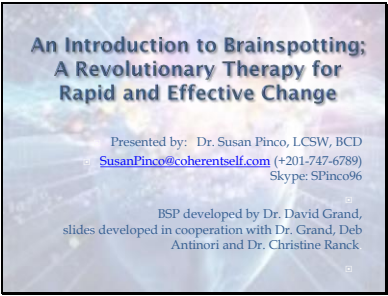


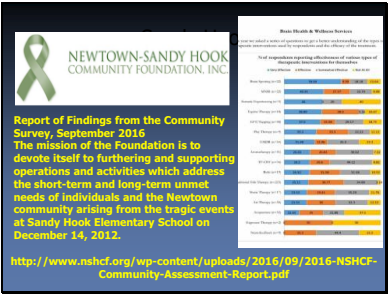
Slide 1



Slide 2



Slide 3



Slide 4

Brainspotting was found to be the most effective mode of therapy used in Newtown-Sandy Hook, Connecticut for survivors of the 12/14 school shooting

Slide 5

**A preliminary study of the efficacy of
Brainspotting – a new therapy for the
treatment of Post Traumatic Stress
Disorder**

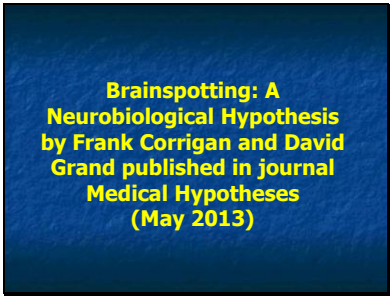
By Hildebrand, Grand and Stemmler

**Journal for Psychotraumatology,
Psychotherapy Science and
Psychological Medicine
2015**

Slide 6

**Brainspotting: Sustained attention, spinothalamic tracts, thalamocortical processing, and the healing of adaptive orientation truncated by traumatic experience by Frank Corrigan, David Grand and Rajiv Raju
Published in journal Medical Hypotheses (May 2015)**

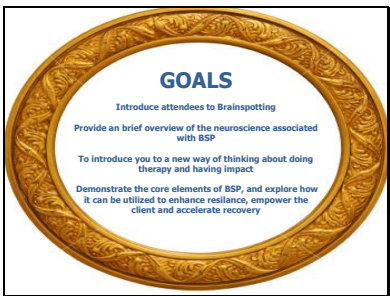
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Slide 8



Slide 9



Slide 10

Clinical Brainspotting (BSP):
A new tools for your tool box.


BSP is intended to make your work more experiential; utilizing neurobiology to support the clinical healing relationship



Slide 11

BSP's Lineage

BSP, 1st developed by Dr. David Grand, continues to emerge based on his on going work with clients and on the work of fellow BSP practitioners



As you will see, BSP, shares many of the tools developed by Eugene Gendlin (Focusing), Peter Levine (Somatic Experiencing), Ego State (Watkins & Watkins) and numerous other masters of somatically informed therapy. What makes it unique is the focused activation associated with fixed eye positioning, and the explicit freedom it gives to the practitioner to do what works best in the moment; privileging attunement over protocol.

Slide 12

Brainspotting

"Brainspotting functions as a neurobiological tool to locate, focus, process and release experiences and symptoms that are typically out of reach of the conscious mind and its cognitive and language capacity.

Working with the deep brain and the body though its direct access to the autonomic and limbic systems, it taps into and harnesses the body's innate self-scanning capacity to process and release focused areas which are in a maladaptive homeostasis or "frozen primitive survival modes".

Slide 13

More simply

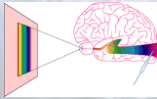


Brainspotting is the utilization of fixed eye positions which appear to stimulate neural networks and, facilitate both the associative process and the resolution, digestion or healing of both physiological and psychological trauma.

Slide 14


How Do you Find A Brainspot ?

A Brainspot is located by finding a eye position that pairs with externally observed and internally experienced reflexive responses. As such, a Brainspot is seen as accessing a physiological capsule that is holding emotional experience.



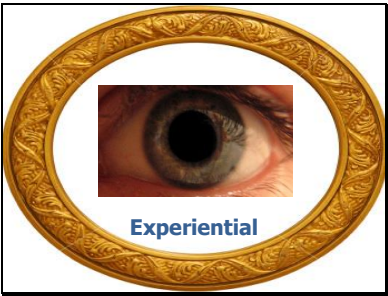
Slide 15

What does the subcortical brain perceive when we pause on a Brainspot?



