

What's Happening Now...

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EMDR Humanitarian Assistance Programs

Winter 2009

Reaching UP and Turning on the HEAT

HAP's Board of Directors, meeting last Spring, took a long look ahead – to 2014 – and endorsed a strategic plan that calls for growth in the number of clinicians we train and the general scale of our work. It's a plan that depends on increases in the number of volunteers, the size of donations and revenues and the growth of grants. We think the goals for **growth** are reachable, but we also think they are less important than the **directions** we are planning to travel.

Reaching UP and **Turning on the HEAT** are the two slogans that sum up those directions. UP means "Underserved

Populations" – people who experience above average traumatization, or who live in places where access to clinicians is rare, or where clinicians have few tools to treat trauma or other conditions that are responsive to EMDR. Turning on the "HEAT" means "HAP Educating About Trauma".

Teaching EMDR to clinicians has always been part of our work, but we realize that getting help to UP's takes more than training clinicians. People don't always realize that they or their loved ones have a treatable condition. Governments and insurance companies don't always think through the implica-

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EMDR in Kenya Reaches New Milestones

November saw multiple milestones reached in Nairobi, where HAP has been supporting a rapidly developing EMDR professional community.

Thirty-eight participants took Part I EMDR training, including several clinicians from Senegal, Uganda, Ethiopia and Liberia.

Twenty-five clinicians completed Part II, and fourteen previously trained clinicians attended a specialty workshop on EMDR with children. Nearly a hundred clinicians have now been trained in EMDR in Kenya, with others hoping to join them in future training workshops.

Beyond the simple numbers trained, Kenya is achieving other development goals. An EMDR Kenya association has evolved and is defining standards for training in the African context to ensure that EMDR adapts well in this setting. HAP volunteers and local clinicians are working on a study of "translation"

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Minneapolis TRN Breaks New Ground



Minneapolis EMDR clinicians, coming together recently in a Trauma Recovery Network (TRN), have just completed a unique initiative in their community. Two years ago, when a local disaster affected many Latino children, it became apparent that there were no Spanish speaking EMDR clinicians available.

Reaching out to several cultural minority communities that have high incidence of trauma but no local access to EMDR therapy through their own community agencies, the TRN sponsored a large-scale Part I training through HAP that gathered in more than 60 participants from five major community cultural groups.

Elaine Wynne (Minneapolis TRN Coordinator) and Sue Evans (Minneapolis EMDRIA Regional Coordinator) set up a committee to make this training happen.

Co-sponsors with the local HAP TRN and Minnesota Regional EMDRIA were African American Family Services, the Indian Health Board, Children's Hospitals and Clinics of Minnesota (especially Pain and Palliative Care), Wilder Children and Family Services, and Salud Wellness Center.

This training appealed especially to therapists who had language and cultural competences in addition to English

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EMDR HAP Meets the Intellectual and Developmental Disability (ID/DD) Community

In November, Jan Schaad, LCSW, representing EMDR HAP, was a panelist at the 2009 Annual Convention of The Arc, one of the nation's leading advocacy and service organizations for people with intellectual and developmental disabilities. Jan spoke about her work with people with ID/DD for over 25 years, and her success in using EMDR with this population. As a result of her talk The Arc has asked her to write a fact sheet on Effective Trauma Treatment, for inclusion in a series of Arc fact sheets relating to Intellectual and Developmental Disabilities.

Jan's presentation was part of a continuing HAP project to reach underserved people and educate the public about trauma. People with intellectual and developmental disabilities experience high rates of traumatization and

generally do not get access to treatment. Earlier this year, Lou Ann Baylock, another EMDR clinician with extensive experience treating ID clients, taught a HAP Traumatology and Stabilization workshop for ID/DD provider agency staff in Massachusetts. Administrators, supervisors and direct support personnel reported that this training enabled them to approach their clients with sensitivity to trauma and its effects, to work more effectively with them, and overall, to do their jobs better.

Gail Ford, HAP's Associate Director, coordinates our effort to seek out partners and educate administrators, advocates, caregivers, and direct support staff. She has had conversations with national leaders in the ID/DD field about the effectiveness of EMDR with

this population and the importance of training direct support staff and family caregivers to be able to recognize the symptoms of traumatization and seek appropriate treatment, including EMDR.

Gail also represents HAP on the Community Advisory Council of the Connecticut University Center for Excellence in Developmental Disabilities (UCEDD).

HAP aims to submit presentations to other national conferences, develop pilot and demonstration projects with local organizations that support our goal, and train clinicians who work with people with ID/DD to use EMDR. Volunteers and EMDR clinicians interested in becoming part of this project are invited to contact Gail at gford@emdrhap.org.

EMDR in Kenya Reaches New Milestones (Continued from page 1)

issues to ensure that the protocol is comprehensible in local languages.

