDR with Indian Males with Personality Disorders: An Approach that Focuses on Attachments and Early Life Experiences.*

Time: 15:30 – 16:00 Session: 246

Chair: **Tri Iswardani Sadatun**

Abstract: This presentation is a qualitative discussion of clinical cases of Indian Males diagnosed with Personality Disorder or having the traits of the three clusters as per DSM-5, where EMDR was used as primary psychotherapeutic approach. It was found out that these individuals reported attachment issues, and/or early traumatic/adverse life experiences that were hypothesized to contribute to the presenting complaints. Careful history was obtained for each case in Phase-1, with AIP informed approach, paying attention to early adverse life experiences and attachments. Emphasis was given to phase 2 before moving to further phases to help them stay in the window of tolerance and to strengthen/develop the adaptive networks of memory. A number of stabilization techniques, self-soothing techniques, emotion-management skills, present-time orientation skills, behaviour modification were used. Various protocols of EMDR such as EMDR standard protocol, Recent event protocol, EMD, were used. During Phase 3-7, the emphasize was given on selection of an appropriate target according to the clients' need and preparedness during each session. The comprehensive treatment plan aimed at processing past traumatic experiences, recent triggers, and developing future templates for healthy personality patterns. Phase 8 was given significant importance to keep a check on clients' stability, progress in therapy, processing of each target, and the global improvement. It was observed that the unhealthy behavioural patterns could be altered, and more adaptive patterns of coping were established. Using EMDR helped the clients gain new insights into their personality patterns.

Standard Paper (30 minutes)

Presenter: *Nuzhat e-Rahman and Shaheen Islam*

Topic: *EMDR to Enhance Recovery from Addiction: Preventing Relapse Cycle*

Time: 16:00 – 16:30 Session: 247

Chair: **Tri Iswardani Sadatun**

Abstract: Substance abuse is the most central cause of social damage. Non-adaptive model of drug use marks in adverse problems and consequences that are addressed very sophisticatedly in the recovery process. Yet the relapse rate notably high and little focus has been given to exist preparation to prevent the relapse cycle during rehabilitation. The greatest challenges of maintaining sober life is to deal with the triggering feelings, attitude, and behavior encountered in real life situation after return. Not to mention, the running into the triggering time, place, person or event in everyday life at home and society. The present study aims to address these two future challenges through AIP model of EMDR before discharge from rehabilitation centre. The purpose it to use inverted protocol to build positive future template helpful to face the challenges of outside world. Randomized control trial will be used to explore the effectiveness of EMDR future template to prevent the relapse cycle. Measure of distress level, social connectedness and case report will be the outcome measures to recognize the change in recovery process. Both before, during, and after EMDR session comparison will be analyzed to see the significant effect.

CONFERENCE DAY 1

4th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Maggie Wai-ling POON*

Topic: *Flash Technique Group for Parents with Parenting Stress of Children with Special Education Needs*

Time: 10:30– 11:00 Session: 251

Chair: **Sushma Mehrotra**

Abstract: Flash Technique (FT) is a new protocol for use in the preparation phase of EMDR to quickly reduce the emotional intensity of stressful memories before full processing with EMDR. This presentation is about the use of FT in groups with parents whose children were having special education needs (e.g. Autistic Spectrum disorder, ADHD, developmental delay, mental retardation). These parents were recruited from special and integrative child care centres for pre-school children (aged from 2 to 6 years old) in Hong Kong.

This FT group is a preventive group intervention to reach out to parents who do not show clinical symptoms of emotional disorders, but are actually under chronic stress in daily life. The group consisted of 4 sessions with 3 hours for each session. This short group duration was designed to meet the busy schedule of parents in Hong Kong. Participants filled out the General Health Questionnaire-12 (GHQ-12) in the first and 4th session. The post group scores of GHQ-12 showed a significant reduction in stress level. Parents also reported the PEF became their resourced memory that they would recall about it in time of stress.

The group started with psychoeducation about how stress affect parenting. The participants were taught to briefly bring up a parenting stressful situation and then assigning a SUD. Afterwards, this memory was put aside. They were then instructed to focus on a Positive Engaging Focus (PEF), while tapping on their thighs simultaneously. They were also asked to blink their eyes in rapid succession (triple flash) until the SUD of the traumatic memory decreased. If SUD persisted after a number of flashes, EMDR-IGTP-OTS group protocol will be introduced.

Extended Paper (45 minutes)

Presenter: *Plaktin Om*

Topic: *Understanding Client's Belief System Helping Treatment Process*

Time: 11:00– 11:45 Session: 252

Chair: **Sushma Mehrotra**

Abstract: I have met a client who came with many concerns on daily life. Most importantly on her daughter's security. She concerned that her daughter might get sexually abuse by men no matter father, grandfather, teachers or strangers. She is working with NGO that provide help for young females who got sexually abuse. More or less, she agreed that the nature of her current work and her worry are related. However, through AIP perspective the therapist found out her worry is related to her sexually abuse during childhood. By learning about client's religious belief system, therapeutic relationship was faster to build. This is the most important resource that have been use during the reprocessing. As the result after feeder memory have been process, the level of disturbance on other traumatic memories were also decrease.

CONFERENCE DAY 1

4th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Mowadat Hussain Rana*

Topic: *EMDR and Spirituality*

Time: **11:45 – 12:15** Session: **253**

Chair: **Sushma Mehrotra**

Abstract: The paper aims at discussing spirituality as a psychotherapeutic intervention in general and its overlaps with EMDR. This is done through a scientific and evidence based scope and meaning of spirituality and its relevance to psychotrauma and its management. Drawing heavily on the author's work with survivors of terrorism, the spiritual formulation and management of these survivors through a joint use of EMDR and spirituality is discussed. The presenter touches upon the swing of survivors to experience Post Traumatic Growth (PTG), in their battle against PTSD through a concomitant use of spirituality and EMDR. The research, therapeutic and prognostic implications of EMDR and spirituality working in tandem are discussed. Issues related to develop hybrid models, and their use in Asia are also alluded to.

Half Day Workshop (135 minutes)

Presenter: *Ann Beckley-Forest*

Topic: *Integrating EMDR Therapy and Play Therapy with Children*

Time: **13:30 – 16:15** Session: **254**

Chair: **Ann Parichawan Chandarasiri**

Abstract: When play therapists complete training in the 8 phase EMDR protocol, they sometimes find it challenging to integrate EMDR therapy into their current work. By the same token, clinicians with a primary focus in EMDR are often looking for ways to deliver the EMDR protocol in more developmentally sensitive ways which feel safer to the child. We will review the therapeutic power of each modality and then look for ways to maximize the healing of the youngest clients through integration of the two approaches. This half day workshop will follow the flow of the 8 phases of EMDR, bringing the power of play, specific play-based tools, and playful protocols to each phase, in particular trauma history, preparation, assessment and reprocessing, focusing on how to use play therapy and the child's post-traumatic play as the setting for EMDR, with interactive practice, video examples and discussion of how to respect the child's ability to move towards and away from the trauma content.

CONFERENCE DAY 2

5th JANUARY 2020

KEYNOTE ADDRESS

Room 1 (1210)

Title:

"Milestones and Sharing the Experience of Growth of EMDR in Asia"

Keynote Speaker: **Sushma Mehrotra**

Time: 09:00 - 09:30 Session 311

Chair: Matthew Woo



Title:

"A Tribute to Francine Shapiro"

Keynote Speaker: **Rosalie Thomas**

Time: 09:30 - 10:00 Session 312

Chair: Mrinalini Purandare

CONFERENCE DAY 2

5th JANUARY 2020

Room 2 (1201)

Mini Workshop (60 minutes)

Presenter: **Adithy**

Topic: ***EMDR for The Treatment of Dissociative Disorders***

Time: **10:30 – 11:30** Session: **321**

Chair: **Atara Sivan**

Abstract: It is known that EMDR therapy needs to be done carefully while working with dissociation and dissociative disorders. Over the years, many have documented the effective use of EMDR with these conditions. This workshop would attempt to build the bridge between the skills learned in the basic training in EMDR, and the basic skills needed for working with dissociation and dissociative disorders. To facilitate this, the following topics would be presented:

- How dissociation and dissociative disorders could present in clinical practice
- How to assess for dissociation and dissociative disorders
- Best practices in the field of treatment of dissociative disorders
- Therapeutic models used in conjunction with AIP/EMDR for working with dissociative disorders
- When and how to start using EMDR
- Case Examples – what worked and what didn't
- Resources for acquiring more skills

The participants will be introduced to views from theories of attachment and structural dissociation of the personality, and therapeutic approaches of internal family systems, ego states and progressive approach. The focus will be on using EMDR for the treatment.

Mini Workshop (60 minutes)

Presenter: **Tri Swasono Hadi and Tara de Thouars**

Topic: ***Giving a Simple Structure to Complex Trauma: How to Treat Complex Trauma More Effectively***

Time: **11:30 – 12:30** Session: **322**

Chair: **Atara Sivan**

Abstract: EMDR has been proven to be effective in handling both simple and complex traumas. However complex traumas is not quite a well defined area yet, it's span over multiple clinical diagnoses, with a high variety in the level of difficulty and complexity. To point it simply, it can be a messy and chaotic experience especially for the inexperienced clinicians.

This workshop aims to give a simpler perspective and structure to help EMDR clinicians dealing with complex trauma, it can be helpful especially to beginner in EMDR, but it may also give new insights and tools for the more experienced EMDR clinicians.

In this workshop participant will learn about dealing with the various psychological defences that is resulted from the complex trauma process, how to help the client make peace with their Core and Primal Anxieties, how to use a new stabilization technique (PIE BUN) and integration with the standard EMDR protocol and AIP Model.

Half Day Workshop (135 minutes)

Presenter: *Anabel Gonzalez*

Topic: *EMDR and Emotional Processing: Working on Severe Emotion Dysregulation*

Time: **13:30 – 16:15** Session: **323**

Chair: **Marid Kaewchinda**

Abstract: EMDR is being used in a wide range of psychopathological conditions beyond simple PTSD, and there is now an active controversy about the need of modifications on procedures and protocols. Complex traumatization and the presence of dissociative symptoms have been related with difficulties applying standard protocol, and with the need of modifications in therapeutic procedures. This workshop will be oriented to understand the role of the influence of severe emotion dysregulation in EMDR treatment.

Emotion dysregulation is a frequent feature in trauma-related disorders. Different kinds of regulation problems seem to be linked to particular psychiatric conditions, and there is growing evidence of the association between neurobiological correlates and those dysregulation patterns. Nevertheless, many of the recent findings from the field of the neurobiology have not been translated into clinical practice and are insufficiently contemplated in trauma-oriented therapies. The aim of this workshop is to review recent developments in the field of emotion regulation, connecting these issues with the practical implementation of psychotherapeutic procedures in complex cases. This workshop focus on how emotion dysregulation may influence eye movement desensitization and reprocessing (EMDR) treatment in trauma-related disorders. Different patterns of emotion dysregulation may influence EMDR treatment and procedures, and the application of EMDR beyond non-dissociative PTSD should take into account the predominant emotion-regulation strategies in each patient.

Different clinical cases will be presented to illustrate the theoretical concepts and to describe a decision-making having into account the specific emotion regulation problems that each patient presents.

CONFERENCE DAY 2

5th JANUARY 2020

Room 3 (1208)

Standard Paper (30 minutes)

Presenter: *Sithu Pe Thein*

Topic: *The Trauma Counselor Trainings: Promoting The Community-Based Psychological Care and services in Myanmar*

Time: 10:30 – 11:00 Session: 331

Chair: *Masaya Ichii*

Abstract: EMDR Myanmar Association in collaboration with EDMR Cambodia Association, Trauma-Aid, Tdh Germany and BMZ has been providing the system building of trauma treatment and therapy under the projects named Mekong 2 and 3, benefitting 46 EMDR therapists, 21 Trauma Counselor Trainers and providing the services for more than 1,100 clients in the past 5 years.

Being a third world country, the health seeking behaviour in Myanmar is low, like most of the Asian countries and the number of clients seeking the EMDR as well as other professional psychotherapy is very limited due to lack of awareness, even though trauma related disorders are very abundant in the community.

In order to bridge these and fill this gap, the Mekong 3 project designed and developed the specialised “Trauma Counselor Training”, a sister therapy of EMDR, as it is based on the “adaptive information processing model”, the fundamental component of EMDR therapy. The objective of this training is to train the para-professional from the community-based organizations to reach to the unreached population and strengthen the referral from community to the mainstream EMDR Therapy. This training also provides various stabilization techniques used in the EMDR therapy. This training curriculum was developed in close collaboration with Trauma-Aid Germany, modified from the TPSS+ manual, to fill the needs of Myanmar. The pilot trauma counselor trainings were conducted in 3 places of the country and some 36 trauma counselors were trained from 21 community-based organizations.

This presentation will explore some of the principles surrounding trauma capacity building to the para-professionals – how success stories, challenges and lessons learnt from this project, which can be applied not only to the other Asian countries but also globally where there is a need whilst at the same time recognising the importance of cultural differences and diversity.

CONFERENCE DAY 2

5th JANUARY 2020

Room 3 (1208)

Short Paper (15 minutes)

Presenter: *Nawanant Piyavhatkul*

Topic: *Research Finding from Local Results of Mekong I Project in Thailand: Effectiveness of EMDR Therapy for The Unreached Traumatized People*

Time: 11:00 – 11:15 Session: 332

Chair: *Masaya Ichii*

Abstract:

Introduction: The Mekong I project was a project for Capacity Building-EMDR Therapists in Thailand, Indonesia and Cambodia by Himpsi Jaya in Collaboration with terre des hommes und TraumaAID Germany. From 2010 - 2014, 39 EMDR therapists and 15 supervisors were trained, who were able to treat a total of 5055 patients. In Thailand, 953 clients, 412 adults and 266 child, were treated in this projects. In northeastern Thailand, there were 3 therapists trained in this projects and 83 clients were treated.

Objectives: To study the efficacy, of trauma therapy among patients with psychiatric illness in who were treated in Mekong I project in northeastern Thailand.

Methods: Cross-sectional descriptive study to see the effectiveness of the results of trauma therapy for the clients in Mekong I project who have the complete data.

We assess the anxiety and depressive symptoms and trauma-related symptoms by using the Hopkins Symptom Checklist [HSCL-25] and the Harvard Trauma Questionnaire before and after the treatment.

Results: 64 adult clients were included in the research. Complete assessments were done for 25 patients and the HSCL-25 and HTQ scores decreased significantly after the therapy. The respective number of eye movement desensitization and reprocessing [EMDR] sessions was significantly correlated with the baseline HSCL-25 and HTQ scores and also correlated with overall improvement in HTQ scores and the cognitive symptoms subscale scores of HTQ.

Conclusion: Trauma therapy, with and without EMDR sessions, is effective in reducing anxiety, and depressive and trauma-related symptoms in psychiatric patients in north-eastern Thailand.

CONFERENCE DAY 2

5th JANUARY 2020

Room 3 (1208)

Extended Paper (45 minutes)

Presenter: *Mrinalini Purandare*

Topic: *EMDR Therapy in Bringing Psychological Well-Being to Survivors of Natural Disaster*

Time: **11:15 – 12:00** Session: **333**

Chair: **Masaya Ichii**

Abstract: The purpose of this paper was to highlight the importance of multipronged approach to relieve the trauma of natural disaster. In 2018 Kerala the southernmost state of India was devastated by floods, landslide and hurricane. Almost all parts of the state were affected by natural calamity. The local mental health professionals reported rise in symptoms of PTSD. The regions that were affected by landslide reported increase in suicide rate. This state has highest literacy rate in India and very strong network of mental health professionals. As soon as rescue and relief work was completed the psychological relief work was undertaken. The first step was training the first responders in psychological first aid. Here the first responders were taught basic stabilization techniques such as safe calm place, light stream, yogic techniques of meditation and so on. This is part of preparation stage of EMDR therapy. These first responders went into the field and did preparatory work of stabilization with survivors.

The second part of the project was to train mental health experts in EMDR therapy. This training was done for humanitarian purpose and therefore was conducted on a very low budget, without compromising on quality of trainees and training. The mental health professionals were from all parts of the state and working in the field with survivors of floods, landslides, and hurricane.

The third prong of this project was to go out in the field and work with survivors of natural disaster. This was mandatory for the EMDR trained professionals through an undertaking given by them voluntarily. The EMDR trained therapist worked with affected people in different set ups such as tribal's, fishermen, school set ups and individual clients.

