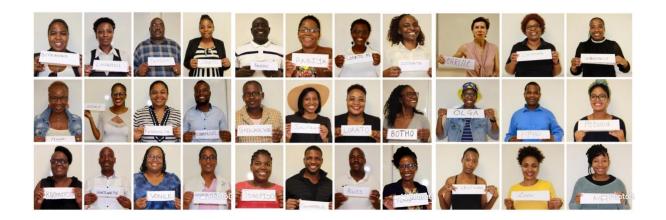
EMDR Course Botswana

2020-2022

Training and Supervision Level 1 and 2

Narrative and Financial Report











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1. Introduction and Background

This report describes the 2nd EMDR course (level 1 and 2) that was organised in 2020 in Botswana after a successful first course in 2019. This report describes the organisation of the project, the activities and achievements. More specifically, it is for accountability purposes for Trauma Aid Netherlands, as





the key financial donor for this project. It can also be used for similar initiatives in other countries, so that others can benefit from our lessons learnt.

With this report Stepping Stones International also likes to use the opportunity to thank all partners for their contribution to the project. It concerns specifically Trauma Aid NL, and the six Dutch EMDR professionals, Hellen Hornsveld, Dafna Zwarts, Do Doeksen, Alex Hooijschuur, John Kersten and Evelien Speel (see annex I). This project would have not been possible without their time, knowledge, financial contributions, perseverance, and dedication.

1.1 Context

Botswana is located in southern Africa with around 2 million inhabitants. There are no data available of the amount of people in Botswana that suffer from PTSD. However, looking at the challenges that people in Botswana face in everyday life, the number is presumably very high, looking at the fact that it is the number 2 country in the world with the highest reports of rape (United Nations Crime Stats), and high amounts of child (sexual) abuse, exploitation and neglect, the second highest HIV/AIDS rate in the world (18.5% of the general population).

Most traumas remain untreated because people are often not aware that there are treatments available that they can benefit from, and because of the limited number of mental health professionals.

There are only a couple of hundred registered psychologists (master's degree) and approximately 10 psychiatrists in Botswana. It is only possible to obtain a Bachelor Psychology Degree in Botswana. For a Bachelor Honours degree or Master's degree or any form of continued education or professionalisation, people need to go abroad. There is also no accreditation system that stimulates continued learning and keeping up to date with new scientific insights or methodologies and enhancing skills. There are hardly any trainings available in Botswana for psychologists after they have finished their studies.

1.2 Initiative

Stepping Stones International (SSI), an NGO working with youth and communities in Botswana, identified the need for professionals that are trained in the treatment of psychological trauma. After expert consultations, SSI reached out to Hellen Hornsveld, a Dutch EMDR Europe Consultant and Trainer, one of the founders of the Dutch EMDR Association who served as a board member from 2002 until 2015. SSI requested her help for training and supervision¹ of psychologists in the field of EMDR. In 2019, the first course was a fact. After a successful first course, a total of 11 trainees met the requirements to receive the EMDR level 1 certificate of completion'.

2. Approach and project design

2.1 Objective

The objective of the project in Botswana is to introduce a well-established, evidence-based traumatreatment methodology in Botswana and organise a high-quality course (training and supervision) for

¹ Instead of "supervision", the word "consultation" can be used as well. For consistency reasons we use the word supervision for this project and in this report.





local mental health professionals. EMDR is one of the first choice treatments for PTSD and highly recommended in international standards, e.g. WHO-guidelines².

2.2 Entry requirements

The trainees were carefully selected for quality assurance purposes. The trainees needed to meet a certain qualification level. The following entry requirements were formulated:

- 1. Master's degree (preferred) in psychology, clinical social work, psychiatry or education counselling.
- 2. Solid experience with counselling, specifically cognitive-behavioral therapy
- 3. Regular treatment of (trauma) clients, so that new obtained knowledge can be practiced directly and video recordings can be made of EMDR sessions for supervision purposes.

2.3 Training Design and Contextualized Protocol

The training was designed according to EMDR Europe training standards and awaiting EMDR Africa standards, whereby a start with a long intensive training weekend (common in the US and Europe) was replaced by three consecutive weekdays (three days of six hours), and a month later two days (two days of six hours), adding up to a total of 30 hours. In Botswana, it is not common to organize trainings during the weekend, and it is also common to have longer breaks (with a hot meal) during the day. The aforementioned training days were followed by three live (small group or individual) supervision sessions spread over the year, complemented with online supervision when necessary. To ensure that as many participants as possible would also use supervision after the training, it was decided not to offer supervision separately, but to include it in the program and price.