Also during this visit, HAP trainers met with eight previously trained Kenyans who began preparing as consultant/facilitators, the first step in making the new EMDR community "self-sustaining." Additionally, EMDR Kenya leaders and HAP volunteers joined university faculty in Nairobi to consider establishment of a trauma studies track in the professional clinical education programs at the university.

This highly productive HAP visit to Nairobi was made possible through the voluntary efforts of HAP trainers Reyhana Seedat, Michael Keller, and Robbie Adler-Tapia, and facilitator Braam Beetge. Funding came from the generous support of HAP donors to the Africa and Middle East fund. Local expenses in Nairobi were also defrayed

by local fundraising among participants. We will return to Nairobi as soon as we can cover the costs of a future training.

Ethiopia Joins Countries with EMDR Clinicians

One week before her workshop in Kenya in November, HAP trainer Reyhana Seedat joined facilitators Dorothy Ashman and Catherine McLaughlin in Addis Ababa where 27 clinicians completed a Part I EMDR workshop.

This event culminated months of effort by Dorothy Ashman, who initially approached HAP about a project to support AIDS orphanages there. Since then, she has visited to teach traumatology and stabilization workshops, mobilized friends and neighbors in eastern Pennsylvania to donate funds for EMDR development in Addis Ababa,

and finally joined the first EMDR training team. After the training workshop, Dorothy shifted into consultant mode and visited participants where they worked for the next two weeks.

Ethiopia's EMDR engagement is still at an early stage. Though the country is more than twice the size of Kenya, where EMDR has grown quickly, Ethiopia has fewer well-trained clinicians available for basic EMDR training. HAP is therefore pleased that several faculty members at the Addis Ababa University are interested in creating a trauma studies track for students in their clinical education programs, culminating in EMDR training through HAP. John Messer, a visiting faculty member with EMDR training, is helping with coordination.

Building a strong EMDR community in Ethiopia is both needed and possible, with continued support from donors. HAP's Africa and Middle East Fund supports work in Ethiopia.

What's HAPpening Now? HAP needs your help to update our "What's HAPpening Now" mailing list. If we are sending you more than one copy of our newsletter — perhaps to two different addresses — please let us know. We can then update our mailing list and maybe even save a tree. Please email us about duplicate mailings at hapstore@emdrhap.org. Thank you.

“Welcome Back Veterans” Project Moves Ahead

HAP’s project to expand treatment options for veterans with combat trauma has reached its next level. Funded by the McCormick Foundation and Major League Baseball, the project aims to serve at least 200 veterans and their families, while demonstrating that civilian clinical agencies can effectively treat combat trauma.

To date, coordinator Dr. E.C. Hurley has trained over 50 clinicians in EMDR and combat trauma, at three participating agencies – Pastoral Institute, in Columbus GA, near Ft. Benning; Palomar Family Counseling Services in Escondido, CA near Camp Pendleton, and Centerstone in Nashville, TN, near Ft. Campbell.

For the past month, clinicians have been submitting recordings of their case work for fidelity checks. In the next phase of the project, they will serve veterans deployed since 9/11 who are diagnosed with PTSD. Grant funds will cover client fees for up to 12 EMDR sessions and up to 5 family therapy sessions if the client’s own insurance does not cover. HAP will also provide specialty training on treating combat trauma in late January to already-trained EMDR clinicians in central Massachusetts.

HAP is collecting assessment data on treatment outcomes and hopes that this project will be a springboard to training more agencies that already use EMDR in the special issues that can apply in combat trauma.

Fidelity Checks: Now YOU Can Help Advance Research

Dr. Kate Wheeler needs your help, and Francine Shapiro hopes you will help her. Dr. Shapiro chose her plenary address at the EMDR International Association this year to underscore both the importance of research in advancing EMDR in its first 20 years, and also the need to expand research efforts now, to test promising reports of EMDR’s efficacy for diagnoses other than trauma.

If you are a certified EMDR clinician who never considered yourself a key player in clinical research, here is your chance. Good research needs clinicians willing to record and report their therapeutic practice. It also needs observers – “fidelity checkers” – to determine if the treatment observed conformed to the protocol for EMDR. Deborah Korn recently constructed a rating guide for fidelity checkers, and Kate Wheeler, at Fairfield University in Connecticut, is now seeking to test the guide for “inter-rater reliability.” To do that she needs certified clinician volunteers to record a clinical case, reflecting all eight phases of EMDR, and send it to her. (Then other volunteer fidelity checkers will apply the rating guide to see if the recording generates consistent ratings from different raters.)

If you would like to help build a better research tool for EMDR, by taping and submitting one of your cases, contact Kate Wheeler (kwheeler@mail.fairfield.edu). You could be making a real contribution to the next round of EMDR research.

