



**EMDR  
Europe**

Valencia  
2022

**Workshop  
Conference**



**EMDR and Resilience**  
10<sup>th</sup> - 12<sup>th</sup> June 2022

# Quick Reference Timetable

The detailed programme is available on the [official website](#) and on the Mobile App.

## FRIDAY JUNE 10<sup>TH</sup>

- 9:00 - 12:00 Researchers Meeting - State of the Art of EMDR research in Europe
- 17:00 - 18:00 Opening & Welcome - Isabel Fernandez
- 18:00 - 18:30 David Servan Schreiber Award
- 18:30 - 19:30 Keynote - Christiaan H. Vinkers
- 19:30 - 20:30 Welcome Cocktail

## SATURDAY JUNE 11<sup>TH</sup>

- 9:00 - 10:30 Conference Workshops
- 10:30 - 11:00 Break - Exhibitors' Stands And Poster Boards
- 11:00 - 12:30 Conference Workshops
- 12:30 - 14:00 Lunch Break
- 14:00 - 15:30 Conference Workshops
- 15:30 - 16:00 Break - Exhibitors' Stands And Poster Boards
- 16:00 - 17:30 Conference Workshops
- 17:45 - 18:00 Trauma Aid Europe Award
- 18:00 - 19:00 Keynote - Ignacio Jarero
- 20:30 Gala Dinner

## SUNDAY JUNE 12<sup>TH</sup>

- 9:00 - 10:30 Conference Workshops
- 10:30 - 11:00 Break - Exhibitors' Stands And Poster Boards
- 11:00 - 12:30 Conference Workshops
- 12:30 - 14:00 Lunch Break
- 14:00 - 15:30 Round Table & Conference Workshops
- 15:45 - 16:15 Francine Shapiro Award
- 16:15 - 17:15 Keynote - Deborah Korn
- 17:15 - 17:30 Closure

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# Welcome

Dear friends,

First of all, I would like to thank you for the incredible success of our Virtual Conference 2021. Nearly 2,000 colleagues from around the world gathered virtually to share ideas and experiences, to discuss the challenges of the future, and to create a wider and stronger network.

It was amazing to be together virtually in 2021, so being able to meet again in person is going to be even more thrilling: we are pleased to announce that the next edition of our Conference is going to take place both online and in the beautiful Mediterranean city of Valencia!

The 2022 Conference's theme will focus on promoting resilience with EMDR. We chose this topic in a time when it is urgent to cultivate a proactive approach and reach out for people in need: as the risks of experiencing psychological stress are rising due to the Pandemic and the military situation in East Europe and its unforeseeable consequences, the prevention of long-term effects on the population's mental wellbeing is crucial. Improving the capacity to cope with adversity, offering early intervention and access to adequate support should be an integral part of any containment and post-pandemic recovery plan.

Our keynote speakers, Christiaan H. Vinkers, Ignacio Jarero and Deborah Korn will help shed light on human resilience from disasters and complex trauma. A variety of workshops has also been planned for you to have the opportunity to expand your knowledge and network with the field's leading professionals. I encourage all attendees to come together in a conversation with us on topics important to EMDR Europe's mission, to discuss the impact of trauma and build community resilience in Europe.

I would like to personally thank the Conference Committee and all the people who are contributing to make this event a success. Joint efforts of the EMDR Europe team are vital to this organisation and to the development of EMDR therapy.

I look forward to meeting you all in June!

**Isabel Fernandez**



# EMDR Conference Committee (ECC) & Scientific Committee

ECC



Bruna Maccarrone  
Chair



Isabel Fernandez



Judith Havelka



Sofia Mariani



Olivier  
Piedfort-Marin



Marian Tobin



Patricia Waaijman



Michael Hase



Antonio Onofri



Carlijn De Roos



Suzy Matthijssen



Sara Carletto



Ana Moreno-Alcazar



Paulina Zelviene



Isabel Fernandez



Benedikt Amann



Dolores Mosquera



Anabel Gonzales



Francisca Garcia  
Guerrero

Scientific Committee

# Professional Congress Organizer



Since 1985, Kuoni Tumlare | Congress has been a synonym for professional and successful congress organisation – and it represents an extensive and continuously expanding network that's bursting out of Europe.

It is one of the world's leading Professional Congress Organizers (PCO) offering a wide portfolio of housing and PCO services from logistics to on-site management and from advanced web solutions to association management.

The team building EMDR 2022 is located in various European countries, and after the great success of EMDR 2019 and 2021, we are very proud and excited to partner with the EMDR Europe Association for this event in 2022.



Franck Grosset  
Congress Manager



Begoña Ruiz  
Client Relation



Nicolas Montet  
Project Manager



Zuzana Jinova  
Project & Program  
Coordination



Minerva Del Val  
Registrations  
Coordination



Jesús Pérez  
Graphic Designer



Cedric Cholley  
Web Developer

# Keynotes' Abstracts and Biographies



**Vinkers, Christiaan H.**, is psychiatrist at GGZ in Geest and associate professor at the department of psychiatry and the department of anatomy and neurosciences at Amsterdam UMC/VUmc. His key interest is vulnerability and resilience to stress.

Christiaan studied Pharmacy (2005), Law (2009), and Medicine (2009) at Utrecht University. In 2009, he finished his PhD thesis on fundamental neurobiological research and the GABA system (cum laude). Subsequently, he started his clinical training to become a psychiatrist and continued to carry out clinical research related to risk and resilience for psychiatric disorders and the role of the GABA system. In 2014, he became a psychiatrist and researcher at the Rudolf Magnus Brain Center. In 2018, he strated as researcher and psychiatrist at Amsterdam UMC/VUmc and GGZ in Geest.

His overall research objective is to investigate the neurobiological background of stress resilience and vulnerability including (epi)genetic, neuroendocrine, and brain circuitry factors, with a special interest in the GABA system. Traumatic stress, especially during early life, is a major risk factor for the development of almost all psychiatric disorders including bipolar disorder, post-traumatic stress disorder (PTSD), major depressive disorder, and schizophrenia. Moreover, stress has persistent effects on brain structure and functionality. However, considerable inter-individual differences exist in outcomes after trauma exposure. Despite decades of research, we still cannot predict which individuals are at risk and which individuals are resilient following traumatic stress. Therefore, his goal is to shed more light on the neurobiological basis of stress susceptibility. His work is sponsored by grants of the Netherlands Organization for Scientific Research (NWO, VENI), ZonMW, the Brain Center Rudolf Magnus, NARSAD, the Dutch Brain Foundation, and Neuroscience Cognition Utrecht.

## Integration of psychological and biological determinants of stress and trauma: a novel road for new interventions?

Stress and trauma have direct detrimental impact on mental health, and increase the risk for posttraumatic stress disorder (PTSD) and major depressive disorder (MDD). Psychological and (neuro)biological factors both play a role in the emergence and remission of these symptoms after treatment but are often studied in isolation. In this lecture, Christiaan Vinkers will discuss his research that links (neuro)biological and psychological factors and interventions related to PTSD and MDD. Moreover, he will discuss how this integration may lead to new targeted interventions, for example Eye Movement Desensitization and Reprocessing (EMDR) to target childhood trauma in MDD patients.