This was one of the most successful EMDR therapy work carried out in disaster affected area with involvement of multiple agencies and stakeholders. We are planning to replicate the same model in other parts of country affected by natural calamities.

CONFERENCE DAY 2

5th JANUARY 2020

Room 3 (1208)

Short Paper (15 minutes)

Presenter: *Pingkan C. B. Rumondor*

Topic: *Adaptation and Effectiveness of EMDR-IGTP in Alleviating Subjective Unit of Disturbance of University Students with Shared Traumatic Memory*

Time: 12:00 – 12:15 Session: 334

Chair: **Masaya Ichii**

Abstract: University students often regarded as normal population. However, they are not immune to trauma. As suicide number in young people increases, there are also increasing chance for a University student to witness one. Experience of witnessing suicide of other fellow student can be conceptualized as traumatic memory. It needs to be process so that it will not hinder one's relationship and individual wellbeing, as well as academic performance. As Adaptive Information Processing (AIP) model suggested, every individual have natural adaptive processing to process the traumatic memory. Nevertheless, traumatic event can block that process and EMDR can help unblock it. However, in University context, there is limited resource of mental health practitioner who are focusing in trauma related treatment. Thus, it is important to implement effective and efficient strategies to alleviate disturbance caused by traumatic memories in student. EMDR Integrative Group Treatment (IGTP) has been used for alleviating disturbance and PTSD symptoms in context of natural disaster, caregiver of terminal illness and geopolitical crisis. However, there is little research evidence for EMDR-IGTP in context of University Student who recently experience shared traumatic memory (less than 3 months). Thus, the aim of this paper is twofold: 1) adapt EMDR-IGTP into University Students' context, 2) test effectiveness of EMDR-IGTP in reducing subjective unit of disturbance in University Students who witness suicide. Theoretical and practical implications of EMDR-IGTP in specific population like students who experience shared traumatic memory will be discussed.

CONFERENCE DAY 2

5th JANUARY 2020

Room 3 (1208)

Half Day Workshop (135 minutes)

Presenter: *Jörg Albers*

Topic: *EMDR Digital Protocol(EMDR-DP): A Virtual Reality Approach Processing The Preparation Phase*

Time: **13:30 – 16:15** Session: **335**

Chair: **Sombat Tapunya**

Abstract: F. Shapiro called at the 2010 EMDR Asia Conference for the global EMDR network to accelerate the treatment process of the standard protocol (with a focus on the preparatory phase). This with a view to increasing the total number of high quality EMDR treatments, knowing that the imbalance between the need for trauma treatment and the professionals available for it continues to grow exponentially. The EMDR standard protocol (EMDR-SP) is a very stringent procedure that ensures the standardization and quality assurance of individual therapy sessions ("face to face intervention"). The rapid development of digital technology, especially in the area of Virtual Reality, opens up a hitherto untapped potential; a possibility to convert the use of partial areas of the EMDR standard protocol into VR technology. Taking into account the treatment guideline of gradual positive progress (Leeds, at the EMDR Europe Conference 2018), which should be the preferred treatment especially after prolonged absence of mental health, the development of a prototype named EMDR Digital Protocol (EMDRDP) has progressed to such an extent that it may have the potential to exponentially increase the number of trauma treatments performed by each practitioner by applying VR technology ("face to net intervention"). THE EMDR-DP protocol is completely applicable over VR glasses, suitable for group sessions from 5 persons and includes 9 steps (Introduction, Resource Rhythm, Decluttering Rhythm, Freeze, Decluttering, Resource State I, II and III, Future Orientation). There are short pauses between the steps in which interactive dialog between the user and the instructor is possible.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Extended Paper (45 minutes)

Presenter: *Sophearith Phul*

Topic: *The Adaptation Assessment Phase of EMDR: Case Study with Social Phobia*

Time: 10:30 – 11:15 Session: 341

Chair: Ean Nil

Abstract: EMDR is developed by Francine Shapiro in 1989. Base on a theory call information processing model. EMDR is the effective treatment for trauma population. The main objective of EMDR is the reintegration the disturbing or unresolved traumatic experience. EMDR use eight-phase for entire treatment. In Phase Three, the clinician need to activate the traumatic experience of the client through the baseline measures of the client's current state (Image, cognitions, emotion and body sensation) before starting reprocessing. I have met one client who have problem with going out of home. He dropped out of the school because of fears to going out because he afraid of the other people. After I get through the Phase One and Two, I started to prepare to do the Assessment Phase in order to do the trauma reprocessing. I face the challenging by the client cannot activate the memory during Assessment Phase. I asked the client to draw the image of his fear out and go through the baseline measures in the Phase Three. After drawing the picture, it can stimulate the negative cognition, emotional disturbing and body sensation. Right after the traumatic memory activate, I started the reprocessing the memory. After several sessions with him, he can overcome his anxiety and start his school life again. Even if six months after terminate from the treatment, he still do not have any problems regard to the fear anymore.

Standard Paper (30 minutes)

Presenter: *Matthew Woo*

Topic: *Case Series: EMDR Processing of OCD Symptoms*

Time: 11:15 – 11:45 Session: 342

Chair: Ean Nil

Abstract: The present paper is an attempt to extend the mechanisms of action in EMDR beyond the processing of past traumatic experiences. The two subjects in the case series have not processed past traumatic experiences, and have attained significant progress with processing firstly, memories of triggers based in recent events and secondly, memories of obsessional rituals based in neutralising sentences and behaviours (safety behaviours). The fact that these two cases show positive outcomes indicates that OCD treatment is successful when it focuses on processing recent experiences (triggers or events that precede the OCD symptoms) and memories of the symptoms elicited on exposure to the feared stimuli. Insofar as EMDR in the processing of recent experiences is akin to ERP procedures in its exposure to recent triggers suggests a certain similarity in the mechanism of actions between EMDR and ERP procedures.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Short Paper (15 minutes)

Presenter: *Rakibul Hasan and Shaheen Islam*

Topic: *Exam Anxiety among Graduate Students: Use of EMDR to Address Relevant Childhood Trauma*

Time: **11:45 – 12:00** Session: **343**

Chair: **Ean Nil**

Abstract: The current research is aimed to explore the effectiveness of Eye Movement Desensitization and Reprocessing (EMDR) in dealing with the exam anxiety of university students. Based on Adaptive Information Processing (AIP) model disturbing life events at childhood which are linked with present anxiety will be targeted to bring a significant positive change in distress. Randomized controlled trials will be used and both qualitative and quantitative measures will be taken to study the effectiveness. The qualitative measures will include the session summaries, NC (negative cognition), PC (positive cognition), plateau of disturbing life events, and the quantitative measures will include administering relevant psychometric tools on each counseling session. It is hypothesized that reprocessing related disturbing life events will significantly reduce exam anxiety.

Standard Paper (30 minutes)

Presenter: *Seema Hingorrany*

Topic: *Modified EMDR with Case of Encephalitis*

Time: **12:00 – 12:30** Session: **344**

Chair: **Ean Nil**

Abstract: My client Miss S, is 27 yr old girl was diagnosed with Anti-NMDA receptor encephalitis. Symptoms included highly characteristic set of neurologic deficits along with behavioural changes, cognitive deterioration and abnormal speech. Short term memory deficits and confusion was seen when she was slowly recovering. Anti-NMDA receptor encephalitis is a disease occurring when antibodies produced by the body's own immune system attack NMDA receptors in the brain. Miss S was admitted for 6 months in the hospital in UK and has no recollection what happened in those 6 months. After she got her memory back, she could barely talk and all her motor skills were grossly impaired. Along with Occupational Therapy and Speech therapy, she was recommended therapy to work on her cognitive impairments and deficits, behavioural issues, attention spans which were affected after the encephalitis episode and her future concerns about her career. Not only she didn't have access to her memories, but it was instructed by doctors not to trigger any of her past memories related to encephalitis. Client also exhibited high levels of anxiety after this episode.

EMDR protocols that used were Inverted Protocol by Arne Hofmann. The proposed tests of the protocol are a way to ensure the client is neither kept too long in affect-avoidant stabilization nor pulled too early into trauma-work that overwhelms her. The goals that were worked on was to make her everyday life more calm and stable, the ability to control herself as she developed impulsive behaviours like drinking too much and lack of emotional regulation. The Wedging and Strengthening Technique called as Absorption Technique was used to enhance resources in order to deal her future concerns such as relationship problems, present and future trigger with her work and her inability to comprehend cues in the environment. Resource Development Installation by Dr Andrew Leeds was used to install positive resources in the client. Resources were drawn from three board domains of experience, Mastery memories, relational resources and symbols. Well selected resources were helpful in enhancing current behavioural, emotional and cognitive stability.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Standard Paper (30 minutes)

Presenter: *Masaya Ichii*

Topic: *Support Returning to Work After Reprocessing of Power Harassment Memory by EMDR*

Time: 13:30 – 14:00 Session: 345

Chair: *Sithu Pe Thien*

Abstract: A client of current case study is married female nurse, who lost her father when she was 6 years old. Her mother managed to raise her and her sister by herself. Since the relationship has been good, I cannot find any traumatic episode to be processed. Relationship with husband is also good. I focused the traumatic episode of power harassment in which medical doctor gave her earful, chased her and put her under lock and key for few minutes. I spent one and half year (23 sessions) to let her return to workplace. After listening to the history, first six sessions was used for processing trauma of the power harassment. Although we finished processing the trauma, she had bad dream where she was locked in elevator with him, and in real life in the hospital, he look daggers at her when she submitted a document of accidents in line of duty, and SUDs increased again. I treated her with RDI, fragmented processing such as his eyes, his words, and dream. I also began in vivo exposure in hierarchical manner. After I used future template of going back to the hospital, she returned to other section of the hospital. I discuss why it has taken long to treat her considering elements of her circumstances such as power construct between male doctor and female nurse, the fact that perpetrator did not receive any punishment, and possibility of encountering with him in workplace.

Standard Paper (30 minutes)

Presenter: *Supanee Siri-apawiwat*

Topic: *Eye Movement Desensitization and Reprocessing Therapy for Female Client with Vaginismus*

Time: 14:00 – 14:30 Session: 346

Chair: *Sithu Pe Thien*

Abstract: This study aimed to explore the effects of EMDR Therapy on a client with vaginismus which is a form of sexual dysfunction often found in women where strong and uncontrollable contractions of vaginal muscles interfere with sexual intercourse, induce anxiety in fulfilling the role of a sexual partner, affect self-esteem, and the ability to conceive. Vaginismus may be caused by a fear of having something inserted into the vagina resulting from the first experience of sexual intercourse that did not go well, pain from gynaecological examination, or sexual abuse. The client is a single woman with a history of childhood sexual abuse and was diagnosed with vaginismus who has participated in 15 sessions of EMDR Therapy during a three-month period. After the treatment the client experienced relief from recurring thoughts of her childhood sexual abuse, reduction of anxiety and fear of vaginal penetration, and was able to practice with a vaginal Dilator. Treatment results from this case is an indication that EMDR Therapy can be effective in treating women with vaginismus.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Standard Paper (30 minutes)

Presenter: *Iain McGowan*

Topic: *Mental Health Nurses Willingness to Pay for EMDR Therapy Training*

Time: 14:30 – 15:00 Session: 347

Chair: Sithu Pe Thien

Abstract:

Background: In 2018, the Northern Ireland government commissioned and paid for 25 mental health nurses to undertake two-part EMDR therapy training.

Aim: We sought to establish the monetary value participants placed on the training and to examine the impact that continuous professional development (CPD) hours and/or academic credit would affect the perceived value reported.

Method: As part of the evaluation we asked participants to complete a willingness to pay survey. A questionnaire comprising five questions was developed. These questions asked respondents to state how much of their own money they would be willing to pay toward EMDR therapy training; if training was or was not recognised for CPD, if the course carried academic credit and if their employer subsidized the course.

Findings: Twenty-one of the participants responded. The mean amount they stated they were willing to pay was £871.25. If the training did not attract CPD hours the amount that they were willing to pay fell to £544.44, in comparison to £814.71 when CPD was awarded. They were willing to pay a mean of £817.65 when academic credit was attached to the training. Statistically significant differences were evident between willingness to pay when CPD hours were offered and when not and academic credit and no CPD hours. No difference between CPD hours and academic credit was found.

Conclusion & Learning: Those commissioning or planning EMDR therapy training for mental health nurses should be aware need for either academic credit or CPD hours to be available for potential trainees.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Extended Paper (45 minutes)

Presenter: *Lina Ibrahim*

Topic: *Successes and Challenges of Capacity Building EMDR Training Programmes in Humanitarian Projects: A Lebanese Experience*

Time: 15:00 – 16:15 Session: 348

Chair: **Sithu Pe Thien**

Abstract: Generally, Capacity Building Training Programmes enable people, organizations, and communities to expand and strengthen their capabilities to develop, implement and maintain effective health sector services. Specifically, EMDR Training Programmes aim to provide psychotherapists with the knowledge and skills to utilize EMDR Therapy and the ability to integrate it into their clinical practice. Although each Training Programme should include the minimum requirements that are set by international EMDR organizations, they can offer different format options depending on the needs of the trainees, organizations, or the communities.

EMDR Lebanon Project 2017-2019 is Capacity Building EMDR Training Programme that offered high-quality education and professional competencies in EMDR Therapy for psychotherapists that were majorly working in the humanitarian field. It is also a multi-layered training project for it helped to build a whole structure of EMDR professionals by provide training to EMDR consultants-in-training and trainers-in-training, both of which supervised the implementation of EMDR therapy on vulnerable population (i.e. refugees, poor or disadvantaged people) who needed mental health care in Lebanon.

The format of the project was majorly designed by the funder, Trauma Aid Germany and the accredited EMDR trainer, Dr. Derek Farrell. The second EMDR Trainer, Mrs. Mona Zaghrout added some aspects to it. The project was managed and implemented by EMDR Lebanon Association with the support of the Mental Health Program in the Lebanese Ministry of Public Health.

The purpose of this presentation is (1) to present the format of the Capacity Building EMDR Training programme that crystalized in the 2 years implementation, (2) to highlight the successes reaped after implementing the whole project, and (3) to share the challenges that were encountered as lessons learned for the future.

CONFERENCE DAY 2

5th JANUARY 2020

Room 4 (1209)

Standard Paper (30 minutes)

Presenter: *Atara Sivan*

Topic: *Reflection on Action: Supporting Clinicians in Their EMDR Training and Application*

Time: **16:15 – 16:45** Session: **349**

Chair: **Sithu Pe Thien**

Abstract: The paper presents clinicians' views on an interactive and facilitative mechanism which has been implemented to support their EMDR training, consultation and supervision. The mechanism called Group Sharing and Case Consultation (GSCC) was developed and implemented by the author in Hong Kong based on successful studies on reflective practices in the helping profession. Informed by the notions of action learning, reflection on action and collaborative peer inquiry, the mechanism has facilitated therapists' ability to reflect on their own experiences of using EMDR in their practices through sharing and guided reflection by a trainer and peer participants. The framework underpinning GSCC will be examined with illustrative examples. Feedback gauged from clinicians who participated in a series of GSCC sessions will be presented. Results highlight the contribution of this mechanism to therapists' ability to better reflect on their own practices, and to their enhanced confidence in using EMDR in their practice. References will also be made to the specific issues which participants learned and the different sources of their learning. Results are discussed in light of the growing need to provide ongoing case consultation and supervision to practitioners while undertaking on board the socio-cultural context in which they practice. Implications are drawn to the ways in which reflection can be further developed within a collaborative group inquiry and sharing for better use of EMDR therapy.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Edward Andriyanto Sutardhio*

Topic: *Eye Movement Desensitization as a Strategy to Reduce Trauma Symptoms of Terrorism Acts Survivors*

Time: **10:30 – 11:00** Session: **351**

Chair: **Naysim Hong**

Abstract: Terrorism act is one of the worst of man-made disaster that have impact to individuals and community. Survivors of terrorist attacks suffers from chronic and acute stress symptoms. Indonesia is one of the countries that experience terrorism acts and one of the worst happened in May 2018. Terrorists attacked three cities in Indonesia, Depok – West Java, Surabaya – Sidoarjo, and Riau.

