

# NEUROPSYCHOTHERAPY

*Issue 49 • June 2018 - July 2018*



## IN THIS EDITION:

- Celebrating the SECOND International Conference of Neuropsychotherapy
- Feature Article: Rita Princi's Conference Closing Keynote

# Welcome

## WELCOME TO THIS EDITION OF NEUROPSYCHOTHERAPY!



**In this edition** we focus mainly on the Second International Conference of Neuropsychotherapy, held at the Catholic Conference Centre in Melbourne, 22-25 May 2018.

**Our feature article** is Rita Princi's very important closing note of this year Conference. Rita was the Conference Master of Ceremonies and we believe that everyone who attended will agree that she again did a tremendous and wonderful job.

**We also celebrate the Conference** with some beautiful photo collages of the speakers, attendees and activities during the conference.

### INTERNATIONAL CONFERENCE OF NEUROPSYCHOTHERAPY

**As was the case last year**, Mediros hosted and organised this year's Conference. The IACN again collaborated with Mediros and endorsed what we now can call a very successful 2018 Conference.

**On 22 May 2018** this year's Conference kicked off with two half day workshops:

- **Neuroscience of Bulimia Nervosa and Binge Eating Disorder: Implications for Treatment Strategies** by Dr Roger Mysliwicz from New Zealand (Eating Disorders Specialist and Doctor in Psychosomatic Medicine) and

- **Wellness and Capacity Development.**

**The Neuroscience of Resilience** by Jurie Rossouw and Davinia Glendenning.

**From 23 – 25 May 2018** we had a full Conference packed with 50 presentations and mini-workshops. We also hosted the second AGM of the International Association of Clinical Neuropsychotherapy.

**The Conference theme** "From Neuroscience Research to Clinical Practice" again focus on neuroscience-based research which included a wide variety of clinical applications.

The Key Notes and State of the Art Lectures were very well received and covered the following topics:

- Integration of Mind and Body in the Practice of Neuropsychotherapy (Dr Roger Mysliwicz),
- The Intentional and Diverse Application of Neuropsychotherapy (Rita Princi),
- The Parent Neuropsychotherapy Protocol: A Relational

and Developmental Approach to Working with Youth and Their Families. (Thedy Veliz),

- Structured Image Framework Theory (SIFT): A brain based therapeutic technique to explain the traumatic experience (Daren Wilson),
- Brain based approaches to working with children and adolescents (Dr David Collins).

**The mini-workshops and presentations** offered excellent opportunities for attendees to learn from specialists and peers with brain-based approaches put forward in various fields of clinical, organisational, educational, developmental, attachment, community, family and relationships, spirituality and meditation work.

**The Conference was attended** by 128 participants from 5 countries. Mediros wants to thank all of you for your attendance and your active contribution to this outstanding event.

*Best wishes, the Mediros Team*



## In The Next Edition:

### ONLINE TRAINING

Mediros' main directive has now evolved to providing Online Training.

Mediros now offers online The Mediros Neuropsychotherapy Training Modules that provides a platform where all clinicians can access up to 20 online training modules. The modules each consist some sessions, a training video and multiple questions. A Certificate of Professional Development Hours (one hour for each module) is issued when a pass is achieved. More about this in the next e-journal.

### NEUROPSYCHOTHERAPY E-JOURNAL

Mediros is committed to continue with a bimonthly issue of this free e-Journal. As previously mentioned, the aim is to continue to serve the purpose of what this Journal was created for; \*the spread of information about the modality of neuropsychotherapy, \*sharing news and training opportunities in the field of neuropsychotherapy and in the form of reflective essays, \*sharing fellow neuropsychology colleagues' expertise about the applications of neuropsychotherapy.