For the training, the international EMDR standard protocol was used with some minor adaptations. Participants were instructed to read some articles about EMDR before the start of the course. All study material could be downloaded from the trainer's website. During the training a syllabus was distributed with the handouts of the presentations, the protocols, exercises and some additional information.

2.4 Certification

As in the first year, it was agreed that after successful completion of the training and supervision, trainees would receive an EMDR level 1 'certificate of completion', necessary to enter level 2 EMDR training. Criteria for successful completion of level 1 were:

- Meeting the entry requirements (see 2.2)
- 90% attendance of the trainings and supervision sessions
- Active participation during the training and supervision sessions
- Recorded EMDR treatments with clients for supervision purposes
- Proven experience and mastery of EMDR's standard protocol I (on checklist competencies level 1).

Criteria for successful completion of level 2 were:

- Certificate of completion level 1
- 90% attendance of the trainings and supervision sessions
- Active participation during the training and supervision sessions

² World Health Organization, News release, 6 August 2013, Geneva





- Recorded EMDR treatments with clients for supervision purposes
- Proven experience and mastery of the level II teaching material (on checklist competencies level 1).

2.5 Recruitment and Selection Process

A brochure was developed with practical information on the training (training dates, entry requirements, profiles of consultants, price, etc.) and more background information on the EMDR methodology itself. In addition, a flyer was made to enable easy sharing on social media and whatsapp (see picture). Unfortunately, there is no active platform where all psychologists in Botswana are connected and through which they can easily be informed about the training. Through cooperation with existing (social media) platforms, efforts were made to communicate effectively, such as through the Botswana Association of Psychologists, the University of Botswana, and NGO platforms. In addition, a lot of effort was made to reach out to the target group by sending personalised emails and making countless individual phone calls. Word of mouth marketing of trainees from 2019 has proven to be very effective for recruitment, since many of them recommended the course to colleagues and friends.

Although there was a lot of interest to join the training, many people were not eligible because they did not have the right qualifications. It is quite common in Botswana that people without proper education or experience counsel others. After careful screening, eventually 24 people were admitted to the level 1 training.

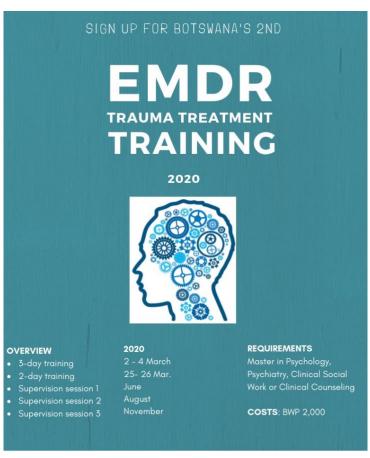
All the 11 'graduates' of the level 1 training in the first year signed up for the level 2 training. Unfortunately, two of them had to cancel their registration; one had a severe traffic accident and was hospitalised, the other one had changed employer and could not get time off in her probation time to attend the training. This resulted in a group of nine level 2 trainees.

Trainees came from different sectors; a government social worker, professionals from the Botswana Police Service, NGOs (Botswana Gender-based Violence Prevention and Support Center, SSI, SOS Children's Village), Hospitals and a Psychiatric Hospital, Gaborone Rehabilitation Center, the Counselling Clinic of the University of Botswana, the Botswana Defence Force, and some private practitioners. See annex 1 for an overview of all the trainees.

Most people that signed up were from the greater Gaborone area, where approximately 90% of the inhabitants from Botswana live. However, since Botswana is such a large country, it can be a challenge for people that live far from Gaborone to attend all the training and supervision sessions, because of travel time and expenses (transport and accommodation). This can also explain the fact that only people in the proximity of Gaborone attended.









TO RECEIVE THE BROCHURE WITH MORE INFORMATION, EMAIL PETUNIA MOGOTSI: MOGOTSIPETUNIA@GMAIL.COM
OR JELDAU RIEFF: JELDAU.RIEFF@SSINT.ORG



Flyer announcing the EMDR 2020 level 1 training

2.6 Collaboration

The project is the result of a cooperation between a number of parties and persons. See the table below for their different roles.