**Jarero, Ignacio (Nacho)**, Ph.D., ED, D., is the world pioneer in the provision of EMDR therapy in a group format in-person and online, AIP-informed Advance Psychosocial Interventions for Trauma-Exposed Populations, and AIP-informed Procedures for in-person and remote support. He is an Expert Certified Tele Mental Health Clinician and Member of the Council of Scholars for the Future of EMDR Therapy Project. For his humanitarian services around the world with nearly 200 deployments since 1998, he received the Francine Shapiro Award, the International Crisis Response Leadership Award, and the Psychotrauma Trajectory Award. For his research work with EMDR therapy, he received the EMDRIA Outstanding Research Award. Dr. Jarero is EMDR Institute Senior Trainer of Trainers and Advance Specialty Trainer and has conducted seminars and workshops worldwide with participants from 67 different countries.

He is a co-author of the EMDR Protocol for Recent Critical Incidents and Ongoing Traumatic Stress (EMDR-PRECI)®, the Protocol for Paraprofessionals use (PROPARA)®, the Acute Stress Syndrome Stabilization (ASSYST)® AIP-informed procedures in a group, individual, and remote formats, and the EMDR Integrative Group Treatment Protocol (EMDR-IGTP)® that has been provided worldwide with thousands of natural or human provoked disaster survivors and populations with recent, present or past prolonged adverse experiences. He is also the author of the AIP-informed Advance Psychosocial Interventions for Trauma-exposed Populations Training Program®.

Dr. Jarero is EMDR Mexico Co-Founder, Latin American & Caribbean Foundation for Psychological Trauma Research (Francine Shapiro Award Winner), Founder & President, International Center of Psychotraumatology, Founder & President, Iberoamerican Journal of Psychotraumatology and Dissociation, Co-Founder & Editor in Chief, and the Mexican Association for Mental Health Support in Crisis (AMAMECRISIS, NGO), Founder & President.

## The AIP Theoretical Model and the Expansion of Human Resilience Understanding

During this presentation, we will explore the current understanding of human resilience from diverse fields of knowledge and theories like epigenetics, genetics, neurobiology, psychobiological allostasis, psychology, spirituality, attachment, family systems, vicarious resilience, and resilience protective factors. We will discuss how the Adaptive Information Processing (AIP) theoretical model expands the understanding of human resilience and explain how we can design high-quality research studies to create a robust body of EMDR therapy and AIP-informed resilience empirical evidence.

### Learning Objectives

At the end of this presentation, the attendees will be able to:

1. Describe the current understanding of human resilience from diverse fields of knowledge and theories.
2. Discuss how the AIP expands the understanding of human resilience.
3. Explain how to design high quality research studies on EMDR therapy and AIP-informed resilience.



**Korn, Deborah L.**, PsyD maintains a private practice in Cambridge, MA, and is an adjunct training faculty member at the Trauma Research Foundation in Boston. She has been on the faculty of the EMDR Institute for the past 28 years, is the former Clinical Director of the Women's Trauma Programs at Charter Brookside and Charles River Hospitals, and is a past board member of the New England Society for the Treatment of Trauma and Dissociation (NESTTD). Dr. Korn has authored or coauthored numerous articles and chapters focused on EMDR therapy, including comprehensive reviews of EMDR applications with Complex PTSD. Dr. Korn is an EMDR International Association-approved consultant and is also on the Editorial Board of the Journal of EMDR Practice and Research. She has been a regular presenter at the EMDR International Association (EMDRIA) Conference and was invited to present EMDRIA's very first "Masters Series" class. She recently spent two years serving on the Council of Scholars associated with the Future of EMDR Therapy Project. She presents and consults internationally on the treatment of adult survivors of childhood abuse and neglect. As a clinician, teacher, researcher, and consultant, Dr. Korn is known for her knowledge and integration of many different trauma-focused clinical models. Every Memory Deserves Respect, her new book about EMDR therapy—co-authored with Michael Baldwin and written for the layperson—was released in May 2021.

## Fostering Resilience in Complex Trauma Survivors Using EMDR Therapy - Lessons Learned over Three Decades

Adult survivors of childhood abuse and neglect face significant difficulties in regulating emotions, behaviors, and somatic experience. They also report deeply held negative self-beliefs, profound states of aloneness and shame, and problematic patterns in relationships. Unfortunately, for these vulnerable clients, psychotherapy has the potential to trigger affect and attachment phobias, rigid defenses, and high levels of dissociation. Dr. Korn will discuss the lessons she has learned over the course of thirty years using EMDR to treat complex trauma survivors and their families in inpatient, partial hospitalization, and outpatient settings. She'll talk about the importance of acknowledging and privileging clients' strengths and survival resources and of establishing a strong therapeutic relationship. She'll also stress how critical it is for EMDR therapists to think beyond basic symptom reduction, focusing instead on comprehensive healing of the whole person with an emphasis on increasing resilience and post-traumatic growth. She'll highlight how EMDR therapists can integrate useful concepts and techniques from other trauma-informed models and expand their use of "interweaves" to help clients with moment-to-moment regulation, developmental repair, and movement from powerlessness to action. Finally, Dr. Korn will describe how to help clients integrate and maximize the gains made during their EMDR sessions, helping them carry their transformational learning experiences from the therapy office back into their everyday lives.

# EMDR KIT

Win an  
**EMDR Kit!**

Come and visit our stand and get a free raffle ticket.

On sunday 12:30, we will announce the winner.  
The winner may choose between an EMDR Kit Wireless or  
an EMDR Kit Classic (Bag included).



# Workshops' Abstracts

Saturday June 11<sup>th</sup>



**Silvestre, Michel, Dr.** is a clinical psychologist since 1978 and a family therapist who has been in private practice since 1999. He is an EMDR Europe Accredited Child and Adolescent Trainer, one of the founding members of the EMDR French association and the former Chair of the EMDR France Association. He is a graduate of the Mental Research Institute, Palo Alto, California and a Senior Lecturer at the School of Psychology, Universities of Metz, France. He is a member of the European Family Therapy Association.



**Grandjean, Vanessa**, Psychologist at the Centre Hospitalier de Luxembourg since 2005. Psycho-oncologist Responsible for the psychologists EMDR Europe. Practitioner Founder of the EMDR training institute in Luxembourg. Resilience Institut Luxembourg.

## Resilience and the Family

*We will discuss the place of resilience when confronting traumatic situations, such as domestic violence behaviors, serious illness, and the Covid epidemic.*

*Working with children and their families has taught us the importance of individual and/or relational resiliencies in EMDR therapy. The activation of individual resiliencies through the family, parental or sibling bond will help to potentiate the EMDR work with a child and in turn this EMDR work will promote the development of these resiliencies.*

*In this dynamic loop, resilience is an essential factor in the stabilization, preparation and maintenance of the child in his or her window of tolerance; it is thus a crucial element in emotional regulation.*

*The announcement of a diagnosis of a serious illness, such as cancer, is a tsunami for the patient as well as for those around him. Each person learns to develop ways to adapt to the situation in which the illness takes a new and unwanted place in the family. How does everyone integrate this new member into the family nucleus?*

*The Covid pandemic shook up family ties in a brutal way. During the first months, death was dehumanized. The relationship between the patient and his family was built on a virtual level so that the last attachment could be maintained.*

*Through this workshop, we will tell you about the lives of these families turned upside down by violence, illness, pandemic where resilience and EMDR therapy were a winning combination.*



**Mansukhani, Arun**, is a Clinical Psychologist and Sexologist with 25 years of experience as a therapist. I hold master's degrees in Sexology, in Behavioral-Cognitive Therapies and in Hypnosis. I am an EMDR Europe accredited consultant and facilitator. I am also a Level III Sensorimotor therapist. I have been a Member of the Presidential Committee of the Illustrious College of Psychologists (COP-AO), Member of the Presidential Committee of the Spanish Federation of Sexologists (FESS) and have participated in many national and international conferences as a speaker and have teaching experience in seminars, workshops and master's degrees. I currently lead a team of psychologists working with trauma and attachment issues as director of the Centre for Emotional Regulation in Malaga, Spain.

