EMDR Europe 2016 Den Hague, Netherlands

Trauma Capacity Building

Projects: Myanmar,

Cambodia & Iraq



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Vice-President EMDR Europe
President Trauma Aid Europe







Mental Health in Iraq

Iraqis very low access to mental health services is worsening problem of already critical proportions. The prevalence trauma-related disorders requires a concerted effort from the Iraqi government and international community to help rebuild mental health services in the war-torn country (Iraqi Psychiatrist - Al -Uzri, 2013)



Trauma Capacity Building

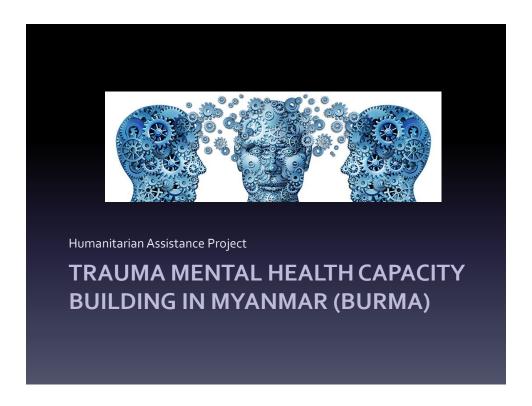
- 1. Individual, Family and Community centered
- 2. Community based
- 3. Culturally sensitive and culturally competent
- 4. Developmentally appropriate.
- 5. Participants as partners with staff
- 6. Empowerment and strengths based approaches
- 7. Trauma competence

Trauma Capacity

Trauma = EMDR Therapy

 EMDR Therapy is the predominant paradigm underpinned by the Adaptive Information Processing (AIP)
 Framework Trauma > EMDR Therapy

- AIP is more comprehensive
- EMDR Therapy is part paradigm alongside other interventions
- Capacity building
- Task shifting





Myanmar

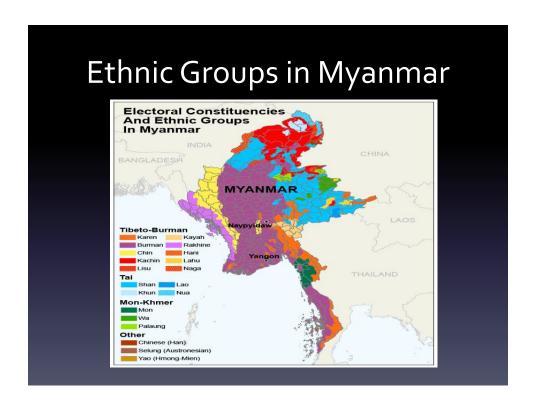
- 1962 2013 Military Rule
- Once one of Asia's wealthiest nations – now one of the poorest
- This is despite having an abundance of natural resources: oil, gas, hydropower etc.



Myanmar

- Country which contains significant ethnic tensions and separatist rebellions
- Conflict between Buddhist and Islamic groups
- One of the least economically developed countries in the world – suffered stagnation, isolation and mismanagement







Health Expenditure [% GDP] (World Bank, 2014)

Country	% GDP
Afghanistan	8.3
Austria	11.0
Brazil	9.5
Canada	10.7
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Myanmar's Health System

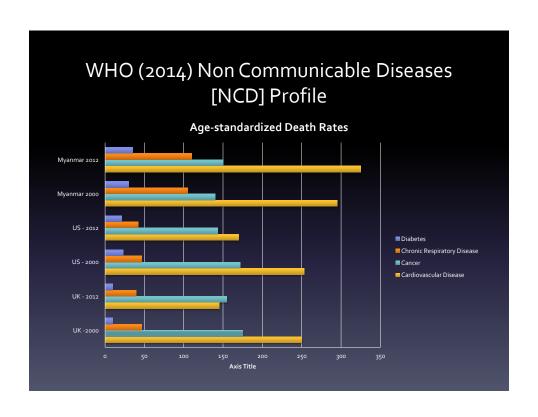
- Dramatic shift politically since 2010
 - Constitution
 - Liberalisation of some political systems
 - Democratic elections (?)
 - Overall Healthcare System Performance
 - -190/190 (WHO, 2014)



Healthcare Issues - Myanmar

- Malaria & Drug Resistant Malaria
- Tuberculosis (TB) and Drug Resistant TB
 - 18.4% Over-weight
 - 48% Smoke
 - 51% Chew Tabaco
 - 19% Heavy episodic drinkers
- Trauma accounts for 27% Non-communicable Diseases (NCD)
 - Cardiovascular disease, cancer, diabetes, chronic lung disease
 - Between age 30 70 Probability of death = 24%
 - USA = 14%
 - IJK = 12%





Mental Health & Myanmar (WHO-AIMS Report - 2006)

- Mental Health expenditure approximately 0.3% of total healthcare expenditure
- Hospitals take approximately 87%
- 25 Outpatient units
- 17 community based psychiatric inpatient units
- Human resources
 - 89 psychiatrists
 - 4 Psychologists



