EMDR INTEGRATIVE GROUP TREATMENT PROTOCOL (EMDR-IGTP)
The EMDR Integrative Group Treatment Protocol (EMDR-IGTP) for early intervention born under a mango tree as a roof and sea sand as a floor...

Lucy Artigas (Butterfly Hug originator) during the Group Protocol Preparation Phase. Acapulco, 1998
... it was the first Early EMDR Group Intervention, created out of necessity by members of the Mexican Association for Mental Health Support in Crisis...

...when they were overwhelmed by the extensive need for mental health services after Hurricane Pauline ravaged the coasts of Oaxaca and Guerrero in 1997.

In the **EMDR-IGTP**, the group setting allows for a group administration of individual **EMDR** treatment, ensuring that many individuals can be treated simultaneously. This is highly valuable in settings where resources are limited.


*E.M.D.R. México*
Lucy Artigas (Butterfly Hug originator) during the Group Protocol Preparation Phase. Acapulco, 1998
Jarero et al. (2015) adapted the standard EMDR-IGTP for early intervention to treat population living with ongoing traumatic stress with no posttrauma safety period.

The adaptation was made to allow for the identification, targeting and processing of the continuum of multiple traumatic experiences faced by this population and not only one target per session.

With the EMDR Integrative Group Treatment Protocol Adapted for Ongoing Traumatic Stress (EMDR-IGTP-OTS), individual EMDR treatment can be provided in a group setting to small (3-15) or large (16-50) groups of patients who have been through:
a) The same type of ongoing or prolonged traumatic events or circumstances. These include: victims of constant violence (e.g., sexual abuse or severe interpersonal violence).

b) At-risk personnel (e.g., agency and NGO staff dealing with natural disasters, violent conflicts, rape and domestic violence; emergency response personnel, military on duty).
c) People undergoing life-changing experiences with ongoing traumatic stress or extreme stressors (e.g., refugees, internally displaced persons, long term disasters, prolonged violent conflicts or terrorism).

d) People with diverse ongoing trauma histories with similar circumstance in common (e.g., chronic or severe illness; individuals, couples and families with ongoing domestic violence situations that have not been resolved and are still unsafe to some degree).
The **EMDR-IGTP** administers the eight phases of **EMDR Individual treatment** to a group of patients, using an art therapy format (i.e., drawings, symbols) and the **Butterfly Hug (BH)**, as a self-administered bilateral stimulation method to process traumatic material.

ATLIXCO, PUEBLA (MEX). AFTER THE SEPTEMBER 19, 2017 EARTQUAKE
EMDR-IGTP
MAIN OBJECTIVES
PROTOCOL MAIN OBJECTIVES

❖ Be part of a comprehensive program (continuum of care) for trauma treatment.
❖ Treat individual trauma in a group setting.
❖ Reprocess traumatic memories.
❖ Reduce posttraumatic symptoms.
❖ Confront traumatic material.
❖ Bring to conscious awareness those aspects of the trauma that were dissociated.
❖ Facilitate the expression of painful emotions or shameful behaviors.
Protocol Main Objectives (cont.)

❖ Condense the different aspects of trauma into representative and more manageable images.
❖ Increase patient's perception of mastery over the distressing elements of the traumatic experience.
❖ Offer the patient support and empathy.
❖ Identify those who need further assistance.
❖ Normalize reactions: The patients can see that their reactions are normal since other patients are working on their memories in the same manner.
EMDR-IGTP
ADVANTAGES
PROTOCOL ADVANTAGES

✓ Treatment can be delivered in non-private settings such as under a mango tree, in shelters, open-air clinic, and so forth. Private settings are difficult to find in emergency situations.

✓ Patients in the group do not have to verbalize or write information about the trauma.

✓ The Protocol is suitable for large-scale post-traumatic situations and chaotic conditions.
PROTOCOL ADVANTAGES

✓ All treatment and memory exposure takes place in the affect-regulating presence of the therapists.

✓ Protocol is easily taught to both new and experienced EMDR practitioners.