## EMDR to enhance Couple Therapy

*Initially developed to address acute trauma and PTSD, EMDR therapy has proven extremely effective in a large number of clients with various difficulties, related not only to defence system traumas but also to relational traumas, more linked to attachment and/or social ranking systems. Because these childhood relational traumas determinate adult relational strategies, EMDR becomes an unvaluable approach for working with couples. All couples facing difficulties can benefit from EMDR interventions, but especially the highly reactive and conflictive ones, precisely the most difficult to treat with standard couple therapy.*

*In the workshop we will outline a conceptual framework from which to integrate EMDR in couples therapy, analysing what adjustments need to be made in the assessment and intervention phases. We will go through and provide interventions EMDR therapy offers to maximize work with couples and how and when to introduce these interventions with couples who, initially, are not in therapy to work on their past, but on their present relational conflicts.*

### Learning Objectives

1. Participants will be provided with a conceptual framework from which to integrate EMDR into couples therapy, including aspects to consider in the assessment and intervention phases, leading to a comprehensive way of working in couples therapy with EMDR.
2. Participants will learn specific EMDR interventions that enhance couple therapy, especially for highly reactive and conflictive couples.
3. Participants will learn how to identify the most common pitfalls and mistakes made when extending EMDR to couple work and how to identify and avoid them, helping to adjust treatment plans in the context of each therapeutic relationship.



**Ter Heide, Jackie June** (1972) trained as a clinical psychologist and theologian. She works as a therapist at ARQ Centrum'45, an institute for patients suffering from complex psychotrauma in the Amsterdam area, where she specializes in treatment of profession-related PTSD and moral injury. Jackie June is an EMDR Europe practitioner as well as an EMDR supervisor in training. In addition, she is a senior researcher and coordinator of the ARQ research track on complex trauma. Jackie June has published on numerous topics including EMDR therapy for refugees, Complex PTSD, the dissociative subtype, moral injury and treatment of police officers. She is currently head researcher of a study on moral injury in Dutch treatment seeking military veterans funded by the Dutch Ministry of Defense. Jackie June is a member of the editorial board of the European Journal of Psychotraumatology and a guest editor of a special issue on emerging treatments for moral injury of Frontiers in Psychiatry.

## Reprocessing trauma and restoring resilience in trauma-exposed police officers using EMDR Therapy

**Background and aims:** Police officers are typically exposed to multiple work-related potentially traumatic events (PTE's) and consequently have a higher conditional probability of developing post-traumatic stress disorder (PTSD; e.g. Marmar et al., 2006). The odds of developing PTSD are increased when police officers resort to negative resilience: dealing with the stresses of PTE exposure by using structural denial or dissociative coping (Friedman & Higson-Smith, 2003). In addition, police officers may become psychologically injured by morally injurious events and may lose moral resilience (Rushton, 2016). While most police officers may be successfully treated using EMDR or other types of trauma-focused therapy, some may need additional interventions to restore psychological and moral resilience (Martintmäki et al., 2021). In this workshop, participants are acquainted with the negative resilience model and learn how to reprocess traumatic memories and restore resilience in trauma-exposed police officers using EMDR and additional interventions.

### Method

Work and traumatic stressors as well as common psychiatric disorders in police officers, including PTSD and moral injury, are discussed using research and video material. Specifics of EMDR case conceptualization and cognitive interweaves with this population are discussed and practiced, and additional interventions for restoring resilience are presented, including techniques from sociotherapy, psychomotor therapy, and Acceptance and Commitment Therapy (ACT).

### Learning Objectives At the end of the workshop, participants:

- are familiar with common PTE's and consequent psychiatric disorders, including PTSD and moral injury, in police officers, as well as with the model of negative resilience;
- know how to tailor their EMDR case conceptualization and cognitive interweaves to this population;
- know which additional interventions may be offered to promote psychological and moral resilience.



**Leutner, Susanne** is a licensed psychologist and psychological psychotherapist. Ego-State-Therapy Institute Rhineland with E.Cronauer Psychotherapy with adults, children and adolescents, supervision, further training and counseling for psychologists and other health care professionals since 1980. Person-centered therapy, family and child therapy, EMDR, PITT, hypnotherapy, ego-state therapy, Theory of Structural Dissociation. Special interest: Combining different treatment models with a focus on well adjusted early confrontation and resource activation, especially in working with traumatised people. EMDR Europe Practitioner and consultant, Trainer in Ego-State-Therapy. Lecturer and supervisor at various training institutes. Involved in professional politics in EST-DE (Ego-State-Therapy Germany and international); former vice-chair of EMDRIA-Germany and EMDR-Europe Board member.

## EMDR, Ego states and resilience

*EMDR as well as Ego-State-Therapy are very helpful to enhance resilience and to provide tools to confront traumatic memories from the beginning of the treatment. The AIP model allows a wide variety of interventions which can be tailored to the needs of clients according to their stability. Ego-State Therapy (EST) and other parts models can also be used successfully on the whole spectrum of resource activation and trauma confrontation. The combination of both treatment methods is even more helpful, because therapists can adapt the treatment planning even more exactly in the interaction with the clients and their special needs at a given moment.*

*The processing model which I developed helps clinicians to better conceptualize their treatment, from more "simple" to more complex cases. I will show and discuss how the tools of EMDR and EST can be combined to regulate the impact of trauma resolving treatment. For example, access to resourceful ego-states is helpful when clients need more safety. Access to touchstone events that will be confronted by using EMDR is facilitated when the history of traumatized Ego-States becomes clearer. EMDR therapists will be provided with first and easy EST interventions to work as well with resourceful as with fragile inner parts. A group exercise will be performed to get into touch with resourceful ego-states. Appropriate work sheets will be distributed.*

*I will highlight the use of EST in EMDR's eight phases, teaching how to develop a therapeutic sensitivity towards the appearance of ego-states while processing. The benefit of both approaches can be combined.*

### **Participants will be able:**

- to better know whether an ego-state may be speeding up or rather blocking the process.
- learn how to deal with these interferences.
- and how to purposefully enhance the whole therapeutic progress.



**Mosquera, Dolores** is a psychologist and psychotherapist specializing in complex trauma, personality disorders, and dissociation. She is the director of an Institute for the Study of Trauma and Personality Disorders. Dolores has extensive teaching experience leading seminars, workshops, and lectures internationally. She has published several books, book chapters and articles on personality disorders, complex trauma, and dissociation. Dolores received the David Servan-Schreiber award for outstanding contributions to the EMDR (Eye Movement Desensitization and Processing) field in 2017 and was made Fellow of the International Society for the Study of Trauma and Dissociation in 2018, for her contributions to the trauma and dissociation field.

## EMDR Therapy for Victims of Domestic Violence

When domestic violence occurs, there is a rupture of personal safety and trust. Children exposed to family violence are impacted by what they observe and experience directly from these adult models and attachment figures. Similarly, adults exposed to family and Intimate Partner Violence (IPV) are shaken and struggle to recover and move forward from these experiences. When these traumatic experiences remain unresolved, indelible impressions of these relational dynamics remain imprinted. They shape perception of self and others and provide templates that are called into action when triggered. When violence is an ongoing threat, these triggers are constant and deepen the lack of power and safety.

