

# 2021 CONFERENCE

## Registration & Pricing Information

### CONFERENCE REGISTRATION

Conference registration is open. Check our conference website for updated information ([www.emdriaconference.com](http://www.emdriaconference.com)). For the virtual conference, it is not necessary to choose sessions at the time of registering. Once registered, instructions for accessing the live-streaming sessions you wish to attend will be provided to you via email as the conference approaches.

### PROGRAM DATES:

November 6–7 | November 9  
November 11 | November 13–14

### EARLY-BIRD REGISTRATION DEADLINE:

September 30, 2021, by 6 p.m. CT

### REGISTRATION DEADLINE:

November 7, 2021, by 6 p.m. CT

### CANCELLATION POLICY:

Cancellation requests from registrants **must** be made by completing the online Cancellation Form on our conference website. **EMDRIA will not accept cancellation or refund requests by phone or email.** A total refund of paid registration fees, minus a \$100 processing fee, will apply to all cancellations submitted by September 30, 2021. EMDRIA will not issue refunds after September 30, 2021.

EARLY BIRD (Now – Sept. 30)	REGULAR (Oct. 1 – Nov. 7)
<b>\$575</b> Non-Member	<b>\$625</b> Non-Member
<b>\$450</b> Member	<b>\$500</b> Member
<b>\$250</b> Student Member	<b>\$250</b> Student Member

## Conference Session Information

EMDRIA Virtual Conference 2021 includes an outstanding lineup of virtual sessions designed to help EMDR clinicians stay on the cutting edge of practice, education, and research. Select from 38 different sessions held Saturday, November 6 through Sunday, November 14. During each session, participants will maximize learning during a live Q&A with expert presenters.

### SESSION CATEGORIES

SESSION CATEGORIES	SESSION NO.
Acute Stress Reaction/Early EMDR Interventions	111, 115, 121
Addictions - Behavioral/Substance	123
Anxiety & Panic Disorders	411
Attachment Issues/Personality Disorders	216
Case Conceptualization	215, 314
Children & Adolescents	214, 401, 416
Chronic Illness/Medical Issues/Somatics	414
Couples/Relationship Issues/Sexuality	113, 323
Dissociation/Complex Trauma	114, 201, W1, 315, 325, 413
Diversity/Equity/Inclusion	101, 112, 122, 212, 311, 412
Eating Disorders	125
Family/Parenting	W2, 415
Intimate Partner Violence	321
Models/Theory	213
Neurobiology	211
PTSD	124, 301
Public Practice/Agencies	313
Research	312, 324
Techniques & Strategies	322

## NEW SPANISH TRACK

This year we are pleased to add a track of sessions delivered entirely in Spanish! There will be one Spanish session included in each breakout section offered during both weekends of the conference, for a total of six sessions. These sessions will be included when you register for the regular conference. Still, they will also be offered as a separate registration opportunity for our Spanish-speaking clinicians who wish to take advantage of only those sessions.

### Saturday, November 6

**115** *presented by Lucina Artigas*

**125** *presented by Natalia Seijo*

### Sunday, November 7

**216** *presented by Dolores Mosquera*

### Saturday, November 13

**315** *presented by Sandra Baita*

**325** *presented by Anabel Gonzalez*

### Sunday, November 14

**416** *presented by Ana Gomez*

## PRESENTATION LEVELS

### INTRODUCTORY

Participants need no prior knowledge of the specific topic or content to participate fully and effectively in the workshop. The information presented or skills taught will most likely be unfamiliar to participants and will include basic theory and skills.

### INTERMEDIATE

Participants should have some basic knowledge of the specific content covered but need not have in-depth knowledge or skills. The workshop will provide information at a level beyond the basic knowledge of the topic.

### ADVANCED

To participate fully, those enrolled must possess a substantial working knowledge or skill level in your specific content area. Generally, the participants have significant knowledge and experience in the content area. The speaker will provide advanced techniques or knowledge needed to refine and expand current expertise.

### Integrative Presentations

To participate fully, those enrolled must possess a substantial working knowledge or skill level in the specific content area. Generally, it would be expected that the participants have significant knowledge and experience in the content area. Presenter will provide advanced techniques or knowledge needed to refine and expand current expertise.

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## SATURDAY, NOVEMBER 6, 2021

### SESSION 101

10 a.m. – 11:30 a.m. (1.5 Credit Hours)

Wendy Ashley, Psy.D., LCSW

TOPIC AREA: Diversity/Equity/Inclusion

INTERMEDIATE

#### Contemporary JEDI's in EMDR Treatment

A Justice, Equity, Diversity, and Inclusion (JEDI) lens is critical to effectively engaging with clients, facilitating culturally relevant interventions, and effectively addressing trauma. A JEDI approach to clinical practice includes critical consciousness, cultural humility, and courage by practitioners to name, unpack and deconstruct racialized memories, narratives and traumas that may be linked to other traumatic experiences. Clients of color may disclose experiences of trauma coupled with individual, interpersonal, systemic, and vicarious encounters of racial trauma, creating a complex, nuanced trauma presentation. Effective adaptations for clients of color necessitates consideration and acknowledgment of historical trauma, intersectional identities, stigma, power, privilege, and shame in clinical spaces. This presentation will provide a framework for clinicians to enhance their EMDR practices, highlight the significance of anti-racist positionality, and provide strategic recommendations for implementing a JEDI lens and approach in EMDR treatment.

### SESSION 111

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Kelly Smyth-Dent, LCSW

TOPIC AREA: Acute Stress Reaction/Early EMDR Interventions

INTRODUCTORY

#### INTEGRATIVE PRESENTATION

##### EMDR Early Intervention & Rapid Response: Benefits of Integrating ASSYST

Participants interested in EMDR Early Interventions, rapid response, and humanitarian mental health work will be introduced to the Acute Stress Syndrome Stabilization (ASSYST) procedures. These low-intensity-interventions can be administered in-person or online and in individual and/or groups formats. These procedures can be administered within the first hours or days after an adverse experience when the person shows severe symptoms of psychological distress, physiological

reactivity, and/or deterioration in current functioning. The objective of these procedures is focused on the client's nervous system activation regulation through the reduction or removal of the activation produced by the sensory, emotional, or physiological components of the intrusive distressing/pathogenic memories of the adverse experiences to achieve optimal levels of nervous system activation; thus, facilitating the AIP system and the subsequent adaptive processing of the information. Participants will learn the contexts in which to use the ASSYST procedures to enhance their clients EMDR experience.