25 May 2018

### *The Intentional and Diverse Application of Neuropsychotherapy*

Rita Princi

B.Psych(Hons), M.Psych(Clin), MAPS, MCCLP, MIACN (Cert)

Whether applying Neuropsychotherapy in the therapy room, training or educational setting, or to clinicians, teachers and leaders in education, or medical practitioners, or parents, it is evident that its application is wide and relevant across many domains. The intentional aspect of using neuroscience as a framework to engage and connect with participants in any setting provides a foundational framework from which to explain and understand the application in diverse settings. From both my clinical work with clients and in my presentations and workshops to professionals and others, it is clear that Neuropsychotherapy provides the basis to follow the science/practitioner model by applying neuroscience to understand and solve everyday problems: by firstly meeting basic needs in order to increase an individual's sense of

control; to facilitate healthy connections with others; and increase motivation by seeking pleasurable activities and positive outcomes in order to achieve a fully integrated self. Throughout the application, the focus is on social interaction as a way of emphasising the brain's need to connect and engage with others in order to achieve and maintain emotional, social and physical wellbeing. Therefore, the closing keynote summarised the intentional and diverse application of Neuropsychotherapy presentations across the Conference: from working with children and families, to couples and relationships, treating eating disorders, in education, applying mindfulness, in organisational psychology, treating misophonia and more - the list goes on and on.

For the purposes of this paper, the focus will be on the implementation of Neuropsychotherapy, defined as the therapeutic application of neuroscience theory and research, when working with children and families. The intentional aspect is to be aware of the client group when implementing Neuropsychotherapy. We may start with a

couple, being aware of whether relationship difficulties are impacting on the couple or it may be to do with fertility issues which can also impact on the couple as a result of the medical treatment involved, and the rise and fall of hopes and disappointments.





## “presenting neuroscience to young students, especially those trying to manage stress and study ...”

rosience to young students to understand the young brain; to teenage students, especially those trying to manage stress and study, relationships and social media; to teachers and educational leaders in helping them understand the young brain in order to facilitate connecting with their students and to focus on well-being and subsequently enhance performance.

Neuropsychotherapy may also be implemented in presentations to professional domains, for example, to emergency medicine doctors sitting their final exams. Even though their knowledge is very advanced with regard to the human brain and body they also appreciate being reminded about balance in meeting basic needs, and social interaction when spending time with their partners, children and friends in order to feel connected and increasing self-awareness that social interaction is critical when assessing and treating patients. Other domains include presentations on neuroscience and stress to athletes, to the legal profession and other organisations.

Importantly, when practicing Neuropsychotherapy individually, with families, in groups or to different professions, it is critically important that the work we present is evidence based. As the terms brain-based and neuroscience have become quite common, it's imperative that we ensure that what we present is research based in order to follow a science practitioner model.

During my keynote presentation, I also included a slide showing how stress can lead to many physical, emotional, behavioural and social difficulties. Therefore, by following the Neuropsychotherapy model it gives us the foundation with which to connect with clients to explain the importance of sleep, nutrition, exercise and social interaction and connections with others in order to minimize disconnecting from others: See Figure 2 below.

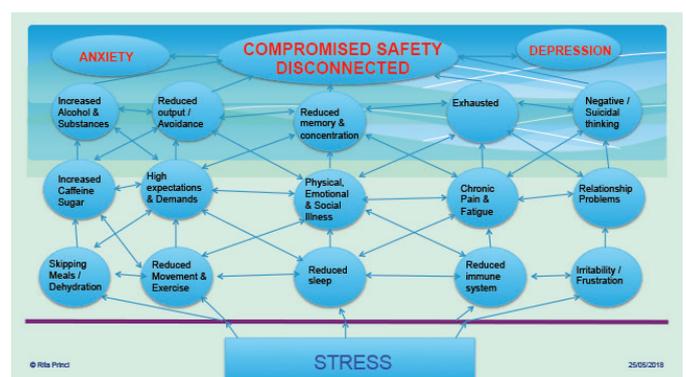


Figure 2

Other clients may present as a result of being pregnant, and the associated anxiety, which can impact on a woman's sense of control and sense of safety. Perhaps the woman has had challenges with anxiety previously on becoming pregnant which has now become heightened. Once the baby is born, while there is joy and relief that the baby is well, sometimes the lack of support or lack of understanding about the baby's needs and developmental stages can further affect the family's ability to manage the arrival of a baby. For some families, these complex needs are exacerbated when they are supporting a child with illness.

During childhood and teenage years, knowledge about brain development, especially the development of the triune brain, helps parents and educators understand the child's emotional, physical and social needs to assist children and young people during the significant stages of development both at home and at school.