Adaptive responses that help a person survive the moment of violence often, unconsciously, develop into maladaptive coping responses that lead to relational patterns. These patterns often reflect lives trapped in reenactment of the violent trauma they experienced. Defensive responses sustained over time reinforce rigid and problematic behavioral patterns ranging from submission to aggressiveness. Other complications include avoidance of one's own emotions and lack of awareness of one's needs.

Some people find themselves repeatedly involved in harmful relationships with ongoing abuse and maltreatment. Many struggle to leave unhealthy relationships, unable to assess risks, set boundaries, or protect themselves adequately.

Domestic violence often impairs judgement and distorts the victim/survivor's sense of self and current triggers can activate intense emotions of guilt and learned helplessness. 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.

In the treatment of victims/survivors, two concepts are 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 their personal history which also need to be addressed. In some cases, it is necessary to strengthen the victim's resources to prepare them to 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.

This presentation will review the impact of domestic violence with a focus on the treatment needs for victim/survivors. Intervention methods and case conceptualization are presented within the EMDR therapy, Adaptive Information Processing (AIP) informed, 8-phase treatment model. The presentation will discuss ways to an individualized treatment plan that considers aspects such as the psychoeducation needed by that specific person and the selection of strategic targets. Effective plans balance an awareness that many clients need to work on early personal history and previous negative relationships while managing current relationships.

### **This training will address:**

- Frequent difficulties for victim/survivors of domestic and gender violence
- Internalized trauma and dysfunctional coping strategies
- Blocking emotions
- Discovering and respecting personal needs and boundaries
- Distorted sense of responsibility and guilt
- Dangerous relationships- unsafe to stay and difficult to leave
- Building internal and external safety. A clinical guide tool



**Gysi, Jan**, MD, works as a psychiatrist and psychotherapist in private practice in Bern, Switzerland. He is a specialist on diagnostic and treatment of trauma related disorders, especially severe posttraumatic and dissociative disorders. He has published two books in German, the latest book in 2020 on diagnosing trauma related disorders according to ICD-11, of which the English translation currently is in progress. Furthermore, he works as supervisor and public speaker.

## Diagnosis and differential diagnosis of complex PTSD, partial DID and DID & major implications for treatment

**Background and aims:** In 2019, the World Health Organization launched the new ICD-11 with important changes in the field of trauma and dissociation. A new chapter on "Disorders Specifically Associated with Stress" includes "Posttraumatic Stress Disorder" (PTSD) and the new diagnosis of "Complex PTSD" (CPTSD). Furthermore, in a chapter on "Dissociative Disorders", the renamed and more precisely defined "Dissociative Identity Disorder" (DID) and "Partial DID" (PDID) were introduced.

### Method

We present the diagnosis of CPTSD, PDID and DID according to ICD-11 with special focus on:

1. CPTSD includes the three PTSD clusters (re-experiencing, avoidance, hyperarousal) and three additional clusters that reflect 'disturbances in self-organization' (DSO): (1) affect dysregulation, (2) negative self-concept and (3) disturbances in relationships.
2. PDID is characterized by the disruption of identity in which there are two or more distinct personality states, usually without amnesia.
3. In DID, there exist two or more distinct personality states (dissociative identities) associated with marked discontinuities in the sense of self and agency. They have diverse patterns of experiencing, perceiving, conceiving, and relating to self, the body, and the environment. Furthermore, the distinct personality states recurrently take executive control of the individual's consciousness and functioning in interacting with others or with the environment.

### Results

Understanding the key symptoms of each disorder, we will look at questionnaires for diagnosis, examine diagnostic challenges, and discuss major differential diagnoses such as borderline disorder, ADHD, bipolar disorder and schizophrenia.

### Conclusions

Evidence-based diagnosis and differential diagnosis of CPTSD, PDID and DID according to ICD-11 has major implications for treatment planning, especially for the evaluation of indications and contraindications for EMDR therapy in CPTSD, PDID and DID.

### Abstract topic

ICD-11, Complex PTSD (CPTSD), Dissociative Identity Disorder (DID), Partial DID (PDID), Questionnaires, Diagnosis, Differential Diagnosis

### Learning Objectives:

- a. Understand the diagnosis of CPTSD, PDID and DID according to ICD-11
- b. Know questionnaires, important diagnostic challenges and differential diagnosis
- c. Understand major implications for treatment planning, esp. for EMDR of CPTSD, PDID and DID

# Workshops' Abstracts

Sunday June 12<sup>th</sup>

**Auditorium 1 | 9:00 - 12:30**  
(Translation into Spanish - Italian - French - Polish - Finnish - Ukrainian - Russian)



**Quinn, Gary, Dr.** is a psychiatrist and Director of The EMDR Institute of Israel. He has conducted EMDR trainings in Israel, Asia, Africa, Europe and the United States. He is a Trainer of trainers of the EMDR Institute Inc. in Asia. Dr. Quinn developed the Emergency Response Procedure (ERP) for clinicians and the ISP® for First Responders to treat victims of trauma within minutes to hours of a traumatic incident. Dr. Quinn taught EMDR at Hebrew University School of Social Work, and ICU staff in emergencies at Shaare Zedek Medical Center in Jerusalem.

## Upgraded ISP®

*ISP® (formerly ERP) for Immediate Stabilization for Victims of Natural and Manmade Disaster (including survivor guilt) and Dissociated EMDR patients.*

*ISP® (Immediate Stabilization Procedure) is a stabilization procedure for victims of natural and/or manmade disaster within minutes to hours of trauma exposure.*

*ISP® has been fully upgraded.*

*ISP® utilize rapid alternating tactile stimulation to reduce SUDS 7 to 10 and unresponsive dissociated- often within 5 to 15 minutes.*

*ISP® stabilizes survivor guilt.*

*ISP® can be used by a therapist when a patient experiences an abreaction (strong emotional event) at any time in the 8 phases. ISP® may be a change of TRAIT instead of change of STATE. It can be used instead of RDI other stabilization techniques which are a change of STATE.*

*ISP® can be used as a self- stabilization technique between sessions.*

*This workshop will be training in learning to use and practice ISP® to stabilize victims in the immediate aftermath of Man-made and natural disasters. In addition, therapists will learn how to use ISP® during an abreaction.*

### **A practicum will be conducted**

- Participants will learn to use the ISP® Field Manual
- Participants will have a practicum to experience using ISP®
- Participants will learn to use a one-page Initial Contact form. This enables information on the stabilization and follow-up/after care assessment. it can also be used for research of stabilization with the use of ISP®