The survivors range from police officers, people who are going to the church, churches' staffs, and people passing by outside of those churches. Impacts of the terrorism acts ranging from loss of possession, relatives, and lives. Survivors from other bombing might also be triggered by the new event.

Trauma recovery Indonesia delivered short intervention with 10 of the victims who shows most disturbance by the National Board of Counterterrorism (BNPT) 1 month after the event. Considering the limited time and recency of the event, team considered Eye Movement Desensitization (Francine Saphiro) as a symptom reduction strategy to help survivors who experience recent traumatic event.

This presentation reported the application EMD for survivors with SUD ranging from seven to ten before the intervention. After processing four to seven target of EMD, the SUD of the survivors drop to zero to two. This shows the effectiveness of EMD to the help survivors to lower their SUD score and therefore lower their disturbing.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Jackie Viemilawati and Fuye Ongko*

Topic: *EMDR-IGTP and Mass Disasters: The Need of an Effective Intervention for Psychological Distress in Disaster Prone and Resource Scarce Areas, a Study in Indonesia's Context.*

Time: 11:00 – 11:30 Session: 352

Chair: Naysim Hong

Abstract: Mass natural disasters affect individuals and communities significantly, not only economically and socially, but also psychologically. Including in Indonesia which is a prone disaster country. Indonesia's geographical location, which is located between two continents and two oceans, and is at the meeting point of two Pacific and Indian Earth plates, makes Indonesia vulnerable to natural disasters. It is estimated that since 2017 until mid-2019 only, Indonesia has experienced about 5,594 catastrophic events. Many mental health and psychosocial support programs developed to response the need to strengthen the individuals and communities' resilience since early phase to face the predicament. However, the study of the effectiveness of those many early interventions are underdeveloped. Nevertheless, EMDR-IGTP has been used widely as an intervention to disaster and traumatic experience and studies have shown its effectiveness. Therefore, this paper aims to provide a study of the effectiveness of EMDR-IGTP in the context of Indonesia following the earthquake, tsunami and liquefaction in NTB and Central Sulawesi provinces, with their own social and cultural context including the resource scarcity situations. Consequently, to design an effective and efficient program is a challenge. Although controlled research is needed for further study, the results of the study suggest and support other studies that EMDR-IGTP can be an effective therapeutic intervention for trauma reaction for large groups of people affected by mass disaster. The study also shown that EMDR-IGTP has strength to assess survivors who needed further intervention. Thus, this study is to promote that by implementing EMDR-IGTP, mental health and psychosocial support prevention and intervention program to address the effect of mass disasters can be developed more efficiently and so more affected people can be assisted by the program.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Walid Abdul-Hamid*

Topic: *The Need for Trauma Therapy of Man-made Trauma Victims Compared to Victims of Natural Disaster, a Health Professional Survey.*

Time: **11:30 – 12:00** Session: **353**

Chair: **Naysim Hong**

Abstract:

Introduction: Trauma Aid UK (previously HAP UK & Ireland) conducted three EMDR trainings in Turkey: the first was in Istanbul on 28th November 2013. Since then, 3 groups of mental health trainees completed 3 parts EMDR training. In total 86 clinicians were trained. Also, in June 2016, the first part of three parts EMDR training in Nepal was completed following the Nepal Earthquake in 2015.

Methodology: A survey was conducted at the beginning of each of the above-mentioned training courses. Participants were asked to consent to participate in the study and, if they did, they will be given the 'The Need for Trauma-based Services' quantitative and qualitative Questionnaire, or its Arabic translation. 63 Syrian participants of the Istanbul and Gaziantep EMDR training and these were compared with 37 Nepalese Participants completed the survey.

Results: The results analysis of these surveys showed the significantly higher PTSD prevalence in the man-made Syrian conflict trauma compared to the prevalence following Nepal natural Earthquake. 52% of the Syrian mental health professionals suggested that PTSD is the major mental health problem in their country, compared to only 6% of the Nepalese mental health professionals. Both the Syrian (33%) and Nepalese (27%) felt they were only able to meet around third of their client's needs. They felt that training in EMDR in their mother-tongue will help increase the meeting of these needs. Other suggestion of service provisions and innovations were suggested to meet more of the needs of their trauma survivors.

Conclusion: This study highlighted the high need for trauma mental health services of the Syrian refugees as reported by mental health professionals working in the neighboring countries. The important difference of these needs from those of the Nepal people confirms that man-made trauma can cause much more mental health disturbance and needs. Recommendation for training and service development for Syrian refugees were made.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Short Paper (15 minutes)

Presenter: *Yulia Direzkia*

Topic: *EMDR for the Gender-based Violence in Aceh: A Case Study*

Time: **12:00 – 12:15** Session: **354**

Chair: *Naysim Hong*

Abstract: This article reports on a case of the gender-based violence in Aceh Province, Indonesia, treated by the author using the full protocol EMDR. The Aceh Province, Indonesia was under martial law in consequence of 30 years political conflict between Gerakan Aceh Merdeka (GAM – Aceh Freedom Movement) and Government of Indonesia (GoI). After the GAM and GoI signed a peace agreement in 2005, also known as MoU Helsinki, as the case of conflict violence between GAM and GoI is reduced, reports illustrates an increasing number of violence against women and children in Aceh until 2018. The reports not only reveals the increasing numbers of violence against women and children, but also the form of violence at a recent time developed as more brutal acts (website P2TP2A, 2018). Treatment using EMDR (Eye Movement Desensitization and Reprocessing) indicate positive results. Full protocol EMDR was successfully administer to the case and show promising result from which survivor experience changes in several aspects such as new “insight” and “belief”. This report followed by a summary of the case supported by quantitative and qualitative data. Six-month follow-up data showed maintenance of treatment effects. Transcripts from a semistructured telephone interview were analyzed using qualitative method, which identified 3 themes: the traumatic experiences, the shame-based trauma and therapeutic alliance.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Standard Paper (30 minutes)

Presenter: *Agnes Mary@Khine Myint Oo*

Topic: *Application of EMDR-IGTP for Return Refugees from Thai-Myanmar Borders*

Time: 12:15 – 12:30 Session: 355

Chair: Naysim Hong

Abstract: In recent years, many refugees, mainly of Karen and Karenni ethnicity are returning to their home country of Myanmar after living in Thailand-Myanmar border refugee camps for many years. Some international organizations and church based organizations are helping the returnees with their adjustment and resettlement back into current Myanmar society. Having lived in the refugee camps for many decades, it is not easy moving back to their home country. These are the people who would have experienced many traumatic incidents; violence, insecurity and uncertainty for future while staying at camps and during the return process. The need for psychological support is in high demand and with very little resources. The EMDR (IGTP) has been studied in many countries and in many different man-made and natural disasters and it would be advantageous to add to the study with the Myanmar refugee population. As the therapy aims for the early intervention and for the group with similar traumatic experiences this study would be supported for the returnees who can hardly access to both mental and medical support in the remote area of Myanmar. The study aims to adapt Jarero's EMDR (IGTP) (2010, 2017) in Myanmar and test its efficacy in reducing emotional disturbance and anxiety, measure with GAD-7 and PCL-5 Myanmar returning refugees. Implications for EMDR (IGTP) in Myanmar returning refugees will be discussed. Moreover, this would be the first study among the Myanmar population, thus demonstrating the effectiveness of EMDR (IGTP) therapy for the early intervention.

CONFERENCE DAY 2

5th JANUARY 2020

Room 5 (1216)

Half Day Workshop (135 minutes)

Presenter: *Bryan Shen*

Topic: *Reaching Clients Hidden and Struggling in Conservative-religious Communities and Families*

Time: 13:30 – 16:15 Session: 356

Chair: *Rosalie Thomas*

Abstract:

Introduction – This includes describing the psycho-dynamic factors in development that contributes to self gender identity. The factors include experiences of relationship with the same-sex (eg. boy to father, brothers, other boys); experiences with the opposite sex; view of self in relation to others; presence of sexual, emotional and moral abuse; making meaning from witnessing bad male-female relationships; etc.

Educating the Social-family Systems – The presentation then explains the use of these information to educate the community leaders and members, to remove prejudice and misconceptions about SSA (Same Sex Attraction). The presentation explains how this psycho-education is done to enable clients deeply hidden with SSA to feel safe enough to ask for help in private.

Attending to the Client – A thorough inventory of the client's psycho-dynamic history, including how the client remembers, experiences and makes meaning of them, is taken. The pertinent factors are not only many but also often contribute to other issues such as internalized low-self worth, depression, victimization, obsessive compulsions, etc. Objectives and application of EMDR are thus clarified accordingly.

Helpful is recognizing which of the factors require attention and/or EMDR in a suitable sequence, always respecting the client's choice and socio-family outlook.

Helping the Social-family System to support the client – Besides the importance of education to change attitudes, some members may require parts work because EP intrusions, even though regarded as "normal disciplinary reactions", can contribute to the client's compulsion to live-up to expectations, which (unknowingly) disconnects them from healthy core emotions and their core identity.

POSTER PRESENTATIONS

Presenter: **Shaheen Islam**

Topic: ***Inclusion of Psychotraumatology for Sustainable EMDR Practice***

Session: 261

Abstract: Background and aims: Bangladesh faces numerous developmental challenges. Starting from pressing poverty, discrimination, disparity, domestic and political violence to liberation war, recurring natural and man-made disasters left none to get away from invisible impact of trauma, often having far reaching life consequences. Psychological impact of untreated trauma, which have massive bearing on social and economic life, is unrecognized and less prioritized. As a first line treatment of trauma, EMDR gained wide acceptance and recognition among world endorsement bodies. Though EMDR was introduced in Bangladesh 20 years back by UNICEF in 1998, only a few continued to practice EMDR. Later with the good office of HAP/Trauma Aid Switzerland EMDR was revitalized and a MOU signed with Dhaka University by undertaking this project. Intense, culturally appropriate curriculum on psychotraumatology and continuous supervision were the integral part of the project to trained mental health professional on psychotraumatology and EMDR as trauma recovery. The viability of this project to mark a sustainable development of EMDR practice in Bangladesh has been projected in this poster presentation. **Method:** Survey, key informant interview and case documentation were used as tools. **Results:** Psychotraumatology curriculum scored high as vital component in laying the foundation for trauma informed of EMDR. 67% were successfully applying EMDR in their practice. Client satisfaction with EMDR was 77%. **Conclusion:** The span of the project scaled up continuous development on EMDR to make it sustainable.

Presenter: **Ohnma Win Pe, Khin Yadana Soe, And Ramaswamy Deepti**

Topic: ***Clients' Experiences of difficulties during EMDR Therapy and How They Cope with Them***

Session: 262

Abstract: Clients' internal resources and their capability to use them for growth is the emphasis of EMDR therapy (Oren & Solomon, 2012). The client's contribution is the most crucial ingredient in creating therapeutic change (Bohart, 2000; Bohart & Wade, 2013) and this role of the client is the most obvious while they are dealing with difficulties (Henretty, Levitt, & Mathews, 2008; Williams & Levitt, 2007). Qualitative interviews were conducted with seven clients from Yangon, Myanmar who completed EMDR therapy provided by two EMDR therapists in training. Through the lens of the Resource-Congruence Model of Coping, this study explores how clients cope with their internal experience of difficulties during the therapy process and the impact of culture on the same. The most frequently reported difficulties clients encountered are self-disclosure and re-experiencing the negative events during processing. The clients used both active strategies such as expressing the problem to the therapist and pushing themselves to continue the process and passive ones such as postponement and lying to therapist about the progress. The culture plays an important role in the clients' experience of difficulties and their coping. Reported cultural norms are related to the need to perceive oneself as a strong person, accomplish what one started, be considerate of others and leave the past behind. If not identified and managed effectively in therapy, these beliefs can function as "blocking beliefs" that impede treatment effectiveness. The findings shed light on ways to prevent clients' drop-out, improve therapy effectiveness for novice clinicians and for potential cultural adaptation of EMDR therapy.

POSTER PRESENTATIONS

Presenter: **Rasham Rana**

Topic: ***Psychotrauma in Psychosis: Is EMDR an Answer?***

Session: 263

Abstract: Background and aims: Bangladesh faces numerous developmental challenges. Starting from pressing poverty, discrimination, disparity, domestic and political violence to liberation war, recurring natural and man-made disasters left none to get away from invisible impact of trauma, often having far reaching life consequences. Psychological impact of untreated trauma, which have massive bearing on social and economic life, is unrecognized and less prioritized. As a first line treatment of trauma, EMDR gained wide acceptance and recognition among world endorsement bodies. Though EMDR was introduced in Bangladesh 20 years back by UNICEF in 1998, only a few continued to practice EMDR. Later with the good office of HAP/Trauma Aid Switzerland EMDR was revitalized and a MOU signed with Dhaka University by undertaking this project. Intense, culturally appropriate curriculum on psychotraumatology and continuous supervision were the integral part of the project to trained mental health professional on psychotraumatology and EMDR as trauma recovery. The viability of this project to mark a sustainable development of EMDR practice in Bangladesh has been projected in this poster presentation. **Method:** Survey, key informant interview and case documentation were used as tools. **Results:** Psychotraumatology curriculum scored high as vital component in laying the foundation for trauma informed of EMDR. 67% were successfully applying EMDR in their practice. Client satisfaction with EMDR was 77%. **Conclusion:** The span of the project scaled up continuous development on EMDR to make it sustainable.

Presenter: **Sandheesh P.T.**

Topic: ***Efficacy of EMDR among College Students with Internet Addiction***

Session: 264

Abstract: The present research was designed to evaluate the psychotherapeutic efficacy of EMDR among college students with internet addiction. Two group randomized pre test-post test research design was employed in the Experimental study to evaluate the efficacy of EMDR among college students with internet addiction. A sample consisting of 30 college students, identified as internet addicts and given consent for the study were selected and assigned randomly into experimental (N=15) and wait list control group (N=15). The major tools utilized in the present research were Internet Addiction Test, General Health Questionnaire, Global Assessment Functioning Scale, and Online Diary. An EMDR was framed out and administered individually to the experimental group; whereas the control group was merely engaged with interactive sessions. The intervention proved to be efficacious in reducing the level of internet addiction and enhancing psychological well-being as well as psychosocial and occupational functioning of experimental group in comparison to the control group. The intervention was also found to be efficacious in enhancing the duration of sleep, social interaction, study and ameliorating uncontrolled internet use. Thus EMDR proved as a potential tool for successful coping of internet addiction enabling them to be productive global citizens.

POSTER PRESENTATIONS

Presenter: **Abdul Nasir**

Topic: *Use of EMDR in PTSD Survivors in Terrorist Attacks and Bomb Blasts*

Session: 265

Abstract:

Objective: Study the peculiarities of EMDR Therapy in PTSD consequent to Bomb blasts in a terrorist attack.

Study Design: Descriptive study

Place of Study: Baluchistan Institute of Psychiatry and Behavioral Sciences (BIPBS), Quetta, Baluchistan.

Methodology : Clinical workup and EMDR Therapy of a survivor of the terrorist attack and bomb blasts of February 17, 2013, after the PTSD had remained resistant to all treatment for six years. The transcript of audiotaped EMDR therapy Sessions with this patient were analyzed using the qualitative method of content thematic analysis.

Result: After remaining resistant to treatment for six years, the dramatic response to EMDR Therapy, was seen in not only long standing PTSD but also in depression and suicidality. The patient recovered to gain full, social and occupational functioning.

Conclusion: EMDR proves to be an effective intervention in longstanding resistant PTSD.

Presenter: **Naysim Hong**

Topic: *EMDR Increases Resiliency: A Case Study of Complex Trauma Client after Short Treatment*

Session: 266

Abstract: Eye Movement Desensitization and Reprocessing (EMDR) developed by American psychologist Francine Shapiro in 1989 based on Adaptive information processing model and there are 8 phases in a full standard protocol to treat people with psychological trauma. For this case presentation, I would like to demonstrate about how EMDR treatment build up more resilience for a complex trauma client. I have met and worked with a client who got 8 scores of ACE and victimized by domestic violent and also house owner violence repeatedly while she have worked as a house servant by force, she married and lives with mental illness husband and in currently living with suspicious of breast cancer sign. I worked and applied a full standard protocol of EMDR with her. After 6 sessions because of the limit of time, resources, and long distance between therapist and client, the result showed that this client gain the resiliency to deal with her trauma even though the symptoms of depression and anxiety did not reduce after the treatment. At the last session, she decided to meet doctor to make a clear diagnose of her breath cancer and ask help for her husband.