When applying Neuropsychotherapy, importance is placed on being flexible and able to form an alliance with all families by understanding that families do come in different shapes and sizes and being mindful of their needs in a very respectful and engaging way. This applies too when we are working with families going through separation as relationships change through to the transition of making new relationships and building new families. Therefore, when working with families, Neuropsychotherapy can be implemented from the couple all the way through life as people face the difficulties that may be present as a result of retirement, health deterioration, loss and grief. The diverse application can also be revealed in presentations and workshops in different areas. Some examples are; presenting neu-

The next diagram showed how Neuropsychotherapy underpins all other therapies whether in the therapy room, the classroom or in professional settings. However, these are just a small range of areas as the application of Neuropsychotherapy is limitless in the areas where it can be implemented. After all, it is about us, the human family: See Figure 3.

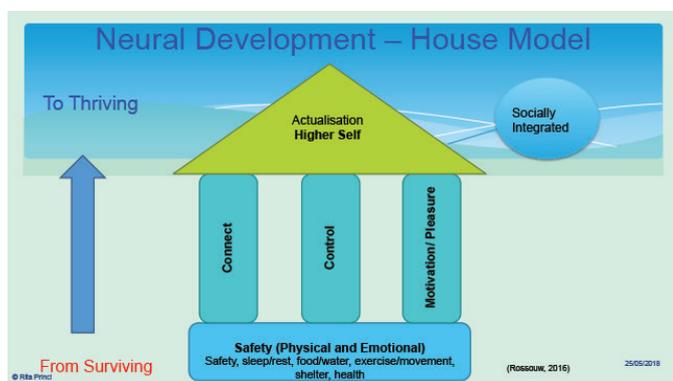
Figure 3



### THE INTERCONNECTEDNESS OF US

The Neuropsychotherapy model provides a framework to share with clients in order to highlight the importance of having our basic needs met, the need for control through self-awareness of our choices to meet our needs, the importance of supportive social relationships, being able to look forward to pleasurable things in our lives in order to achieve a higher self with the understanding that the brain is a very social organ. However, it is also important to emphasise that we can shift between survival and thriving depending on which areas may be lacking in order to ensure that we are aware of our needs: See Figure 1.

Figure 1 (after Rossouw 2016)



### THE APPLICATION OF NEUROPSYCHOTHERAPY

*First things first.* It is imperative to understand the client's presentation of survival, before moving on to thriving. In other words, as therapists we need to sit with the client, validate, listen, connect, engage before jumping to solutions and problem solving. This helps us to achieve a strong therapeutic alliance, based on confidentiality and trust.

*Secondly,* the focus shifts to basic needs and the importance of meeting these needs every day. Before addressing our need for control, (i.e. having a sense of control with increased self-awareness of needs) in connecting with others and feeling confident to choose safe others as friends (which then helps to manage others with whom we are less compatible), we then

need to understand that motivation increases with dopamine release, which occurs when we have a sense of achievement. Unfortunately, when we successfully avoid a painful situation, the brain can release dopamine, which makes it very difficult to resume a painful or frightening activity, e.g. for a child return to and successfully re-engage in learning and their social connections at school or in any other capacity where the environment has presented challenges.

The model follows a process that leads to thriving as we achieve a sense of integrated self, which is a high order construct. When people are socially integrated they optimise their wellness and are more able to approach situations with 'controllable congruence' as their self-esteem and self-reliance increases. This sense of self then leads to approaching life rather than avoiding difficulties, helps shift the client from feeling isolated to being encouraged to seek out integration with others and connects the left prefrontal cortex (LPFC) with the right prefrontal cortex (RPFC), connecting IQ with EQ. (emotional intelligence). It is only now that the left prefrontal cortex is able to give voice to the right prefrontal cortex in being able to express emotions, needs, hopes, dreams and goals.

This is where learning occurs - sustained and meaningful learning.