**Hase, Michael** Obtained the German "Abitur" diploma from a high school in Einbeck, Germany (Goetheschule; 1979). Obtained a degree in medicine at the University of Kiel, Germany (Christian-Albrechts-Universität zu Kiel; 1979-1985). After serving as a doctor in the German military, he received further education in neurology and psychiatry at private and public hospitals in Germany. After obtaining the specialist qualification in psychiatry and psychotherapy in 1993, Hase worked as a consultant at the psychiatric hospital in Lüneburg, Germany for 15 years (Psychiatrische Klinik 1 am Niedersächsischen Landeskrankenhaus Lüneburg). He established a unit for the treatment of PTSD. Since his EMDR training in 1997, he has been working on the integration of psychotraumatological approaches and EMDR in clinical psychiatry, psychosomatic medicine, psychotherapy in secondary care, and rehabilitation. He completed his doctorate in 2006, which was dedicated to the topic "Reprocessing of the addiction memory with EMDR". Hase is co-founder of the workgroup "acute traumatization" of the DeGPT. He has advised regional counselling centers of the German police forces and the health center of the German judiciary in Lower Saxony. Hase closely collaborates with department 6b of the German Armed Forces hospital in Hamburg. Since 1999, he has regularly presented at national and international symposia on the topic of therapy for psychotrauma, as well as EMDR. His research focus is on the development of EMDR protocols for the treatment of substance dependence, depression, burnout syndrome, chronic pain, traumatization due to physical illness and medical treatment, as well as the general development of the EMDR method. Hase has been head of the department of psychosomatic medicine and psychotherapy at a rehabilitation center in Hamburg ("RehaCentrum Hamburg") from 2007-2009. From 2009 - 2016 he was head of the department for psychosomatic medicine and psychotherapy of a hospital in Bad Bevensen, Germany (Diana Klinik). Since October 1, 2016, he is working in private practice and has been concomitantly developing the Lüneburg Center for Stress Medicine. Since 2020 Hase is senior consultant with a clinic for patients addicted to illegal drugs. Hase was an active member of the board of EMDRIA Germany, which he chaired from 2011-2018. He is a current member of the scientific committee of EMDR Europe and is on the scientific advisory board of NADA Germany. Since 2019 Hase is a member of the 'Council of Scholars' within the project, Future of EMDR Therapy by EMDRIA International. He is head of the research committee of EMDR Europe. Together with Dr. Arne Hofmann, Hase was awarded the Outstanding Research Award for his research on the EMDR treatment of depression and the creation of the international research project "EMDR Depression European Network" by the board of directors of the EMDR International Association in 2015. Michael Hase is teaching EMDR as a senior trainer in German-speaking countries and Denmark. He is also a lecturer with officially recognized psychodynamic and behavioral psychotherapeutic training institutes namely the IPA in Hanover and the IVAH in Hamburg. Hase is consulting at the department of psychosomatic medicine at the medical clinic of Dresden university hospital and at various psychiatric hospitals in Germany.

## Treatment of sex/porn addiction and chemsex with EMDR

*An increasing number of clients showing symptoms of sex / porn addiction or chemsex inspired us to develop a treatment regime within the inpatient rehabilitation of drug addicted clients. A considerable amount of the addicted clients experience shame or guilt and a strong connection between sexual behaviour and drug consumption often leading into extreme 'relapse-sessions'.*

*Treatment Programm for sex / porn addicted or chemsex are rare. EMDR Therapy shows promise in the treatment of above mentioned addictive behaviours especially if combined with addiction to illegal drugs, primarily psychostimulants. EMDR Therapy protocols and procedures have the potential to change extreme patterns of consumption regarding drugs as well as reducing the intensity of porn or chemsex related imagery (Kerschl, 2016). The reprocessing of triggers and traumatic memories is also part of the treatment protocol. The workshop gives an overview on the theory behind this approach. Clinical case examples and videotaped EMDR Therapy sessions illustrate the EMDR approach and application of the CravEx protocol (Hase, 2008), to reprocess also the addiction memory. Preliminary results show the potential of EMDR Therapy to reduce relapse regarding addictive behavior as well as the use of illegal drugs.*



**Cillo, Adrián E.**, MD. Specialist in Psychiatry (Buenos Aires University) Psychotraumatologist. President EMDR Iba Argentina - Approved Consultant and Full Member EMDR International Association. Master in Psychotherapy with EMDR - UNED - Spanish Society of EMDR. Full Member of the American Psychiatric Association (APA) and the World Psychiatric Association (WPA) Certified by the Biofeedback Certified International Association and Instructor of the Staff of Boston Neurodynamics - USA. Member of the AAPB (Applied Psychophysiology and Biofeedback) and the ISNR (International Society of Neurofeedback and Research). Member of APSA (Argentine Association of Psychiatrists) and AAP (Argentine Association of Psychiatrists). Associate Professor of Psychiatry at UCES and at the Graduate Department of the Faculty of Medicine of the University of Buenos Aires. Director of NeuroCare AR and the Argentine Foundation for the development of Neurofeedback and Biofeedback.



**Bálsamo, Susana** is a clinical psychologist from Buenos Aires, Argentina. She is an EMDR Trainer of Trainer, EMDR Trainer and Approved Consultant from the EMDR InstituteDirector of the Argentine Institute EMDR. Specialist in Psychotrauma and Psychological Intervention in individual and collective critical situations." Certified Traumatologist" for The Green Cross Academy of Traumatology. She specializes in the treatment with children and adults in trauma and trauma by medical interventions. She has been working in Surgical Psychoprophylaxis for more than thirty years. She has trained graduates in psychology, postgraduates and clinicians in EMDR psychotherapy in Buenos Aires and other provinces of Argentina and Paraguay. She has taught courses and seminars related to trauma in Argentina, Paraguay and Chile. She has presented his works related to trauma in national and international congresses. She has published works, articles and books (co-authored) on trauma. Integrates research teams with topics related to psychotraumatology.

## The importance of conceptualization in EMDR treatment

*The clinician should begin reprocessing information only after he/she has completed a FULL assessment of the client's picture and has designed a detailed treatment plan" F. Shapiro 2001 Treatment planning and conceptualization, included in Phase 1 of the standard EMDR protocol, are fundamental to carrying out the treatment design for the client. Conceptualization is essential for hypothesizing and understanding what is happening to the patient and provides critical elements for the treatment planning that will be our (dynamic) map in the EMDR psychotherapeutic treatment.*

*We propose a treatment planning model that includes a set of necessary actions, especially in more complex disorders, prior to performing the Three-Way Protocol. Background and objectives Scientific evidence shows that procedural fidelity in EMDR treatment is effective and efficient, but with clients with complex symptoms or complex and difficult traumas, we will need to make modifications to the protocol not only for reprocessing (Phases 4, 5, and 6) but also in history taking (Phase 1).*

*Conceptualization is not only important with adult clients but also in treatment with children and adolescents where we will work with parents/caregivers throughout the development of Phase 1. We will explore some of the criteria necessary for conceptualization: genogram: transgenerational trauma, hidden trauma, the history of the symptom. Stability of the patient. Diagnosis: current perspectives from a psycho-traumatological perspective. Adult attachment and symptomatic correlates and their therapeutic manifestations and in the therapeutic bond.*

*The adaptive network: forms of identification. Its importance in the conceptual and therapeutic scheme, investigating the positive triggers. It is necessary that EMDR therapists who work with children and adolescents, in addition to having completed specific training in the EMDR psychotherapeutic model, know the impact of trauma on neurodevelopment and its consequences and can make differential diagnoses taking into account neurocognitive disorders. A We will emphasize the importance of increasing and strengthening adaptive networks as an important factor within the conceptualization to connect the patient with their adaptive resources and enhance their resilient response.*

### Learning Objectives

- That attendees acquire a set of key tools for case conceptualization.
- Differentiate the Treatment Plan from the Three-Way Protocol.
- Point out the importance of the adaptive network to develop Phase 1 and especially the conceptualization and stimulation of resources that will stimulate the patient's resilience.



**O'Connor, Mike** (CPsychol. AFBPsS) has been using the EMDR storytelling approach with children of different ages for many years. He is an EMDR Europe Accredited Consultant and Training Facilitator whose core profession is Educational Psychology. His initial training in EMDR took place in 1996 under the HAP Programme. He was accredited an EMDR Consultant in 2001 and as an accredited Child & Adolescent Consultant in 2017. Mike was the Chair of the EMDR UK & Ireland Child & Adolescent Section from 2008 until 2015 and in that capacity was a member of the EMDR UK & Ireland Board. He has continued to serve on the EMDR UK Board since 2015. He is also a member of the EMDR Europe Board. He is the current President of EMDR Association UK.