### SESSION 112

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Erica Bonham, LPC; Chinwe Williams, Ph.D., LPC, NCC, CPCs

TOPIC AREA: Diversity/Equity/Inclusion

INTERMEDIATE

#### INTEGRATIVE PRESENTATION

##### Healing Racial Trauma with Somatic EMDR Therapy

The presentation will explore how to assess and address racialized trauma with EMDR therapy, enhanced by somatic approaches. Diversity trainings that do not incorporate the body are insufficient in addressing racialized trauma since so much of the harm occurs on subconscious/autonomic and physiological levels. The multi-racial facilitators will emphasize the importance of clinicians assessing and unpacking their own implicit bias and privilege and teach how to embody anti-racist work. The facilitators will incorporate polyvagal theory and ego state work in addressing race-based trauma. They will explore how to assess for generational trauma within the EMDR protocol. Participants will identify strategies for broaching topics of race (even with white clients) and how to avoid causing racialized harm to BIPOC clients. Participants will learn about somatic resources that can help establish client safety across various cross-cultural therapeutic relationships.

## SESSION 113

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Quandra Chaffers, LCSW

TOPIC AREA: Couples/Relationship Issues/Sexuality

INTRODUCTORY

### INTEGRATIVE PRESENTATION

#### Sex Therapy and EMDR: Bringing the Bedroom to the Therapy Room

Psychotherapists often express fear about addressing sexuality in the therapy practice. Therapists must create safety for clients by bringing up sexuality and related life stressors. Otherwise, clients often report wanting to talk about sex but feeling uncertain about when to ask their professional important questions (Timm, 2009). Some sexuality topics include, but are not limited to, sexual shame, childbirth, fertility issues, lack of pleasure during sex, body image, coming out, and a host of other issues relevant across the life course. If therapists create this safe space, clients will benefit from processing and overcoming many traumas besides the big T traumas of sexual abuse. This presentation will also briefly take an intersectional approach by helping therapists target oppression based on marginalized sexual identities while understanding how racial background may compound on those targets.

## SESSION 114

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Dolores Mosquera, PsyD

TOPIC AREA: Dissociation/Complex Trauma

INTERMEDIATE

### EMDR Therapy for Gender Violence

Some people find themselves repeatedly involved in harmful and abusive relationships. Many of them struggle to walk away from the relationship, set boundaries, or protect themselves adequately. Two concepts will be essential 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 his/her/they history. We will look at the different problem areas in which it is usually necessary to intervene. Cases will be presented from an EMDR perspective, both in terms of case conceptualization and treatment.

## SESSION 115 – SPANISH TRACK

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Lucina Artigas, Ph.D.; Viviana Urdaneta, LCSW

TOPIC AREA: Acute Stress Reaction/Early EMDR Interventions

INTRODUCTORY | INTERMEDIATE | ADVANCED

### Escenas detrás de las alas del Abrazo de la Mariposa

Después de un desastre natural o uno causado por intervención humana, las personas afectadas desarrollan una serie de síntomas que de no ser tratados de manera pronta pueden incrementar en severidad. Las intervenciones tempranas con EMDR han sido utilizadas alrededor del mundo para ayudar a aquellos que han experimentado este tipo de desastres. Estas intervenciones pueden ayudar en dos áreas: tratamiento y prevención. Este taller discutirá el origen y utilización de protocolos basados en el modelo del Sistema de Procesamiento de Información a estados Adaptativos (SPIA) incluyendo aplicaciones grupales de la terapia EMDR. Además, se compartirá información acerca del origen y utilización del abrazo de la mariposa como una herramienta de estimulación bilateral que facilita la regulación y estabilización en la ventana de tolerancia del paciente.

## SESSION 121

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

Ignacio Jarero, Ph.D., Ed.D.

TOPIC AREA: Acute Stress Reaction/Early EMDR Interventions

INTRODUCTORY

### Understanding the EMDR-IGTP-OTS Provided Both In-Person and Online

To address the COVID-19 mental health challenge, Dr. Jarero and his team adapted for remote (online) use. They conducted research on the EMDR Integrative Group Treatment Protocol (EMDR-IGTP) for Ongoing Traumatic Stress Remote (EMDR-IGTP-OTS-R). In addition to over 30 articles published on the EMDR-IGTP and the EMDR-IGTP-OTS, in this Multisite RCT, healthcare professionals working in nine hospitals during the 2020 COVID-19 pandemic received individual EMDR therapy in a group and online setting. This innovation is evidence-based, informative, and timely to help scale up and expand the horizons of your EMDR practice. This presentation seeks to broaden the participants' understanding of what is possible when providing EMDR therapy. The eight phases of EMDR are adapted to be provided in-person and online in a group setting and include a case example based on a published research article. Participants will also witness a video demonstration of the EMDR-IGTP-OTS.

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## SESSION 122

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

**Brittany Johnson, LMHC**

**TOPIC AREA:** Diversity/Equity/Inclusion

INTRODUCTORY

### INTEGRATIVE PRESENTATION

#### Racial Trauma in High Achievers

The Racial Trauma protocol for high achievers is designed to implement the Adaptive Information Processing (AIP) through the intersection of high achieving adults and a culturally competent lens. It includes consideration for culturally competent resourcing, identifying oppressive negative beliefs that primarily exist in spaces where they are the minority, how racial trauma is carried and stored in the body, and processing the traumatic incidents an individual and systemic approach. Participants will learn how to modify EMDR standard protocol to emphasize resourcing for past, current, and future microaggressions and incidents of racial trauma. Participants will learn how to help clients identify negative beliefs based on their experience with microaggressions and racial trauma and how to implement somatic resourcing protocols as part of resourcing. Participants will learn how to use Phase 8 to prepare for continued exposure to microaggressions and racial trauma.

## SESSION 123

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

**Larisa Traga, LCSW, MAC, CCDS**

**TOPIC AREA:** Addictions: Behavioral/Substance

INTRODUCTORY | INTERMEDIATE

### INTEGRATIVE PRESENTATION

#### Integrating MI & EMDR: Working with Complex Presentations and Ambivalence

Motivational Interviewing (MI) is a practical, evidence-based collaborative conversation style supporting patient treatment engagement and reducing reluctance around behavior change. This interactive workshop will introduce participants to the skills, strategies, and processes of MI and its application with EMDR. Participants will learn how MI can complement and enhance EMDR treatment with a specific focus on 8 phases and 3 prongs to support clients throughout the EMDR process. By implementing MI processes (engaging, focusing, evoking, planning), a clinician can keep clients engaged when they are anxious about addressing their trauma. MI can help EMDR

clinicians enhance client willingness around their goals (i.e., reducing substance use), strengthen motivation when challenges arise, sustain change after an EMDR session, and tailor treatment to the patient's needs. Finally, the workshop will differentiate between a "top down" vs. "bottom up" approach to reprocessing using EMDR and review additional resources to support individuals with complex PTSD.