It appears to feel a sense of connection and attunement the neocortical brain doesn't understand.

Slide 16



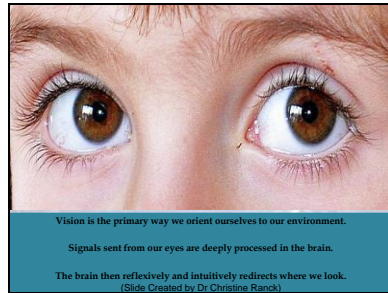
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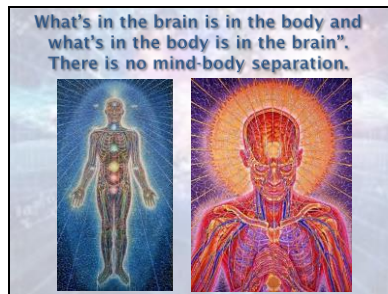
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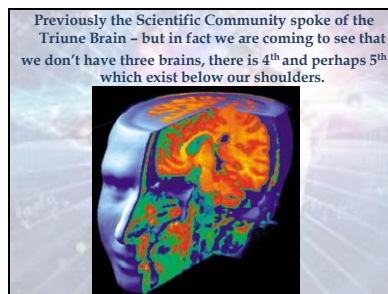
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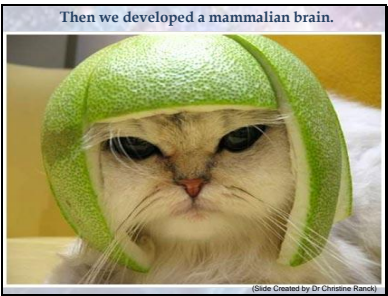
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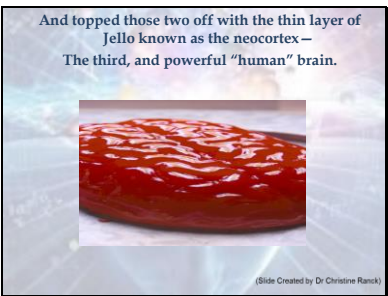
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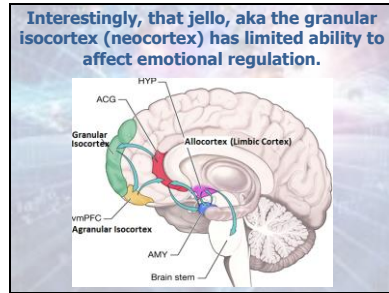
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Slide 24




Slide 25



Slide 26

Research in In Neurophysiology Suggests



When the left brain/prefrontal and frontal cortices (Language and logic) are lit up the right brain's activities are dampened or greatly reduced but the changes are not lasting (Mayberg et al. 1999; Oh and Choi 2007; Rauch, Whalen, et.al. 2000; Rauch and van der Kolk 2007)

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Slide 27


The goal of every psychotherapy is to move clients from dysregulation to regulation.



Brainspotting aims to engage the regions of the brain that are involved in neurobiological regulation and bypass the regions that are not involved in it.

Slide 28

As you know, Trauma overwhelms the brain's processing leaving pieces of the unprocessed experiences frozen in time and space




Slide 29

Disregulation is thought to be triggered by these encapsulated remnants of trauma that are stored in the brain and in the body (Robert Scaer, MD)

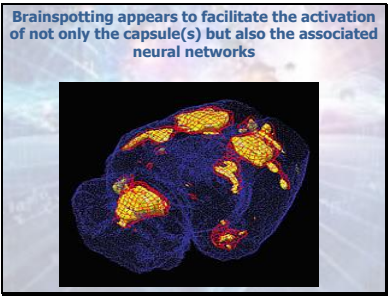


Slide 30

BSP appears to utilize an eye position, and orientation that associates to a physiological trauma capsule that holds traumatic experience in memory form



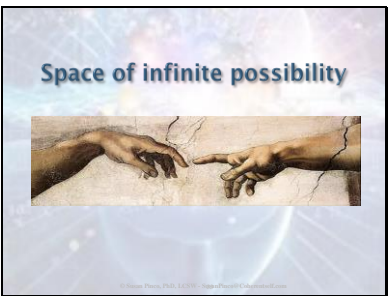
Slide 31




Slide 32



Slide 33



Slide 34





Observations regarding that Space; Silence

As clients pendulate between verbalizations and silent observation of sensations, emotions, involuntary body movements, images and thought, they become less anxious, more present and better able to address core issues.