During his career he has worked in a variety of posts in the voluntary sector and local government since 1974. For almost all of his career he has been involved in developing specialist services for children and families affected by loss and trauma. His former posts include Principal Psychologist for Clackmannanshire Council, Director & C.E.O. of the Notre Dame Centre, Glasgow and Consultant Psychologist in a residential school for Looked After children. Currently, he works in private practice and in an Educational Psychology Service where he is part of an Intensive Therapy Service supervising psychologists providing EMDR Therapy to children and young people.



**Logie, Robin**, Dr. is a Clinical Psychologist who works with both adults and children.

Since training in EMDR in 1996, Robin has steadily developed his expertise in EMDR. For nine years he was at the centre of the UK's EMDR community as Treasurer of the EMDR Association UK & Ireland and then its President for three years. During this time, he was on the steering committee for two international EMDR conferences and opened the 2014 EMDR Europe conference in Edinburgh in the presence of Francine Shapiro, the founder of EMDR.

For many years Robin has been involved in EMDR training as a supervisor of EMDR therapists. He has taught on EMDR trainings and presenting at conferences and is booked to provide keynote addresses at conferences in Sarajevo and Berlin. He has regularly taught on the EMDR Association's own training course for EMDR Consultants and is a member of the Accreditation Committees for the EMDR Associations in both the UK and Bosnia and Herzegovina. Dr Logie has published articles on EMDR in peer reviewed journals. He is a member of a research team at Manchester University, evaluating EMDR in the treatment of psychosis.

Robin is also involved in the use of EMDR for humanitarian purposes and is the treasurer of Trauma Aid UK (formerly HAP UK & Ireland) which provides EMDR trainings in Bosnia and the Middle East.

Robin has extensive experience of using the storytelling approach with children and adolescents. As well as presenting several workshops on this topic, Robin was the principal author of a book, published with Mike O'Connor and others on this topic: *Using Stories in EMDR. A guide to the storytelling (narrative) approach to EMDR therapy*. Logie et al (2020). Trauma Aid UK. Copies obtainable from: [www.emdrquipmenteurope.com](http://www.emdrquipmenteurope.com)

## EMDR with Children and Adolescents: Using stories in EMDR for trauma and attachment resolution

*The storytelling procedure in EMDR therapy was introduced to the EMDR community by Dr Joan Lovett in 1999. In the foreword to her book 'Small Wonders: Healing Childhood trauma with EMDR' Francine Shapiro acknowledged the importance of the new strategy developed by Lovett for children, one that incorporated storytelling along with more familiar EMDR protocols and which had proved very effective with children of all ages. Drawing on the work of Joan Lovett and others the Presenters will:*

- Discuss the place of stories in psychological functioning
- Outline the rationale for using storytelling within EMDR therapy
- Consider why, when and how to include storytelling in EMDR therapy
- Describe a framework for constructing stories for use in EMDR treatment
- Provide opportunities for questions and discussion relating to the case material and videos

#### **Method**

*In the presentation the speakers will discuss case material and share videos to illustrate the use of stories within EMDR treatment with children and who have experienced trauma and attachment disruption.*

#### **Abstract Topic**

*The storytelling procedure in EMDR therapy with children of all ages.*

#### **Learning Objectives**

- Learn about the rationale for using storytelling in EMDR
- Learn when to consider using this approach with children and adolescents who have experienced trauma and attachment disruption
- Be introduced to a framework for writing stories for use with EMDR clients and learn how to use it



**Boehm, Karsten**, Dr. phil., Dipl. Psych., is a Trainer in EMDR Europe, Consultant in CBT and specialist in OCD, Anxiety Disorders and PTSD psychotherapy. He is chair of the German EMDRIA board and member of the German National Guideline Commission on the treatment of OCD. Next to it, he is a lecturer for psychotherapy at the EMDR-Institute Germany, institutes for Cognitive Behavior Therapy (Stuttgart, Basel in Switzerland), medical councils and on different congresses (DGPPN Congress Berlin etc.). He has published a number of articles, chapters and working materials on the use of EMDR in OCD patients. From 2003-2009, he worked as a clinical and ward psychologist at the University Hospital of Freiburg and after that until 2021 as a leading psychologist in Klinik Friedenweiler of Friedenweiler in the Black Forrest, Germany. Currently, he is working in his own private practice.

## EMDR in Pandemic Time

*Resilience in a Pandemic time is an important factor to overcome and go along with stress and traumatic experiences caused by the many changes and difficulties. Second, patients suffering from Long-Covid need to be focused and treated not just on their somatic problems, but also on their traumatic memory network. Various studies have demonstrated, that EMDR could be a helpful therapy for increasing resilience; patients often experience persisting difficulties in regulating their negative emotions. In this practical workshop, EMDR is presented as a method to increase resilience, both, in Long-Covid patients and in all humans, experiencing a Pandemic time and the upcoming stress and traumatic memories.*

*Long Covid-patients experienced EMDR as a useful and motivating method. Furthermore, they felt encouraged to deal with their emotions in additional somatic treatments. EMDR is shown as a useful augmentation method to somatic strategies and medication in treating patients suffering from Long Covid by using live-demonstrations and speech. Especially, important interweaves to work on resilience and the timing in therapy will be shown.*

### Learning

- Demonstrate the use of the EMDR-protocol on Long Covid patients AND on patients suffering from the Pandemic situation in general
- Create specific interweaves for Long Covid patients
- Differentiation between the practical use of bilateral stimulation in a Pandemic time and from before (distance, light bars, tapping, online EMDR, masks)
- Use of flexibility in EMDR to increase resilience
- Use of negative and positive Cognitions in Long Covid patients

*Presentation format: Workshop*

*Presentation duration: Workshop - Standard Paper - 90 min.*

*Academic level: Intermediate*

*Content of presentation (theory/practice/research): < 20% / 30 - 50% / 20 - 30%*



**Spadoni, Manuela** is a clinical psychologist and psychotherapist. Manuela has expertise in complex trauma and dissociation and works with adult and adolescent patients who have a wide range of disorders. During her career she has trained in several psychotherapeutic approaches. She trained in the Emdr approach under Dr. Isabel Fernandez and Dr. Jim Knipe. She currently has a private practice in Monza and also works at the CRSP (Center for Research and Studies in Psychotraumatology, Dr. Fernandez, Milan). In the past she worked for the Italian National Health Service and consulted as a forensic psychologist for the Civil Court in Milan. She is an Emdr consultant and teaches Emdr treatments for Complex Patients at Emdr Association workshops, seminars in Psychiatric and Hospital Facilities and Training Schools.