## SESSION 124

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

**Sunny Strasburg, LMFT**

**TOPIC AREA:** PTSD

INTERMEDIATE | ADVANCED

### INTEGRATIVE PRESENTATION

#### Psychedelic Assisted Psychotherapy and EMDR:

Find out how psychedelics can enhance and amplify the effectiveness of EMDR. Studies are showing that psychedelic-assisted therapy potentiates our ability as trained psychotherapists to heal and assimilate trauma. Ketamine is currently the only legal psychedelic in the United States. Sunny Strasburg, LMFT, has created specific protocols incorporating EMDR with Ketamine Assisted Therapy. Using ketamine at a midrange and sub-anesthetic dose to complement the 8 phases of the EMDR protocol can amplify the effectiveness of trauma treatment. While therapists must be trained explicitly in psychedelic-assisted therapy and EMDR, this presentation will provide an overview of this novel approach and give attendees an introduction to this exciting and synergistic approach to trauma therapy.

## SESSION 125 – SPANISH TRACK

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

**Natalia Seijo, Psy**

**TOPIC AREA:** Eating Disorders

#### Abordaje de los Trastornos Alimentarios desde la Terapia EMDR

Basándonos en años de experiencia con los trastornos alimentarios (TA), el tratamiento más adecuado es el que trata los aspectos que dan origen al trastorno, en lugar de centrarse en el síntoma de manera aislada. Sin lugar a dudas, la terapia EMDR logra este objetivo, ya que funciona yendo a la raíz del trauma, donde comenzó todo, y reparándola. Cuando hablamos de trauma en los TA, no hablamos solo de acontecimientos traumáticos, sino también de apego y de traumas del desarrollo,

bastante habituales en estos trastornos. El protocolo de EMDR para los trastornos alimentarios ayuda a mejorar el modo en el que entendemos estos trastornos y reduce el tiempo de recuperación de las personas que los padecen. Este protocolo combina el trabajo con trauma, apego y disociación. Estos tres campos están conectados en la base de estos trastornos y deben trabajarse para lograr resultados positivos a largo plazo. El protocolo se desarrolla a lo largo de las ocho fases de tratamiento y se centra en tres puntos básicos: • Identificación y organización del mundo interno de la persona • suavizar las defensas • Procesamiento de los diferentes traumas (T grande, t pequeña). El objetivo final se logra con la integración del mundo interior, a través del reprocesamiento de los traumas que originan el trastorno.

## SUNDAY, NOVEMBER 7, 2021

### SESSION 201

10 a.m. – 11:30 a.m. (1.5 Credit Hours)

Jennifer Madere, MA, LPC-S; D. Michael Coy, MA, LICSW

TOPIC AREA: Dissociation/Complex Trauma

#### EMDR & Dissociation: Past, Present and Future

\* Check [www.emdriaconference.com](http://www.emdriaconference.com) for updates to this session.

### SESSION 211

12:30 p.m. – 4 p.m. (3 Credit Hours)

Rebecca Kase, LCSW, RYT

TOPIC AREA: Neurobiology

INTRODUCTORY | INTERMEDIATE | ADVANCED

#### INTEGRATIVE PRESENTATION

##### EMDR & Polyvagal Theory: An Integrated Approach

Polyvagal Theory (PVT) and EMDR are neuro-informed, cutting-edge clinical approaches. This workshop will teach participants methods for integrating these two complementary models through the 8 phases of EMDR. Participants will review the core components of PVT and their integration with EMDR. We will explore PVT and AIP-inspired approaches for case conceptualization, opportunities for PVT-informed preparation techniques, and the role of PVT throughout the phases of reprocessing. Participants will also gain knowledge of the role of therapeutic presence as a key ingredient for successful treatment outcomes.

### SESSION 212

12:30 p.m. – 4 p.m. (3 Credit Hours)

Mark Nickerson, LICSW

TOPIC AREA: Diversity/Equity/Inclusion

INTRODUCTORY | INTERMEDIATE | ADVANCED

#### Connection and Belonging: A Core Human Need and Distinct Category of NC/PCs

Maslow, social psychologists, and many other respected theorists and researchers have cited the core human need for interpersonal connection and belonging. Trauma and adversity, in this realm, include interpersonal rejection, attachment failures, social exclusion, and discrimination which can result in isolation, loneliness, disempowerment, alienation, and compromised physical health. Extensive cross-cultural research documents the debilitating effect of isolation and social exclusion from children to the elderly and across many other social identities. EMDR training has tended to identify core negative and positive cognitions as typically falling into three categories: responsibility/self-worth, safety, and power/control. This presentation describes and advocates for recognizing a fourth primary category of beliefs, which are consistent with Dr. Francine Shapiro's conceptualization of core beliefs and yet distinct from the currently emphasized three categories. Awareness of the resonance of these core beliefs related to connection and belonging affirms the lived experience of many EMDR therapy clients.

### SESSION 213

12:30 p.m. – 4 p.m. (3 Credit Hours)

Barbara Horne, MASc, RP, RMFT

TOPIC AREA: Models/Theory

INTERMEDIATE

#### INTEGRATIVE PRESENTATION

##### Getting Ventral with Polyvagal Theory in EMDR Therapy

We love Polyvagal Theory (PVT), but are perhaps not yet comfortable with it. This workshop will help you "get ventral" with PVT, by synthesizing it into more workable use with clients. The evolution of PVT, from its dense, difficult origins to its current accessible state can now be mirrored in our offices as we teach it to clients and explicitly use it. Porges has bridged the gap between academia and ourselves, so we too can bridge it between ourselves and our clients. It is helpful to understand PTSD and dissociation in Polyvagal terms. Here you will be shown how to address EMDR

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therapy's tasks of history-taking, case conceptualization, stabilization, and reprocessing using the Polyvagal lens. PVT in EMDR therapy's Phases 1-8 will be illustrated using personal and case examples and whole group exercises.