Who	Role		
NGO Stepping Stones International,	Initiator and coordinator in Botswana (recruitment and		
Jeldau Rieff	selection process, communication, stakeholder management,		
	financial and practical organisation)		
Trauma Aid NL	Co-funder		
Hellen Hornsveld	Certified EMDR Europe Consultant and Trainer		
John Kersten	Certified EMDR Europe Consultant		
Dafna Zwarts	Certified EMDR Europe Consultant		
Do Doeksen	Certified EMDR Europe Consultant		
Evelien Speel	Certified EMDR Europe Consultant		
Alex Hooijschuur	Certified EMDR Europe Consultant and Coordinator of the		
	project in the Netherlands		
	(see their profiles in annex 2)		
University of Botswana	Arranged venue and catering		





3. Results and Experiences

3.1 Execution Project

In this section we describe how the project was eventually executed.

1. First training days (March 2020)

The first 3 training days for level 1 were on 2, 3 and 4 March 2020, provided by Hellen Hornsveld and John Kersten. During these days, the theory of EMDR was explained, skills were demonstrated live and by video fragments. There was enough time to practice. After this first part of the training participants were able to treat uncomplicated trauma. Participants were asked to practice EMDR and record a session with a client of their own client population. These fragments were used during the next sessions.

That same week, a 2-day training for level 2 was held on 5 and 6 March. The first part of the training consisted of a brief repetition of the EMDR basics, discussion on some frequently made mistakes, and tips and tricks for more difficult cases. Multiple trauma (Type II), complex trauma and comorbidity were discussed. The AIP model underlying EMDR was discussed and the possibilities for a trauma sensitive approach of psychopathology with EMDR.



Picture: trainees level 1 during the training days

2. Second training days (planned for end March 2020)

After the first training days, subsequent training days were originally planned for the end of March. Unfortunately, the worldwide COVID-epidemic that started to hold the world in its grip around this time, has severely affected the course of the project. Botswana has been heavily affected by the COVID-epidemic. Because of the limited capacity of the health care system, many people died. It





had one of the highest death rates of the world, looking at the relative death toll. Many people lost their livelihoods because of the lockdown and travel restrictions, and no social safety nets were available, leading to dreadful situations. There was a steep rise in cases of gender-based violence and abuse, and families that fell into poverty. Many trainees have also lost family members (siblings, (grand)parents, cousins), friends or colleagues to COVID. Since most of their clients had no or limited access to internet or suitable devices, many of the trainees could not see clients anymore. Trainees of the police for instance, had to do other urgent response work. As a result, the trainees had no opportunities or limited time to practice their newly acquired EMDR skills.

Onsite trainings and supervision could not take place because of restrictions. Instead of the second training days and the scheduled three supervision sessions over the course of 2020, the project team tried to find alternative ways to train and supervise the trainees. Online trainings and supervision were held instead. The Dutch supervisors have put a lot of effort in ensuring the trainees received the support they needed. SSI has provided a lot of technical assistance (online and phone) to all trainees, to support them in getting familiarised with ZOOM, and sharing videos through secured platforms. This has proven to be a problem, since their internet bandwidth and speed often did not allow large files to be shared.

3. Online Trainings

Several online trainings have been organised, to compensate for the lack of face-to-face site visits.

a. Training on online provision of counselling and EMDR (April 2020)

One additional training for level 1 and 2 was provided by Hellen Hornsveld on how to do online counselling, specifically how to do EMDR online. 26 of the 35 trainees attended this training, an extreme high number considering the connectivity problems and the workload of the trainees. A special demonstration video was developed to show participants a practical example of how online EMDR can be done.



Picture: Part of the group during the online training on how to do online counselling and EMDR





b. Online Training on Cognitive Interweaves (May 2020)

For level 2, Do Doeksen and Dafna Zwarts facilitated a session on cognitive interweaves with the use of a self-produced demonstration film.

c. Online Training on Flash Forward, Mental Video Check, Future Template (October 2020)
This training was organised by Do Doeksen and Dafna Zwarts in October for both the level 1 and level 2 groups. The trainees practiced these techniques in break out rooms.

4. Online supervision and Test

Many online supervision sessions have been provided over the 2 years that the project eventually lasted. Small groups were created whereby one supervisor was appointed to a group of 3 or 4 trainees. In May 2020, trainees were requested to fill out a test to assess their knowledge of EMDR.