## Attachment To The Perpetrator: Some Basics And Some Clinical Work Directions For Therapy

*Background: Attachment to the perpetrator is often a core issue in therapy. A child growing up in an abusive or neglectful environment has two opposing survival needs: defending him or herself and maintaining an attachment to the same people. Therefore, in order to maintain that attachment, the child has to develop a variety of defenses. Destructive patterns related to self and others may be a consequence of this kind of attachment, become evident in later in life and may require therapeutic treatment. Sometimes standard Emdr protocols may result ineffective with these clients, so additional procedures may be added in order to work with defenses/dissociation.*

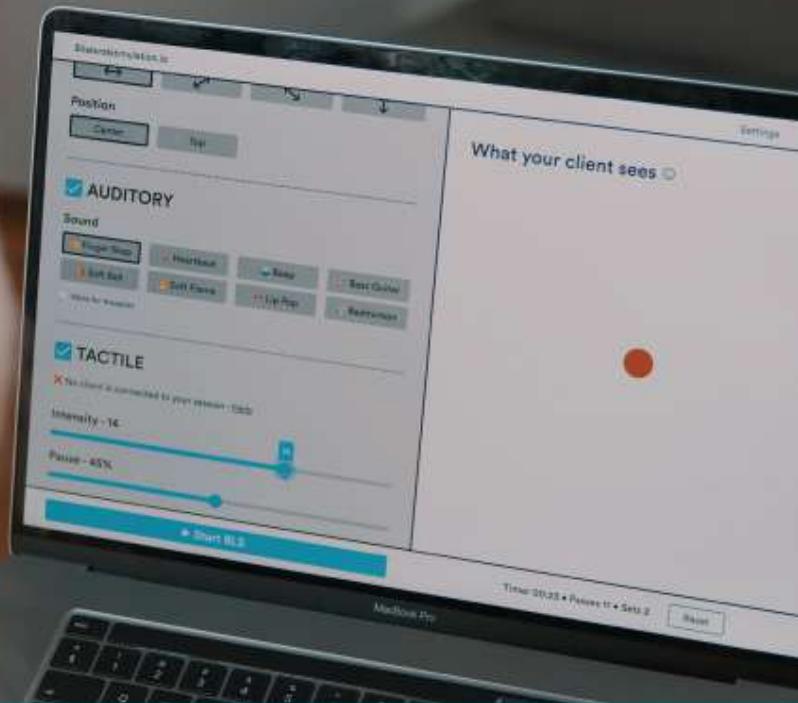
### Learning Objectives

- participants will review some basic concepts on the attachment to the perpetrator issue and deepen some Emdr related methods mainly referred to in the theory and the interventions described by Jim Knipe;
- participants will become familiar with some of the possible clinical work directions for therapy to work with the attachment to the perpetrator;
- participants will gain a more complete understanding of what has been presented seeing some parts of Emdr sessions with clients (videos and transcripts).

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# Conference Information

## General Information

The Conference opens on June 10<sup>th</sup>  
Check-in from 14:00 to 17:00  
Sessions from 17:00 to 20:30  
June 11<sup>th</sup> from 8:15 to 19:30  
July 12<sup>th</sup> from 8:15 to 17:30

The programme is available on the Mobile App and on the Website.

The conference is based upon a series of workshops and will include three keynote speakers.

The registration is for the entire conference. However it does not include the Trainers & Consultants sessions nor the lunch and dinner.

## Trainers Day

It is scheduled to take place on June 9<sup>th</sup> from 9:00 to 16:00 in a different location:

Sercotel Sorolla Palace (200 meters from the Conference Venue)  
Meeting Room: Perellonet + Arenas  
Avinguda de les Corts Valencianes, 58  
46015 València  
Tel : +34 961 86 87 00

## Consultants Day

It is scheduled to take place on June 9<sup>th</sup> from 14:00 to 17:30 in a different location:

Sercotel Sorolla Palace (200 meters from the Conference Venue)  
Meeting Room: Recati A  
Avinguda de les Corts Valencianes, 58  
46015 València  
Tel : +34 961 86 87 00

## Conference Venue

The location of the conference is the Palau de Congressos València (Valencia Congress Center):

Avinguda de les Corts Valencianes, 60  
46015 València

Tel : +34 96 317 94 00

Access to the Venue is facilitated by a very good public transport service.

- Bus lines: 62, 63, 99 and N3
- Metro lines: 1, 2 and 4

The Venue is located only 9 km from Valencia Airport (around 15 minutes | Taxi fare is around € 15)

## Registration desk

The registration desk is located at the ground floor of the Conference Center on the left from the main entrance (see map). You can use the Mobile App and the Event Check-In option by scanning the QR Code on the Welcome board. Your name badge will be automatically printed and ready for you to collect at the Registration desk (express lane).

## Information desk

An information desk is available next to the registration desk during the whole conference for any questions you may have.

## Exhibition Area

- 10 June Friday 17:00 to 20:00
- 11 June Saturday 08:15 to 18:00
- 12 June Sunday 08:15 to 16:00

## Researchers Meeting

State of the Art of EMDR research in Europe

It is scheduled to take place on June 10<sup>th</sup> from 9:00 to 12:00 at the Conference Venue. This meeting is open to all participants registered to the Conference.

## Conference Language

The official conference language is English. Main lectures (keynotes and workshops in Auditorium 1) will be translated into Spanish, Italian, French, Polish, Finnish, Ukrainian and Russian.

Workshops in Auditorium 3 will be translated into Spanish.

Headphones for translation will be available in Auditorium 1 and 3.

## Name Badge

You will receive your badge during the registration process. It will give you access to the different events. In order to grant each participant the right credit hour, your badge will be scanned at the entrance of every room.

Please wear your name badge during the whole event (including the Gala Dinner). Please make sure to pick up the badge for the accompanying person as well.

## Certificate of attendance and credit hours

Certificate of attendance will be sent by mail. The EMDR Europe conference will be awarded 16 credits.

## Responsibility and Insurance

It is strongly recommended that participants take out insurance to cover loss (including registration fees) incurred in the event of cancellation, medical expenses and loss of personal effects. The Congress Organizer will not accept liability for personal injuries or for loss or damage to property belonging to participants, either during or as a result of the event.

## WIFI

WIFI Network: EMDR 2022

Username: Emdr

Password: Valencia

## Valencia description

A place full of contrasts awaits the visitor with a charming old town next to futuristic buildings. This is Valencia, one of Spain's most welcoming cities to spend a few days. Beyond the cultural effervescence of its cities, a stroll is always a good idea, or bathing at its Mediterranean beaches. Of course, you must try the star dish, paella (true authenticity!) and other delicacies such as clams or tiger nut milk.

## Return your lanyard

Attendees, who will be leaving on their last day of the conference, will have the option to return their badge and lanyard. The collected lanyards will be repurposed and badges recycled. The collection place of lanyards and badges will be at the registration desk.