## SESSION 214

12:30 p.m. – 4 p.m. (3 Credit Hours)

Ann Beckley-Forest, LCSW, RPT-S; Annie Monaco, LCSW, RPT

TOPIC AREA: Children & Adolescents

INTRODUCTORY

### Parents in the Process of Playful EMDR with Children

Therapists struggle to include caretakers in all the phases of EMDR with children, including engaging them to agree to allow the processing of memories. Therapists may also have ambivalence if the caretakers are the cause of the attachment trauma, they failed to protect the child adequately, and the parental attachment pattern is negatively impacting the child. Despite the complexity, the literature is clear that caregivers (by which we mean biological, foster and adoptive parents, grandparents, etc.) must be involved in EMDR therapy as a resource and for the fullest benefit of trauma processing with EMDR. The workshop will provide playful interventions for children and involve caregivers in the preparation phase as co-regulators of their children; and being present in the room and key in supporting the child's reprocessing using the storytelling approach. Therapists will assess in-between session processing to determine a change in the child with the Closure and Re-Evaluation checklist.

## SESSION 215

12:30 p.m. – 4 p.m. (3 Credit Hours)

Suzanne Rutti, MSW, LISW-S; Lisa Hayes, MSW, LISW-S; Tammy Moore, MSW, LISW-S

TOPIC AREA: Case Conceptualization

INTERMEDIATE

### Secondary Trauma & EMDR Therapy: Implications for Clinicians

Treating survivors of trauma and adverse life experiences poses a risk for developing our secondary trauma symptoms. Attendees of this workshop will complete self-assessments for secondary trauma symptoms and identify self-care plans for the management and prevention of burnout. The panel will discuss specific

EMDR therapy phase 2 strategies for self-use. This presentation will explore the impact of working with trauma survivors while experiencing secondary trauma symptoms and how to conceptualize cases when working with clinicians as clients.

## SESSION 216 – SPANISH TRACK

12:30 p.m. – 4 p.m. (3 Credit Hours)

Dolores Mosquera, Psy

TOPIC AREA: Attachment Issues/Personality Disorders

### Retos Terapéuticos en el Trabajo con el Trauma

¿Alguna vez te encuentras con dificultades a la hora de organizar el plan de tratamiento con casos complejos? ¿las herramientas que suelen funcionar con otros clientes se quedan cortas? ¿te cuesta fijar objetivos realistas con algunos clientes? ¿alguna vez sientes confusión en torno a por dónde empezar y cómo mantener una estructura de trabajo? ¿a veces dudas sobre qué hacer, cómo y cuándo? ¿sientes que hay bloqueos que es difícil manejar? En este taller se dará respuesta a estas preguntas y otros temas prácticos en relación con los retos frecuentes en el trabajo con el trauma y en particular, con el procesamiento del trauma con la terapia EMDR. Se describirán casos con diferentes problemáticas y puntos de bloqueo y las herramientas para organizar el trabajo y manejar los diversos retos que suelen surgir.

## TUESDAY, NOVEMBER 9, 2021

## SESSION W1

10 a.m. – 1:30 p.m. (3 Credit Hours)

Arielle Schwartz, Ph.D.

TOPIC AREA: Dissociation/Complex Trauma

INTERMEDIATE

### INTEGRATIVE PRESENTATION

#### EMDR Therapy for Complex PTSD: An Integrative Approach to Treating Clients

Many therapists are trained in the treatment of single traumatic events. However, clients with complex PTSD (C-PTSD) come to therapy with an extensive history of trauma that often begins in childhood and continues into adulthood with layers of personal, relational, societal, or cultural losses. The most common question asked by EMDR therapists treating C-PTSD is, "Where do I start?" In this training, you will develop confidence in your ability to organize and prioritize your client's treatment goals

successfully. You will learn how to effectively work with clients who have experienced multiple traumatic events and prolonged trauma exposure including the chronic stress of the COVID-19 pandemic. You will learn valuable leading-edge strategies that integrate polyvagal theory, relational psychotherapy Parts Work Therapy, and Somatic Psychology, with EMDR therapy. We will discuss how to successfully stabilize the dysregulated affect and dissociative symptoms accompanying C-PTSD in preparation for traumatic event desensitization and reprocessing.

## THURSDAY, NOVEMBER 11, 2021

### SESSION W2

10 a.m. – 1:30 p.m. (3 Credit Hours)

**Cherilyn Rowland Petrie, MA, LMHC**

**TOPIC AREA:** Family/Parenting

INTRODUCTORY | INTERMEDIATE

### Legacy of Love: EMDR Therapy for (Wounded) Parents of Wounded Kids

The transmission of trauma from one generation to the next is an issue that motivates many clinicians to address trauma in their adult clients. Few approaches directly address the impact of childhood maltreatment on current parenting. This workshop guides clinicians to apply the Standard EMDR Protocol to work with parents of traumatized children to improve parenting skills and reduce barriers to parenting. A review of recent research on the intergenerational transmission of trauma will be presented to substantiate the importance of addressing the critical issue of how past trauma underlies parenting responses. Clinicians will hone their case conceptualization skills, learn how to develop resources to improve parenting, and identify targets to reduce past trauma impacting current parenting and attachment. By focusing directly on the client's maltreatment that impacts their parenting, clinicians will support the creations of a healing home environment.

## SATURDAY, NOVEMBER 13, 2021

### SESSION 301

10 a.m. – 11:30 a.m. (1.5 Credit Hours)

**Deborah Korn, Psy.D.**

**TOPIC AREA:** PTSD

INTRODUCTORY | INTERMEDIATE | ADVANCED

### EMDR Treatment of Complex PTSD: Lessons Learned Over Three Decades

Complex PTSD is associated with chronic or prolonged victimization, deprivation, and neglect. Many experts consider it to be a disorder of dysregulation—one that involves difficulties in regulating emotions, behaviors, relationships, attention and consciousness, self-perception, and somatic experience. This dysregulation leads to the development of affect phobias, insecure attachment styles, rigid defenses and avoidance patterns, high levels of dissociation, and the inability to access critical internal resources. EMDR therapy adapted to meet the needs of Complex PTSD patients offers the promise of profound transformation and post-traumatic growth. In this plenary address, Dr. Korn offers relevant concepts and guiding principles from the field of traumatic stress studies to facilitate EMDR case conceptualization and effective intervention. She also reflects on the lessons she has learned during the past 30 years treating Complex PTSD patients across inpatient, partial hospitalization, and outpatient settings.