POSTER PRESENTATIONS

Presenter: **Sany Varghese, Gincy Mathew, and Mary Mathew**

Topic: ***Reaching the Unreached: An Outreach to Tribal Settlements***

Session: 267

Abstract: Eye movement desensitization is a therapeutic approach by Dr Francine Shapiro, developed to resolve the symptoms resulting from unresolved trauma, distressing events, exposure to natural disaster, or childhood trauma. This is found to be a valid treatment method for PTSD and it is recommended for children, adolescents and adult by WHO in 2013. State of Kerala in India has witnessed a devastating natural calamity in the form of flood and landslides in 2018 August. Wayanad district is one of the most affected area typically known for Tribal settlements where hundreds of people died and thousands lost their life time settlement areas. The presenters visited the location where a group of handpicked adolescents were approached for intervention at Karunya Nivas on 17-5-2019.

EMDR IGTP session was conducted in Karunya Nivas, which is an NGO in Thonichal, Wayanad. The institution up brings the tribal children, adolescents and youth, those are dropouts and facing tragic life events. A group of 55 adolescents consisting of 15 to 18 years of age from various courses for self employment like computer courses, stitching etc were the participants. The introduction part of IGTP protocol was briefed, the causes and symptoms of stress were explained, different types of soothing methods like abdominal breathing and safe place were taught. Distress level were rated using appropriate tools. IGTP session was conducted where EPTs were present. Many of them reported a decreasing in their stress level. The high risk population was identified and still on follow up sessions with intermittent evaluations.

Presenter: **Mahjabeen Haque**

Topic: ***The Magic of Absorption Technique***

Session: 268

Abstract: In the present study a comparison was made between two groups of clients where two different strengthening techniques were used: the Absorption Technique and Positive Self Image. At the time of the study none were EMDR clients. The beauty of the Absorption technique (where BLS is used) is it can be applied even with non EMDR clients. Results indicated that the Absorption worked much better in handling the anxiety provoking upcoming situations than other strengthening techniques. Therefore, even though the clients didn't start EMDR, their capability to handle situations and emotional management were better than the other group. The possibilities are high that because of BLS (a very important part of EMDR), Absorption technique was effective.

The study included participants from different SES, coming from different parts of the country. Not all of them were capable to come to sessions on regular basis considering distance, time and cost. They needed something to hold on to face their future. The use of BLS was a magical experience for them as reported. Most of them became more inclined to continue their sessions in EMDR so that they can work with their other issues.

POSTER PRESENTATIONS

Presenter: Payongsri Khanthikul

Topic: *EMDR on Vicarious Trauma and Post-traumatic Growth in The Helper of Abused Children and Family*

Session: 269

Abstract:

The multidisciplinary team experience daily exposure to cases of child abused, which is likelihood to develop vicarious trauma and do not seek for therapy.

Objective: The purpose of this study was to investigate the effects of eye movement desensitization and reprocessing (EMDR) therapy on vicarious trauma and post-traumatic growth (PTG).

Methods: This study is a quasi-experimental research. Nineteen participants were selected with medium to high level of Vicarious Trauma Scale. They are working with children, women, and family with abusive relationships in multidisciplinary team, including social workers, psychologists, therapists, and nurses. The participants were divided into two groups; one experimental group and one control group. Three-individual sessions were provided for the experimental group. The Vicarious Trauma Scale (VTS) and the Post Traumatic Growth Inventory (PTGI) were utilized before and after the treatment.

Results: After treatment; first session was history taking and preparation, second session was EMDR therapy and third session was re-evaluation, the data were analysed for percentages, median, means, standard deviations, and t-test. The mean score of VTS and PTGI scores among the experimental group and control group after receiving the experiments and being controlled were not statistically significant. The experimental group had mean score of PTGI after the EMDR, was significantly higher than before receiving EMDR at the level of .01 ($p=0.002$). The controlled group had VTS decrease and PTGI increase

Conclusion: EMDR therapy has no effect on vicarious trauma and post traumatic growth in the helper of abused children and women. Further controlled studies comparing with other treatment modalities for PTSD are needed.

POSTER PRESENTATIONS

Presenter: **Rekha Aththidiye**

Topic: ***The Need for a Cross-cultural Adaptation of the EMDR Group Protocol Intervention for Trauma Affected Children and Adolescents: Reflections from the Sri Lankan Context***

Session: 270

Abstract: When used within a group set-up, Eye Movement Desensitization and Reprocessing (EMDR), is a key intervention to enhance psychological healing and resilience. Used with children, adolescents and adults, in its original and adapted formats, EMDR has proven effective in the treatment of trauma in many countries. Sri Lanka has experienced several traumatic events, including a now-concluded 30-year ethnic conflict, the Tsunami, and the more recent Easter attacks. Though EMDR was introduced to Sri Lanka in the aftermath of the Tsunami in 2004, there is a dearth of research of this intervention, locally. In order to fulfill this gap, the EMDR group protocol was used with children and adolescents impacted by the Easter attacks that occurred on 21/4/2019 in Sri Lanka. 854 female students, ranging from 9 to 18-years, from one school, participated. Primary and secondary students were taken separately. With 10 groups in all, each group consisted of 73 -100 students. Subsequent to this intervention, the authors reflected on the necessity to cross-culturally adapt the EMDR group protocol to the Sri Lankan context. Particularly, for adolescents: (i) there is a need to include a component of psycho-education on the psychological effects of trauma, (ii) there is a need to include a component on the facets of a balanced future life, and (iii) as most adolescents were writing than drawing, it was deemed more culturally appropriate to guide them to write about one particular memory in each box. The authors intend to cross-culturally adapt the EMDR group protocol to Sri Lanka.

POSTER PRESENTATIONS

Presenter: **Maksuda Begum**

Topic: ***EMDR Expedition can Highly Promote School Students Academic Performance who have History of Grade Failure and Dropout***

Session: 271

Abstract: EMDR psychotherapy has become the most effective way of treating traumatized clients according to WHO. The main objective of this article as a pilot project in a rural area, is to show that EMDR therapy can have an extensive influence on reprocessing the maladaptive information, related to the past trauma memories and present stress and has the enormous positive influence on the central nervous system of school going students specially who have the history of grade failure and drop out to make them calmed, reassured and to concentrate on academic subjects. As trauma memories has the continuous capacity of making client pathological, thus students' academic abilities extremely hindered. While before rushing for clinical intervention, using EMDR components' in school premises on regular basis these students emotional, cognitive and behavioral orientation can be addressed to promote academic performance and reduce dropout.

Method: The process was conducted on the phase fourth of EMRD (Desensitization, three pronged Protocol, Adult Attachment Interview and Resource Team building.)

Sample size: 120 students of age 12-17 (who have the history of exam fail, phobia, physical illness during exam, withdrawal symptom, restless behavior) were recruited from grade 5-9 and their parents for psycho-education

Duration: 3 year

Sessions conducted: 6 - 12.

Result:

- 25% got good academic skills
- 17% multiple sexual molestation
- 15% attachment trauma with separation anxiety
- 12% low energy for critical home environment
- 10% Phobia with physical abuse
- 8% learning difficulty with OCD history
- 13% suicidal ideation, no school attendance.

POSTER PRESENTATIONS

Presenter: **Masaya Ichii**

Topic: ***Effect of Eye Movement on Memorization of Threat Words***

Session: 272

Abstract: The purpose of the current study is to investigate: (1) that memory bias that can be seen in depression, anxiety, and trauma in the procedure of presenting target words during eye movement, (2) that memory bias could be ameliorated by eye movement. Participants are thirty-four undergraduate and graduate students. They were asked to memorize words, which included neutral and threat words. The words were presented on display consecutively, during eye movement or eye stationary in front of the participants. By BDI, STAI-State, STAI-Trait, IES-R score, they were divided into high ($>\text{mean} + 0.5\text{SD}$) and low ($<\text{mean} - 0.5\text{SD}$) groups. The ratio of threat words to all words memorized was the dependent variable. We could not find any memory bias regarding BDI, STAI-State, STAI-Trait variables in the eye stationary condition. However, the ratio was statistically different between IES-R high and the low group in the eye stationary condition. Trauma could be the promising variable for detecting cognitive bias. The interaction between IES-R and eye movement was statistically significant. Compared with the IES-R low group, the high group showed a significantly high ratio in the high group in eye fixed condition. Also the ratio was significantly low in the high IES-R group in the eye movement condition. This indicates that eye movement does not only tax cognitively, but also facilitates processing emotional aspects of stimuli. The role of eye movement was discussed compared with exposure procedure and based on models of working memory and inter-hemispheric interaction.

Presenter: **Soontaree Srikosai**

Topic: ***Effect of EMDR Therapy: A Report of Fifty-two Thai People with Psychological Trauma***

Session: 273

Abstract:

Objective: To evaluate the effect of EMDR Therapy treatment in fifty-two Thai people with psychological trauma.

Methods: Implementation of standard EMDR therapy protocol for fifty-two Thai people with psychological trauma who received treatment at RICD or a private psychiatric clinic. The eight phases of EMDR therapy included: history taking, client preparation, assessment, desensitization, installation, body scan, closure and re-evaluation of treatment effect. The desensitization phase consisted of techniques targeted to activate the neuronal network using bilateral stimulation or tapping. Subjects average attended three therapy sessions ranging in length from 1.30-1.45 hours each, between November 2018-August 2019.

Results: Subjects included thirty-six females and sixteen males, with an average age of 29 years (min=13, max=50). Chief complaints included: PTSD, depression, panic, anxiety, low self-esteem, and self-harm/suicide. Immediately after EMDR treatment, thirty-four subjects (65.4%) complete the full protocol, with subjective units of disturbance (SUD) scores of 0-1/10 and validity of cognition (VOC) scores of 7/7. At follow-up, the SUD scores of these thirty-four subjects remained at 0/10 and unchanged VOC scores of 7/7. Subjects with incomplete therapy protocols reported SUD scores of: 2/10 (2 subjects), 3/10 (7 subjects), 5/10 (3 subjects) and 7/10 (2 subjects), and 8/10 (1 subject).

Summary: EMDR therapy is an effective treatment method for people with psychological trauma. Randomized-controlled trials should be conducted to determine the efficacy of EMDR therapy in the Thai population.

POSTER PRESENTATIONS

Presenter: **Sonali Tanksale**

Topic: ***Processing Grief of Untimely Loss of Loved One Verses due to Prolonged Illness with EMDR Therapy***

Session: 274

Abstract: Manifestation of grief due to the loss of loved one is experienced by all human beings across cultures in the entire universe, however, the nature and extent of mourning process may differ due to the cause of death, age of deceased, relationship with the deceased, attachment patterns, emotional dependency, economical impact and social impact.

This paper attempts to summarize the experiences of therapists across 10 clients where EMDR therapy was used for 2 categories of clients who had experienced:

1. Death due to prolonged illness,
2. Untimely death due to accidents, alcoholism, suicide and sudden brief illness

A comprehensive treatment approach is needed to help clients accept, understand and cope with their loss. Disturbing and intrusive thoughts along with a yearning for their loved ones is noted in cases of traumatic grief. The reactions and responses displayed by the clients lead to undermining of their abilities to deal with situations, inability to deal with day-to-day living and impaired coping resources. Clients exposed to prolonged period of stress and high ACE's find it all the more difficult to tolerate intense present triggers that are reminders of past experiences. Similarly clients who have witnessed traumatic and sudden deaths in comparison to death due to prolonged illness face guilt, anger and a dramatic change in the role played by them and on the other hand clients who have caregiving experience during the illness are inundated with fear and stress and have difficulties in rationally evaluating the support and care provided to the loved one.

This paper highlights different reactions and responses of clients during the processing of grief and changing memory storage, reduction of distress and new learning as per AIP model. This paper will also provide an in-depth discussion on the impact of bereavement on regular life and how EMDR helped clients overcome the traumatic experience in 3-4 sessions in different cultural, social, age groups and to move on with new insights. The feedback of clients will be added to discuss the therapeutic outcomes.

PRESENTER BIOGRAPHIES

Abdul Nasir is a consultant psychiatrist, Baluchistan Institute of Psychiatry and Behavioral Sciences (BIPBS) Quetta, Pakistan. Currently declared as accredited EMDR practitioner trained under EMDR Pakistan by Europe Accredited trainer.

Adithy has been working as a counseling psychologist in Pune, India, since 2001. Specializing in trauma work, training in leading-edge therapeutic methods, she works with individuals and groups. Eager to learn effective methods of healing, and share what she learns, she has designed and facilitated workshops and long-term programs on trauma healing and dissociative disorders and presented at conferences in Asia and USA. She has been a facilitator for EMDR trainings in Asia. adithy@gmail.com

Agnes Mary is a Counseling Psychologist, graduated with a Master of Science in Counseling Psychology from Assumption University, Thailand. She has experience in working with the refugees and migrant workers from different countries. Agnes provides individual counseling to adolescents and adults from various background and age group. She focus on the area of stress related issues, anxiety, depression, trauma and relationship issues. She takes integrative approach to her therapeutic practice from different psychological approaches including Cognitive Behavior Therapy, Eye Movement Desensitization and Reprocessing and Mindfulness. She works with EMDR Myanmar Association as Psychotherapist and Trauma Counselor Trainer. She provides mental health trainings and workshops.

Anabel Gonzales, MD. PhD. is psychiatrist and psychotherapist, trained in various orientations as Group Therapy, Cognitive Analytic Therapy, Systemic Therapy and trauma-oriented therapies. PhD in Medicine and specialist in Criminology. She belongs to the Board of the European Society for Trauma and Dissociation (ESTD) and is Vice President in the EMDR Spanish Association. He works at the University Hospital of A Coruña (CHUAC), coordinating the Trauma and Dissociation Program, oriented to patients with severe traumatization. Is an active docent, giving training on dissociative disorders, trauma, attachment and emotional regulation. She is accredited consultant and trainer of EMDR therapy. Is teaching collaborator in her hospital, where she coordinates the training in psychotherapy of the residents in psychiatry. She participates as a guest lecturer in the Master of EMDR Therapy in the Universidad Nacional de Educación a Distancia (UNED). At the level of research, she directs several projects in the field of trauma and dissociation and the treatment with EMDR for various disorders. He has published numerous articles on dissociation, trauma and EMDR, and is author/co-author of the books: Dissociative Disorders, Dissociative Identity Disorder, EMDR and Dissociation, the Progressive Approach, and EMDR and BPD. Her last books are I am not myself: Understanding Complex Trauma, Attachment and Dissociation. A Guide for Patients and Therapists and EMDR and Emotional Processing.

PRESENTER BIOGRAPHIES

Ana M Gómez, MC, LPC is the founder and director of the AGATE Institute in the U.S. She is an EMDR Institute, and EMDR-IBA trainer of trainers. She is a psychotherapist, author, and an international speaker on the use of EMDR therapy with children and adolescents with complex and developmental trauma as well as attachment wounds and dissociation. Ana is the author of EMDR Therapy and Adjunct Approaches with Children: Complex Trauma, Attachment and Dissociation and several books, book chapters and articles on the use of EMDR therapy with children and adolescents. Ana was the recipient of the 2011 “Distinguished Service Award” from the Arizona Play Therapy Association and the 2012 Sierra Tucson “Hope Award.” Ana has developed numerous programs and protocols that include the “EMDR-Sandtray Protocol” and the “The Systemic, EMDR- Attachment Based Program to Heal Intergenerational Trauma & Repair the Parent-Child Attachment Bond.”

Ann Beckley-Forest is a Licensed Clinical Social Worker in private practice in Buffalo, New York. Her specializing in child trauma. She is a registered play therapist supervisor and approved provider of play therapy training through the Association for Play Therapy. She is certified in EMDR and an EMDR Approved Consultant and a faculty member of the Child Trauma Institute. She gives trainings locally and internationally, primarily focusing on the intersection of play therapy and EMDR and has published on this topic in the September 2015 issue of *Play Therapy* and the March 2019 issue of EMDRIA’s magazine, *Go With That*.

Ann Parichawan Chandarasiri, MD, is a child psychiatrist who is on the Faculty of Medicine at Chulalongkorn University. She is board certified in Pediatrics and in Child and Adolescent Psychiatry, EMDR Europe Accredited Trainer, EMDR Europe Accredited Child Trainer, board member of EMDR Asia and president of EMDR Thailand. Her interests and areas of expertise include psychotraumatology, Post-Traumatic Stress Disorder treatments, EMDR Therapy as an effective treatment modality, attachment and systemic therapy. She has been served as the Professional Director of Mekong Project, the Humanitarian Program for Trauma Treatment in Thailand, Cambodia, Myanmar, Vietnam and Indonesia since 2011.