### NEUROPSYCHOTHERAPY AND OTHER THERAPIES

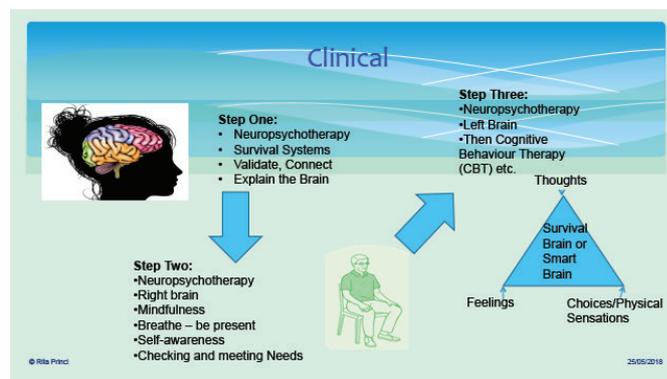


Figure 4

The above three-step model (Figure 4) illustrates the Neuropsychotherapy model in clinical practice, which aims to create an enriched therapeutic environment to facilitate the underlying principle of safety and explain the role of emotional connection as being the basis for the platform of wellness. This approach increases and strengthens foundations of confidence to facilitate individual problem solving abilities and increase emotional safety and security. This process is achieved by explaining the brain processes involved when emotionally dysregulated and teach ways to calm the brain with mindfulness, relaxation and visualisation, increasing self-awareness about how the brain works and identifying needs, both physical (i.e., sleep deprivation, feeling tired, hungry/thirsty, needing rest) and emotional needs, engaging in reflection, understanding, then empowerment through the reflective process. The focus then shifts to increasing a sense of control, strengthening relationships via connecting and increasing motivation by focusing on goals. Once the calming process has been

achieved then cognitive behaviour therapy strategies are introduced as the client becomes able to utilise their smart brain (LPFC and RPFC). It is also important to not focus on distress and challenges as being a burden to avoid, but rather a useful tool to approach and face fears in a confident way.

These are some very important questions to aware of when implementing Neuropsychotherapy: **What do I need right now? What does the client need? What does the child need in the school setting? And what is the cost if I don't meet that need?** Otherwise the focus can be very much on want and have to rather than connection with self and awareness of needs.

## CONCLUSION

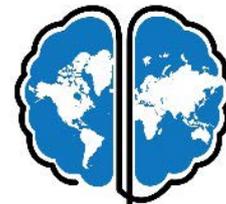
Let's bring it all together. We can intentionally apply Neuropsychotherapy to any individual or cohort in diverse domains. The intentional application requires us to know our audience, in order to achieve right brain to right brain connection by being present with the client, which is the best way to apply the Neuropsychotherapy model to increase wellness for the client as we help them shift from surviving to thriving then being able to make informed decisions for their life.





FROM THE IACN SECRETARY,

*Jonathan Wills*



IACN International Association of  
Clinical Neuropsychotherapy

## Hello again Mediros eJournal readers and IACN members

First allow me to thank everyone who attended the Second International Conference in Melbourne during May – it was wonderful to see so many of you again and to hear as many presentations and I could. I am so very grateful for the support provided in the run up and during the conference from IACN members and non IACN members alike – it really was heart-warming to experience such camaraderie and to really feel part of such a caring and committed community of practitioners.

I am not forgetting the IACN members and eJournal readers who were unable to attend – I truly value your support and ongoing membership of the IACN as well, and we hope to add some value for you by making at least some of the presentations available in digital form, at some stage later this year.

### **WELCOME TO NEW ASSOCIATE MEMBERS AND THE NEW IACN EXECUTIVE AND MANAGEMENT COMMITTEE**

I want to reiterate my personal welcome to your new

IACN Executive and Management Committee – President, Dr Roger Mysliwiec, Secretary, Matthew Dahlitz Treasurer, Daren Wilson and non-executive Management Committee members Rita Princi, Dionne Shnider, Mary Bowles and Peter Janetzki. It will be a challenging year ahead as the IACN consolidates its purpose and reinvigorates the Neuropsychotherapy Practitioner Training in preparation for 2019 when we aim to re-commence trainings. In the meantime we also welcome a new group of Associate IACN Members – those who attended the Conference but who were not already members – you will receive your membership certificates in the coming weeks and we hope some of you will consider attending the first Practitioner Trainings next year, when we are ready to relaunch.

Until the next edition of the eJournal and some more reflective essays – keep safe.

Warm regards

*Jonathan*

“thank everyone who attended the Second International Conference in Melbourne during May – it was wonderful to see so many of you again and to hear as many presentations and I could.”