### SESSION 311

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

**Jamie Marich, Ph.D., LPCC-S, LICDC-CS, REAT, RYT-500; Sue Genest, MSc., CCC; Lisa Hayes, MSW, LISW-S; Roshni Chabra, LMFT; Patrick Monette, LMHC, CASAC; Danielle Godfrey, LCSW-R**

**TOPIC AREA:** Diversity/Equity/Inclusion

INTRODUCTORY

### LGBTQ+ EMDR Therapy Experiences: A Panel Discussion

Listening to the experiences of LGBTQ+ clients, therapists, and consultants/trainers is an integral part of becoming more culturally responsive and highly ethical as an EMDR therapist. This panel presentation brings together a group of long-term EMDR therapists and consultants/trainers who also identify in various ways under the broader LGBTQ+ umbrella. They offer their lived experience of discrimination and being impacted by microaggressions in society at large and within clinical circles.

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They review literature-supported best practices for working with LGBTQ+ clients with special attention paid to nuance of each group's specific needs and the impact of oppressive cognitions across the lifespan. Intersectionality is also defined and discussed as are issues around spiritual abuse and healing the legacy of so-called "conversion therapies."

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## SESSION 312

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Andrew Leeds, Ph.D.

TOPIC AREA: Research

INTRODUCTORY

### The New Horizon—EMDR Research on Populations, Protocols, and the Brain

Discover at least three ways research on EMDR therapy can inspire, inform, and surprise you. This review of EMDR therapy research surveys peer-reviewed journal articles published primarily in 2020 and 2021, focusing on clinically relevant treatment outcome research and laboratory results. Key findings from individual case reports, pilot studies, and randomized controlled trials are summarized to assist practicing clinicians to be aware of research relevant to their current and future clients and encourage further research to advance our understanding of the full range of EMDR therapy applications. Broad trends include the growth in group treatment research, successful remote delivery of EMDR therapy, and the expansion of the delivery of EMDR therapy to disadvantaged communities, refugees, and developing countries. Surprise hints: Is EMDR therapy effective for mice, and can EMDR therapy alter epigenetic tags in human DNA?

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## SESSION 313

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Lori Pereira, LPC; Crystal Wildes, Ph.D.

TOPIC AREA: Public Practice/Agencies

INTRODUCTORY

### Increasing Access to EMDR Therapy in Community & Agency Settings

Community mental health centers (CMHCs) and larger mental health agencies have a significant role in the provision of behavioral healthcare. CMHCs and larger agencies provide services to underserved groups and are actively involved in advocacy related to behavioral healthcare. A goal of this presentation is to discuss the importance of increasing accessibility of EMDR therapy to

mental health professionals who work in CMHCs, larger agencies and clients who receive services from them. This presentation will present a model to develop and maintain EMDR therapy treatment across multiple programs with a wide variety of diagnoses and levels of care. Creating buy-in within a larger system will be addressed and reflections on implementation challenges and future considerations. By doing this, we have the potential to have a significant impact on healing, adding to research and data and increasing inclusivity of EMDR therapy.

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## SESSION 314

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Sarah Dawson, MA, MSW

TOPIC AREA: Case Conceptualization

INTRODUCTORY | INTERMEDIATE | ADVANCED

### Not Just Preparation: Resourcing for Dissociation as a Focus of Treatment

Sandra Paulsen has written of the "ubiquity of dissociation" (2014) and also that "dissociation is the engine...not the caboose" of traumatic symptoms ([emdrandbeyond.com/blog/2018/4/13/screening-for-did-and-more](http://emdrandbeyond.com/blog/2018/4/13/screening-for-did-and-more)). If dissociation drives trauma symptoms, from simple to complex, and small-t to big-T, then EMDR practitioners should be prepared to treat dissociative processes in all clients. However, most training distinguishes between "standard" clients and "dissociative" clients. Dissociation treatment appears in the preparation phases of the EMDR protocol, which implies that dissociation needs only be addressed if it interferes with reprocessing trauma rather than considering dissociation as a focus of treatment. This presentation will discuss the benefits of using specific resourcing techniques from the dissociation and early childhood trauma literature with all clients. The speaker will present techniques in the context of contemporary neurological theory, which provides a model for understanding how dissociative processes occur in standard clients. These processes are reversed through the associative nature of EMDR.

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## SESSION 315 – SPANISH TRACK

12 p.m. – 1:30 p.m. (1.5 Credit Hours)

Sandra Baita, Psy.D.

TOPIC AREA: Dissociation/Complex Trauma

INTERMEDIATE

### Carrera de Obstáculos: EMDR y Disociación en Población Infantil

Independientemente de los modelos teóricos explicativos, en la experiencia de nuestros pacientes la disociación cumple una función protectora. Ésta, sin embargo, se vuelve desadaptativa cuando la exposición al peligro terminó. El reprocesamiento de los recuerdos traumáticos -que constituye el objetivo principal del tratamiento EMDR- encuentra en algunas manifestaciones disociativas, obstáculos aparentemente insalvables. ¿Cómo accedemos a aquello que no se recuerda porque es demasiado doloroso? ¿Cómo accedemos a información que parece estar protegida de su develamiento por poderosos guardianes internos? ¿Cómo avanzamos en nuestro trabajo cuando nuestros pequeños pacientes – aún dependientes del mundo adulto- no pueden sentirse seguros en el contexto de sus relaciones primarias? En esta presentación trataremos de responder a estas preguntas mostrando estrategias que nos permitan el procesamiento de la información traumática en niños y niñas con disociación, de una manera contenida y segura. Se presentarán ejemplos clínicos en los que el juego y la creación de historias son usados para favorecer y potenciar los alcances de EMDR.

## SESSION 321

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

David Archer, MSW, MFT

TOPIC AREA: Intimate Partner Violence

INTERMEDIATE

### INTEGRATIVE PRESENTATION

#### Bound By Our Attachments: Race, Gender, and the Trauma of Violence

Intimate partner violence (IPV) and femicides are prevalent in societies marked by patriarchy and misogyny. While women generally face a higher chance of victimization than men, their racial identity and social context can impact victimization risks and COVID-19 victimization risks. The COVID-19 pandemic has caused increased rates of IPV due to chronic stressors and the restriction of movement. Even in isolation, survivors still suffer from the echoes of past abuse. Clinical observations have

revealed, in some cases, the reemergence of PTSD symptoms during the pandemic for survivors of past abuse. This necessitates a discussion of EMDR therapy and methods of assisting survivors of gendered violence. This presentation will provide a review of attachment styles, betrayal trauma, and explore how the adaptive information processing model can assist in reprocessing the trauma that survivors carry with them. Case examples will explore the AIP model, IPV, and anti-racist psychotherapy perspectives.

## SESSION 322

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

Deborah Silveria, Ph.D.; Michell Gottlieb, Psy.D.

