DEVELOPMENT OF EMDR IN BOSNIA AND HERZEGOVINA - FROM AN IDEA TO THE FIRST EMDR CONFERENCE

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SUMMARY

Introduction: The needs for EMDR (eye movement desensitization and reprocessing) treatment of Bosnia-Herzegovina (BH) citizens, affected by 1992–1995 war, increased. The Trauma Aid UK (former Humanitarian Assistance Programs UK & Ireland) works in partnership with mental health professionals in BH.

Aim: We aim to build an environment in which qualified and experienced professionals trained in EMDR may establish and sustain complete EMDR education and to keep international standards of EMDR practice.

Method: Authors described the history of idea and its realization of EMDR education considering all needed phases that were provided from the Trauma Aid UK with non profit, humanitarian approach in sharing skills of EMDR to mental health therapists in BH.

Results: The trainers from Trauma Aid UK completed five EMDR trainings in Bosnia-Herzegovina for recruited trainees from different cities and entities in BH. For continual professional development (CPD) all of these mental health professionals need to be active participants in professional and scientific meetings. Though, Association of Bosnia and Herzegovina EMDR Therapists, member of EMDR Europe, organized the First EMDR conference in Bosnia-Herzegovina sponsored by Trauma Aid UK under the patronage of EMDR Association of UK & Ireland.

Conclusion: Five training of Bosnia-Herzegovina mental health workers to effectively use EMDR with enthusiastic help of EMDR trainers from Trauma Aid UK resulted with European accredited EMDR practitioners, one European accredited EMDR consultant and the first EMDR conference in BH. This will keep national development of psychotherapy capacities in post-war BH.

Key words: EMDR education – Bosnia and Herzegovina – Traum Aid UK – EMDR conference

INTRODUCTION

Between 1992 and 1995, a large percentage of the 4.5m population of Bosnia and Herzegovina (BH) people was traumatized by severe war catastrophes. After the war in BH, whole population remained highly psycho-traumatized, because of witnessing or experiencing a myriad of traumatic events (Hodgetts et al. 2003, Hasanović, Sinanović & Pavlović 2005, Hasanović et al. 2006). This includes what chillingly became known as ethnic cleansing; by mass rape, displacement and all the other atrocities of war (Morgan 2013). Experiences of war traumas create a chronic sense of decreased safety that may lead to altered health behaviors, long-term effects on emotional and physical health, and increased use of health care services (Hasanović & Herenda 2008). During the war, the civilians in BH experienced many traumatic situations similar to those experienced by combat soldiers such as extreme threats and intense feeling of helplessness (Hasanović 2011). The scars of trauma are still very evident in Bosnian society, and the resources to deal with it remain scarce (Morgan 2013). Mental health therapists had no enough capacities to meet needs of population. They are permanently in need to increase their psychotherapy capacities (Farell et al. 2011, Hasanović et al. 2017).

Eye Movement Desensitization and Reprocessing (EMDR) is a psychotherapeutic treatment which incorporates eye movements to provide bi-lateral stimulation to the brain. In 1987, Dr Francine Shapiro, an American Psychologist, made the chance observation that eye movements significantly reduce the intensity of disturbing thoughts and feelings. EMDR has developed rapidly since then and is now used by therapists all over the world. Research studies have shown that it can markedly accelerate the healing process (Shapiro 1989a, 1989b, 2001).

EMDR was initially developed to be used with sufferers of Post Traumatic Stress Disorder (PTSD) following traumatic events in their lives. In March 2005 it was validated by the National Institute for Clinical Excellence in the UK (NICE) as a treatment of choice for PTSD (see www.nice.org.uk ) (NICE 2005).

Professionals for mental health in BH were invited every year from 1995-1999 to Missouri University in Columbia Missouri, US, from Professor Arshad Husain to complete an international course from psychological trauma. So the first author of this paper had learned about EMDR at the conference “Training the trainers” in that occasion in July 1998. This was only two years after the siege in Sarajevo had ended and the population of Bosnia and Herzegovina was only just beginning to
emerge from the shadow of ethnic cleansing and prolonged military conflict. Families had been torn apart and lives destroyed. Trauma was experienced on a massive scale, the scars of which are still very evident today (Husain et al. 1997, Husain 2012, Hasanović 2011).

