

<u> Udi Oren report – 13.8.2006</u>

Let me start by saying that while not being surprised, I was deeply moved by the response of many of you during the past weeks.

The wish to give a hand, to work hard, the willingness to take risks, the brain storming, the true support, the innovations, the cooperation, the appreciation of ones efforts large and small, all that were what the EMDR-community was all about during this horrible month.

I feel honored to be part of this group of great people.

On a personal note. I spent a couple of days during the past two weeks in a city in the north, which suffered from heavy Katusha attacks. Like other EMDR therapists I volunteered to be sent by the municipality head quarters to bomb shelters and homes were peopled asked for some psychological intervention. Driving around the city was a surrealistic experience. The empty streets (most of the citizens either left the city to the south, or were sitting in bomb shelters), the sounds of the sirens and the explosions, seemed like a back ground to an old low level Hollywood movie, but it was for real. The people I met were doing the work of survival under very difficult conditions: living in bomb shelters for what feels to them (and I do not blame them) like eternity. Some of the work I did was EMDR and some of it was just supportive.

Focusing on the EMDR work, I can say (yet again) that I was very impressed with what I experienced (and what I read in the reports of others who did similar work):

People were working on current trauma while experiencing it. This was not something that happened some time ago, but something that just took place and will probably happen again soon (and many times it did). The work was done in circumstances that I would never consider "therapeutic". Bomb shelters and homes with people (some times many people) around, looking at us, asking questions, talking, playing table tennis, looking at the news on TV, having lunch, etc. The people we worked with did not know us. We had very little time to form a relationship of any kind, and yet we had to focus on active SUDS=10 traumas.

My first client was a 10 year old girl of a Lebanese couple (the father was part of the Lebanese army that worked with Israel in the past).

She was in a bomb shelter that was hit by a katusha a week prior to my visit, and since than was peeing in her pants every time she heard a siren (something that happened many times each day), had difficulty sleeping and had to be close to her parents all day long.

The EMD session went very well until the siren was heard. The girl panicked, started crying and run with her mother to the bomb shelter across the street. I said to myself "oh, s..." and accepted the father's invitation to sit in a protected room in the house and do the Middle Eastern coffee and cigarette ritual. A few minutes later I went down to the shelter to continue the session and to my surprise the girl was smiling and handed me a picture of flowers and hearts. The mother said this was the first time in a week she saw her daughter smiling and acting "normally".

In another house a 23 year old woman would not come out of the shelter since a katusha hit the building next to her home while she was out side. By the end of the EMD session (SUDS 1–2, Voc 5–6, and "ecological" was never as clear as under these circumstances) she came up and had a cup of coffee with her mother and me, while sitting next to the stairs leading to the shelter. The conversation focused on post war plans.

With a four year old that started acting "strange" since the beginning of the war I did a very long safe place exercise, with the safe place being what was happening at that moment, i.e. being in the bomb shelter sitting on his mother's lap and holding his grand mother's hand.

During the "session" there were two sirens and a few distant explosions that were clearly heard. The kid would stop for a second and than smile and continue focusing on the tapers buzzing in his little hands. By the end of our work he had a huge smile, gave me a high five, and run to play with his friends. The mother and grand mother looked at me the way I look at my son when he does one of his magic tricks: "This must be a trick, but I can't see it".

But than there were places where very little could be done beside listening and being supportive. In other places people were making "shopping lists" of what they needed in order to continue living in the bomb shelters.

And in other places all I could do is recommend to the municipality that people would be evacuated from the city.

Driving down south I felt that this was important work but it felt (and I know it is) like a drop in the ocean of needs.

During the past month the EMDR-Israel community did its best: people drove up north to volunteer (not to mention our friends from the north that stayed up there to continue their important work, despite the fact they could come south like so many of their neighbors), others worked in the many refugee camps that were set up all around Israel (the work done in Nizanim – the largest refugee camp – is especially impressive), others did the important work of organizing the operations, a group of us worked on the EMD protocol while others developed other interventions along the line of resource installation and around group EMDR work.

I do hope that if many of us will use the EMD protocol, check it and refine it, we will be able to give a gift to the international EMDR community. I believe that collecting the information regarding our work will give it the kind of empirical basis that is so important. The protocol and the information sheet will be in our site later this week. I urge you to print it, use it and send us feedback.

We are all praying that the war will end soon, and with talks about an up coming cease fire, this may actually be happening. But in the day after, our work will not be done. This war which has put a huge civilian population in the "front", has exposed that population to the psychological dangers of military fighting units: ASD, PTSD and the many other psychological consequences of having your life threatened. While most people will go back to rebuild their lives, many others will carry scars that will make that mission seem impossible.

It is unclear to me at the moment what will be the role of EMDR-Israel in the post war healing work, but I know we will do our best to bring forward our ability to do this kind of work. It is clear to me that we will provide low fee/free trainings to as many therapists as possible, and provide low fee/free supervision to those trained. First contacts regarding this project started already.

In addition to that we will try to be part of the therapeutic work it self. This is why we need to know whether you are interested in working with the war victims. At the moment we do not know if this will be as volunteers or you will be paid for it by some organization. Please help the office develop the list of interested therapists. Please let us know of any initiative you are aware of at any level: municipality, government agency or any other, so we will try to get involved.

War brings the best and the worst out of people. It brought the best out of you all.

May we keep this spirit in times of peace, and during the hard work that is expecting us all.

Take good care,

Udi