TOPIC AREA: Techniques & Strategies

INTRODUCTORY | INTERMEDIATE

### What To Do When “Go With That” Does Not Work: Clinical Choice Points

When we were all trained in EMDR therapy, trainers said all you have to do is say, “Go with that” and everything will change. While EMDR therapy is amazingly effective, it is often not quite that simple. Sometimes our clients’ processing stops, and we do not understand why. The focus for this workshop will be on three specific issues that block reprocessing: blocking beliefs, feeder memories, and ecological appropriateness. By the end of the workshop, you will understand what these concepts are and techniques and strategies to help your clients through these blocks.

## SESSION 323

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

Robin Shapiro, LICSW

TOPIC AREA: Couples/Relationship Issues/Sexuality

INTRODUCTORY

### INTEGRATIVE PRESENTATION

#### Healing Sexual Issues Rape and Abuse Survivors

A history of sexual abuse as a child or as an adult can deeply impact adult sexual relationships. This workshop includes using EMDR and Ego State therapies to heal past sexual trauma, reclaim the adult body, learn skills for assertive, safe communication in sexual situations, and have safe, fun, connected sex with a good chosen partner. It will also explain how to talk to clients about sex in a sensitive, straightforward manner.

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## SESSION 324

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

TOPIC AREA: Research

INTRODUCTORY | INTERMEDIATE | ADVANCED

### RESEARCH PAPER SYMPOSIUM

#### Thematic Analysis of Therapists Integrating EFT and EMDR in Couple Therapy

Jason Linder, Psy.D.

#### EMDR Group Treatment Remote to Healthcare Professionals During COVID-19

Maria Cristina Pérez-Grados, M.D.;

Maria Elena Estévez, M.D.

#### Cultural Adaptations and Use of the EMDR Protocol in Africa

Femke Bannink Mbassi, Ph.D.

#### Treating Endometriosis Pain with EMDR: A Pilot Qualitative Case Study

Peter W. Pruy, MA, Ed.M., MS

#### Treating Suicidal Drivers with EMDR Therapy: A Randomized Controlled Trial

Joyce Baptist, Ph.D.; Natalia Kuzmina, MS

#### Safety Platform on Preparation Phase of EMDR: Heart Rate Variability

Maria Aparecida Junqueira Zampieri, Ph.D.;

Marina Junqueira Zampieri, Ph.D.

## SESSION 325 – SPANISH TRACK

2:30 p.m. – 4 p.m. (1.5 Credit Hours)

Anabel Gonzalez, M.D., Ph.D.

TOPIC AREA: Dissociation/Complex Trauma

INTERMEDIATE

#### EMDR y Procesamiento Emocional: Trabajando en Pacientes con Desregulación

La regulación emocional es un elemento transdiagnóstico habitualmente presente en los trastornos derivados del trauma, en mayor o menor medida. Como otros síntomas postraumáticos, puede mejorar a raíz del tratamiento de los recuerdos asociados

a su origen. Sin embargo, cuando la desregulación es grave, puede suponer un desafío para poder acceder al material traumático, para procesarlo adecuadamente y para el estado posterior del paciente. Además, la regulación emocional no es un fenómeno simple, sino un conjunto de estrategias y de elementos interrelacionados, que hemos de entender a profundidad. En este taller se hablará del trabajo con EMDR atendiendo al análisis de procesos en psicoterapia, incluyendo como aspecto central la regulación emocional y sus disfunciones. Más que un listado de técnicas, se hablará del análisis momento a momento de lo que ocurre en sesión, y de intervenciones dinámicas en función de los factores que se identifiquen.

## SUNDAY, NOVEMBER 14, 2021

## SESSION 401

10 a.m. – 11:30 a.m. (1.5 Credit Hours)

Ana Gomez, MC, LPC

TOPIC AREA: Children & Adolescents

INTERMEDIATE

#### A Multimodal & Systemic Approach to EMDR Therapy with Children During Times of Change

The COVID-19 pandemic has brought trauma, adversity, and distress to most parents and children. In addition, it has exacerbated previous and generational trauma as they had to endure losses, seclusion, financial hardships, and a lack of social support. Children have been forced to move out of homeostasis, connection, and co-regulation into self-preservation, defense, and survival. Children are malleable and resilient and at the same time incredibly vulnerable. How has our children's biology and nervous systems been impacted by the stresses of such uncertain times? This seminar will offer an overview of the individual and the systemic work needed to help children and their families heal during such unprecedented times. In addition, this plenary will show how to use a multimodal approach within the overarching structure of EMDR therapy that includes: Polyvagal focused strategies, parent-child interventions, play, Sandtray, and expressive arts, among others.

## SESSION 411

12:30 p.m. – 4 p.m. (3 Credit Hours)

C. Paula Krentzel, Ph.D.; Jennifer Tattersall, LCSW

TOPIC AREA: Anxiety & Panic Disorders

INTERMEDIATE | ADVANCED

### The Distancing Technique: OCD and Anxiety Disorders, How to Treat with EMDR

The Distancing Technique was initially developed using EMDR targets with an over-importance of thoughts, the need to control thoughts, and the thought-action fusion. It also targets the misinterpretation of sensation as predictive of future catastrophe. The goal of this technique is for the client to become a detached observer to his/her thoughts, sensations, images, and/or urges. For example, to understand that the obsession is a thought and not real, to gain distance from the thought, and put it aside. The anxiety disorders that the Distancing Technique can be applied to include OCD, panic disorders, and phobias. Interweaves, which come from the client's words as expressed in the Preparation Phase, are used, when necessary, in the Standard Protocol to process the initial, worst, most recent and current triggers (including the pandemic).

Pacific communities and impact EMDR therapy in Phases 1 through 8. With understanding and awareness, clinicians can more effectively use EMDR's three-pronged approach in helping clients negotiate racial trauma within American culture.

## SESSION 412

12:30 p.m. – 4 p.m. (3 Credit Hours)

Evelyn Wright, LCSW; Diane DesPlantes, LCSW; Kaitlyn Kuo, Psy.D.; Cecelia Penailillo, LMFT

TOPIC AREA: Diversity/Equity/Inclusion

INTRODUCTORY

### Clinical Racial Relevance Within EMDR

The AIP model applies across cultures, races, ethnicity, and generations. Attunement to these distinctions should guide our use of EMDR therapy's eight phases in addressing the traumas and adverse life experiences within these critical social contexts. This panel discussion highlights and attempts to familiarize attendees with clinically relevant racial, cultural, generational and immigration concerns often present yet frequently unrecognized or misunderstood when viewed cross-culturally or interracial in servicing the BIPOC community. This discussion focuses on some of the unique racial/ethnic/cultural interplays that influence clinical aspects of the Black, Latinx, and Asian

## SESSION 413

12:30 p.m. – 4 p.m. (3 Credit Hours)

Roger Solomon, Ph.D.