After try using the principles of EMDR in everyday work with traumatized patients and being amazed by the results the achievements, the first author of this paper recognized his own need for formal EMDR training and approached the EMDR community in the UK with a view to bringing the training to Bosnia and Herzegovina. Mental health professionals on Department of Psychiatry in Tuzla leaded with Izet Pajević, the Head of the Department, who were trained in Missouri from psychological trauma too, recognized that EMDR could be a useful tool when working with a population left deeply traumatized by genocide, massacre, mass rape and concentration camps, as well as displacement from homes and the destruction of houses, hospitals and schools (Morgan 2013).

When the President of Trauma Aid UK contacted the first author of this paper on behalf of HAP, she recognized someone ideally placed to identify other mental health professionals throughout the country who would be keen to train in EMDR, thus setting off a ripple effect. Synchronicity has had a hand in the project. The approach from Bosnia-Herzegovina came just when HAP UK & Ireland was launching as an independent organization, so it were well placed to respond. Humanitarian assistance is mostly associated with the developing world, but often the need can be found much closer to home (Morgan 2013). War atrocities, natural disasters, community violence, physical abuse and catastrophic illnesses are many faces of trauma and are endemic and the children are the most vulnerable victims. The atrocities in BH may have ended, but their impact remains powerful and the psychological and emotional damage wreaked on the population will doubtless be felt for generations to come (Husain 2012, Hasanović et al. 2006).

Humanitarian Assistance Programs of United Kingdom and Ireland (HAP UK & Ireland), today works under new name “Trauma Aid UK” is a charity affiliated to, though independent from, the EMDR Association UK & Ireland. It was set up to provide training in traumatology and EMDR to local mental health professionals working with people in traumatized communities worldwide (Morgan 2013).

Management of Trauma Aid UK thinks that their best help in Bosnia-Herzegovina may be realized by adding to the expertise of their mental health professionals through training them in EMDR. This is a long-term project which aims to make them self-supporting in eventually being able to provide training with the country and found their own EMDR organization. Apart from providing training, this means providing on-going supervision and support on a regular basis (Morgan 2013, Hasanović et al. 2017).

**AIM**

We aimed to describe a building of an environment in which qualified and experienced professionals trained in EMDR may establish and sustain complete EMDR education and to keep international standards of EMDR practice in post-war conditions of Bosnia and Herzegovina.

**METHOD**

Authors described the history of idea and its realization of EMDR education considering all needed phases that were provided from the Trauma Aid UK with non profit, humanitarian approach in sharing skills of EMDR to mental health therapists in BH.

**RESULTS**

One cohort consisted from three parts of EMDR training. The first level was realized through three days where trainees were introduced in basic principles of EMDR therapy in interactive lectures about history of EMDR, eight phases of EMDR protocol, practicing in small groups in couples and triads under supervision of trainer and facilitator(s).

The second part of training is intermediate level, and it consisted from practicing of eight phases of EMDR protocol, practicing in small groups in couples and triads under supervision of trainer and facilitator(s), additional theoretical learning, with supervision of case reports that trainees brought from their practice after the first level. Finally the third part of EMDR training needs three days for realization where trainees were introduced in advanced principles of EMDR therapy and work with complex medical conditions in interactive lectures following the eight phases of EMDR protocol, practicing in small groups in couples and triads under supervision of trainer and facilitator(s), with group supervision of case reports that trainees brought from their practice after the intermediate level. For those who completed theoretical part of EMDR training, they accomplished the condition for the process of supervision for acquiring accreditations for European accredited EMDR practitioners, which lasts minimum two years under the supervision of accredited EMDR consultants, accredited from EMDR Europe.

Since 2009, Trauma Aid UK has fully trained 130 professionals in EMDR through five cohorts and one training in EMDR for Children and adolescents. We estimate that more than 1,000 BH citizens have benefited from the process and are no longer suffering from psychological symptoms (Table 1).
Cohort one
The first cohort of EMDR training in Bosnia and Herzegovina took place at the Department of Psychiatry, University Clinical Centre (UCC) Tuzla pro bono, thanks to kindness and hospitality of Professor Izet Pajević was in the same time Head of Department of Psychiatry and President of Psychiatric Association in Bosnia and Herzegovina, so he signed the certificates for all trainees who completed the training. It started in December 2009, with Michael Patterson OBE and Bridget O’Rawe from Northern Ireland who provided Level 1 EMDR training for 24 trainees: neuropsychiatrists, residents of neuropsychiatry, one general practitioner and psychologists from eight different health institutions from six different cities in BH. Intermediate level of EMDR training has continued in May 2010 year with Sian Morgan and John Henry as supervisors.

