



Brain Based Interventions for Attachment and Developmental Trauma

Description: This presentation will explore the primary functions of the brain in emotional, behavioral, and relational functioning, and how neurology can be effectively impacted by certain brain based therapeutic interventions in a population with attachment/developmental trauma. It will provide participants with an initial understanding of the types of neurological based interventions and the process and complementary interventions which are best to accompany them.



Scott Kuenneke MS, LPC, BCN

Brain Based Interventions



Dyadic Biofeedback Transcranial
Magnetic
Stimulation
(TMS)

Cranial Electro-Stimulation (TDcS)

Audio/Visual Entrainment

Bilateral stimulation

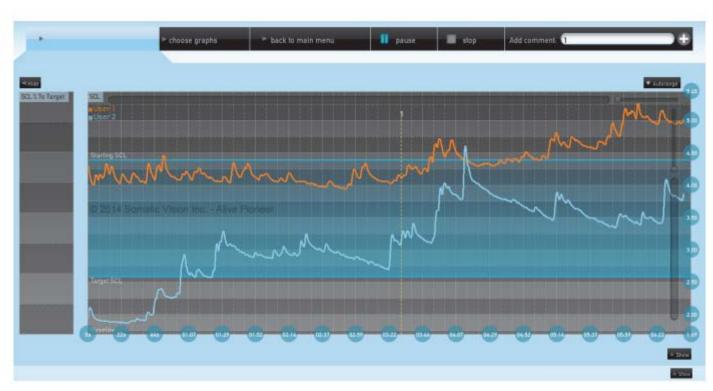
Safe and Secure Protocol (SSP)

Integrative listening System (iLS)

Neurofeedback

Dyadic Biofeedback

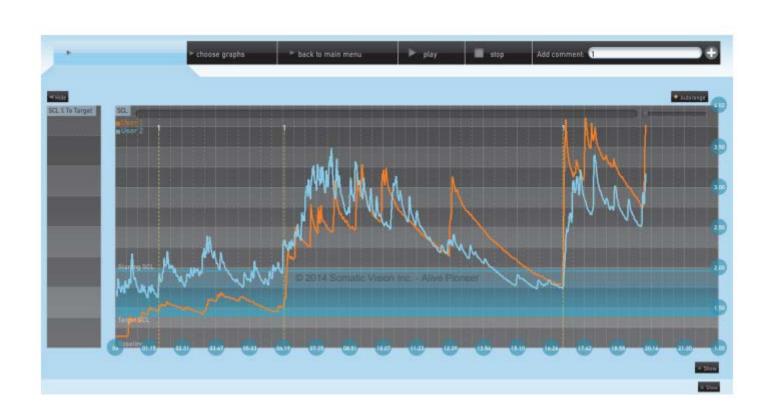




Staying inside the "zone of communication"

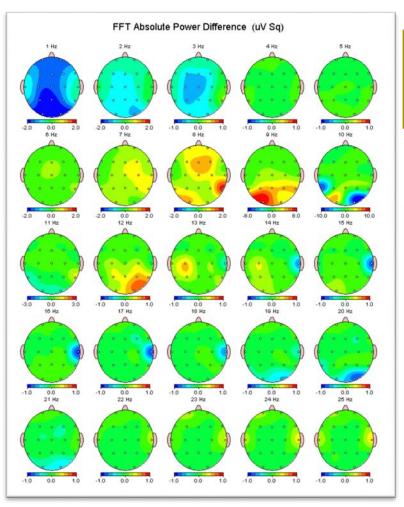
Dyadic Biofeedback



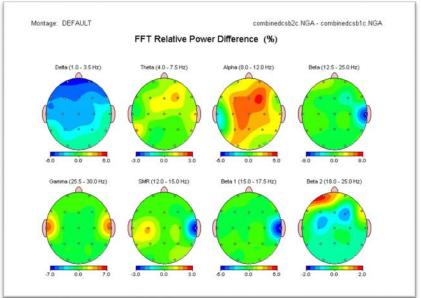


Alpha-Stim Results





Alpha stim conducted pre and post qEEG evaluations on 30 subjects using Alpha-Stim.