TOPIC AREA: Dissociation/Complex Trauma

INTERMEDIATE | ADVANCED

### Treatment of Traumatic Attachment to the Perpetrator

This workshop will focus on treatment of complex trauma with the emphasis on treatment of the traumatic attachment to the abuser. Treatment for victims of abuse not only has to deal with the trauma of what happened, but the traumatic attachment to the abusers. Clients often have conflicting emotions and perceptions about their abusers with some parts having an idealized view while other parts fearing and/or hating them. Other parts can have a positive attachment to their perpetrator and not acknowledge the abuse. Other parts will imitate the perpetrator and reenact the abuse with the parts that underwent the original abuse. EMDR therapy, with appropriate modifications for complex trauma, is helpful in treating both the trauma of the event and the attachment trauma. Teaching points will be illustrated by client videos of EMDR treatment sessions.

## SESSION 414

12:30 p.m. – 4 p.m. (3 Credit Hours)

Gary Brothers, LCSW

TOPIC AREA: Chronic Illness/Medical Issues/Somatics

INTERMEDIATE

### INTEGRATIVE PRESENTATION

#### Integrating the Attachment System and AIP Model for Chronic Health Syndrome

The presentation will provide both the theoretical background and a model of care for integrating the attachment system and the AIP Model to treat clients with chronic health syndromes, including autoimmune disorders and chronic pain conditions. Specific focus will be on 1) theory and the neurobiology of the attachment system, including Polyvagal Theory; 2) advances in neuroscience as it relates to components of perception (exteroception, interoception, and neuroception); 3) how

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perception and the AIP Model are interrelated and integrated; 4) how maladaptive attachment experiences lead to maladaptive internal subjective neural templates perpetuated by maladaptive memory networks; 5) how these maladaptive internal subjective neural templates underlie and perpetuate chronic health syndromes; and 6) practical ways to conceptualize this for the therapist and client (both are critical) and to use this information through the eight phases of EMDR to promote the healing of chronic health syndromes (Yes, it is possible!).

## SESSION 415

12:30 p.m. - 4 p.m. (3 Credit Hours)

Mara Tesler Stein, Psy.D.; Paul Miller, M.D.

TOPIC AREA: Family/Parenting

INTERMEDIATE | ADVANCED

### Primary Prevention: Utilizing EMDR in the Perinatal Period

The reproductive period is one fraught with psychosocial and sociological meaning. Understanding perinatal trauma and postpartum loss require knowledge and sensitivity across the range of cultural constructs framing it. While the birth giver most often is the focus of concern, partners, grandparents, and older children (siblings) are profoundly impacted by these experiences. The AIP model is trans-diagnostic and when integrated with the central themes of the perinatal period, becomes a comprehensive attachment-focused, developmental model, useful in case formulation and treatment planning. This session will introduce participants to this integrative framework, demonstrating its utility across a wide range of issues in the reproductive period. Case examples will illustrate the immediate applicability of this model to practice: explaining pathology, directing meaningful therapeutic endeavors, and predicting outcomes of effective therapy for these clients. Participants will reflect on what they bring to this work and how this shapes clinician engagement and the development of treatment plans.

## SESSION 416 – SPANISH TRACK

12:30 p.m. - 4 p.m. (3 Credit Hours)

Ana Gomez, MC, LPC

TOPIC AREA: Children & Adolescents

INTERMEDIATE

### La Terapia EMDR Desde una Perspectiva Sistémica y Multimodal con Niñas y Niños

El tratamiento del trauma y el TEPT complejo presentan una multitud de retos para el terapeuta EMDR infanto-juvenil. La activación de la arquitectura sináptica de estos niños/niñas que contiene material traumático arraigado recluta patrones de neuroactivación y organización interna dirigidos a la defensa y no a la homeostasis. En su realidad cotidiana coexisten con defensas truncadas, fobias hacia su mundo interno y disociación entre otros. Esto resulta en la sensibilización de estructuras biológicas que hacen difícil el ingreso a los sistemas de memoria traumáticos. Este seminario, presentará La Terapia EMDR desde una Perspectiva Sistémica y Multimodal con la población infanto-juvenil con trauma crónico, severo y generacional. el uso de metáforas, terapia de juego, caja de arena y estrategias de artes expresivas, serán presentadas. Adicionalmente, se expondrán estrategias neuroreguladoras basadas en la teoría Polyvagal al igual que abordajes sistémicos que fortalecen la correulación y la conexión infanto parental.

# 2021 CONFERENCE

## Guest Speakers



**Wendy Ashley, Psy.D., LCSW**, is a professor and associate chair of the California State University Northridge's MSW program. Dr. Ashley maintains certifications in diversity and inclusion practices from Cornell University and Eye Movement Desensitization and Reprocessing (EMDR). She is a Licensed Clinical Social Worker and has over 25 years of clinical practice experience. Dr.

Ashley is the author of multiple publications, speaks at conferences nationwide and internationally, maintains a private practice, and provides training for multiple organizations. Her research interests emphasize the promotion of justice, equity, diversity, and inclusion in practice, pedagogy, and organizational culture.



**D. Michael Coy, MA, LICSW**, is an EMDRIA Approved Consultant who maintains a private practice in Bremerton, Washington. He previously served on EMDRIA's Standards & Training Committee (2014-2017). Coy has collaborated with Jennifer Madere and Multidimensional Inventory of Dissociation developer Paul F. Dell, Ph.D., since 2016, co-authored the *MID Interpretive Manual*, and

manages the MID Analysis and MID website. Madere and Coy have presented on the MID both in the U.S. and internationally. Coy serves on ISSTD's board of directors and as the Society's treasurer. He co-chaired the group that developed ISSTD's EMDR therapy 'basic' training, which he also co-teaches.



**Ana Gómez, MC, LPC**, is the founder and director of the AGATE Institute in Phoenix, AZ. She is a psychotherapist, author, and an international speaker on the use of EMDR therapy with children and adolescents with complex and developmental trauma as well as generational wounds and dissociation. Gomez is the author of *EMDR Therapy and Adjunct Approaches with Children: Complex Trauma, At-*

*tachment and Dissociation*, and several book chapters and articles on the use of EMDR therapy with children and adolescents. In addition, she is the author of multiple children's books. Gomez has developed numerous intensive training programs and protocols.