✓ EMDR clinicians can be assisted by other specially trained professionals (e.g., social workers, nurses, first responders), in particular situations where the availability of clinicians is limited.
Boys and Girls doing the Group Protocol Under a Mango Tree. Acapulco, 1998
BOYS AND GIRLS DOING THE IGTP IN A SHELTER. MEXICO CITY AFTER SEPTEMBER 19, 2017 EARTHQUAKE.
The disturbing memory is not visualized mentally as in the standard EMDR protocol, instead is represented concretely in the participant’s drawings or symbols.
PROTOCOL ADVANTAGES

✓ Relying on drawings presents a special advantage to provide culturally sensitive and effective treatment for patients who struggle to connect to their cognitive states or feel guilty or ashamed.
✓ Also, drawings are used for effective reprocessing with patients with lower levels of literacy (F. Shapiro, 2016).

✓ Clients afraid to have in their hands a crayon or pencil, like women from Iraq that are punished with the death penalty if receive education, can use a Sandbox.
SRI LANKA. AFTER JULY, 2017 FLOODS.
The BH instruction: “Stop when you feel in your body that it has been enough and lower your hands to your thighs”, allows for enough sets of BLS for reprocessing the traumatic material and helps to regulate the stimulation in order to maintain the patients in their window of tolerance allowing for appropriate reprocessing.
The EMDR-IGTP has SEVEN sets of bilateral stimulation for disturbing memory reprocessing using the Butterfly Hug.
SRI LANKA. AFTER JULY, 2017 FLOODS.
PROTOCOL ADVANTAGES

✓ Intensive EMDR Therapy: Therapy can be done on subsequent days, two or three times a day, and there is no need for homework between sessions.
Evidence suggests that more frequent scheduling of treatment sessions maximized PTSD treatment outcomes.

Gutner et al. (2016).

EMDR-IGTP-OTS INTENSIVE THERAPY. SIX ADMINISTRATIONS IN TWO DAYS. TRAUMA RECOVERY AND RESEARCH (RCT) PROJECT WITH 65 FEMALE PATIENTS WITH CANCER AND PTSD. PUEBLA, MEXICO. AUGUST, 2017
EMDR-IGTP-OTS INTENSIVE THERAPY. SIX ADMINISTRATIONS IN TWO DAYS. TRAUMA RECOVERY AND RESEARCH PROJECT WITH FEMALE PATIENTS WITH CANCER AND PTSD SYMPTOMS. MONTERREY, MEXICO. 2014
Equally effective cross-culturally.

EMDR-IGTP reduce cultural resistance, even to members of reticence cultures, to treatment because it is minimally intrusive, does not require creating a narrative of the traumatic experience, verbal or written disclosure of details, prolonged reliving traumatic experiences, or homework.
✓ Cost-effective. People are treated more quickly, with fewer therapist, and involving larger segments of the community.
SRI LANKA. AFTER JULY, 2017 FLOODS.
EMDR-IGTP

EFFECTIVENESS
This manuscript is horrendous!

PEAR REVIEW
EMDR-IGTP

META-ANALYTIC REVIEW
The Department of Child and Adolescent Psychiatry and Psychotherapy, University Hospital ULM from Germany (2017), conducted a meta-analytic review of 36 studies, on n = 3,260 children and adolescents who had all experienced or witnessed a mass traumatic event to investigate specific psychosocial treatments for children and adolescents after man-made and natural disasters.

EMDR Therapy in individual and group (specifically the EMDR-IGTP) formats showed to be very effective in pre–post comparisons and more effective than (waitlist) control groups.

MANIZALES-COLOMBIA-EMDR CLINICIANS-2017
EMDR-IGTP-OTS

RCT on the Provision of the EMDR Integrative Group Treatment Protocol Adapted for Ongoing Traumatic Stress to Female Patients with Cancer-Related PTSD.

Coordinate by Dr. Amalia Osorio
In this RCT using a wait-list control design, the EMDR-IGTP-OTS was administered for two consecutive days, three times a day in a hospital setting.

