



### Thailand EMDR HAP ISRAAID training

Gary Quinn

03-Feb-05 we arrived in Bangkok on January 30,2005 and went to the Thammasat University. We had a staff meeting and discovered we had around 60 participants registered. The staff consisted of Gary Quinn trainer and 5 facilitators Jane Lopacka facilitator and overall organizer of the entire training from Cambodia. Carolyn Neuneunbel from Hong Kong. Joel Comet, Aiton Birnbaum, Frances Yoeli and Alan Cohen from Israel.

That first night we got some experience of Bangkok traffic as we traveled several hours to eat at a kosher restaurant in downtown Bangkok that night.

We started at 7 am to meet with the interpreters and the EMDR team. Some of the interpreters were clinicians and other translators from different professions. They did a basically good job. There were several participants who spoke English well and helped out. The translated text needed revision as it missed cultural nuances. The facilities at the University were excellent. This was arranged initially by Dr. Sutatrip, assistant dean and later by the dean himself.

The participants were psychiatrists, psychologists, social workers and nurses. Only clinicians were accepted to the training. In the previous week a trauma workshop was presented by Mary and Jane to give basic traumatology concepts to those who needed to be raised to a level that they could benefit from the emdr training. The traumatology course included those who were not eligible for the EMDR training.

The standard EMDR Part 1 was given with the additions from the Disaster Hap field manual. This included special sections of ERP and EMD. The first days practicum consisted of vignettes and mechanics of bilateral stimulation and safe place. Taught in that first day was the history of EMDR and the research including the a TV interview with Bessel Van der Kolk demonstrating PET scans showing the effects of PTSD followed by the changed scan following EMDR treatment. Phases II, III were presented The video of Hernandez was shown so they would see an actual EMDR session. A practicum was held doing vignettes and practicing EMDR mechanics and then safe place was done.

At 5 pm a number of participants showed up with a schedule that said the training started at 5:30 pm sent by persons unknown. Because the participants had traveled more than 8 hours to arrive at the training and were planning to leave the training and practice in the South we decided to find a way to include them in the training.

We had the training video taped so they were shown the my video and questions were answered and practicums given by Carolyn and Aiton (A very late day for Carolyn and Aiton).

## **Day 2**

At first questions were answered and they were taught progressive relaxation (in part to help them relax after fighting Bangkok traffic) Phase IV, desensitization, Phase V, installation, Phase VI body scan, and Phase VII, closure were presented.

In the Phase IV ,desensitization, the differences of EMDR and EMD was introduced but emphasis was that EMDR would be done in the practicum.

It was confusing to some and so in the future I would only present EMDR at this stage and save EMD for the next day. Phase I History and Selection criteria were given.

The practicum was held after going through step by step the procedural manual and seeing the bob tape. In this practicum the facilitators worked extremely hard to help the participants. The mistakes in translation were discovered and the fact that Thai's have no past present or future was discovered.

Although we had told the participants to read from the manual they had difficulty at first. At first they went to quickly. Most of the facilitators discovered by stopping them and having at least one of the 3 in the group go over the full protocol the group of 3 would finally start to do the EMDR properly.

In the first practicum there was uncertainty how well they had grasped the concepts. Debriefing of staff was done and Carolyn continued the vignettes with the late arrivals from the first day.

## **Day 3**

We did the debriefing of their practicum. In the middle the air conditioner began to smell of burning rubber. We turned off the air-conditioned and opened the windows.

It was sweltering hot but participants managed to stay focused.

The recent event protocol, grief, ERP, EMD protocols were introduced.

The group and child protocols were presented with plans that Aiton would do a fuller workshop later in the week. The blocked responses, abreaction and Mary tape was shown. The third practicum was done. This time there was a sense that they did get it. Participants seemed quite excited and all raised their hands when asked if they thought to attend the part 2 training. They had filled in an Impact of events scale before and after the training and turned in evaluations.

Mostly 5's and 4's were given across the board for the trainer and facilitators.

The participants signed up when they would go to the Tsunami region. Because they took off so much time from work to come to the training no one came down immediately after the training. We debated whether we would go south without any participants to supervise. We had spoke to those who had contacts in the south and had a tentative meeting in one of the hospitals but the person contacted was not sure we needed to come

as they only had 10 patients and volunteer therapists everywhere.

At first we thought to remain in Bangkok and try to talk to high level people but decided that we needed to see what our students would be seeing.

We felt we needed to “look outside of the box” and not follow our original idea to supervise as we had no one to supervise.