In 2020: March, June, October, November/December.

In 2021: the supervisors made individual or group assignments over the course of the year.

5. Supervision visit 1 (November 2021)

When the worst phase of COVID had subsided, the first supervision visit could take place in November 2021, and was conducted by Alex Hooijschuur and John Kersten, who were accompanied by Jeldau Rieff from SSI. Over the course of one week several events took place. The week started with a half-day refresher training (one half day for level 1, one half day for level 2), which was attended by a high number of people, as can be seen in the picture below. The rest of the week was filled with supervision sessions, in small groups or individually. The visit has proven to be very useful, and revived the energy of most participants who were motivated to bring the course to a good end in March 2022.



Picture: The group session for the level 1 trainees during the supervision visit in November 2021





6. Supervision visit 2 and final Assessment (March 2022)

In March 2022, the last supervision visit took place, conducted by Evelien Speel and John Kersten. During their visit, all trainees had the opportunity to submit their last recordings, and were assessed based on the (level 1 or level 2) their skills checklist. The outcomes of this assessment are described in the next section.

3.3 Overall results

Level 1

In total, 24 trainees started the training. During the course of the training, some participants dropped out of the course due to different reasons. Some changed job positions and in their new position were not seeing clients anymore, they got transferred to other parts of the country, or because of the results of the aftermath of the COVID epidemic. A total of 15 trainees (potentially 17 pending approval) met the requirements to receive the EMDR level 1 certificate of completion'. The table below provides an overview of all the trainees that successfully completed the level 1 course.

Name	Position / Education	Organisation		
1.	Clinical Psychologist	Princess Marina Hospital (government)		
2. MA Education Counselling		Botswana Police Service		
3. BA Psychology		Stepping Stones International		
4.	BA Psychology	Stepping Stones International		
5.	PhD Candidate (Psychiatry and Mental Health), MA science (clinical psychology). Clinical Psychologist	Gaborone Rehabilitation and Emergency Centre		
6. BA Social Science		private practice		
7.	BA Education Counselling, Botswana Gender-Based Violence Prevention an Counsellor Support Center			
8.	BA Social Work; MA Childhood Studies; social welfare officer	Social welfare & community development, Gaborone City Council		
9.	Dr Clinical Neuropsychology, MA Psychology; Clinical Supervisor	Counselling Clinic, University of Botswana		
10.	MA in Marital & Family Therapy	Private practice		
11.	BA Social Work, social worker	Sbrana Psychiatric Hospital		
12.	MA Psychology	Botswana Defence Force		
13.	PhD. Counselling	University of Botswana and private practice		
14.	MA Psychology	ICAS (private organisation, occupational health)		
15.	Counsellor/ addiction professional	Sedilega Private Hospital		
Pending final submission				
16.	BA Social Work	SOS Children's Village		
17.	BA Social Work	Botswana Police Service		

Level 2

Of the 9 level 2 trainees, three had indicated that they had to put their training on hold, mainly because of COVID-related reasons. Eventually, four of them have proven to be mastering the level II course





content and skills. These participants will be asked to facilitate during the next EMDR level I training (mid 2022).



Picture: Some of the EMDR level 1 'graduates' in Botswana

3.3 Types of Trauma Cases

The trainees see severely traumatized clients with complex problems. There was a lot of sexual and domestic violence and a striking number of traffic accidents. In this paragraph some random examples of cases that were discussed during supervision are described:

A woman who had a stillborn child and who was not able to function normally after this tragic event, a woman who was raped, a victim of incest, someone with an extreme fear of elephants, a victim of a robbery and a victim who had intruders in their house, someone who was victim of a car accidents with alcohol abuse involved, and someone who had been a victim of domestic violence.

3.4 Evaluation

At the end of the training days, the trainees filled in an evaluation form. Overall, the response on the training was very positive, most items were ranked "excellent" or "good". The evaluation also brought forward that the practicals, the video recordings and "flashforward" exercises were highly appreciated. Most of the graduates have already signed up for the level 2 training in July 2022. They have also recommended the training to others, as can be seen in the interest shown in the next EMDR course.

3.4 Lessons learnt

The first EMDR course in 2019 in Botswana has provided many lessons learnt that have been used to improve the second EMDR course. This course has also a couple of lessons learnt that will be used in the next courses.