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Slide 35



▣ Those clients who were not comfortable with working in the silence seem to remain stuck in recitations of issues



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Slide 36


It appears that while the words exchanged between therapist and client(s) provide the scaffolding of the relationship, they can at times impede deeper work



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Slide 37

BSP Therapists guide our clients –
“don’t react to your reactions – observe
them with curiosity and mindfully
observe where things go”.




This helps break the performance block
and the vain attempts by the neocortex
to gain control (faux control).

Slide 38



The client is like the head of a comet and
the attuned therapist is like the tail

Slide 39



To facilitate the process of
following in the tail of the
comet, Brainspotting
Therapists are encouraged to
WAIT.. (why am I talking).
Within this context the
therapist doesn’t engage less,
he/she engages differently

Slide 40

It is the attuned, related presence of the therapist that supports the healing



Being mindfulness of this enhances the healing

Slide 41

Reinforcing the Importance of presence


- Quality of listening (Study of Children at Play - Lapidis 2008)



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Slide 42


The discovery of Brainspotting occurred in 2003 with a 16 year old figure skater who couldn't master the triple loop. Dr. Grand and the client targeted the moment her jump went awry.



While she tracked his finger crossing her visual field, her eyes wobbled and froze. He instinctively held her gaze at that point.


Slide 43

Dr. Grand was struck by the fact that new material emerged that had not come out in a year of intensive treatment. But I was even more struck that issues that had been "resolved" reemerged and processed through to a deeper level.



Slide 44


A torrent of trauma material poured out for the next ten minutes.



Despite a year of weekly 90 minute sessions, new memories of maternal abandonment leading to parental divorce as well as countless sports injuries flowed out with intense emotion.

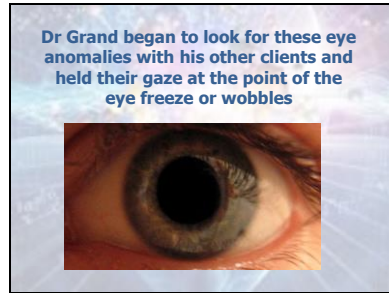
Slide 45

The next day the young skater performed a flawless triple loop for the first time.



And she never had the problem again

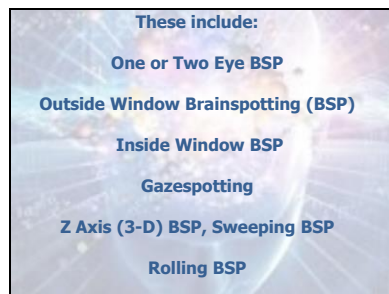
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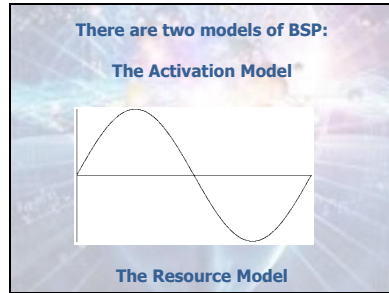
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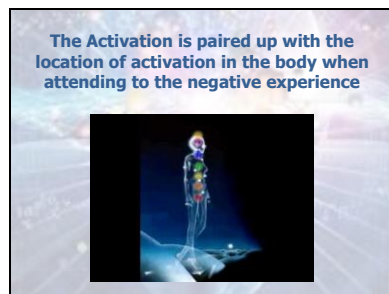
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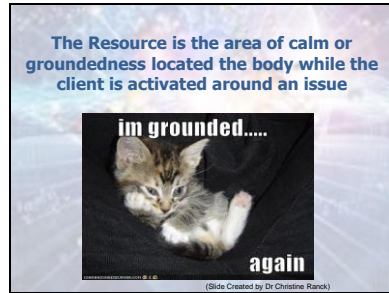
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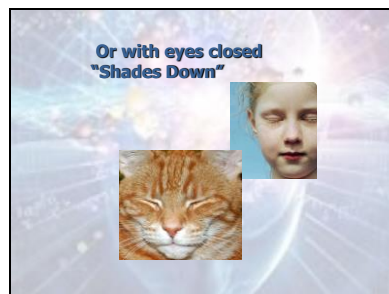
Slide 52




Slide 53



Slide 54



Slide 55



Brainspotting can be enhanced by BioLateral Sound CDs. For highly dissociative clients, or those who are not comfortable with the sounds, Brainspotting can be initiated without any bilateral intensification, which can be added later as the client becomes more integrated.