The night the training was over Gary, Joel, Frances and Aiton went to Phuket.

We were awakened by an early call from Dr. Sutatrip. She said we would be wasting out time to go into Phuket as most of the patients had left the hospitals and she said she had people she wanted us to see in the tent city.

In the morning a driver picked us up and took us 2 1/2 hours north to meet up with Dr. Sutatrip who had been working with Bob from Australia who was draining the large pools that had gathered and were trying to locate the 700 people that still were missing (buried in the 7 to 10 large swamps that had not been drained).

Before we got to Dr. Sutatrip we met the head of the army red cross who had just arrived the day before and was trying to register the legitimate workers. He had heard of EMDR which we thought was a positive sign but did not have time to spend with us and we were a rush.

#### **ARRIVAL AT SITE:**

We arrived at this area of devastation that was on a peninsula so had been hit from both sides by the waves that completely wiped out the village.

This area was largely ignored because it had no tourist and only local inhabitants.

The buildings were also built of less substantial material so that it was completely destroyed. We found boats even what looked like a navy ship more than a mile washed inland. The destruction was incredible. Dr. Sutatrip was alone with Bob trying to find these 700 unfound bodies. They had pushed hard to get a 2 pumps from the government to drain the pools for 7 days and the night we left the government took them away despite the pools being still un-drained and bodies not found.

We found Dr. Sutatrip with Bob on a motorcycle with high boots and this meter long pipe. Bob explained to us the way that he found the bodies was putting some material over a gauze cover. He then went to the swamps and pools. He looked for air bubbles. He explained to us that the maggots in the bodies would fight to get out after a while. They would split open the gut and air would escape. He would use this tube to then smell the released gas and would be able to identify a dead body there.

Sometimes it was an animal but in the hours we were there he found 2 new bodies.

This made these two volunteers very respected by the local people because someone was helping them get closure to their losses and they were helpless to do it on their own.

Frequently people would get dreams and they would go digging in the area where the dream hand indicated.

This special relationship allowed Dr. Sutatrip to bring our team into the lives of these people. We traveled in an open pick up truck and met our first victim.

She started by telling us that she had dreams that something terrible was going to happen and felt terrible she had not listened to them.

We were first taken to see what her home had been. We went to an area that was completely flattened. There was only scattered branches and debris everywhere. A single palm tree was standing. They pointed to where her house was. There was nothing to see. About a hundred meters away we were told to look where her mother in a law and father in law had lived. We saw a cement floor only. Everything else destroyed. It was frightening to see such total destruction of what had been a village.

This is the story of one woman-let us call her Kay. She had a husband who was a fisherman and was out at sea when the tsunami hit. She had a 9 year old daughter, 7 year old son, and a 4 year old daughter. They had very little but were happy. Recently she had taken a job and they had started to save a little money. She had bought some new clothes for her son that he was saving for the Chinese new years that was February 6. She had not worked on Saturday which she usually did so she made up for it by working on Sunday. She left her children in the care of her sister in law who she trusted. She had a bad premonition but knew the boss would be angry if she left work early. Then it the tsunami hit. Many of the villagers said at first the ocean receded and so many of them sent their children to catch the stranded fish. They had never seen anything like it. That went on for 12 minutes. Then the tsunami wave hit with no warning.

Kay was told later that when the tsunami hit her children were all at home. When the wave hit the sister in law escaped to safety abandoning the children. Kay's mother in law rescued the 9 year old and was heading back to the 4 year old when she was over taken and the mother in law, father in law 4 year daughter and 7 year old son were killed. They still have not found the 7 year old and Kay is refusing to leave until she finds this 7 year old son's body. Her family and friends are calling her crazy to stay instead of attending to her 9 year old daughter. She tried to get back after the tsunami hit but the roads were blocked. She fought her way in but could not find anyone at first. She was feeling horrible and irreconcilable. She was not sleeping and hardly eating. At first she said it was Karma and she had to accept it but she could not.

So Joel, Aiton, Fran, Dr. Sutatrip, Kelly (our interpreter) and I sat in the back of the pick up truck trying to find a place to work. Kay was so distraught that we started to work with her in that setting. All of a sudden yelling was everywhere and someone yelled another wave was coming. The entire village started to flee the village as we sat tapping on Kay. The scene was surreal. Dr Sutatrip had said this had happened at least 2 other times that someone yelled a wave was coming and the entire town emptied out.