Most common Treatment Approaches

- Antipsychotics
- Antidepressants
- Mood stabilisers
- Anxiolytics
- Anti-epileptics



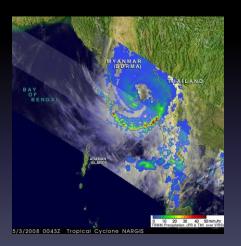
Mental Health Training

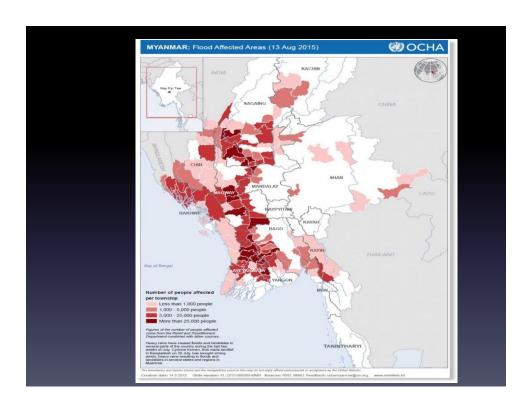
- 1% training for medical doctors relates to mental health
- Refresher trainers consist of 2 days 1/3
 - Pharmacology
 - Psychosocial
 - Child and Adolescent



Mental Health Care in Myanmar

- Natural Disasters: Cyclones, Floods, Tsunami, Landslides
 - Cyclone Nagis (2008)
 - 140,000 died
 - 2.4 million affected
- Human Disasters: War on minority groups (50 years),
 Massacres, Violence, Crime, RTC, HIV, etc.
- Corruption & Mismanagement





Developing Mekong Project II

- Establishment of Trauma Capacity Building Services from Myanmar & Cambodia
- Aim: Mental Health (Trauma) Focussed capacity building
- History Mekong Project I
 - Thailand, Indonesia, Cambodia,

Field Visit – Yangon (2012)

- Government representatives, NGO organisations, Academics
- Screening/ Assessment Tool –
 Children's PTSD Checklist [N=400 children]



Mekong II Field Study Data – Youth Self-Report (YSR) & Child Behaviour Checklist (CBCL) Field Data [N=400]

Sub-scales	%
Anxious/ Depressed	56
Withdrawn/ Depressed	46
Somatic Complaints	16
Social Problems	45
Thought Problems	15
Attention Problems	16
Rule-breaking Problems	6
Aggressive Behaviours	18
Internalising	73
Externalising	28
TOTAL	53

Project Details

- Application submitted to Terre des Hommes Deutschland =
 €1.2 million
- Project March 2015 March 2017
- Myanmar Cambodia
- Demonstration on impact
- Host Country Thailand & Cambodia
- 32 Participants (Myanmar)
 - >50% employed by Mekong Project II



Project Stakeholders

- Trauma Aid Germany
- University of Worcester (UK)
- Trauma Aid Europe (formerly EMDR Europe HAP)
- EMDR National Associations
 - Thailand, Indonesia, Cambodia







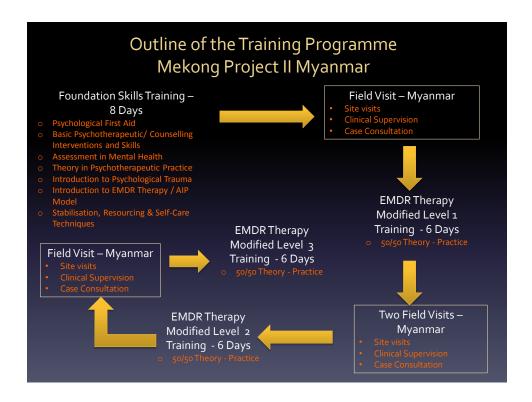
Mekong Project II - Training Team

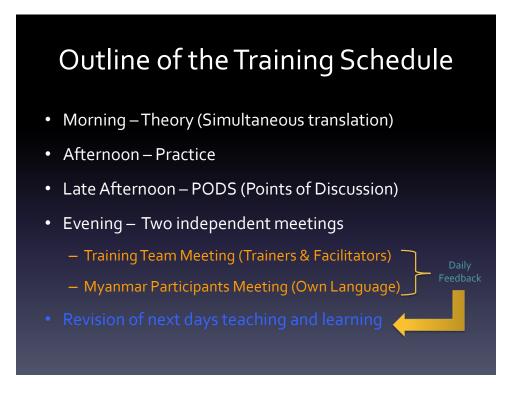
- Ute Sodemann & Peter Bumke Project & Logistics Co-ordinators
- Derek Farrell Chief Trainer (Europe)
- 2 EMDR Asia Trainers EMDRIA & EMDR Europe
- 1 EMDR Asia Trainer in Training
- 4 EMDR Asia Consultants in Training (Senior)
- 12 EMDR Asia Consultants in Training (Junior)
- 1 Researcher
- 2 PhD Projects
 - Students (University of Worcester)