The full training was completed in 16-19 May 2011, when Michael Patterson OBE (Order of British Empire: an OBE is awarded from the Queen of UK, for having a "major local role in any activity, including people whose work has made them known nationally in their chosen area") and Keith Piper provided Level 2 EMDR training for 19 trainees.

Cohort two and three
Second cohort of EMDR training in Bosnia and Herzegovina took place at the Psychiatry Department, Clinical Centre University of Sarajevo. It started in December 2012, with Sandi Richman of Richman EMDR Training, assisted by and Sian Morgan and Sanja Oakley, an EMDR consultant originally from Zagreb and fluent in the local BH languages, from UK who provided Level 1 EMDR training for 26 trainees: neuropsychiatrists, residents of neuropsychiatry, psychologists and one neurosurgeon from 16 different health institutions from seven different cities in BH. Intermediate level of this EMDR training has continued in June 2013 year with Sandi Richman, Sian Morgan and Sanja Oakley. The full training was completed in 4-6 September 2013. Sandi Richman, Sian Morgan and Sanja Oakley provided Level 2 EMDR training for 24 trainees.

Third cohort of EMDR training in Bosnia and Herzegovina took place again at the Psychiatry Department, Clinical Centre University of Sarajevo, with kindness and hospitality of Professor Abdulah Kučukalić and his clinical staff. Professor Kučukalić was in the same time Head of Psychiatry Department and President of Psychiatric Association in Bosnia and Herzegovina, so he signed the certificates for all trainees who completed the training. This cohort started in December 2013, with same trainer and facilitators as in 2nd cohort, who provided Level 1 EMDR training for 26 trainees: neuropsychiatrists, residents of neuropsychiatry, psychologists and one social worker from 24 different health institutions from five different cities in BH. Intermediate level continued in April 2014 year, and the full training was completed in 4-6 August 2014 year for 26 trainees (Hasanović et al. 2012, 2013).

Cohort four
Fourth cohort of EMDR training in Bosnia and Herzegovina took place at the International University of Sarajevo (IUS), with kindness and hospitality of IUS management and staff. This cohort started 28-30 June 2015, with Sandi Richman, assisted by and Sian Morgan and Sanja Oakley, from UK, who provided Level 1 EMDR training for 21 trainees: neuropsychiatrists, residents of neuropsychiatry, psychologists and one neurosurgeon from 20 different health institutions from nine different cities in BH. Intermediate EMDR training has continued in 18-19 September 2015 year with the same trainer and Sanja Oakley, Sian Morgan and Asko Salihović from UK as facilitators. The full training was completed in 13-15 December 2015 again under the trainer leadership of Sandi Richman, Sian Morgan, Sanja Oakley, Mevludin Hasanović and Šemsa Šabanović who successfully provided Level 2 EMDR training for 19 trainees.

Cohort five
Fifth cohort of EMDR training in Bosnia and Herzegovina took place at the Dramar Center Tuzla, with kindness and hospitality of it’s management and staff.

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Table 1. Distribution of trainers, facilitators, and trainees regarding cohorts of EMDR trainings in Bosnia and Herzegovina

<table>
<thead>
<tr>
<th>Cohort</th>
<th>1st level</th>
<th>2nd level</th>
<th>Trainers*</th>
<th>Facilitators**</th>
</tr>
</thead>
<tbody>
<tr>
<td>2nd - Sarajevo</td>
<td>26</td>
<td>24</td>
<td>S. R.</td>
<td>S. M., S. O.</td>
</tr>
<tr>
<td>3rd - Sarajevo</td>
<td>26</td>
<td>26</td>
<td>S. R.</td>
<td>S. M., S. O., M.H.</td>
</tr>
<tr>
<td>4th - Sarajevo</td>
<td>21</td>
<td>19</td>
<td>S. R.</td>
<td>S. M., S. O., A. S., M. H.,</td>
</tr>
<tr>
<td>5th - Sarajevo</td>
<td>23</td>
<td>22</td>
<td>S. M.</td>
<td>S. O., M. H., Š. Š., S. H.</td>
</tr>
<tr>
<td>EMDR C&amp;A</td>
<td>26</td>
<td>20</td>
<td>J. M-S.</td>
<td>S. O.</td>
</tr>
<tr>
<td>Total</td>
<td>146</td>
<td>130</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Sandi Richman (S. R.), Dr. Michael Patterson OBE (M. P. OBE), Sian Morgan (S. M.), Dr. Joanne Morris-Smith (J.M-S)

