



ARHF

Amma Resonance Healing Foundation

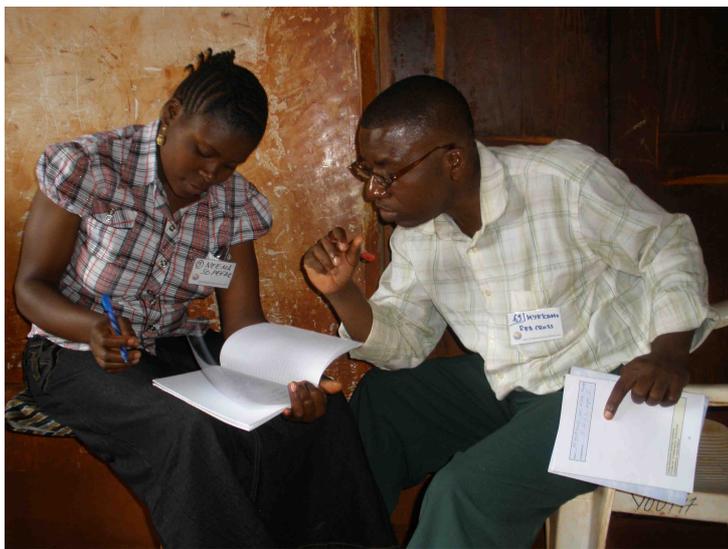
Newsletter December 2011

Harry van der Zee, MD

Trauma Relief Training in Nyarugusu Refugee Camp, Tanzania

In Rwanda in 2005 Peter Chappell realised that the Genus epidemicus principle (treating all suffering from the same disease as if one person) that is used in the treatment of epidemic diseases is also applicable to collective trauma. The PC RESONANCE for the trauma of WAR & GENOCIDE was the first that was used, and ever since several others have been designed and successfully used in the Great Lakes Region where many years of war, rape and torture left millions traumatised. The news about this new development spread and resulted in invitations to come and train people from local NGOs on the use of PC TRAUMA RESONANCES. Earlier in 2011 Nico Beentjes trained 127 people in Baraka, DRC Congo, that now have the ability to decrease the level of trauma in Fizi district. From this very district hundreds of thousands of people fled the country in 1996 and since. They crossed Lake Tanganyika on anything that would float to seek refuge at the shores of Tanzania. Several refugee camps were created by UNHCR (United Nations High Commission for Refugees) and the Tanzanian government. Slowly refugees have been repatriated or found asylum in other countries.

Nyarugusu is the last camp providing refuge to 64,000 Congolese (2011). It's the largest refugee camp created this century. If one listens to the appalling stories of slaughter, torture, humiliation and rape one can understand that even after 15 years the effects are still felt as if it all happened yesterday. Many lost family members, many arrived as orphans with images of their parents being slaughtered, and even inside the camp some were still not sure of their life. Nyarugusu is situated in Kigoma region, the North-West of Tanzania. One of the local NGOs that try to help the refugees is WADS (Women Actions for Development and Solidarity). They invited ARHF to offer training in trauma relief and it was concluded that the ideal place to do this would be inside the camp, so refugees themselves could participate. Through the Ministry of Home Affairs in Dar Es Salaam authorisation was given to provide the training inside the camp. WADS found a partner inside the camp in SOPEFAC (Solidarité Paysanne pour l'Education aux droits des Femmes et des enfants et Anti-Corruption). Antoine Kasongo, whose personal history would make a book by itself, invited members of other NGOs active in the camp and ultimately 122 participants were trained. First they were given basic theory on homeopathy and trauma and then learned how to prepare PC TRAUMA RESONANCES. This was taught in one day, was easily understood, and quickly translated into effective treatment. There is only one remedy as war trauma is endemic, and results happened overnight.



Taking each other's case of trauma

After that they took each other's case of war trauma in pairs and treated each other. Soon the first changes of symptoms were reported. Someone who had at least 4 nightmares per night had his first peaceful sleep in 15 years. Another reported how she always was harsh with children and to her surprise now observed she treated them with mildness and understanding. Tormenting and repetitive thoughts reduced, fears subsided and faces expressing pain and fear now relaxed and radiated with joy and peace. The group was now clearly motivated to treat their fellow refugees. They formed groups divided over 7 zones, and divided each zone into sections. Each group selected a leader. Some members would especially focus on treating orphans with PC ADOPTION TRAUMA and some on treating sexual abuse with PC RAPE TRAUMA. Within the remaining 2 days that we were still in the camp they managed to treat the incredible amount of 5,000 people, and when we left they had enough stock to ultimately be able to treat all inhabitants.



Production of PC Trauma Resonances

Of course we also met all sorts of obstacles based on what we can summarise as a mixture of human nature and the circumstances in Africa: e.g. miscommunication, misunderstanding, bureaucracy, incapacity, rules and regulations, abuse of power, dishonesty or on a more practical level bad roads, no shower or a mosquito net with holes in it. It's part of this kind of work and, although not always directly experienced as such, actually a wonderful learning experience. It distillates as sincerity in our pursuits and openness in our communication and thus resonates with the higher octaves of the very treatment we provide.



122 trainees first treated themselves and then 5,000 refugees in the camp

What kept the refugees for 15 long years in the camp was a combination of the ongoing situation in DRC Congo and their deeply rooted fears. If after the upcoming elections it stays calm in DRC Congo UNHCR is planning to repatriate them. When we met the refugees we met walking stories of a troubled past. We hope that due to the treatment we made available they can return home with joy and hope for the future.