**Deborah Korn, Psy.D.**, maintains a private practice in Cambridge, MA, and is a faculty member at the Trauma Research Foundation and a senior faculty member at the EMDR Institute. Dr. Korn has authored or co-authored many articles and chapters focused on EMDR therapy, including comprehensive reviews of EMDR therapy for Complex PTSD. She is the co-author of *Every Memory Deserves Re-*

*spect*—a 2021 book about trauma, recovery, and EMDR therapy written for the layperson. She is an EMDRIA-approved consultant, on the Editorial Board of the *Journal of EMDR Practice and Research*, and a past member of the EMDR Council of Scholars.



**Jennifer Madere, MA, LPC-S**, is an EMDRIA Approved Consultant and Trainer and founding partner of Intuitus Group in Cedar Park, Texas. She co-chaired the group that developed the EMDR therapy training offered by the International Society for the Study of Trauma and Dissociation and co-teaches this training. She has presented on the MID since 2014 and collaborated with D. Michael Coy

and Paul Dell, Ph.D., to update the *Interpretive Manual* and associated documents for the Multidimensional Inventory of Dissociation (MID). Together Madere and Coy have made the MID documents and training accessible to clinicians and researchers worldwide.

## Spanish Track Guest Speakers



**Lucina (Lucy) Artigas, Ph.D.**, es pionera en el mundo en proveer la Terapia EMDR en formato grupal® y en Intervenciones Psicosociales Avanzadas incluyendo Programas Humanitarios de Investigación y trabajo de campo en Latinoamérica, el Caribe y Europa. Ella es Entrenadora de Entrenadores Senior del EMDR Institute y de EMDR Iberoamérica. Ha sido honrada con el EMDRIA Creative Innovation Award por

ser originadora del Abrazo de la Mariposa; y con el EMDR Iberoamérica Francine Shapiro Award. Es coautora de múltiples protocolos incluyendo (EMDR - PRECI, EMDR-PROPARA, ASSYST and EMDR-e IGTP) que han sido aplicados de manera exitosa alrededor del mundo. Lucy conduce entrenamientos, seminarios y talleres en muchos países. Es coautora de numerosos artículos sobre Terapia EMDR, trauma, resiliencia, Intervención en Crisis y TEPT en pacientes con cáncer, tratados con Terapia EMDR en formato grupal®. Es cofundadora y presidenta de EMDR México, cofundadora y directora ejecutiva del Centro Internacional de Psicotraumatología S.C., cofundadora y directora ejecutiva de la Asociación Mexicana para Ayuda Mental en Crisis A.C. (AMAMECRISIS, ONG.).



**Sandra Baita** es una psicóloga clínica y terapeuta infantil, y trabaja en práctica privada en la Ciudad de Buenos Aires, Argentina. Durante 15 años trabajó en programas gubernamentales de su ciudad, focalizando su tarea en la evaluación y el tratamiento del maltrato infantil. Sandra ha dado talleres acerca de maltrato infantil, trauma del desarrollo y disociación en niños y adolescentes

en Latinoamérica, Europa y Estados Unidos. Sandra es una Supervisora Certificada de EMDR y trabaja como terapeuta EMDR con enfoque en la atención de niños, adolescentes y adultos con historias de trauma del desarrollo. Sandra es autora de un libro sobre disociación infantil, y de varios capítulos de libros.



**Ana Gómez, MC, LPC**, es la fundadora y directora del Instituto AGATE en Phoenix, AZ y el ICP en Colombia. Es psicoterapeuta, autora y conferencista internacional sobre el uso de la terapia EMDR con niños/as y adolescentes con trauma complejos y del desarrollo, así como heridas generacionales y disociación. Ha dirigido talleres y presentaciones magistrales en todo el mundo. Ana es autora del libro: La terapia EMDR y Abordajes Adjuntos: Trauma Complejo, Apego y Disociación, disponible en 8 idiomas. Además, es la autora de varios capítulos de libros y artículos al igual que múltiples libros para niños.

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**Anabel Gonzalez, Ph.D.**, ([www.anabelgonzalez.es](http://www.anabelgonzalez.es)) es psiquiatra y psicoterapeuta. Trabaja en el Hospital Universitario de A Coruña (CHUAC), coordinando el Programa de Trauma y Disociación. Imparte formación sobre trastornos disociativos, trauma, apego y regulación emocional. Es entrenadora EMDR. Es profesora invitada en el Master en Psicoterapia EMDR de la UNED y tutora de doctora-

do en la UDC. Dirige varias investigaciones en el campo del trauma y EMDR. Ha publicado numerosos artículos sobre disociación, trauma y EMDR, y es autora/coautora de diversos libros.



**Dolores Mosquera, Psy. D.**, es psicóloga y psicoterapeuta, especializada en trastornos de la personalidad, trauma y disociación. Dolores es la directora del Instituto para el Estudio del Trauma y los Trastornos de la Personalidad (INTRA-TP) —un centro privado con 3 clínicas que inicialmente se funda en el 2000. Cuenta con una amplia experiencia docente, impartiendo seminarios,

os, talleres y conferencias a nivel internacional. Ha publicado 16 libros y numerosos artículos sobre trastornos de la personalidad, trauma complejo y disociación. Dolores ha recibido el premio David Servan-Schreiber por su contribución destacada en EMDR en el año 2017 y ha sido reconocida en el año 2018 como ISSTD fellow por su contribución en el campo del trauma y la disociación.



**Natalia Seijo, Psy.**, es psicóloga con especialidad en trastornos alimentarios, psicosomática médica y trauma complejo. Directora del Centro Ns Psicoterapia y Trauma en Ferrol (A Coruña). Certificada y facilitadora desde el 2003 y Supervisora desde el año 2006. Natalia es ponente nacional e internacional en congresos y talleres especializados de trastornos alimentarios y obesidad, trastornos psico-

somáticos y defensas en psicoterapia y trauma complejo. Natalia es codirectora del máster de Trastornos Alimentarios y Obesidad en la Universidad Complutense de Madrid y profesora del Máster de EMDR en el área de trastornos alimentarios y psicosomáticos en la Universidad Nacional a Distancia (UNED). Natalia es la autora de los protocolos de EMDR para los trastornos alimentarios y la distorsión de la imagen corporal publicados en los volúmenes de protocolos de EMDR editados por Marilyn Luber del EMDR Institute de EE.UU.