** Bridget O’Rawe (B. O’R.), Sian Morgan (S.M.), John Henry (J. H.), Keith Piper (K. P.) Sanja Oakley (S.O.), Asko Salihović (A. S.), Dr. Mevludin Hasanović (M. H.), Šemsa Šabanović (Š. Š.), Sedin Habibović (S. H.)
This cohort started 28-30 April 2016, with Sian Morgan, assisted by Sanja Oakley from UK and Mevludin Hasanović and Šemsa Šabanović, from BH, who provided Level 1 EMDR training for 23 trainees: neuro-psychiatrist, pediatrician, general physician, psychologists, special educator and one social worker from 20 different health institutions from nine different cities in BH and one BH psychologist from Switzerland.

Intermediate EMDR training has continued in 25-26 August 2016 year with the trainer Sian Morgan and same facilitators from BH.

The full training was completed in 14-15 December 2015 again under the trainer leadership of Sian Morgan with BH facilitators who successfully provided Level 2 EMDR training for 22 trainees who completed theoretical part of EMDR training. Thus, they accomplished the necessary steps for the further process of supervision as well, for acquiring accreditations for European accredited EMDR psychotherapists.

Training EMDR for Children and Adolescents

The trauma is also having a knock-on effect on younger generations. Many younger people, although only indirectly affected by the impact of the war through their parents’ experiences, are also presenting with psychological problems such as anxiety and depression. Although EMDR is known primarily as a treatment for trauma (Logie 2012), it can also be used for a wider range of other psychological presentations. Twenty-six of these clinicians have also completed Parts 1 (15-16 May 2015) and 2 (14-15 May 2016) EMDR Child Training provided by Joanne Morris-Smith (Hasanović et al. 2016a). So, Bosnian EMDR therapists are already using EMDR successfully to treat these conditions as well.

Association of EMDR Therapists in Bosnia and Herzegovina and Membership in EMDR Europe

With help of HAP UK & Ireland BH EMDR trainees established Association of EMDR Therapists in Bosnia and Herzegovina 14.02.2014 in Sarajevo. In 2015, the newly-founded EMDR Association of Bosnia-Herzegovina became a full member of EMDR Europe (Hasanović et al. 2016b). Trauma Aid UK is continuing to provide training and supervision support in Bosnia and Herzegovina, where seven clinicians are now EMDR Accredited Practitioners and the first author of this paper is the first EMDR Europe Accredited Consultant in Bosnia-Herzegovina and President of the National Association (Hasanović et al. 207).

Supervision

As with training courses of any kind, both in the UK and overseas, we know that not all participants will go on to use what they have learned with proficiency or on a daily basis. For this reason, and to maximize the success of HAP projects, another important component is to provide ongoing supervision and support. A number of volunteer EMDR consultants have already been providing Skype supervision to participants on the first training program. This has now been extended and more volunteer EMDR accredited consultants have been recruited to work with the Bosnian cohort currently being trained (Hasanović et al. 2011). These volunteers attended trainings in London and in Birmingham. Sandi Richman and Dr David Blore, HAP veterans and highly experienced EMDR supervisors, are providing further ongoing support through an online linked-in network. It is also our aim to incorporate some ongoing research into this project and other related work in the near future.

Regarding this perspective development of EMDR therapy in BH, we organized this first EMDR Conference in Bosnia and Herzegovina.

DISCUSSION

To train in EMDR, someone needs to be a qualified mental health professional with some experience in the field. Several hundred people complete the training each year in the UK. When selecting a course, first check that the trainer is accredited by the EMDR Europe Association. The initial seven days of training are usually spread over several months. Once a trainee have completed the initial training he/she can work towards accreditation as an EMDR Europe practitioner through supervision of own EMDR practice. There is a requirement to attend for supervision but accreditation is based on the clinician’s competence in all areas of EMDR practice. EMDR consultants are accredited to provide supervision and consultation to therapists who are working towards becoming accredited practitioners. EMDR consultants have completed an additional consultants’ training and have been assessed on their supervising skills and have considerable further supervised experience of using the therapy (Logie 2012).

