

EMDR Early Intervention:

A Large Scale Disaster Management Model after Atatürk Airport Bombing

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Early Trauma Intervention is one of the most important topics especially when there is a large number of people affected by disasters. Turkey shares about 1200 km of border with Syria, Iran and Iraq. During the war in Middle East, especially in Syria, more than 3.5 million refugees from Syria moved to Turkey during the last 6 years. Until recently, Turkey has become the playground of major terrorist organizations and intelligence services of many countries.

Bombings reached its peak during 2016, the last heartbreaking terrorist attack took place in Ataturk Airport in Istanbul in June 2016. It has been reported that 42 people died and more than 230 people have been injured. (www.bbc.co.uk) As EMDR Turkey Association we managed to go and reach out the victims 22 hours later. We reached out 1397 people and did psycho-educational meetings neutralizing the traumatic experience and screening the PTSD symptoms (IES-R ≥ 33). We did G-TEP groups and R-TEP with individuals who are in need. However, only two weeks after the bombing, the coup attempt happened and this time the same victims had a second trauma and all therapists were traumatized too.

Our aim is sharing our EMDR Early Intervention Model for large scale disaster management within the experience of Ataturk Airport bombing.

The steps are as follows:

1. EMDR Turkey Association has 1000 members, scattered around the country. Half of them are volunteers and members of EMDR Trauma Recovery Group. They begin sending messages how many and which days and how long they can work. In this project 40 therapists worked for 2.5 months. In 24 hours the airport began fully functioning.
2. Reaching the CEOs and the managers of the business organizations operating at the airport, discuss the intervention program and get permission to contact with the victims
3. Psychoeducational groups: Aiming normalization, introducing our psychosocial support system and screening.
4. Intervention to crisis individually and in organizational basis: Systemic interventions; leading the leaders, checking the organizations' crisis models and give feedback in order to restrain secondary crisis.
5. Individual and group interventions: After screening, inviting who are in need of EMDR G-TEP and EMDR R-TEP for further support.
6. Creating opportunity for new therapists to learn managing the disaster, doing EMDR R-TEP and running the EMDR G-TEP. Every disaster is an opportunity for a talented young professional to become a leader in future projects.
7. What happens if a second trauma happens; a strategy for traumatized therapists
8. A small study: Is there a relationship between ACE Score and PTSD Diagnosis. It seems there is.

We believe our model sets basis for cooperation with other organizations and within our therapist groups. Participants will learn an alternative intervention model can be applied quickly in any crisis situation which is structured for both therapists and other crisis intervention personnel.