Arne Hofmann is specialist for psychosomatic medicine and head of the EMDR-Institute in Germany. He learned EMDR in 1991 and has introduced it in the german-speaking countries. Dr. Hofmann is co-founding board member of EMDR Europe and a member of a German national guideline commission on the treatment of PTSD. He is teaching, researching and publishing in the field of psychological trauma and EMDR. He has been teaching at the Universities of Cologne, Boston University and the Peking University. He co-founded the European EDEN research group that has up to now published 5 controlled studies that have shown that EMDR is highly effective in the treatment of depression. For his work he has received several awards and the Order of Merit of the Federal Republic of Germany.

PRESENTER BIOGRAPHIES

Atara Sivan, PhD, is President of the EMDR Association of Hong Kong, a certified EMDR Trainer by the EMDR Institute, USA and Director of the Centre for Trauma treatment and Well-being (CTTW). She is Head and Professor of the Department of Education Studies at the Hong Kong Baptist University. Prof. Silvan is also trained as a Gestalt Therapist and has been practicing in Hong Kong and Israel providing individual, couples, and group therapy. As a researcher, she publishes extensively and is invited as keynote speaker to international conferences. Atara won several prestigious awards for her contribution to field of knowledge and practice.

Brurit Laub is a clinical psychologist in private practice, retired from 35 years work at a community mental health center in Israel. She is a certified hypno-therapist and a supervisor in psychotherapy, family therapy and EMDR. In 1995 she learned EMDR and in 1998 became an EMDR Institute facilitator, and later an EMDR Europe accredited consultant. She developed a Resource Connection Envelope (RCE) and presented it in Israel and in EMDR conferences abroad. She developed with Elan Shapiro the EMDR R-TEP (Recent Traumatic Episode Protocol) and co-presented it in numerous conferences in Israel and abroad. She is Co-recipient of the David Servan-Schreiber award for contribution to EMDR from the University of Lorraine, Metz. She developed with Nomi Weiner a dialectical model for psychotherapy and presented it in workshops in Israel. The model was adapted to EMDR therapy and presented in Israel, NYC and in EMDR conferences (Edinburgh-2014, Philadelphia -2015 and Shanghai -2017). The Healing Space was presented at the European EMDR conference in Strasbourg, 2018. She co-authored "Co-Therapy with Individuals, Families and Groups" (1994) and "Innovative Interventions in Psychotherapy" (2006). She also co-authored several articles on the dialectical model and on EMDR R-TEP.

Bryan Shen is a registered counsellor and supervisor with the Singapore Association for Counselling. Fluent in English and Thai, he holds a Masters in Social Science and Counselling. He has helped many religious seminarians, individuals and families in Thailand, Malaysia, Philippines and Singapore. In 2014, Bryan was asked to help the Singapore Archdiocesan Response to people living with SSA (Same-sex Attraction). Since then he has improved his clinical skills by learning from therapists in the US trained to work with clients with unwanted SSA incorporating EMDR. He has also since given many educational talks to conservative-religious communities in Asia.

Chintan Naik is a practicing clinical psychologist, has been working for last 10 years in private and government set ups in India. He has deep insight into human psychology with keen interest in personality, emotional and cognitive underpinnings of behaviour. He has been working chiefly in the areas of psycho-diagnostics, psychological assessment, and psychotherapy. He has attended EMDR part-1 trainer's training, held in April 2017, at Shanghai, China. He has participated in EMDR basic training across various cities in India and in Nepal and Afghanistan, as a trainer in training and facilitator. He has been hosting the five-hours consultations and facilitating the same after trainings. Being an EC member of EMDR association India, he co-ordinates training and intervention programs, he prepares reports of trainings held at various places, compiles and edits the Annual report of the association, co-ordinates the consultations, conferences, and other programs working collaboratively with other EC members, life members, and participants of the programs. He manages the the website of the association and often communicates with people representing the association as an EC member.

PRESENTER BIOGRAPHIES

Carol Miles MSW, LCSW, is a clinical social worker specializing in individual, and family psychotherapy, maintains a private practice in Covington and New Orleans, Louisiana, USA, with adolescent and adult clients. She also provides training and consultation for therapists developing skills in Eye Movement Desensitization and Reprocessing Therapy (EMDR Therapy). A graduate of LSU School of Social Work, Carol specializes in Clinical Social Work, with over 30 years of experience as a social worker in clinical, administration, and marketing with the public and private sectors. Among her areas of expertise are working with clients who have eating disorders and trauma. She is certified in EMDR Therapy (Eye Movement Desensitization and Reprocessing Therapy) by EMDRIA (EMDR International Association) and has additional training in DBT (Dialectical Behavioral Therapy). Carol has often presented at state wide conferences and to general audiences on topics ranging from Eating Disorders, Assertiveness, EMDR Therapy, DBT and Developing a Private Practice. She has taught as an adjunct professor at the Tulane School of Social Work since 1998. Additionally, she is an EMDRIA Approved Consultant and EMDRIA Approved Provider of EMDR Therapy. She has been a member of EMDRIA since 2008, shortly after being trained in EMDR Therapy in New Orleans through the EMDR Humanitarian Assistance Program (now called Trauma Recovery). As a volunteer for EMDRIA, she served as a member of the Conference Committee for many years and founded and chaired the University Special Interest Committee. She is currently the Regional Co-Coordinator of South Louisiana. In 2017 she was elected to serve on the EMDRIA Board of Directors 2017-2021, becoming its President in 2019.

Carol R. Martin has been the Executive Director of Trauma Recovery, EMDR Humanitarian Assistance Programs, a non-profit organization committed to bringing trauma-informed therapy to the underserved, both in the U.S. and in Third World countries for nearly a decade. Carol has more than a 30 year history working with non-profit and educational organizations. Her prior positions include, Vice-President for Development of Save the Children, Westport, CT; Vice-President for Institutional Advancement and CEO of the Foundation, Southern Connecticut State University, New Haven, CT; Vice-President for Advancement, F.I.T., New York, NY and Director of Development and Alumni Affairs, Yale University School of Epidemiology and Public Health. She has also provided counsel to a number of organizations such as L'Envol - a Hole in the Wall Gang Camp and Mother's Voices – an AIDS advocacy organization among many. Carol has a B.A. in Sociology and Psychology from the University of Michigan and a postgraduate degree from the University of Nice, France. She currently serves on the Board of the Rotary Foundation of New Haven, the United Way of New Haven and on the Area Cooperative Education Foundation.

PRESENTER BIOGRAPHIES

Derek Farrell is a Principal Lecturer in Psychology at the University of Worcester (UK) where he is Course Director of a MSc EMDR Therapy programme (the world's first such programme). He is an EMDR Therapy Europe Accredited Senior Trainer and Consultant, a Chartered Psychologist with the British Psychological Society, and an Accredited Psychotherapist with the British Association of Cognitive & Behavioural Psychotherapies (BABCP). He is Past-President of the EMDR UK & Ireland Board, President of Trauma Aid Europe, Past Co-Vice President of EMDR Europe Board and current Chair of the EMDR Europe Practice Committee. He has been involved in a number of Humanitarian Trauma Capacity Building programmes in Pakistan, Turkey, India, Cambodia, Myanmar, Thailand, Indonesia, Lebanon, Poland, Palestine and Iraq. His PhD in Psychology was researching survivor's experiences of sexual abuse perpetrated by clergy and consequently has written several publications on this subject matter. In Geneva 2013, Derek was the recipient of the 'David Servan Schreiber Award' for Outstanding Contribution to EMDR Therapy. In addition, Derek was also shortlisted for the prestigious Times Higher Education Awards (2017) for International Impact due to his Humanitarian Trauma Capacity Building work in Iraq with the Free Yezidi Foundation and the Jiyan Foundation for Torture and Human Rights. In 2018 Derek was awarded the 'Trauma Aid Europe Humanitarian Award' in Strasbourg, France.

Dolores Mosquera is a psychologist and psychotherapist specializing in severe and complex trauma, personality disorders, and dissociation. She is an accredited EMDR Europe Trainer and supervisor. Dolores is the director of the Institute for the Study of Trauma and Personality Disorders (INTRA-TP) in A Coruña, Spain—a 3-clinic private institution initially founded in 2000. She collaborates with two different Domestic Violence Programs, one focused on Women Victims of DV and another one on Males with Violent Behavior. She belongs to the Spanish National Network for the Assistance of Victims of Terrorism, and also collaborates with an organization aiding victims of emergencies, accidents, violent attacks, kidnapping and other traumatic incidents. Dolores has extensive teaching experience leading seminars, workshops, and lectures internationally. She has participated as a guest speaker in numerous conferences and workshops throughout Europe, Asia, Australia, and North, Central, and South America. She has published 15 books and numerous articles on personality disorders, complex trauma, and dissociation, and is a recognized expert in this field. She also teaches in several Universities, and collaborates supervising Clinical Psychologists in postgraduate training programs in Spain. She received the David Servan-Schreiber award for outstanding contributions to the EMDR (Eye Movement Desensitization and Processing) field in 2017, and was made a Fellow of the International Society for the Study of Trauma and Dissociation in 2018, for her important contributions to the trauma and dissociation field.

Donald F. deGraffenried, LCSW is a passionate advocate for expanding EMDR therapy into agency and community mental health settings and has started several agency based EMDR programs. He is especially interested in using EMDR in agency settings to work with the survivors of homicide and is the Coordinator of the Greater New Haven Recovery Network. (GNH TRN). The Greater New Haven TRN is composed of 23 volunteers EMDR therapists who provide up to 10 pro bono sessions to crime victims and survivors of homicide, who have been referred by the New Haven Police Department. deGraffenried is an EMDRIA Approved Consultant, Approved Facilitator and a Senior Trainer for the Trauma Recovery EMDR Humanitarian Assistance Programs. deGraffenried was invited to present papers at the EMDR International Association Annual Conferences in 2002 (San Diego), 2005 (Seattle), 2007 (Dallas), 2008 (Phoenix), 2009 (Atlanta), 2010 (Minneapolis) and 2018 (Atlanta). In February of 2019 he presented at the EMDR Asia Conference held in Mumbai, India.

PRESENTER BIOGRAPHIES

Edward Andriyanto Sutardhio is a lecturer in Faculty of Psychology Universitas Indonesia. He focuses his subjects and researches to human development, cognitive psychology, evolutionary psychology, clinical psychology and intervention. He is head of public services division in Himpunan Psikologi Indonesia (Indonesian Organization of Psychology). He is a child clinical psychologist at a private clinic and the faculty's clinic. He also participates as a psychologist in a NGO that helps the survivors of child abuse. He gives consultation to National Board of Counter-Terrorism dealing with the survivors of terrorism acts, National Board for Disaster Management dealing with psychosocial support, Ministry of Women's Empowerment and Child Protection dealing with child protection programmes, and Ministry of Health dealing with child protection and helping the survivors of child abuse.

Fuye Ongko is actively working for mental health related fields such as giving psychological treatment for refugees from Middle Eastern and African countries, street children community and also helping victim of domestic violence to deal with their trauma (adult and children). On 2018, he also joined Pulih Foundation Psychosocial team to help giving psychosocial treatment for communities in Lombok (earthquake survivors) and Palu (tsunami survivors) that were struggling against their traumatic experiences due to those massive disasters. Fuye Ongko also has experienced in giving EMDR supervision for EMDR Practitioners in Cambodia and Myanmar.

Gary Quinn, MD, is a psychiatrist who specializes in Crisis Intervention, the treatment of Anxiety and Depressive Disorders, and the treatment of Post-Traumatic Stress Disorder. Dr. Quinn has conducted numerous trainings in Israel. He has been senior trainer in Europe, Asia, Africa, and the US. He has participated as a trainer for HAP (Humanitarian Assistance Programs) in Turkey, Thailand, Romania, Cambodia, and Zimbabwe. Dr. Quinn is currently an EMDR Institute, Inc. Trainer of Trainers of Asia. Dr. Quinn has volunteered in medical hospitals after terrorist attacks and treated patients in bomb shelters and after the Tsunami in Thailand. He developed the Emergency Response Protocol (ERP) to treat victims of trauma with EMDR within hours of the incident when suffering from speechless terror with multiple rapid flashbacks.

Gincy Mathew is Pursuing her PhD from Sri Sathya Sai University of Medical Science and Technology, Bhopal. She has completed her PG in MA Clinical Psychology from IGNOU. She was working as counsellor in Government Medical College, Ernakulam. Currently working as the Director of Raining Trees! Counselling and Psychotherapy, Cochin, India. She used to be the Resource person at Department of Family Apostolate, The Archdiocese of Ernakulam-Angamaly, Renewal Centre, Ernakulam, KCBC Commission for Education, Ernakulam, Prefect of Studies, Pastoral Training Institute, Ernakulam. She has completed EMDR basic Training, EMDR-IGTP-OTS, ASSYST, EMDR-PRECI and EMDR Practitioner and Life Member EMDR India.

PRESENTER BIOGRAPHIES

Hong Naysim graduated Master degree of clinical psychology, child and adolescence development from University of Social Sciences and Humanities, Hanoi cooperate with University Toulouse Jean-Jaures, France in 2014. She has provided the treatment with EMDR therapy since 2016 in Cambodia. In the present, She is an accredited EMDR consultant and working at EMDR Cambodia Association in Mekong Project III.

Iain McGowan is a mental health academic and clinician with a particular interest in trauma and its related presentations, and health economics. As a lecturer at Queens University Belfast, McGowan is part of the mental health nursing teaching team delivering higher education at undergraduate and post-graduate levels. He has completed levels 1 & 2 of the EMDR training. He graduated with a PG Diploma in Health Economics in 2018 and is a PhD student in Health Economics and Policy and the University of Lancaster, England. McGowan is currently Treasurer of the EMDR UK & Ireland Northern Ireland committee.

Isabel Fernandez is a clinical psychologist working in Milan. She has been trained in Cognitive Behavioural Therapy and has been on the faculty of the Italian Cognitive Behavioral Association for 17 years. She has worked as a consultant psychologist at the psychiatric ward of Niguarda Hospital, conducting clinical research projects. Currently, she is Director of the Psychotraumatology Research Center of Milan and has published many papers, articles and books on trauma, EMDR and other topics. She is President of EMDR Europe Association, chairman of EMDR Italy and a member of the Board of Directors of the Italian Federation of Scientific Psychological Societies. She has been a member of the Standing Committee Trauma and Disasters and the Board Prevention and Intervention (of the European Federation Psychological Associations- EFPA) for the last 10 years. She has organized interventions with EMDR in mass disasters (Milan's air crash on Pirelli Building and earthquakes) and has worked in cooperation with Civil Defense, Military and Law enforcement and Fireworkers to provide psychological support and trauma treatment for emergency workers. She trains graduates students and clinicians in trauma, EMDR and crisis intervention in Italy and Spain. She has made research and published on Post-traumatic stress reactions in children and adults in emergency settings and mass disasters. She is an expert in post-traumatic reactions in children survivors of mass disasters, grief and trauma. She has been coordinating and training personnel working with Refugees, with unaccompanied children and is a member of the National Psychological Association working group for these issues. Her expertise in this working group is in the field of intervention with EMDR to reduce acute stress reactions in children as a consequence of migration, including grief and loss of attachment relationships, in order to reduce risk factors for psychological and mental disorders.

Jackie Viemilawati is a Clinical Psychologist (University of Indonesia, postgraduate, 2004) and Medical Anthropologist (School of Oriental and African Studies (SOAS), University of London, UK, postgraduate, 2008). Jackie is an accredited EMDR therapist, consultant & supervisor, and a program specialist who works at Puli Foundation – an NGO since 2004. She has strong working experience, both in clinical and community-based settings, focusing on gender-based violence, trauma, mental health and psychosocial support programs, including conflict and disaster settings. She was awarded British Chevening Award Scholarship 2007, JENESYS Future Leader Program Japan Foundation 2012, and Women Leadership and Community Program JDC Israel 2015.