Jarero, I., Givaudan, M., Osorio, A. (in press). Randomized Controlled Trial on the Provision of the EMDR Integrative Group Treatment Protocol Adapted for Ongoing Traumatic Stress to Patients with Cancer. *Journal of EMDR Practice and Research.*
Data analysis by repeated measures ANOVA revealed a significant decrease for treatment group (N=35) compared with no-treatment control group (N=30) in PTSD, Anxiety and Depression symptoms after the treatment.

HADS DEPRESSION MEANS SCORES

TIME 1  
TIME 3

- TREATMENT GROUP
- CONTROL GROUP
This study suggests that EMDR-IGTP-OTS may be an efficient and effective way to address cancer-related posttraumatic, depressive, and anxious symptoms.

Jarero, I., Givaudan, M., Osorio, A. (in press). Randomized Controlled Trial on the Provision of the EMDR Integrative Group Treatment Protocol Adapted for Ongoing Traumatic Stress to Patients with Cancer. *Journal of EMDR Practice and Research.*
EMDR-IGTP

STUDIES AROUND THE WORLD
The **EMDR-IGTP** has been used in its original format or with adaptations to suit the cultural circumstances, in numerous places around the world.

➢ With children and adults after natural or man-made disasters.
➢ With children during ongoing war trauma.
➢ With war refugee children.
➢ With adults during ongoing geopolitical crisis.

MANIZALES-COLOMBIA-2017 . EMDR-IGTP WITH FLOOD SURVIVOR’S
With Children victims of severe interpersonal violence.

To reduce work-related PTSD symptoms of NGO’s staff members who provide care to children and adolescents with severe interpersonal trauma.

HAITI 2017 . EMDR-IGTP WITH HURRICANE MATTHEW SURVIVOR’S
With cancer-related PTSD, anxiety and depression symptoms in female adult patients.
➢ With cancer-related PTSD, anxiety and depression symptoms in adolescents and young adults patients.
EMDR-IGTP-OTS INTENSIVE THERAPY. SIX ADMINISTRATIONS IN TWO DAYS. TRAUMA RECOVERY AND RESEARCH PROJECT WITH FEMALE PATIENTS WITH CANCER AND PTSD SYPTOMS. MONTERREY, MEXICO. 2014
TRAUMA RECOVERY AND RESEARCH (RCT) PROJECT WITH FEMALE PATIENTS WITH CANCER AND PTSD. PUEBLA, MEXICO. AUGUST, 2017
With Rape Victims.

In work accidents that produce Acute Stress Disorder.
Philippines 2014 after Haiyan Typhoon
With survivors of a 50 years-long internal armed conflict in Colombia.
EL VERGEL COLOMBIA. 74 ADULT MALE AND FEMALE
With caregivers of patients with dementia.

EMDR-IGTP-OTS

ONGOING AND PLANNED RESEARCH PROJECTS

2017-2018
ARGENTINA

➢ Planned Controlled Study with NGO staff members who provide care to clients exposed to physical and/or sexual violence and/or negligence.

Coordinated by Sandra Baita
➢ Ongoing Controlled study with adolescents and young adult patients with cancer-related PTSD, anxiety and depression symptoms.

Coordinated by Dr. Amalia Osorio
Planned Controlled study with primary care-givers (e.g., family members) of children and adolescents with cancer.

Coordinated by Dr. Amalia Osorio
Ongoing RCT with patients with full PTSD cancer-related diagnosis.

Coordinated by Shaila Romero
Planned field study with NGO staff members who provide care to refugee clients.

Planned field study for resettled refugees.

Coordinated by Kelly Smyth-Dent
Ongoing field study with NGO staff members who provide care to clients exposed to rape or domestic violence.

Coordinated by Rick Levinson
Planned study with military veterans.

Coordinated by Sylvia Davies
If you have interest in conducting research using this protocol, please send me an email to

nachojarero@yahoo.com