Mekong Project II Goals

- To make the non-Asian aspects of the training redundant as effectively and efficiently as possible
- 2. EMDR Trainings within Trainings
 - Trainers in Training, Consultants, Facilitators,
 Practitioners
 - o EMDR Europe Accreditation Criteria
- 3. European Evidence
 - National Trainer + Association = Sustainable Growth



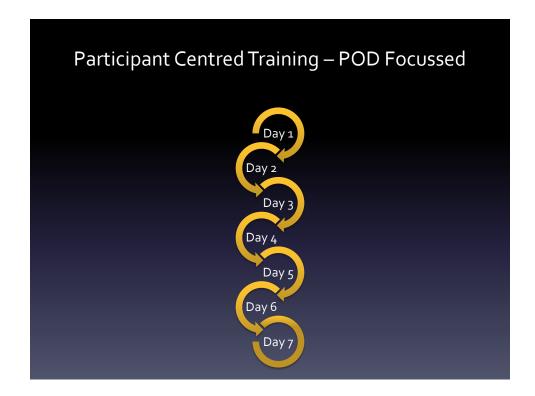


EMDR Therapy Trainings within Trainings EMDR Therapy Participants Training EMDR Therapy Facilitator Training EMDR Therapy Consultant Training EMDR Therapy Trainers in Training

Points of Discussion (PODS)

- Groups of 4 with 1(2) Facilitators
- Open discussion in indigenous language
- Generate questions
- Enhance reflection
- Consider specific training needs



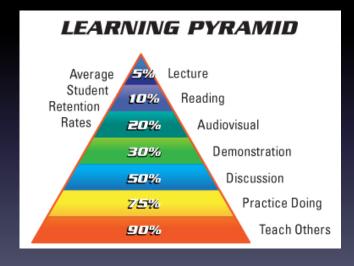


Primary Objective of the Training Programme

 Adapting the Training to meet the participants teaching and learning needs







Our expectations of the participants

- Making a commitment
- Getting as much as possible from the experience
- Networking with fellow Asian and international colleagues
- Expectation to practice (bono fide = 20 hours)
- Contribute to on-going research and evaluation
- Making a difference in Myanmar
- Playing no small part in making the world a 'safer place'

Participant Objectives

- Daily Reflective Diary
 - Description
 - Feelings
 - Evaluation
 - Analysis
 - Conclusion
 - Action Plan



Gibbs Reflective Cycle (1988)

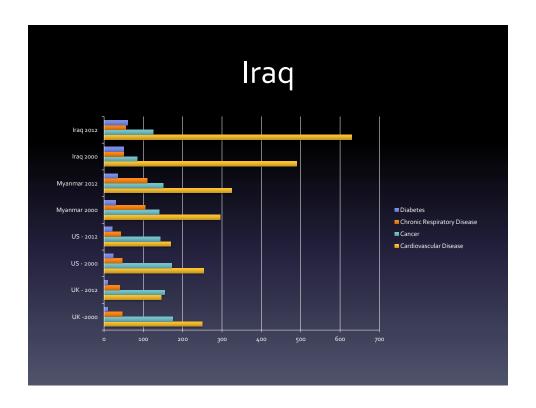
Challenges

- Extremely labour intensive long days
- Active use of facilitators as integral members of the teaching & learning experience
- Language
- Teaching and Learning style
- Previous training experience medical model
- Status & hierarchy asking questions
- Reflection process
- Teaching & learning content material
- Diversity with the participant group





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EMDR Therapy Training in Kurdistan. Northern Iraq

- Collaborative project
 - Terres des Homme, Jiyan Foundation, Free Yezidi Foundation, University of Worcester, Trauma Aid Germany, Trauma Aid Europe
- Funding
 - \$150,000 GUCCI
 - €50,000 Terres des Homme



Timeline

- Free Yezidi Foundation Centre Khanke Camı
- EMDR Therapy Training commences in November 2015 Jiyan Foundation
- 24 staff from Jiyan Foundation Already trained in psycho-traumatology

Conventional EMDR Therapy Training – Humanitarian Context

- Jiyan Foundation covers ALL trauma populations all over Iraq
- Modified Level 1, 2 & 3 (6 Days) 5 months apart
- Clinical Supervision & Consultation
- Collaborative Partnership: Free Yezidi Foundation Centres
- Project commenced November 2015
- PhD Study set up within the project

What implications does this create regarding the teaching and learning of EMDR Therapy?

- The conflict with Islamic State
- Two Treatment Models
 - German External Model [€94 million]
 - Internal Model Trauma/ MentalHealth Capacity Building



Trauma Capacity Building

- More research publications about Trauma
 Capacity Building
- Template WHO (2013) Guideline on Stress
- Reinvention of the wheel

Contact Details

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