While a number of EMDR therapists from the UK have been involved in HAP projects over the years, it was not until 2009 that HAP UK & Ireland was set up as an independent organization. Trauma Aid UK started its Bosnia Project in 2009, after a local request for help from mental health professionals (Hasanović et al. 2013). This is a long-term project, aiming ultimately to bring BH to the point where its trauma professionals can continue the training themselves under the banner if their national EMDR Association of Bosnia-Herzegovina.

Since 2009, Trauma Aid UK has fully trained 130 professionals in EMDR and estimates that more than 1,000 BH citizens have benefited from the process and are no longer suffering from psychological symptoms. Twenty-six of these clinicians have also completed Parts 1 and 2 EMDR Child Training provided by Joanne Morris-Smith.
In 2015, the newly-founded EMDR Association of Bosnia and Herzegovina became a full member of EMDR Europe. Trauma Aid UK is continuing to provide training and supervision support in Bosnia and six clinicians are now EMDR Accredited Practitioners, and the first author of this article is the first EMDR Europe Accredited Consultant in BH.

The on-going supervision via Skype provided by our UK based volunteer EMDR Accredited Consultants has been vital to the success of this project and the continual development of expertise of our BH colleagues. Nowadays, in BH there is group supervision in vivo, with existing accredited EMDR consultant and candidates for EMDR consultants.

We are pleased that EMDR has been greeted so enthusiastically in BH, and looks forward to continuing working closely with our colleagues from UK and BH.

We would like to express our thanks to all contributors who have provided their time so freely as trainers, facilitators and the team of EMDR Consultants providing on-going supervision.

The project offered a timely opportunity to assist our fellow European mental health professionals in healing their peoples’ suffering as they grapple with the aftermath of war.

Unlike crisis humanitarian assistance that focuses on treating people in the immediate aftermath of a disaster, this project is planned to last five years, and is based on the same simple principle as the parable of the fisherman: ‘Give a man a fish and you feed him for a day. Teach him how to fish, and you feed him for a lifetime’ (Morgan 2013).

The project has been extended throughout Bosnia-Herzegovina and hopefully in the future to other areas of the Balkans. The success of HAP projects depends enormously on the relationships built between all involved. The expanding network of EMDR therapists in Bosnia and Herzegovina and the UK is one of the great strengths and mutually beneficial outcomes of the work, and to date has provided valuable opportunities to share and explore professional and personal experiences across cultures (Morgan 2013).

We, Bosnia-Herzegovina EMDR trainees and practitioners together with Trauma Aid UK are pleased that EMDR has been greeted so enthusiastically in BH and we look forward to mutual working closely together and forging and strengthening these links in the future.

CONCLUSION

Five training of Bosnia-Herzegovina mental health workers to effectively use EMDR with enthusiastic help of EMDR trainers from Trauma Aid UK resulted with the first EMDR conference in BH. The trainers from Trauma Aid UK completed five EMDR trainings in Bosnia-Herzegovina and training in EMDR for Children and adolescents for recruited trainees from different cities and entities in BH. For continual professional development (CPD) all of these mental health professionals need to be active participants in professional and scientific meetings. Though, Association of Bosnia and Herzegovina EMDR Therapists, member of EMDR Europe, organized the First EMDR conference in Bosnia-Herzegovina sponsored by Trauma Aid UK under the patronage of EMDR Association of UK & Ireland. This will keep national development of psychotherapy capacities in post-war BH.

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We are thankful to all people who helped the people of Bosnia-Herzegovina during the severe war 1992-1995 and who recognized needs to continue with substantial help and after war up to nowadays.

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Contribution of individual authors:
Mevludin Hasanović: conception and design of the manuscript and interpretation of data, literature searches and analyses, evaluations, manuscript preparation and writing the paper;
Sian Morgan: made substantial contributions to conception and design, participated in revising the article and gave final approval of the version to be submitted;
Sanja Oakley: made substantial contributions to conception and design, participated in revising the article and gave final approval of the version to be submitted;
Sandi Richman: made substantial contributions to conception and design, participated in revising the article and gave final approval of the version to be submitted;
Šemsa Šabanović: made substantial contributions to conception and design, participated in revising the article and gave final approval of the version to be submitted;
Izet Pajević: made substantial contributions to conception and design, participated in revising the article and gave final approval of the version to be submitted.

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