Neurofeedback Prevalence

We estimate over 15,000 clinicians, world-wide are using Neurofeedback. The represented professions are inclusive of: psychology, counseling, social work, marriage and family therapy, nursing, neurology, pediatrics, rehabilitation medicine, physical therapy, occupational therapy, naturopathic medicine, speech and language pathology, chiropractic, psychiatry, child and adolescent psychiatry, and family medicine.



QEEG Brain Map





Teen Boy Background



This child lived at home with his biological mother and his adoptive father. His biological father was emotionally abusive and occasionally physically abusive towards him. He would leave the child and his mother when the boy was still an infant. At that time, the child and his mother began living with the mom's grandparents and the child had limited contact with his biological father. Eventually, his biological father agreed to terminate his parental rights when the child was 4-years old. After his parental rights were terminated, The child's stepfather adopted him. The child had no contact with his biological father.

Generalized Anxiety Disorder (GAD)

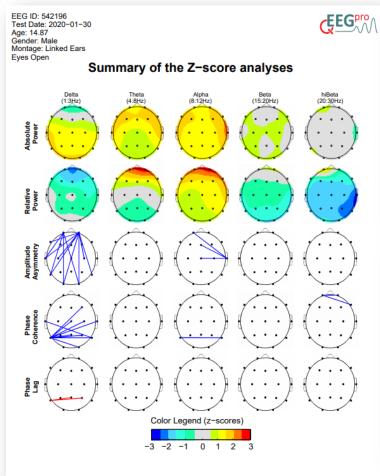
Posttraumatic Stress Disorder (PTSD)

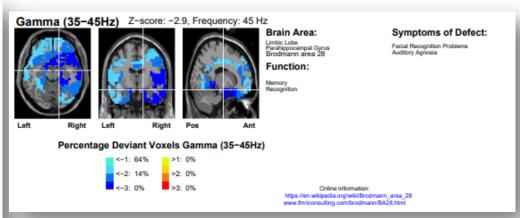
Major Depressive Disorder

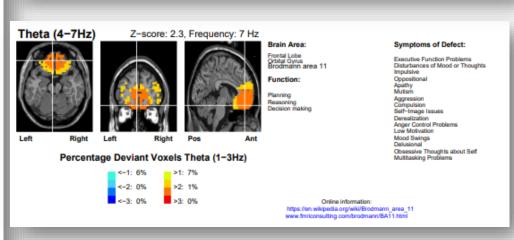
Attention Deficit Hyperactivity Disorder (ADHD), Combined Type

Attachment/Developmental Trauma qEEG









Neurofeedback

Neurofeedback & what it does

- Encourages Neuroplastic changes.
- Motivated by success
- Designed to encourage adaptation
- Using the brain map to develop growth areas.
- Pair symptoms with biomarkers
- Use symptoms to develop goals "If I no longer felt anxiety, that would improve the quality of my life"
- Neurofeedback is teaching the brain to be less defensive as a default