Iraqi Clinicians Will Finish Basic Training

Palestinian EMDR trainers last year brought EMDR basic training Part I to Amman Jordan for a group of Iraqi clinicians from Kirkuk. They have reported excellent results with EMDR among civilians inside Iraq. In a few weeks they are scheduled to return to Amman for their Part II training, made possible by a generous contribution from a US clinician.

Meanwhile Palestinian clinicians at the East Jerusalem YMCA clinic in Beit Sahour hosted a conference on EMDR Nov. 23-24 with 280 participants from many Arab countries, as well as the US, Europe, Australia, Africa and Israel. Clinicians in Gaza were able to participate by video conference. HAP trainer Mona Zaghrout reported on research at six sites and 36 cases in the West Bank.

Her next stop is Beirut, as HAP trainers from the West Bank extend the outreach of EMDR to the Arab world.

Minneapolis TRN Breaks New Ground

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and mainstream. Ana Gomez was the HAP trainer with facilitation from Jill Strunk, Linda Ruf, Katie Murray, Susan Arland, Sue Evans and Susan Schaefer.

Elaine stated, "We all felt honored to be a part of this training, and people who volunteered did what they promised."

Trauma Recovery Networks are regional groups of HAP volunteers who can serve as a “ready reserve” to address clinical needs if disaster strikes. TRN members in a community share a vision and choose among a “menu” of

possible projects: preparing for local disaster (or disaster elsewhere), engaging in professional development, participating in local and TRN networking, and educating the public on trauma and EMDR.

The Minneapolis TRN took a creative approach to this work and is continuing to support their newly trained colleagues with consultation and plans for a Part II training in the Spring.

For more information on TRNs, visit the [information page on TRNs](#) on the HAP website, or the [volunteer information page](#) (once you are there, scroll down to read about TRN clinicians, TRN consultants and TRN coordinators).

If you would like TRN brochures or a copy of a brief PowerPoint on TRNs, drop an email to Conrad Sienkiewicz (Conrads@emdrhap.org).

Turning on the HEAT at the Local Rotary...

One way to help HAP Educate About Trauma is for knowledgeable EMDR clinicians to go to lunch at their local Rotary Club (or Kiwanis or Lions for that matter).

Local leaders in many different fields attend these club meetings and look forward to brief informative presentations by guest speakers.

HAP Volunteer Coordinator Conrad Sienkiewicz is a proud Rotarian and is inviting interested EMDR clinicians to contact him (conrads@emdrhap.org) to consider making a brief informal presentation in their own community, about EMDR or trauma generally. Several HAP supporters have called him already. It's a great project for local TRN groups too.

Reaching UP and Turning on the HEAT

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tions of ignoring trauma or weigh the options for treating it. So turning on the HEAT involves putting information in people's hands by meeting them where they work, reaching them in the media, talking to them in their communities.

In the current issue of **What's Happening Now** you will find many articles that reflect our goals for the next five years. In Kenya and Ethiopia, but also in Minneapolis, at a national conference on Intellectual Disability, and in the three communities where we are working to expand veterans' services, HAP is reaching out to underserved populations, not to mention in the over forty communities in 26 states where we brought basic EMDR training this year.

And wherever we go, we are looking for the opportunities to educate about trauma. Maybe in Kenya and Ethiopia, there will soon be a trauma studies

track in the major university clinical education programs.

Maybe families and agencies caring for ID clients will discover that trauma is a widespread and treatable condition. These possibilities have become more likely already. They are first fruits of HAP's new strategies.

HAP STORE Latest Editions

Many excellent professional books on aspects of EMDR practice have appeared in recent years. The HAP Store is now able to make a growing number of them available for online or mail order purchase. Here are recent additions to our much longer list:

- Ana Gomez— The Thoughts Kit for Kids
- Mark Grant—Change Your Brain, Change Your Pain, Manual and CD

- Mark Grant—3rd Revised Edition Pain Control with EMDR
- Millie Grenough—Oasis in the Overwhelm, :60 Strategies for Balance (English or Spanish)
- Barbara Hensley—An EMDR Primer, From Practicum to Practice
- Marilyn Lubet—EMDR Scripted Protocols, Special Populations
- Marilyn Lubet—EMDR Scripted Protocols, Basic and Special Situations

In support of excellent clinical practice, HAP has always sold EMDR focused literature through the HAP Store. Your purchase from HAP aids our mission.

Go to: www.emdrhap.org

Click on "HAP Store"



We've Had a Moving Experience



EMDR HAP has relocated within Hamden, CT, our "world headquarters" city.

After seven years on the second floor of the Congregational Church community house, within easy listening distance of the nursery school below, and without

an elevator, we finally also ran out of room, as the HAP staff added Volunteer Coordinator Conrad Sienkiewicz. (Thanks Conrad.)

Our new digs are roomier and there is an elevator, but we miss our old neighbors.

Our new mailing address is →

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