It took quite a while to sort out that the negative cognition was "I am a bad mother". The PC was "I did the best I could". She did not believe this at all. It took a long time for her to begin to recognize she did the best she could with the information she had at the time. She began to recognize that her working was to help her family. She started to realize she was a responsible mother and worker. She had a premonition but it was indistinct and she knew that if she left work her boss would be angry.

She realized she did not let her son wear his new clothes because the new year coming was the time that new clothes were first put on.

Eventually she was able to accept the cognition of "I did the best I could-with what I knew then" Then she was able to approach the mourning.

The 5 stages of death and dying were described. She saw more and more that she recognized in her self. She was told the pain would be always at first and relieve only for moments then become minutes and hours and eventually only times of the pain.

She also came to the realization that nothing-including the largest of the waves could take away from her the love and memories that she had of these children. And a nostalgic smile returned to her face. The team has seen her the 4 days since the treatment and her husband agrees that she is a transformed woman. For the first time since the tsunami she slept for 6 hours straight and continues to do so. She needed lots of reassurance she was not crazy. In the end she said how was it possible that her own people and even those who had lived this hell could not understand her but foreigners came and for the first time she felt understood and got help.

Dr. Sutatrip then took us to their tent city. It consisted of 3 types of structures.

Hot metal prefab building on stilts, wood structures and tents. Kay refused temporary housing and slept in a 2 man tent with her husband.

Dr. Sutatrip then took us to another family. One couple had 4 children and lost their daughter who still had not been discovered. 2 grandchildren were left with no mother.

But they had not talked about it because the children said they did not want to.

They said they were the lucky because they only lost one child. Aiton did marvelous work with the 10 year old grand daughter who had lost her mother.

He used the grandmother as his assistant therapist. He used a doll to first tap and got her to identify that she felt her mother died because she was bad and used her arms to show the suds. At the end she realized it was not because she was bad and the grandmother and grandchild hugged and held each other with a warmth and support that had not happened since the tsunami

Fran then dealt with a woman who lost 4 of her 8 children. It took gentle probing to discover that anything was wrong. The people smiled and said it was karma.

But we discovered that this woman had a restaurant that was not destroyed but did not want to return to it because of the memories. So she was going to wait to build another place to try to start over. She thought her grandchildren who lost their parents did not want to be there because of the loss but never talked to them about it.

One of her remaining daughters who was around 20 was there with her.

Fran did incredible gentle work until the woman opened up to her loss and grieving and was able to face her issues. In the end her surviving daughter was able to say she had not only lost 4 siblings but had lost her mother too (although she was alive) They normally had not shown a lot of affection but Fran asked the daughter what she needed and she said a hug from her mother. They then embraced as the connecting tears flowed.

The transformation in both of them was indescribable.

Others we talked to seemed to be dealing with the issues in the expected ways and sometimes some educating of death and dying was given. They felt grateful at our helping them to understand that what they were going through was the normal reactions to abnormal situations.

Aiton and Fran stayed with dr. Sutaarip in the city with no running water or toilets. They reported continued success with more and more people coming to see them. Aiton worked with a group of children. After they processing they went to the water which they had been avoiding. And they were anticipating all sorts of reactions but nothing prepared them for what happened. The children just jumped into the water and played and were overjoyed. They wanted to come back and were planning to bring there friends.

Dr. Sutatrip said that the government was setting up psychiatrists sitting in tents from 9 to 4 and no one was coming to them. They were concluding that there was no psychological trauma because of that. Dr. Sutatrip said they would not come to psychiatrists like that because they would lose face. Only going in the way we did with Dr. Sutatrip could we have a chance to reach the people who desperately need help.

A group of student will start tomorrow and Fran Aiton and Alan will supervise them with Fran. Tuesday both Aiton and Alan will give specialized workshops. Jane will stay most of the month supervising as more that 20 -30 of the 60 already are planning to come down over the month. Fran Aiton and Alan leave on Wednesday. More EMDR HAP therapists could be helpful for ongoing supervision. We are thinking of a part 2 in August or September.

We feel that the way experienced EMDR therapists went in and opened the door may be a serendipitous discovery. Although we had hoped to have students to supervise we feel the initial success we have gotten by such experienced therapists may open the door to our students to now come in and work.

We also feel that the themes these people are dealing with are naturally the themes that Francine Shapiro had discovered despite Karma, Ghosts, premonition dreams etc that might mislead us to thinking that the culture is different and EMDR might not work. By the discovery of what is working to unlock the stuck lives we may be able to our students know what to look for and guide them to better success with their work. It might even change the HAP model of how we work (unless Hap has already discovered this and I am only rediscovering the wheel).

We will still need to see what happens when our students work.