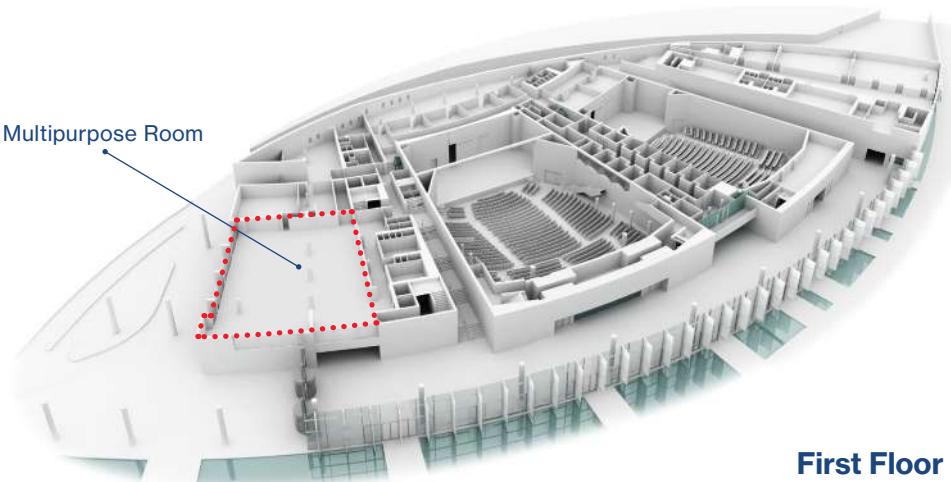
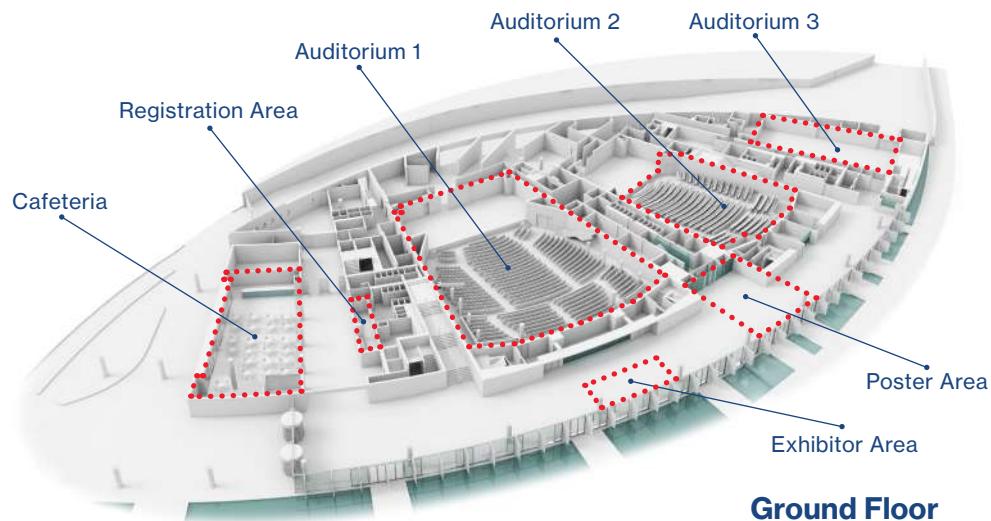
## Lost & found

It's always upsetting to lose something, which is why we kindly ask you to drop by the Help Desk in case you found what looks like a lost item. We'll collect the found objects.

## Venue Accessibility & Mobility Assistance

The Venue is accessible for people using a wheelchair. Elevators and disability toilets are available. If you need assistance while visiting EMDR 2022, please contact a member of the Kuoni Tumlare staff at the registration desks on-site.

# Floor Plan



# Welcome Cocktail, Gala Dinner & Restaurants

## Welcome Cocktail

The Welcome Cocktail is included if you selected it during the registration process and therefore free of charge.

Date: 10<sup>th</sup> June

Time: 19:30 after the Conference Opening

Where: Valencia Congress Center (congress venue)

## Gala Dinner

The Gala Dinner will take place on June 11<sup>th</sup> from 20h30 at:

Restaurant Los Toros in the Palau de les Arts  
Av. del Professor López Piñero, 1,  
46013 València

## Restaurant Suggestion for Lunch

### La Dehesa

Mediterranean food restaurant specializing in meat, rice and wine with a spacious and modern place that unifies elegance, tradition and novelty.

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Calle Valle de Ayora 6, 46015, Valencia Spain

### Voltereta, Bienvenido a Casa

A cozy place with a mix of fusion and traditional cuisine.

+34 962 60 46 07

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Para El Jueves 8 Personas A Las 15:00, 46015,  
Valencia Spain

### Deskarat

A pleasant, fun and comfortable atmosphere, while savoring dishes based on tradition, product and fusion of flavors.

+34 961 937 903

Avinguda de les Corts Valencianes, 28, 46015  
Valencia

### Zazú Lounge

A jungle interior design and a varied gastronomic offer based on the fusion of flavors and cultures.

Placa Periodista Ros Belda 6, 46021, Valencia  
Spain

Avenida Corts Valencianes 26, 46015, Valencia  
España



Asociación  
**EMDR** España

### **Apuesta por el compromiso social**

Trabajamos hacer visible la influencia del trauma a nivel individual y social, y colaborar en iniciativas de prevención e intervención.

### **Vela por la calidad de la formación en EMDR**

Fomentamos la formación de calidad de los profesionales en esta herramienta terapéutica a través de la Acreditación Europea de Clínico EMDR y aportando numerosas formaciones avanzadas a precios muy reducidos para nuestros socios.

### **Fomenta la investigación**

A través de becas y proyectos y difundiendo la evidencia científica disponible.

### **Es una red de apoyo**

Formar parte de la Asociación aporta a los terapeutas la posibilidad de conectar con otros compañeros, formar equipos y grupos de trabajo y desarrollar numerosas iniciativas.

¿Quieres formar parte? Consulta nuestra web o escríbenos a [secretaria@asociacionemdr.es](mailto:secretaria@asociacionemdr.es)

[www.asociacionemdr.es](http://www.asociacionemdr.es)

# Posters Section

## **Ahdiyeh Akbari**

The Necessity of EMDR Therapy in Iran.  
A Report on the status of EMDR Therapy in Iran.

## **Celia Antuña-Camblor**

Use of EMDR in intellectual disability: a case study.

## **Joyce Baptist**

A Randomized-Controlled Trial Using Eye Movement Desensitization and Reprocessing and Cognitive Behavioral Therapy to Treat Suicidal Ideation.

## **Sarah-Jane Butler**

How do clients experience intensive EMDR for PTSD? An interpretative phenomenological analysis.

## **Daniela D'Elia**

Online effectiveness of EMDR treatment: the experience of the Psychological Counseling Center of University of Salerno.

## **Sylvia Davies**

Is the EMDR-IGTP Protocol effective for UK Military Veterans with Post-Traumatic Stress Disorder? A Pilot Study

## **Loredana Dinapoli**

EMDR Treatment Of Traumatic Memories In Covid-19 Survivors

## **Sarah Dominguez**

EMDR for depression. A systematic review and meta-analysis

## **Anna Falco**

Treating transgenerational trauma with EMDR

## **Mazvita Machinga**

Exploring the appropriateness of EMDR with survivors of disaster: A case of Cyclone Idai in Zimbabwe.

## **Milagros Molero Zafra**

Trauma treatment for Adult Victims of Childhood Sexual Abuse: Clinical Case study: combined EMDR (G-TEP) and TF-CBT in group online format.

## **Patricia Navarro Ramos**

Estudio de la eficacia de un Programa de Intervención Online con EMDR durante la pandemia SARS COV-2 en España.

## **Laura Rato Grisalvo**

Eye Movement Desensitization and Reprocessing (EMDR) for post-traumatic stress in a group of nurses in COVID-19 pandemic context.

## **Carol Royle**

Investigating Anxiety in Semi-Professional and Club Cyclists.

## **Gloria Sanchez**

Continuous stress treatment in adolescent population after traumatic impact without safety period: Group intervention in 2 phases with EMDR (EMDR -IGTP-OTS) and TCCBT.

## **Sandra Sanz Alcázar**

A comprehensive third-generation intervention for people with psychosis and post-traumatic stress symptoms (IITG-PPT).

## **Olivier Sorel**

EMDR therapy with children and adolescents: Using a superhero card to access their resources.

## **Tatiana Spolador**

Family resilience and EMDR - Integrated therapeutic approach and review of the installation of resources EMDR protocol.

## **Maria Junqueira Zampieri**

EMDR Safety Platform In The Context Of Domestic Violence: Effects Of Heart Rate Variability (HRV) In A Randomized Study.

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# //// Keynote Speakers



## **Boris Cyrulnik**

Biological and cultural narrative of resilience



## **Isabel Fernandez**

The journey of EMDR in Europe in the last 8 years



## **Jackie June ter Heide**

EMDR treatment for moral injury



## **Luca Ostacoli**

The treatment of neglect at the core of depression



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Congressi Bologna  
Piazza della Costituzione 4  
40128 Bologna, Italy