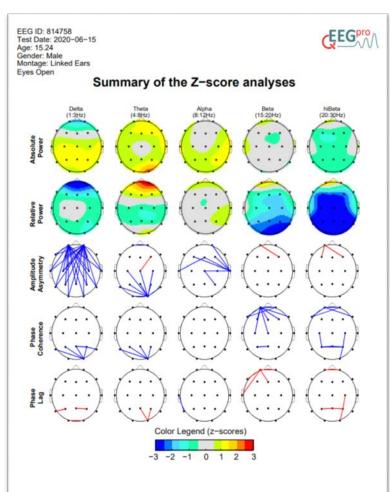
Neurofeedback Training Screen

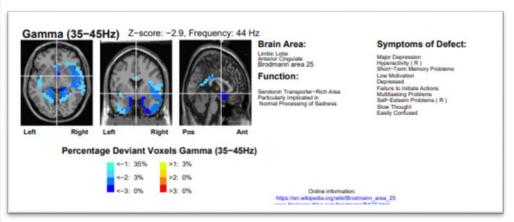


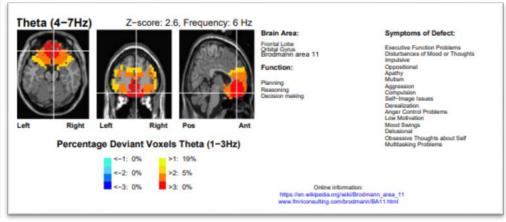


Mid qEEG



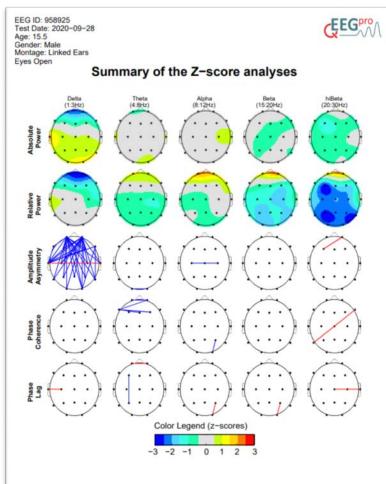


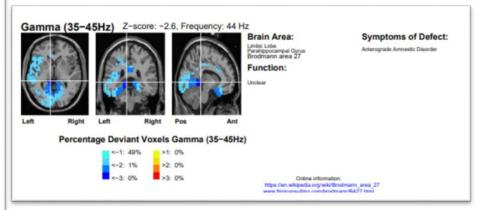


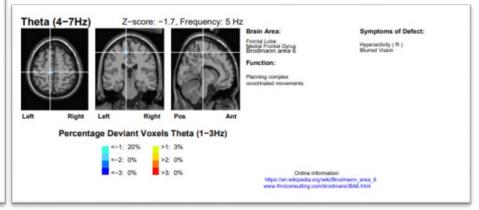


Post qEEG



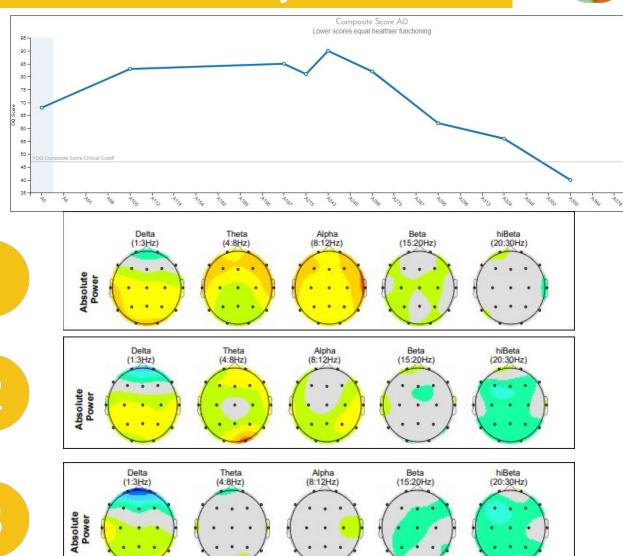






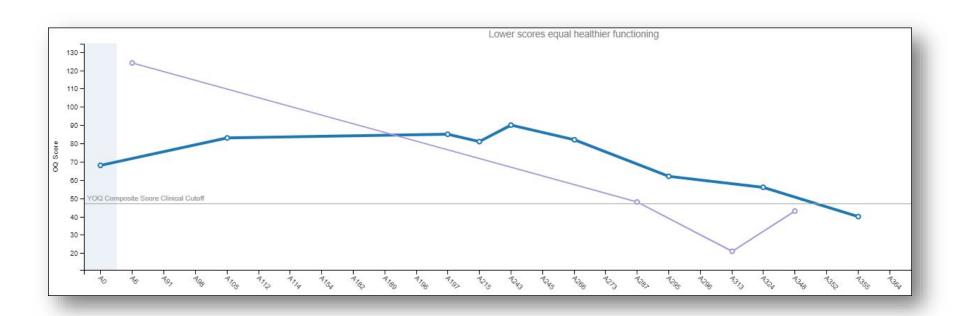
Attachment/Developmental Trauma Case Summary