Slide 56

Ultimate Flexibility: Brainspotting can be done in a number of ways.

- ✓ One or Two Eye BSP
- ✓ Outside Window Brainspotting (BSP)
- ✓ Inside Window BSP
- ✓ Gazespotting
- ✓ Z Axis (3-D) BSP, Sweeping BSP
- ✓ Rolling BSP

Slide 57

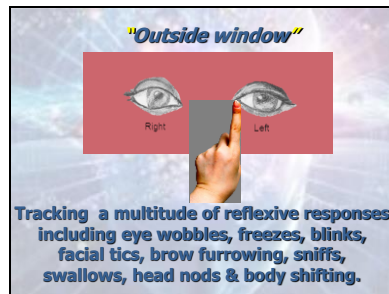
The frame, chosen with the client, is the ideal size and shape to access the innate self-healing capacities of the client.



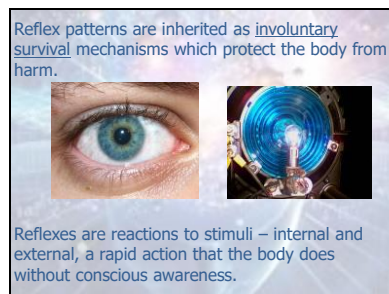
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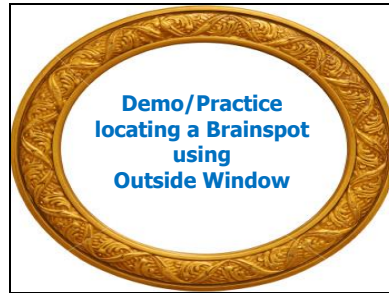
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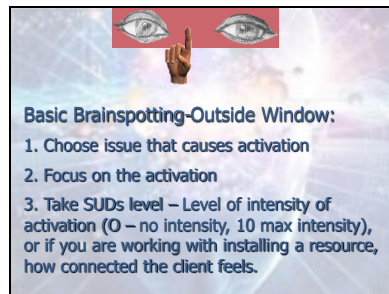
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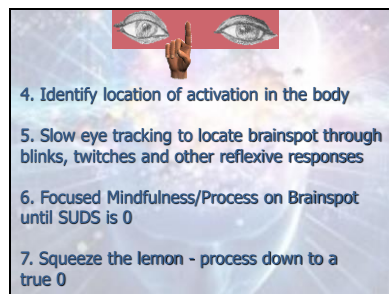
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Slide 62

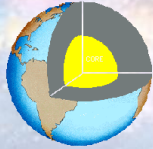


Slide 63



Slide 64

Brainspotting appears to process down to the reflexive core.




Often when it appears one has reached a zero distress level, a new strata is broken through, probing deeper into the brain.

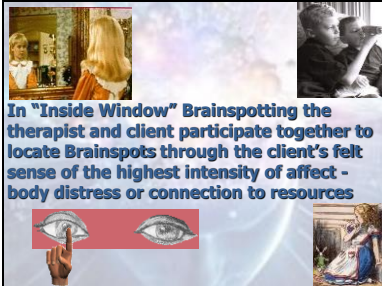
Slide 65

What started as Brainspotting Dr Grand later called "Outside Window" as he realized that Brainspots can also be located & processed from the "Inside Window" of the client's felt sense.

Outside Window & Inside Window

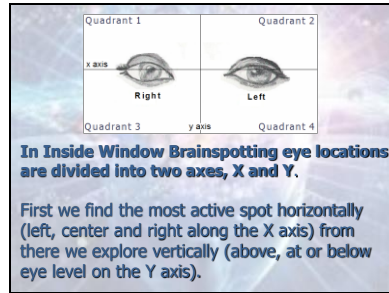


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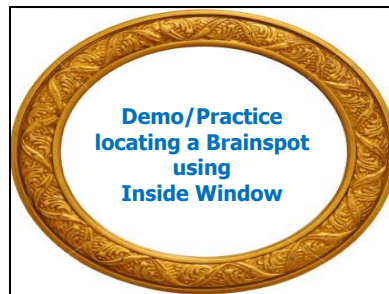


In "Inside Window" Brainspotting the therapist and client participate together to locate Brainspots through the client's felt sense of the highest intensity of affect - body distress or connection to resources