PRESENTER BIOGRAPHIES

Jörg Albers has been working as a psychologist in the field of psychotherapy since 1989. Since 1997 he lives and works in Denmark. Founder of the Essential Exposure Institute since 2015. After studying behavioral/cognitive psychology at the University of Marburg (Germany), he worked in the following years with behavioral therapy, Gestalt therapy and Ericksonian hypnotherapy. He is a Certified EMDR Practitioner since 2010 with the main focus on systematic desensitization and exposure treatment in various psychological fields to optimize and integrate parts of EMDR effectively. He developed a 6-step treatment approach to addiction treatment that significantly reduces both addiction cravings and the burden of traumatic experiences.

Khadija Tahir is a general practitioner who has branched into psychotherapies. She was certified as an EMDR practitioner in 2008. In 2010 she was certified as an EMDR Consultants. She has performed EMDR with earthquake and acid burn victims. She has presented her work in EMDR Europe and all EMDR –Asia Conferences which was highly acclaimed. Dr. Khadija Tahir is certified as EMDR Trainer in 2019 and become the first EMDR Europe accredited Trainer of Pakistan.

Khin Yadana Soe has been working as a clinician for more than 10 years and as a psychiatrist for four years. She has worked in hospitals as well as private clinics. She has also been trained in EMDR therapy and have now completed level 1 and 2. She is also one of the founders of Metanoia Mental Health Services & Resource Center and since August, 2018, she has been providing psychiatric services, and psychotherapy there. In her clinical practice, she has supported clients with mental disorders, clients with drug use problems and survivors of sexual and physical violence.

Leoniek Kroneman is a clinical psychologist from The Netherlands. She holds a PhD in Developmental Psychology (2009) and is a registered cognitive behavioral psychotherapist (Netherlands) and EMDR Practitioner (Europe). She recently graduated from NUS with an MBA in Health Care Management (2019). Previously she worked with abuse victims and juvenile offenders, both in polyclinic and residential settings. After relocation to South East Asia in 2016 she joined the National University of Singapore where she currently works as an Adjunct Senior Research Fellow at the Department of Psychological Medicine. She conducts research, provides clinical supervision and gives talks on mental health related themes.

Lina Ibrahim, MA, is a licensed Educational Psychologist, and she has a private practice and has 28 years of experience in psychoeducational testing and in the treatment of school-age children who have learning, intellectual, behavioral, and emotional problems. Ms. Ibrahim is a certified EMDR therapist and has been using EMDR therapy with children, adolescents, and adults for the past 12 years. She is also an EMDRIA approved consultant in EMDR and an EMDR trainer-in-training. Ms Ibrahim is the founding and the current president of EMDR Lebanon Association, and she has managed all training projects that occurred in the association.

PRESENTER BIOGRAPHIES

Lorenzo Bracco is Philosopher, Medical Doctor, Specialist in Psychiatry, Psychotherapist, Trauma Therapist (Somatic Experiencing, NARM, EMDR). He is a Creator of Ecological Niche Diet™ and Co-founder, CEO of "Lorenzo Bracco Foundation". He is Winner of the 2013 Cesare Pavese Award, Non-Fiction Medical Writing, with "ANOREXIA the Real Causes: Blood Types and Trauma". His new theory about Anorexia of the Female Adolescent is that, besides to the psychological causes of the girl and the existential causes of the family, this type of anorexia requires a specific biological condition: "A different blood type between mother and daughter (O,A,B,AB) + traumatic blood contact between the two during pregnancy and/or birth".

Maggie Wai-ling Poon, Psy.D., is EMDRIA Approved Consultant and Certified Therapist in EMDR. She is a Clinical Psychologist and a Registered Social Worker in Hong Kong. She specializes in working with adults with trauma-related disorders. She has published articles on using hypnosis and EMDR in treating survivors of complex trauma. She has also presented in the 3rd EMDR Asia conference in Shanghai.

Mahjabeen Haque, Ph.D, is a Professor and Chairperson of the Department of Educational and Counselling Psychology(DECP), University of Dhaka (DU). Mahjabeen is a Director, Student Counselling and Guidance Office.

Maksuda Begum, MA, has been an employee of the Bangladesh Protibondhi Foundation since 1999. She has completed a diploma degree in Special Education and a Masters in Special Education from the Bangladesh National University and has worked as a counsellor since 1998. She is also a trainee of Certified Transactional Analyst (CTA). Maksuda Begum is involved in research, publications and providing training and workshops for professional development.

Mary Mathew graduated in educational and developmental psychology from Salesian University, Rome, Italy in June, 2012. She completed postgraduate studies in Clinical and community psychology from Salesian University, Rome, Italy in June, 2014.

Masaya Ichii, M.A., is a Professor of Clinical Psychology, Hyogo University of Teacher Education. He accomplished credits for doctoral program in 1994 in psychology department of Waseda University, at Tokyo Japan. He is a Certified Clinical Psychologist since 1991. He has been teaching clinical psychology since 1994 at University of the Ryukyus and Hyogo University of Teacher Education. He is an EMDRIA Approved Instructor & Consultant since 1998 and an EMDR Institute Trainer since 2006. He is a member of EMDR International Association, President of Japan EMDR Association, and a board member of EMDR Asia. He is also council of Japanese Association of Anxiety Disorders.

Matthew Woo, BHons Science, DClinPsych, has had extensive experience in therapy and supervision. He has been providing psychological therapy for 23 years in different clinical contexts, and is on the supervision and adjunct teaching faculty (Associate Professor) of the National University of Singapore clinical masters programme. Dr Woo has had 12 years of experience with EMDR, having completed his Basic Level training in 2008 with Sigmund Burzynski, and attained 10 hours of certified supervision with Dr Roger Solomon through the Advanced Skill Workshop (Art and Dance of EMDR) in 2009 and 2010. He received his qualification as an EMDR Institute Facilitator in 2010.

PRESENTER BIOGRAPHIES

Mauna Gauhar is a qualified Clinical Psychologist and a psychotherapist with more than 15 years of experience in the field of mental health. Her skills and education as a Clinical Psychologist have been acquired through formal education, (M.Sc., Applied Psychology, M.Phil. Clinical Psychology) and via placements in public and private health care settings. Being a researcher clinician, Mauna is a scientific practitioner approach towards ameliorating mental health challenges. Major contribution to the field of mental health is her pioneer research on exploring Efficacy of the EMDR Psychotherapy in the Treatment of Depression. The population that she work with mostly includes adults, while on occasion she work with adolescents as well. As a Consultant, Mauna has provided services to Hospitals, Corporate, and Educational sectors.

Michel Silvestre is a clinical psychologist and a family therapist who has been in private practice since 1999. EMDR Europe Accredited Child and Adolescent Trainer, member of the EMDR Europe Child & Adolescent Section Committee, founding member and past-president of EMDR France, he is graduate of the Mental Research Institute, Palo Alto, California and Senior Lecturer at the School of Psychology, Universities of Aix-en-Provence and Metz, France. He wrote several books and articles about psychotrauma and EMDR, and particularly “EMDR for the Next Generation, Healing Children and Families” (2013, Academic Publishing International Limited) and “l’EMDR pour l’enfant traumatisé et sa famille (2015, Dunod), both co-writed with J. Morris-Smith.

Mowadat Hussain Rana is a Chief Editor, Journal of Pakistan Psychiatric Society (JPPS) and Director of Centre for Trauma Research and Psychosocial Interventions, Rawalpindi. Mowadat is member of Faculty of Medical Education, College of Physicians and Surgeons Pakistan (CPSP) and Adjunct Professor of Department of Behavioural Sciences, University of Health Sciences, Lahore. He is Founding Secretary General, EMDR Association, Asia, and a Chairman of The Healing Triad, Pakistan. He is an author of twelve books, and more than fifty national and international publications, he was declared the best University Teacher in the field of Medicine by Higher Education Commission, Pakistan, in2007, and is the recipient of Sitara e Imtiaz (Star of Excellence) of Government of Pakistan.

Mrinalini Purandare is former professor and head department of psychology. She has more than three decades of teaching and research experience at graduate and post graduate level. She is recognized Ph.D. supervisor. She is current president of EMDR Association, India. She is associated with EMDR since early 2000. She was part of large scale trauma intervention work using EMDR with survivors of earthquake in the western parts of India in 2001, with survivors of floods in Srinagar in India in 2016. She coordinated the efforts of training in Kerala that was affected by natural calamity in 2018. She is currently consultant in training and was consulting the trainees of Mumbai, Bangladesh, Kochi. She participated in consultant training held in Shanghai in 2017. She is also board member of EMDR Asia and organizing secretary of EMDR Asia.

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Natalia Seijo is a psychologist and psychotherapist who specializes in eating disorders, dissociation and complex trauma. She is the director of an outpatient clinic which she founded 20 years ago in A Coruña, Spain. She is a EMDR Europe consultant and facilitator. She teaches EMDR and Eating Disorders workshops in the Spanish EMDR association and is a presenter in various international conferences and workshops on eating disorders and Psychosomatic disorders. She is teacher on EDs in the EMDR Master in the UNED university and codirector in the Master of Eating Disorders in the Complutense University of Madrid in Spain .

Nawanant Piyavhatkul is an associated Professor in Department of Psychiatry, Faculty of medicine, Khon Kaen University. She graduated MD qualification in 1990 from Khon Kaen University and got the Diploma of the Thai Medical Board of Psychiatry in 1993. Nawanant started to participated in Trauma Capacity Building Project for Thailand, Cambodia and Indonesia - Mekong I Project, which is the project by Trauma Aid (HAP Germany), and started the training in EMDR therapy since 2009. She was accredited to be an EMDR consultant by EMDR Europe Association in 2016. She has experience in treating various psychiatric disorder using EMDR therapy.

Nawaporn Hirunviwatgul, MD, is a President of The Royal College of Psychiatrist of Thailand and a President of Thai Board of Addiction Psychiatry. She graduated MD qualification in 1985 from Khon Kaen University and got the Diploma of the Thai Medical Board of Psychiatry in 1990. Dr. Nawaporn also earned Certificate Of Child Adolescent Psychiatry from University of Minnesota, Minnesota, USA in 1994 and the Diploma of Child and adolescent Psychiatry in 2001. She completed EMDR basic training In 2019.

Nithya Hariya Mohan is a RCI registered clinical psychologist. She has been working as Assistant Professor of Psychology cum Clinical Psychologist in Chengalpattu Medical College Hospital from 2013 till present. The job profile involves: providing Psychological and neuropsychological assessment, providing psychotherapy and cognitive rehabilitation for people across life span, facilitating group therapy, teaching/ training/ supervising MD Psychiatry students, CRRIs, psychology interns and B.Sc Nursing Students. Nithya is a member of district committee to counsel students affected by ragging / campus problems, menace of alcoholism and to coordinate with mental health programme. She previously worked as clinical neuropsychologist and psychotherapist at The Institute of Neurological Sciences, Voluntary Health Services Medical Centre 2006 till 2013 and she has worked in private practice at Neurokrish from 2006 till present.

Nuzhat-e-Rahman is working as an Assistant Counselling Psychologist at a Drug Addiction Rehabilitation and Mental Hospital in Dhaka. Complete EMDR Basic training under supervision of Hanna Egle, Switzerland and also under guidance of Dr. Sushma Mehrota, Chitra Munshi and Dushyant M Bhadlikar, India. She is studying M.Phil. and her research area is providing psychological intervention to reduce burnout of psychiatric nurses. There are two more unpublished research titled – ‘Correlates of Locus of Control’ and ‘Effect of Counselling on the Parents of Children with Special Needs’. She has participated in 3rd EMDR Asia Conference, Shanghai, 2019.

PRESENTER BIOGRAPHIES

Ohnma Win Pe, M.B, B.S, is a mental health practitioner and is currently working on thesis for her master degree in clinical psychology. For over 10 years, she has been working with NGOs for vulnerable population and, for over three years, providing psychological services to a wide range of clients. She has also established Metanoia Mental Health Services & Resource Center in Yangon, Myanmar. She has completed level 1 and 2 EMDR therapy training. She has also conducted several researches in her career and has special interest in antisocial behaviors, aggression and trauma and how they are interconnected.

Payongsri Khanthikul is a therapist who has worked with abused children for nineteen years. She finished Bachelor Degree of Nursing, Mahidol University in 1993 and Master degree of Mental Health, Chulalongkorn University, in 1998. Currently she is studying in master degree in clinical and community psychology, Ramkhamhaeng University. Payongsri was an assistance researcher on Situational of Child Labour in Thailand for International Labour Organization (ILO) in 2001, anti trafficking measure especially in woman and child for Thailand Criminal Law Institute (TCLI) in 2002 and the evaluation of policies for providing education in child abuse for Office of Education Council in 2010. Her latest presentation was an alternative therapy; Stabilization for child abuse, which was presented in The Royal College of Psychiatrist of Thailand Conference in 2010.

Pingkan C. B. Rumondor is a clinical psychologist and lecturer at Psychology Department, Bina Nusantara University, Jakarta since 2010. Thus, she has almost 9 years of experience as clinical psychologist and lecturer. She is now a Ph.D student at Universitas Indonesia (since 2016), studying couple coping with daily stress. She also provides psychological interventions focused in trauma, romantic relationship and marital issues among young adult. She received certification from EMDR Europe as EMDR therapist (2012) and EMDR therapy consultant (2017). Since 2015 she participated in Mekong Project II (as supervisor in training) and Mekong Project III (as group facilitator/supervisor).

Plaktin OM graduated Master Degree in Trauma Healing and Clinical Psychology, RUPP Cambodia. He has been providing EMDR therapy since 2012 and 2017. He has completed the EMDR supervisor which was certified by EMDR Europe. With the current responsibility as treatment coordinator at Mekong III Project, Plaktin has been providing therapy, EMDR supervision and conducting any trainings related to understanding of mental health and trauma.

Ramaswamy Deepti is a British Trauma Psychotherapist who has worked in a range of services in UK for over 10 years. In the last few years, Deepti has been working overseas working with traumatized populations in Iraq and Syria and within integrated health-mental health projects in India and Myanmar. In addition to clinical practice, Deepti has been a clinical supervisor and trainer for several years. Deepti is a British Association of Cognitive Behavioural Psychotherapists (BABCP) accredited Practitioner and Clinical Supervisor and an EMDR Europe accredited Practitioner and Consultant. Deepti has a special interest in trauma and its related presentations.

PRESENTER BIOGRAPHIES

Rakibul Hasan, MD, is Socio Counselor, Directorate of Students' Welfare, University of Asia Pacific and Assistant Professor & Academic Counselor at Bangladesh University of Professionals (BUP). He provide individual, family, group counseling with adults and adolescents. He has rigorous experience of working with adolescents and adults for more than five years mostly with the issues of academic and work stress, low self-image, adjustment issues, anxiety, depression and trauma.

Rekha Aththidiye currently works as an independent Clinical Psychologist. She conducts therapy sessions in few hospitals and visiting psychologist at SLIIT. Rekha is former course coordinator in the Master of philosophy program at the University of Colombo and currently reading for her PhD. Her passion in psychology is serving the mental health sector and enhance the mental wellbeing of the community. Research interests are centered on mental wellbeing, stress, trauma, depression and Mindfulness Based Interventions. Author of Sinhala manual of Mindfulness Based Cognitive Therapy. She is a qualified teacher trainer for Mindfulness Based Cognitive Therapy (Oxford University) and Mindfulness Based Stress Reduction (University of San Diego).

Rosalie Thomas is a licensed psychologist in Washington State. She has served as Board Member, Treasurer and President of the EMDR International Association and is a founding board member of the EMDR Research Foundation. She currently serves as co-facilitator of the EMDR Global Alliance, and co-chair of the EMDRIA Conference Committee. Dr. Thomas is a Facilitator and Trainer for the Trauma Recovery/ Humanitarian Assistance Programs and is a Facilitator and Regional Trainer for the EMDR Institute and a Trainer of Trainers for EMDR Asia. Dr. Thomas has participated in EMDR therapy trainings throughout the United States and Canada, Bangladesh, Japan, India, Sri Lanka, China and the Philippines. She is the principal author of the EMDR Early Interventions Researcher's Toolkit. Dr. Thomas was recipient of the Francine Shapiro Award in 2007, the Outstanding Service to EMDRIA Award, and, along with Dr. Sushma Mehrotra, was co-recipient of the Trauma Recovery/ Humanitarian Assistance Program's Liz Snyder Award for Humanitarian Service in 2016.