Onsite support vs. online support: Because of the COVID-epidemic, the project was forced to switch to provision of online support. As is described in this report, this was far from ideal, because of bad quality internet (and often costly) connectivity, and people not being techsavvy. It was however the only way to keep EMDR alive and provide support. Now that many people in Botswana are more accustomed to working and meeting online, online supervision has shown to be a second-best alternative.

Practical examples: the use of education aids, like demonstration videos have been well received by trainees. They appreciated seeing in a practical and concrete way how a technique is applied.

Skills Checklist: the project team introduced the level 1 and level 2 skills criteria checklist, so that trainees were better able to understand exactly what skills they need to master and demonstrate in order to graduate. It also allowed them to better track their progress in obtaining these skills.





4. Financial Report

4.1 Budget and Financial Support

As in 2019, trainees paid BWP 2,000 (approx. €160) in total for the training days and supervision. This is a substantial amount of their average monthly income and was checked with several psychologists. This became also evident later on, when some people requested delayed payment. The amount was also chosen to ensure participants were really motivated to start and complete the training. Apart from the Dutch trainer and supervisors that have worked pro bono, Stepping Stones International has contributed in kind by providing their program manager's and financial administration's time.

The trainee's contributions could cover one-third of the project costs. The remaining two-thirds were requested from Trauma Aid NL who committed to fund a total sum of approximately €10,000, based on a detailed budget estimation. This amount was eventually approved and granted by Trauma Aid NL.

The project team tried to minimise the costs, the University of Botswana arranged the use of a training venue and managed to organise catering for a reduced amount. The guesthouse where the trainer and consultants stayed gave a 10% discount.

4.2 Actual Expenditure

Below is a final overview of the expenses and revenue of the entire project³.

Expenditure	Income				
EXPENDITURE TRAUMA AID NL	Total €		Cost (unit price)€	#number	Total
1 Training: 2 - 6 March 2020		Trainees Contribution			
Expenses Hellen and John (return AMS-GAB)	1.732	5 day training and supervision level 1: 24 * P2,000 = P48,000	160	24	3.840
2 Supervision: Nov. 2021		4 day training and supervision level 2: 9 * P2,000 = P18,000)	160	9	1.440
Tickets, accommodation, car, tests, etc.	2.005	extra payment Seipone Mphele Donation (P1,000)			80
3 Supervision: March 2022		Total Income SSI: (P66,000)			5.360
Tickets, accommodation SA, tests, etc. John	2.693				
Subtotal	6.430				
EXPENDITURE STEPPING STONES INTL.	Total				
1 Training costs: March 2020					
Catering training days level 1 (3 days): Curry pot P11,793	943				
Catering training days level 2 (2 days): Currry pot P3,326.40	266				
Accommodation Hana Guesthouse trainer and supervisor: P5,500	440				
2 Supervision March 2022					
Accommodation 2 supervisors (6 nights * 2pp = P6,600)	528				
Transport	50				
3 Admin Overall					
Financial Administrator SSI (invoices/paym./catering etc)	100				
Bank fee SSI (P9)	0,72				
Subtotal	2.328				
Total	8.758				

The trainers and consultants have reconciled directly with Trauma Aid NL. SSI has spent the training fees on local expenses such as (some of the) accommodation and catering. In summary can be concluded that the project, because of COVID, required a lot less money than the estimated amount. The project costed €8,758. When deducting the fees from trainees (€5,360), only €3,398 was requested from Trauma Aid NL. SSI has spent less than what was received, and therefore will send an amount of BWP 44,643 (approx.€3,000) to Trauma Aid NL. Trauma Aid NL will be requested to allocate this money for the next courses that will be organised.

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³ Some expenses have been made in Euros, some in Botswana Pula (BWP). The website <u>www.xe.com</u> was used to calculate the exchange rate in 2020.





5. Sustainability

The objective of the EMDR project in Botswana is to build a strong foundation of psychologists who will eventually be able to organise the EMDR training themselves, in terms of organisation, funding, consultation and peer review. Ideally, this foundation forms the basis for further professionalization of mental health professionals in Botswana.

In line with this philosophy a third level 1 and level 2 course are planned for 2022-2023. The role of Trauma Aid NL is crucial in the first years, so that this foundation can be built until the project can be taken over locally.