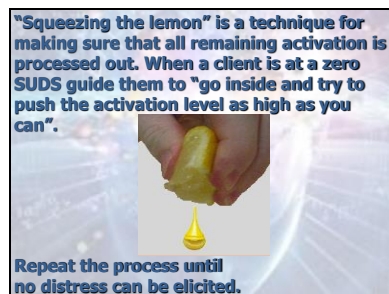
Slide 67



Slide 68



Slide 69



Slide 70



Gazespotting
Fixed gazing while thinking or speaking is natural Brainspotting and can be harnessed

Slide 71



Gaze-Spotting (Self-Spotting)

Notice when a client is looking (gazing) unconsciously at a fixed point while talking about relevant, activated material.

Point out that the client is gazing at this spot and encourage them to keep looking at it while not speaking (to initiate processing) for 30 seconds to 2 minutes (approximately).

Slide 72



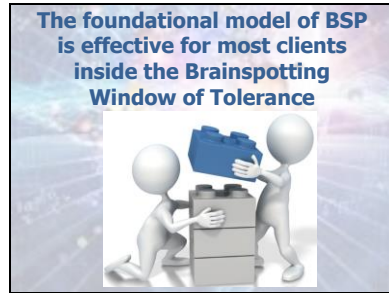
Gaze-Spotting (Self-Spotting)

This will initiate using this gaze spot for full processing of the issue at hand. Because this is a spontaneous version of BSP, you may not have time to get a SUDs level or body location of activation.

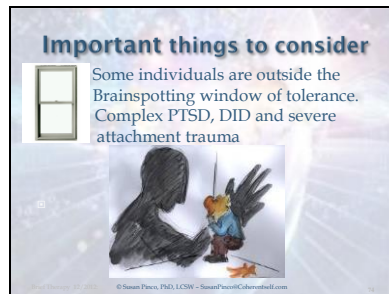
The opportunity may arise during the process but do not force it.

Processing should be carried through until full resolution of issue at hand (assessed by a squeezed lemon zero SUDs).

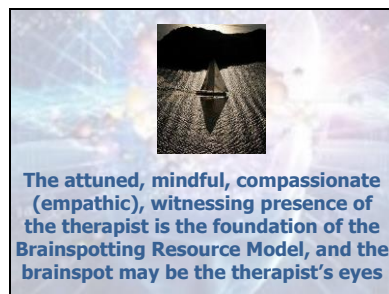
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Slide 74



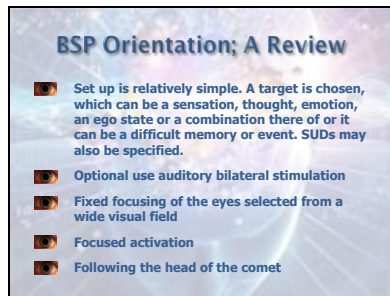
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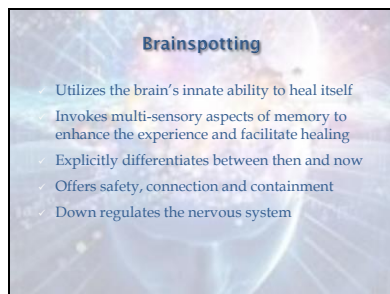
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Slide 77



Slide 78



Slide 79

**Neurophysiological
presuppositions associated with
BSP**

- Neural Networks - must be lit up to change
- Inherent Plasticity*
- Cortex's ability effect impact the limbic and enteric systems is limited to dampening and modulating
- End of Cartesian Duality*
- 4 brains: Enteric or Gut, Stem, Limbic, Cortical

Slide 80

**A Brainspotting session will
vary depending on:**

- Client's need to connect verbally
- Positive Affect Tolerance and Activation of Protector parts
- Remember to adjust the "temperature" of the session, just as you would bath water.

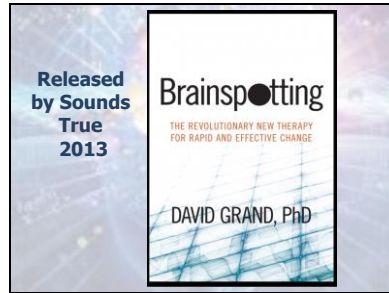
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Slide 81

Brainspotting supports the organic unfolding of healing, helping us to emerge from the protective cocoon of our pain and defensive structures, into the bright sunlight of dynamic, experiential, resourceful integration.



Slide 82



Slide 83



Slide 84