Parent and Student





Neurological Comparison Report





- Normalization is an indication of how much the student's brain has normalized since their previous recording.
- Change/Plasticity is an indication of their nervous system attempting to create a new homeostatic set point or create new pathways for more efficient adaptive functioning.
- Reorganization is the body is trying to figure out how to adapt to the change.

Pre-Teen Student Background



This child was adopted at birth in the united states, having his parents in the delivery room with his birth mother. It was a private adoption through an attorney, which was also an open adoption. The family stayed in the birth location for nearly 2 weeks after the birth, during which time he also spent time with maternal birth family. Adopted parents reports that the birth mother was not entirely honest about her mental health during the process; it was known that she had anxiety and depression, but family recently learned that birth mom is bipolar diagnosis and possibly suicidal. The child's family continued frequent contact with birth mom for the first 5 years. When he was an infant, the family would bring him to visit birth mom and siblings. There has been no contact with birth father, who was "engaged" to birth mom at conception, then when she told him of the pregnancy he told her to get an abortion and went back to his apparent current wife. The last time the child saw his birth mother was at age 7 when she came with a boyfriend to the house for dinner.

Diagnosis

Primal Wound

F41.1 Generalized Anxiety Disorder

F90.2 Attention
Deficit/Hyperactivity
Disorder, combined type

F81.81 Disorder of Written Expression





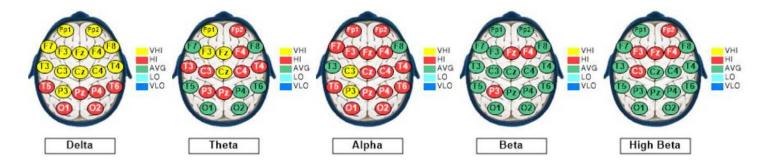


Beta Asymmetry is 69% indicating self-depreciating thinking and withdrawal tendencies.

Pre and Post

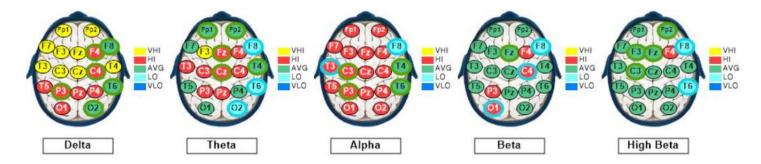


Magnitude - Intake (Eyes Open): 4/9/2020



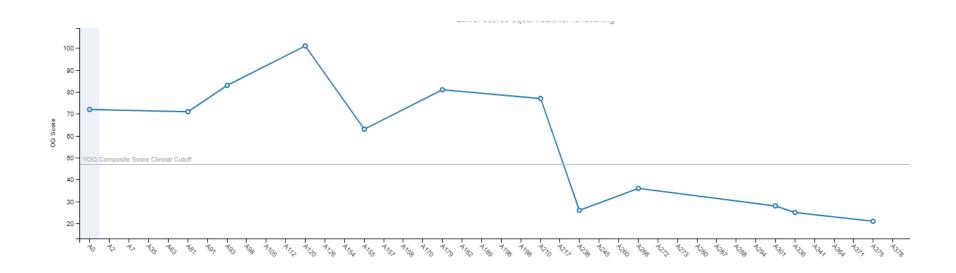


Magnitude - Exit (Eyes Open): 11/16/2020



YOQ Student Report





Parent Overlay





38% Change / Plasticity



% Reorganization

44% Normalization











Thank You

Scott Kuenneke MS, LPC, BCN