Rusham Rana is a Clinical and Health Psychologist who is an accredited EMDR and CBT practitioner working in Rawalpindi, Pakistan. Rusham is part of the Healing Triad, an organisation that works towards the awareness, prevention and treatment of mental illness in Pakistan. She is the Country Lead of a multi-centred RCT in collaboration with the University of York, that is exploring the effects of Behavioural Activation in patients who have Diabetes with a comorbidity of Depression in India, Pakistan and Bangladesh. She is also working on multiple on-going studies, investigating the effectiveness of EMDR in out-patient clinics in Pakistan.

PRESENTER BIOGRAPHIES

Sandheesh P.T. is working as a Clinical Psychologist in Kerala Health Services for last 13 years and a recruitment board member of Kerala Police Commando Wing from 2017 onwards. He also worked in Pariyaram Medical College, Kannur, Kerala. He has completed his M.Phil (Medical & Social Psychology) from Central Institute of Psychiatry, Ranchi, Jharkhand. He did his PhD in Clinical Psychology from Kerala University. He is an expert in internet addiction management using various psychotherapeutic techniques. He writes a lot of mental health articles in different magazines and has done TV programs in various channels. He was the organizing committee chairman of International Psychology Film Festival "Frames of Mind 06".

Sany Varghese has a doctorate in the area of "academic low achievements". She is an alumni of NIMHANS, Bangalore and Central University of Kerala and has cleared her PG in Psychology from University of Kerala and has cleared UGC exam during her PG studies. Her graduate College honoured her BEST OUT GOING student of UC College Aluva. She has started her career as Clinical Psychology Faculty at MG University. She has officiated as Clinical Psychologist in Department of Health and Family Welfare since 2004. She is Former President of IACPKR and permanent life member of IACP.

Seema Hingorrany has done her Masters in Clinical Psychology from SNDT University, Mumbai, in 2001. Seema is the first Indian who wrote a book on Depression in her country called *Beating the Blues*. She still writes articles for many newspapers and publishes in her country. She has presented research papers in Bali in 2010 on Chronic Limb Pain and EMDR. She has presented in Manila in 2014 on Sexual Abuse and EMDR. She has presented in 2017 in China on Tinnitus and EMDR, all under guidance of Dr. Sushma Mehrotra. Seema has been trained under Dr. Andrew Leeds since 2010 till 2018 (Online Skype Consultation in EMDR). She is currently training under Dr. Robbie Tapia Adler since 2017 till now.

Shaheen Islam is a consultant psychologist and trauma therapist. She has a career at Dhaka University for 31 years. She is the founder chairman of Educational and Counselling Psychology Department and served as the Director of Student Counselling and Guidance for 9 years. She is the founder of HEAL Bangladesh Foundation serving for the wellbeing of underserved. She is the Foundation trainer for Crisis Preparedness of Bangladesh Government and affiliated with NGOs for developing psychosocial support services. She has 54 national and international publications. She is a registered member of BACP and other scientific and professional bodies.

PRESENTER BIOGRAPHIES

Sithu Pe Thien is a President of EMDR Myanmar Association and the trained EMDR Therapist from the Mekong Project, funded by BMZ and Trauma Aid Germany. He has been involved in a number of trauma capacity building projects by introducing the EMDR and trauma therapy, as well as a strong advocate for EMDR therapy in Myanmar since 2011. He introduced the “Trauma Counselor” training in Myanmar, a sister therapy of EMDR for the community outreach projects. He completed his medical degree in 2000 from Institute of Medicine 1, Yangon Myanmar and Master of Social Work in 2011 from the University of Hong Kong. He is currently working as an Assistant Director and Head of Disaster Management and Humanitarian Assistance Division of ASEAN Secretariat and initiated the MHPSS guideline for ASEAN region.

Sonali Tanksale completed her M.A. (Clinical Psychology) from Mumbai University in the year 2011. She has been working as a Clinical Psychologist at “**NIMAI Health Care**” (Bandra, Mumbai), Bombay Cambridge International School and Mindcare Clinic, Andheri West. She has 8 years of experience in the field. She has been working chiefly in the areas of psycho-diagnostics, psychological assessment, and psychotherapy. She has experience of working with individuals with anxiety, depression, schizophrenia, emotional disturbance, and other psychiatric issues in individual and group settings. She is currently pursuing her Ph.D. in the field of Grief and intervention for grief using EMDR. Sonali completed her EMDR Part 2 training in 2014 and has presented on EMDR at the EMDR National conferences. She is currently undergoing facilitator in training.

Soontaree Srikosai, received her doctorate degree in Nursing Science in 2013 from Chiang Mai University, Chiang Mai, Thailand. She currently work as a Head Nurse of Child and Adolescent Psychiatric Ward at Rajanagarindra Institute of Child Development. She is also an Advanced Practice Nurse and Psychosocial Therapist.

Sophearith Phul has finished Master of Arts in Clinical Psychology and Trauma Health from Royal University of Phnom Penh, Cambodia in 2016. Since 2015 He has provided treatment in EMDR to clients in Cambodia. Sophearith has been approved as Consultant by EMDR Europe in 2017.

Supanee Siri-apawiwat received her bachelor’s degree in 1993 from Chiang Mai University and worked as an assistant researcher at the Social Research Institute, CMU. During 1994–2006 she had worked as clinical psychologist at Chiangrai Hospital and Krabi Hospital. In 2004 she experienced working with the Tsunami survivors in Krabi and Pang-Nga. In 2006 until now Supanee has been working at Lampang Hospital and work in the area of psychotherapy, behaviour therapy, psychological assessment. She also work as a senior psychological supervisor and a guest lecturer for Chiang Mai University Medical School and Nursing School. From 2009 to present Supanee has been trained under Dr Derek Farrell to be an EMDR practitioner and has been certified as EMDR consultant. Currently she is in the process of completing EMDR Trainer course through the Mekong project.

PRESENTER BIOGRAPHIES

Sushma Mehrotra with M.Phil and PhD in Clinical Psychology, she was associated as a full time faculty member at SNTD Women's University from 1990-2004. Dr. Sushma Mehrotra has over 18 years of professional experience and expertise at policy and intervention level in program planning and design, implementation, evaluation of developmental projects. She has worked for the National Programs for HIV prevention in India as well as in Timor Leste and associated closely with WHO (South East Asia Regional Office), UNICEF, The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), International Planned Parenthood Federation (IPPF), Bill and Melinda Gates Foundation, Grant Management Solutions (GMS) USA, CARE International. Some of the short term consultancies included for PSI Myanmar, Save the Children Bangladesh, Dohrabji Tata Trust India and Engender Health. She has been the founder president of EMDR association of Asia (2010-2017). She is also an International trainer for EMDR and offers voluntary services to Trauma Recovery/Humanitarian Assistance Program (HAP), USA. Currently she is Chair of Training, Standards & Accreditation Committee of EMDR Asia and leading the team of EMDR Asia Trainers in the process of establishing EMDR Asia Therapy training, standards and accreditation as well as to initiate Manual and curriculum development based on international standards in collaboration with other international teams. She is a well-established international Asian trainer for EMDR training and is Founder President of EMDR India (2013-2017). She is being invited to Philippines, Sri Lanka, Uganda, Afghanistan, Indonesia, China and Bangladesh to train mental health professionals for EMDR, besides training EMDR therapy in India. She is also past President of Bombay Psychological Association. She is also a board member of Durbar Mahila Samakhya Committee (DMSC), Global Initiative of Stress and Trauma (GIST-T), The Global Working Group of Trauma Recovery/EMDR Humanitarian Assistance Program, EMDR Global Alliance and Initiative Change Collaborative (ICCo). She is practicing as an independent Clinical Psychologist currently and has her own private practice.

Tara de Thouars is a Clinical Psychologist from University of Indonesia. She has experiences of working in a mental hospital and eating disorder clinic for 11 years. She fulfilled the EMDR level 1 and 2 in 2014. Since then she practicing EMDR therapy for her patients and now she is on training to be EMDR supervisor. Her speciality is dealing with patients with mental illness such as depression, obsessive compulsive disorder and body dysmorphic disorder.

Tri Iswardani Sadatun, MSc, Psy, is Clinical Psychologist and Senior Lecturer in Faculty of Psychology, University of Indonesia. EMDR Europe Accredited Trainer, chair of HAP Asia, past vice president of EMDR Indonesia, founding member and past treasurer of EMDR Asia. Her current research focuses on trauma focused interventions and trauma-based addiction. She has been in private practice since 1992 and serves as EMDR practitioners since 2007, has several structural positions in the Indonesian Psychological Association as Chairperson of the Community Service Division and Competency Development and past chairperson of Community Service and Business Development. Her expertise on trauma recovery is well known in Indonesia and often seconded by National Disaster Response Agency, National Narcotic Agency, National Counter-terrorism Agency, and Disaster Victim Identification (DVI), in critical situation, including airplane crash incident, accident at work, terrorism and natural disaster.

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Tri Swasono Hadi is a clinical psychologist based in Jakarta (Indonesia), practicing for the last 13 years. He completed level 1 & 2 of EMDR training on 2008, and received accreditation as EMDR Europe Approved Consultant on 2013. Currently he is undergoing the trainer trainings. As Consultant, he has conducted EMDR supervisions in various Asia countries such as Indonesia, Thailand, Vietnam, Myanmar and Cambodia. Aside doing private practice, he has been working together with various organization and agency in the areas of human trafficking, refugee, disaster, terrorism, terminal illness, gender based violence, poverty and employee assistance programs. Currently he serves as the President of EMDR Indonesia Association.

Usha Verma Srivastava is a Varanasi based clinical psychologist, practicing for last 17 years. She has received Amit Bhattacharya Bursary from EMDR Institute UK & Ireland, For EMDR level-1 training at EMDR Institute, London in 2005. She received International Fellowship in Neuropsychology from UK in 2018, She completed her EMDR level II Training from Mumbai in 2009. Presently she is undergoing trainer's training. She practices EMDR quite frequently while treating patients at her clinic Samvedna: Centre for Neuropsychological Rehabilitation and Mental Well-being. She is consultant clinical psychologist at CG & Center, Banaras Hindu University, also working as consultant clinical psychologist at Surya multi speciality hospital, Varanasi.

Ute Sodemann was born during the Second World War in Southwestern Germany. From 1960 to 1967 she studied sociology and political science at Freiburg University, Thai Language and SE-Asian Studies at Chulalongkorn University in Bangkok and SE-Asian Studies at the London School of Oriental and African Studies. After her Ph.D in Freiburg she became a lecturer at the South Asia Institute in Heidelberg and took part in an interdisciplinary research project in Thailand in the early 70ies. In 1974 she left her academic career and joined terre des hommes Germany, a Children's aid organisation operating worldwide. From 1977 she was for 16 years tdh's Regional Coordinator for South America based in Bogota/Colombia and subsequently for another 10 years tdh Program Manager at their headquarter in Germany until her retirement in 2003. That is when Ute Sodemann embarked on another long venture and became involved in trauma therapy training programs. An assessment of the Post-Tsunami-situation in Aceh/Indonesia in 2006 was followed from 2007 to 2010 by the first extensive EMDR training project there with the support of trainers and supervisors from Germany. Ute Sodemann had become a member of Trauma Aid Germany in 2005 and became President of Trauma Aid in 2010. The Aceh project was so successful in demonstrating the effectiveness of EMDR that it was followed from 2010 onwards by three Mekong EMDR training projects in Indonesia, Cambodia, Thailand and later Myanmar, each lasting 3 years. In between another training project under the auspices of Trauma Aid Germany was carried out in Haiti and in 2008 a new package of EMDR and TPSS+ training courses for social workers in a refugee context was launched and is being monitored and evaluated in Northern Iraq.

PRESENTER BIOGRAPHIES

Walid Abdul-Hamid is a Consultant Psychiatrist with 30 years experience in psychiatry and who previously worked at North Essex Partnership NHS Foundation Trust and Barts Hospital, London in the UK. Dr. Walid Abdul-Hamid has also held a visiting consultant post at Priory UK and Bart Hospital in London. He uses his long clinical experiences and his wide and deep knowledge of most up-to-date psychiatric research to practice evidence-based mental health care. Dr. Walid Abdul-Hamid has special interest in trauma psychiatry and he has been using EMDR in the treatment of psychological trauma in veteran and non veteran patients. He has been using EMDR and psychiatric medication in the treatment of the causes rather than the symptoms of psychiatric conditions. He has achieved the position of EMDR Europe Consultant and supervisor and trainer in training with the EMDR Europe Association and Trauma Aid Europe.

Yulia Direzkia, M.Sc., Clin. Psy is a Clinical Psychologist of the Aceh Psychiatric Hospital, Banda Aceh, Indonesia. She is also an EMDR Europe Accredited Consultant. She has experienced as an EMDR therapist since 2007 in the Aceh Project, and continuously being actively contributed in the Mekong Project I, II and III at the Southeast Asia region as an EMDR consultant and trainer in training. She is also the leader of the Clinical Psychologist Association – Aceh region. Active involvement in the field of mental health since 2000 has led her to become an invited speaker in Australia and Norway.

USEFUL INFORMATION

REGISTRATION FEES

Registration Fees				
Categories	Pre-conference	Conference Fee		
		Early Bird (before 1 st Sep. 2019)	Regular	On site
A	50 USD	160 USD	210 USD	235 USD
B	50 USD	260 USD	310 USD	360 USD
Evening Cruise	40 USD	40 USD	40 USD	N/A

Category A: East European and South American countries, and Asian countries not listed as Category B

Category B: All European, UK, USA, Canada, Australia, Hong Kong, Japan, Singapore, and South Korea

Evening Cruise: Cruising along the Chao Phraya River, Saturday 4th January – 40 USD per person (Extra charge)

For Thai Citizen				
Categories	Pre-conference	Conference Fee		
		Early Bird (before 1 st Sep. 2019)	Regular	On site
A	1,560.00 THB	4,940.00 THB	6,500.00 THB	7,285 THB
Evening Cruise	1,240.00 THB	1,240.00 THB	1,240.00 THB	N/A

PAYMENT METHODS

Please make the wire transfer to the account below:

Account Name: EMDR Association Thailand
Bank Account: 412-024932-6
Swift Code: SICOTHBK
Beneficiary's Bank Name: Siam Commercial Bank Public Company Limited
Branch: King Chulalongkorn Memorial Hospital
Address: 1873 Rama 4 Rd., Pathumwan District, Bangkok,
Zip code 10330, Thailand

Reminder, Please keep your payment slip as payment evidence

USEFUL INFORMATION

Conference Venue

Bhumisiri-Manglanusorn Building, Floor 12 (Registration Floor 13)

King Chulalongkorn Memorial Hospital

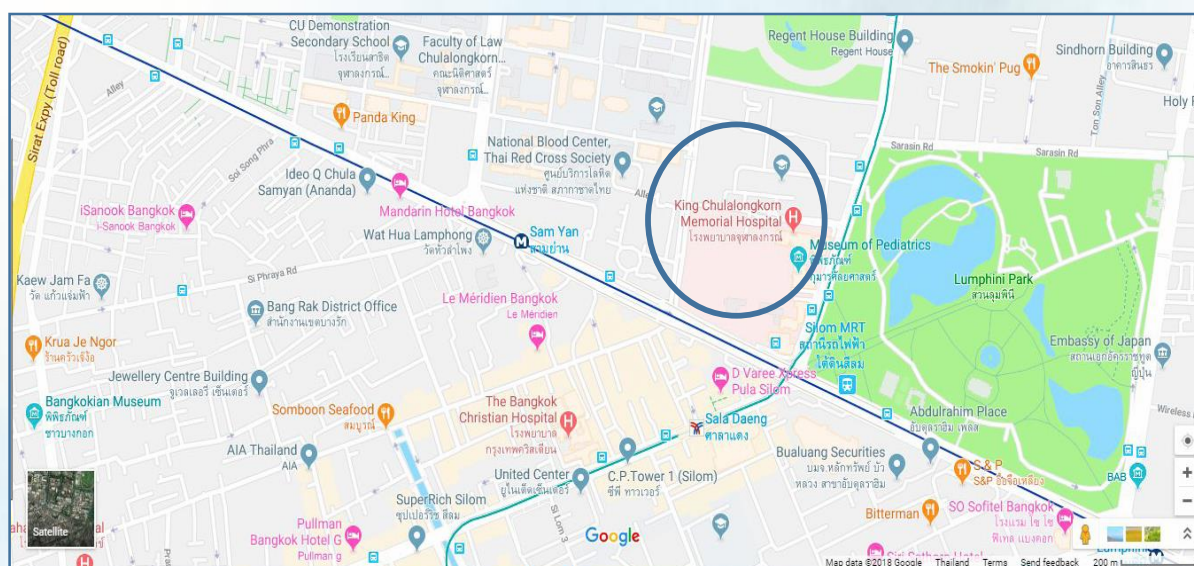
1873 Rama 4 Rd., Pathumwan,

Bangkok, Thailand 10330

Contact Persons : (+66) 95 646 5997 (Any) Waranya Thavankijdumrong

Email: emdr.asiaconference2020@gmail.com

Transportation to Conference Venue



- **Suvarnabhumi International Airport** – is 33.6 km away from King Chulalongkorn Memorial Hospital. You can get to the hospital by train, bus, taxi, or shuttle.