The project team's ambition is to build a strong and self-sustained foundation of trained EMDR-therapists and professional development of trauma treatment in general in Botswana. Based on the effective approach of the project, the quality of the trainees and their enthusiasm towards enhancing their skills, we believe that we are making strides in realizing this ambition. This is also reflected in the high number of people registering for the level 2 course, and the interest of new trainees in joining the level 1 course. The course is recommended by the previous trainees, which is eventually the best marketing.

EMDR Botswana Association

National EMDR associations exist in several African countries. In Botswana too, action has been taken to set up an EMDR association to stimulate the use of EMDR. A formation meeting has taken place on 6 October 2020, and all relevant documentation has been submitted to the authorities. The request to form an association had been granted, requiring a second submission of documents within 4 months of the approval, such as the statutes of the association. Unfortunately, a formal request for extension of submission has been denied, because the timelines are stipulated in the law and no exceptions could be made. As a result, the application process has to start all over again. A new meeting to develop statutes has taken place in March 2022.

Setswana Protocol

Trainees have taken the initiative to translate the English protocol into Setswana. This was a request, since they often counsel clients in their local language. When they can stick to a Setswana protocol, it will ease their work. The draft translation is currently under review for finalization.

Capacitation of advanced trainees

To build a sustainable foundation of skilled EMDR professionals that can eventually organize their own supervision in the future, the project team is exploring ways in which the excelling level 2 trainees can play a role in future trainings. The four participants who completed level II were asked to assist in the level I training in the next course.

EMDR Africa

In 2021 EMDR Africa was officially launched as a platform of national EMDR Associations in sub Saharan Africa. Petunia Mogotsi, EMDR level 2 trainee, takes part on a personal title in the online discussions with colleagues from various countries. Committees have been formed to develop the organisation of EMDR Africa.





Annex I. Trainees 2020 EMDR Level 1 and 2

Level 1 trainees







Level 2 trainees







Annex 2. EMDR Trainer and Consultants 2020-2022



Hellen Hornsveld, PhD, is a clinical psychologist, researcher and exuniversity lecturer (Utrecht University) from the Netherlands. She is an EMDR Europe Consultant and Trainer. Hellen has specialised in the working mechanisms of EMDR, personality disorders, eating disorders, and addiction. She has written and contributed to many articles and books on these topics. Hellen frequently presents at international conferences and serves on a number of editorial boards. She was one of the founders of the Dutch EMDR Association and served as a board member until 2015. Hellen is now a self-employed trainer, therapist, and researcher. She consults on and teaches EMDR in the Netherlands and abroad. More details and a list of publications can be found at www.researchgate.net/profile/Hellen_Hornsveld/publications and www.hornsveldpsychologenpraktijk.com

Alex Hooijschuur is a psychologist and EMDR Consultant from the Netherlands. He is applying EMDR since 2007. In cooperation with two Dutch EMDR trainers, local psychologists and psychological counsellors he organised a level 1 EMDR training in Uganda in April 2018. Alex has provided the supervision sessions of the first group of trainees in Botswana in 2019.





Do Doeksen is a clinical psychologist with her own private practice. Her expertise lays in treatment of adults with early childhood traumas. Do is an EMDR Europe Consultant and facilitator and provides supervision not only on EMDR, but also on cognitive behavioural therapy for children, youth and adults. She provided the supervision sessions of the first group of trainees in Botswana in August and November 2019.

Dafna Zwarts is working as a clinical psychologist, EMDR Europe Consultant and facilitator. She lives in the Netherlands. She has been applying EMDR since 2001. As a psychotherapist she works in her private practice with children and adults. Besides, she trains teachers and school counsellors how to deal with traumatized pupils. Together with a team of Dutch consultants, she has provided supervision sessions for the first group of trainees in Botswana in August and November 2019.









Evelien Speel is a psychologist and EMDR supervisor in the Netherlands. She works in her own practice, mainly with children and adolescents, their parents, families, and teachers. Evelien has been applying EMDR since 2002. Besides, she trains teachers, social workers and groupworkers in a masterclass "trauma sensitivity". Based on her experience and the knowledge of *the window of tolerance*, she is working on a children's book project for young children. Two of the five picture books have now been published.

John Kersten is a clinical psychologist and psychotherapist who lives in the Netherlands. He is an EMDR supervisor who is applying EMDR since 2003. He works both in a private practice with mainly traumatized victims, as well as in an outpatient institution for forensic psychiatry with perpetrators of domestic violence and sexual abuse. As a psychotherapist he meets with adults, families, and adolescents.