Peter Chappell's experience in Rwanda mirrors what is reported above, and shows that PC WAR TRAUMA has many long term benefits, which we would expect to see happening with those treated here in Nyarugusu.

This is a summary of the results of these 30 cases in Rwanda:

- They could get to sleep without tormenting thoughts
- They slept deeply, possibly the first time in 11 years
- They could focus on daily problems without these being linked to genocidal thoughts and could then make rational decisions rather than stay buried in these overwhelming thoughts
- They stopped fearing the neighbours in the community, and started socialising, chatting, going to church, laughing and joking
- They stopped feeling they could be killed any moment, and that any sound would frighten them to death day and night, and instead could socialise
- They now believed that they could be helped and allowed others to help them
- They felt able to begin the process of forgiveness
- They could respond to the needs of others – typically their large orphan extended family
- They decided to stop being dependent and having to beg, and started thinking about setting up in business and becoming independent
- Children that had dropped out of school due to the memories wanted to return
- A businessman who took it, because of high blood pressure and heart palpitations that occurred around the anniversary of the genocide, found it resolved his symptoms.



Leaders of WADS and SOPEFAC

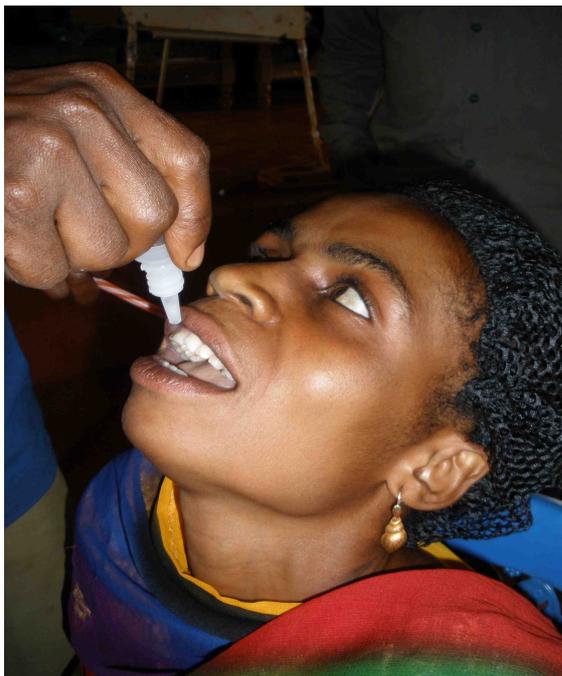


Food preparation for 124 people

In the sidelines of this trip we met several NGOs in Dar Es Salam and Kigoma and enriched them with PC RESONANCES for conditions like AIDS and Malaria. In the local SHDEPHA AIDS-centre in Kigoma we treated 25 AIDS-patients and left stock of PC1 for all their patients, as also for their centre in Kibondo. We treated the national leader of SHDEPHA and through him this treatment can reach all the remaining offices. With a diabetes specialist from Dar Es Salaam we treated some diabetes patients and he will further use PC DIABETES in his clinic of 100 patients.

From the many hours of filming inside Nyarugusu Refugee Camp we prepared a documentary that will be ready before 2012 [order at info@arhf.nl, price for free to donors].

What remains is gratitude for the many people we met and for what was accomplished together with them and their organisations. Great thanks to our donors, which made this trip possible. Special thanks goes to Nico Beentjes who offered to assist on this trip. His knowledge of French was of great help and on many other levels - like preparing and refilling hundreds of dropper bottles - he made it a lighter job.



555 – simple & effective



Lilies alongside a Kigoma road

Amma4Malawi Clinic

Earlier we reported about this small clinic run by Joseph Msumba in Chintheche, Malawi. Here mainly AIDS-patients are being treated, many of them referred to the clinic by the local hospital. The DHO (District Health Officer) has requested training for 20 people that can work in the villages and treat AIDS-patients with PC1 there. For 2012 this project needs a minimum of € 200 per month to fulfil its potential and doubling that amount would make it possible to pay at least a basis salary to those that are working there now as volunteers. Also at least two trips are planned to visit Chintheche to establish a better location, to further develop the relationship with the authorities, to extend the reach of AIDS-treatment and to set up a curriculum for full homeopathic training. PC treatment for epidemics and trauma forms the basis of the clinic, and on that firm foundation homeopathic education can turn the clinic into one that can cover a great range of conditions. A group of homeopaths that are willing to provide training and supervision has already been formed. Others interested to join this group can contact us at harry@homeolinks.nl
To realise all Joseph's plans for 2012 a total budget of € 8,000 is needed.

Amma4Congo&Burundi

Since a first visit in 2008 our partners in Burundi and DRC Congo keep actively using the Amma4Africa Kit providing treatment to hundreds of people. They do this despite a minimal budget and we'd love to be able to support them in a more substantial way. Although more would be very welcome a budget of € 3,000 for 2012 would already be help them tremendously.

Donations

Practical instructions for making a Donation

If you are a UK taxpayer you can use the 'GiftAid' button at www.arhf.nl. This will enable the tax you have paid on your donation to be recovered and given to ARHF.

At www.arhf.nl it is also possible to make an online payment using your credit card by using the 'paypal' button.

Donations by Bank Transfer can be made to:

Amma Resonance Healing Foundation
ABN-AMRO Bank (Rijkstraatweg 184, 9752 BP Haren, Netherlands)
Account number: 422065234
BIC (Swift code): ABNANL2A
IBAN: NL42ABNA0422065234

Amma Resonance Healing Foundation – www.arhf.nl - info@arhf.nl