Airport Rail Link operates a train from Suvarnabhumi Airport (BKK) to the hospital every 15 minutes. Airport Rail Link will stop at Phaya Thai Station. You have to change to **BTS Skytrain** and access to Saladeang Station, is 850 m. away from the hospital. You can access the hospital via skywalk across intersection (Rama4 Rd. and Silom Rd.)

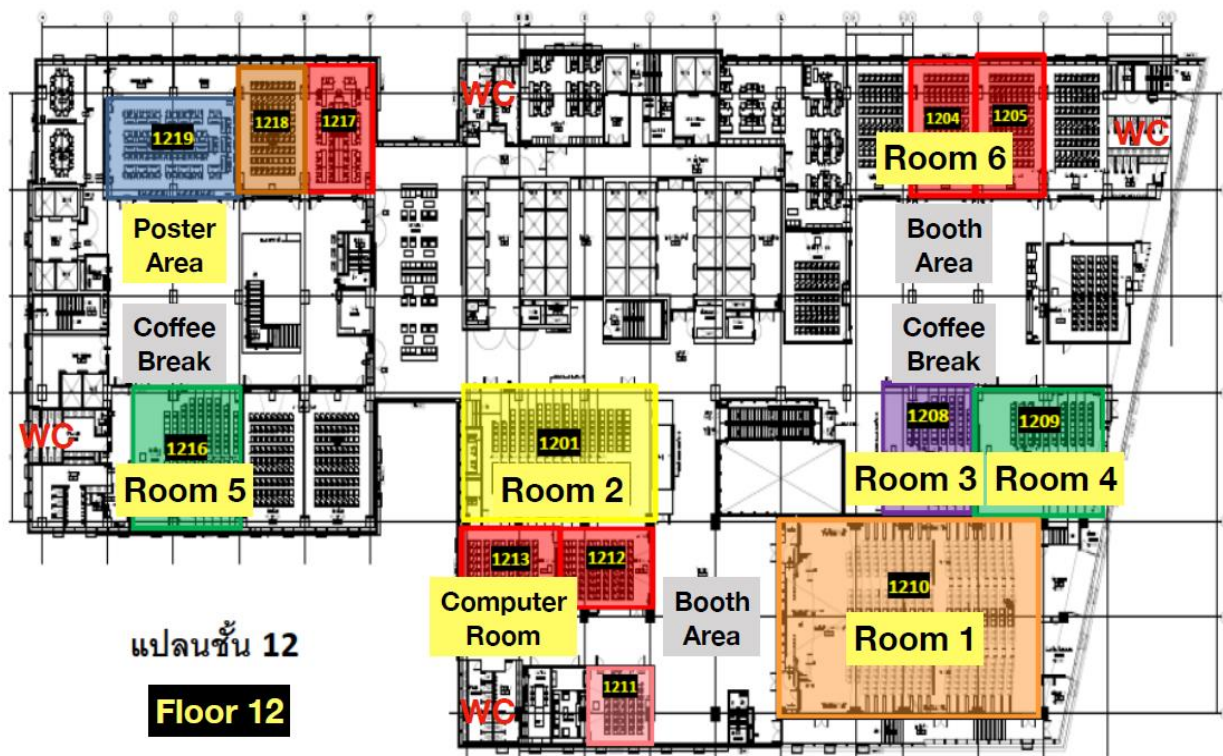
Alternatively, **Airport LimoBus Express** operates a bus from Suvarnabhumi Airport (BKK) to the Hospital every 30 minutes. Tickets cost ฿180 and the journey takes 1 hour.

- **Donmueng Airport** – is 28.4 km away from the hospital. There are several ways to get to the hospital by Subway, Airport Bus, BTS Skytrain, or taxi.

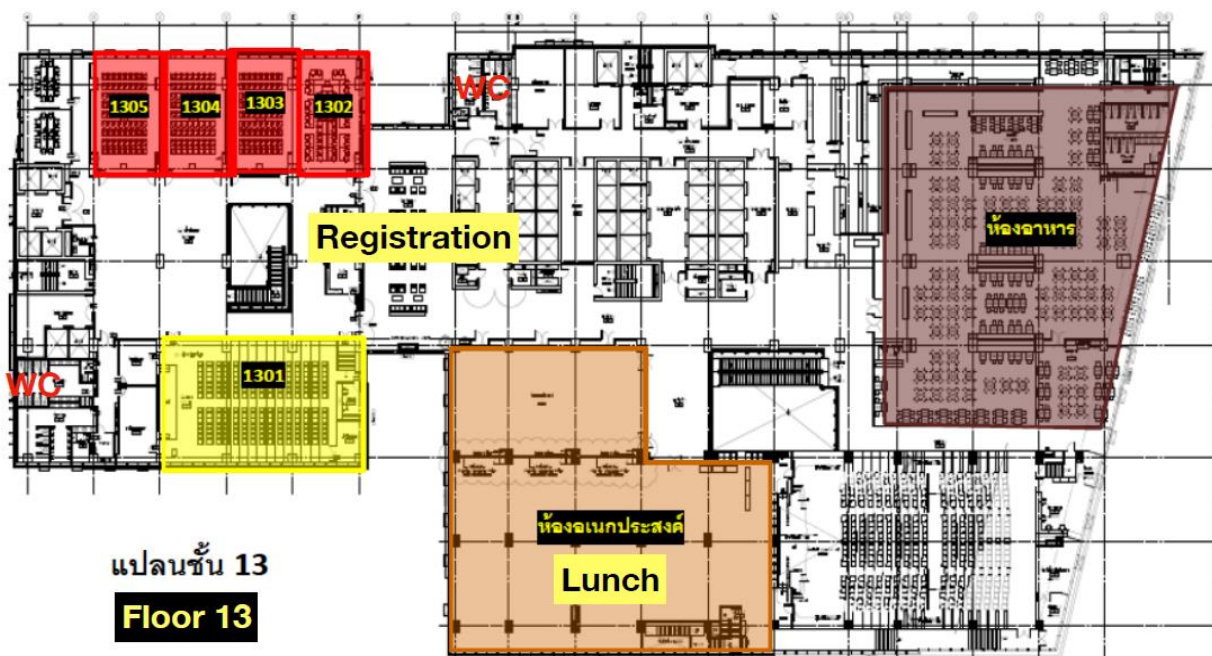
Take the Airport Bus, A3 from Don Mueang Airport to Suan Lumpini opposite to King Chulalongkorn Memorial Hospital. The price is THB 50 per person, and it takes about 60 minutes.

FLOOR PLAN (3-5 January 2020)

Preconference & EMDR Asia Conference 3 - 5 January 2020

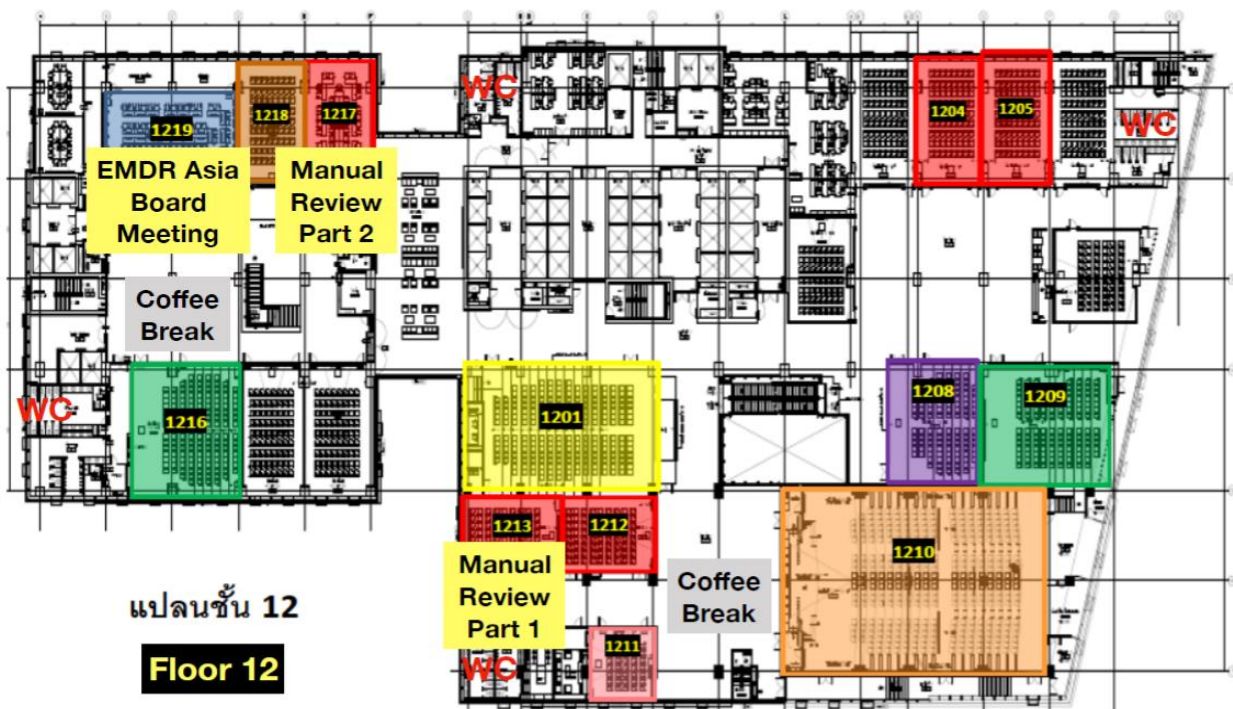


Preconference & EMDR Asia Conference 3 - 5 January 2020

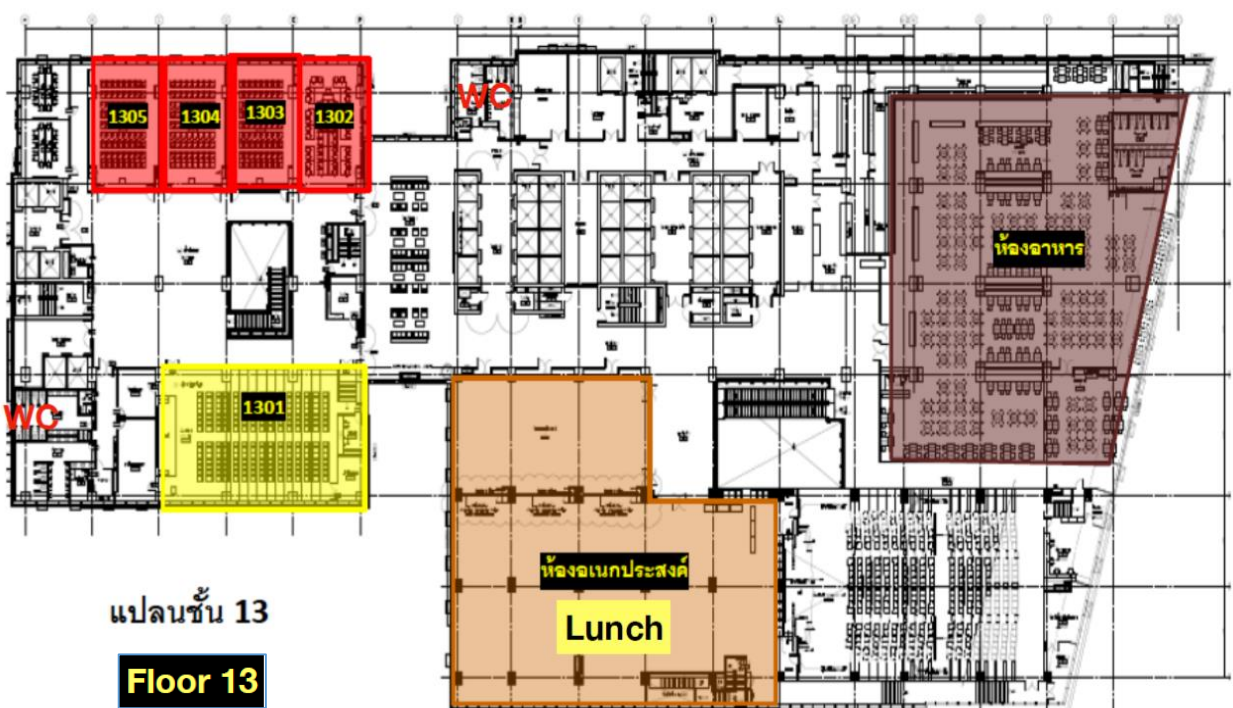


FLOOR PLAN (6 January 2020)

EMDR Asia Board Meeting & Manual Review Part 1 & 2 6 January 2020

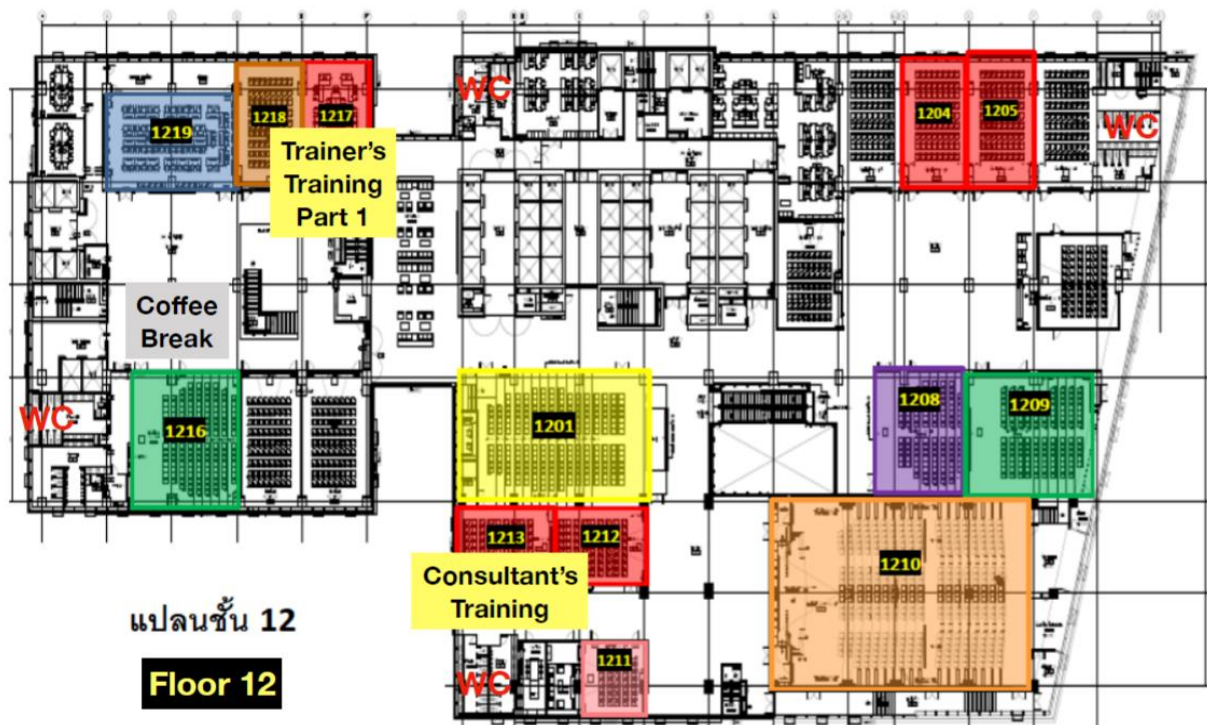


EMDR Asia Board Meeting & Manual Review Part 1 & 2 6 January 2020



FLOOR PLAN (7-8 January 2020)

EMDR Consultant's & Trainer's Training Part 1 & 2 7 - 8 January 2020



EMDR Consultant's & Trainer's Training Part 1 & 2 7 - 8 January 2020