**Feedback notes on the Second International Conference of Neuropsychotherapy**

Thank you to everyone who was a part of 2018 Conference. Each and every person played an important role in making it a successful and meaningful event and we sincerely hope that it provided everyone with everything that they expected or wished for.

On the last day of the Conference, Mediros sent out an online Survey to all attendees, keynote speakers, volunteers, and presenters alike, and asked that they share their experience of the Conference.

This information below analyses 1.) the feedback on the relevance and the organisation of the conference, 2.) gives a snapshot of the quotes about the highlights of the conference as extracted from the feedback survey and 3.) lastly, again by way of quoting the feedback, some specific lessons learnt and identified.

**1 - FEEDBACK ON RELEVANCE AND THE ORGANISATION OF THE CONFERENCE**

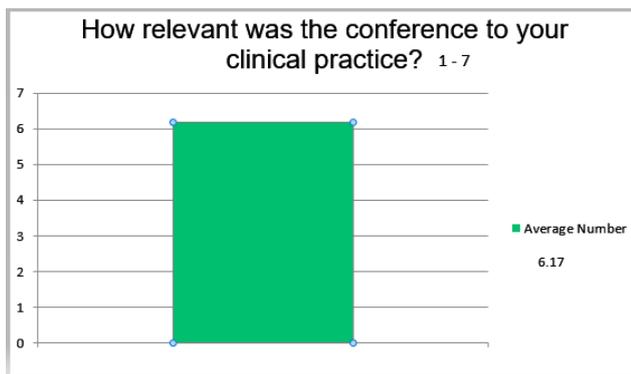
**1.1 The data gathered in the survey were analysed on 27-06-2018. Up to then, 62 participants have responded and completed the survey, which under any circumstances is an excellent response to any online questionnaire.**



**1.2 Relevance of Conference**

How relevant was the conference to your clinical practice? **(1-7)**

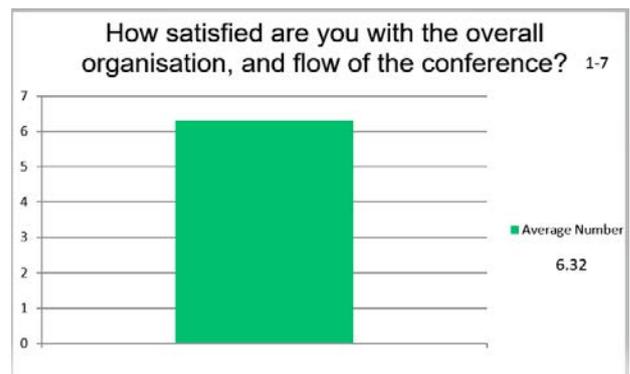
**The average score out of 7 was 6.18**  
 88%; Average response: 6.18; Std Dev 0.9476;  
 Median: 6; Mode: 7; Range: 3:7



**1.3 Organisation of the Conference**

How satisfied are you with the overall organisation, and flow of the conference? **(1-7)**

**The average score out of 7 was 6.37**  
 91%; Average response: 6.37; Std Dev 0.9013;  
 Median: 7; Mode: 7; Range: 3:7



## 2 – A SNAPSHOT OF THE QUOTES ABOUT THE HIGHLIGHTS OF THE CONFERENCE AS EXTRACTED FROM THE SURVEY

### Question: What were the highlights of the conference?

- *Range of applications*
- *Highly accomplished speakers with leading edge information and powerful therapeutic methods*
- *Networking with likeminded professionals*
- *Diversity of applications of neuroscience to practice*
- *The interaction between participants and some speakers*
- *Keynotes, Venue, Organisation*
- *Meeting people learning techniques*
- *Session on conflict and the presentations on sleep*
- *Some keynotes and presentations on Child/parent interaction and Boundaries*
- *Wide ranging conference topics and expertise of presenters*
- *International speakers, Thedy Veliz, social function*
- *Keynote speakers*
- *How recent neurobiological knowledge can be utilised with therapy and the implications of integration.*
- *Broad options of topics and networking*
- *Different applications of brain smart practice. Overseas presenters*
- *The variety to the presentation content and context*
- *Meeting people*
- *For me, the pre-conference workshops*
- *Relevance and quality of certain seminar sessions*
- *Meeting likeminded practitioners*
- *Networking opportunity*
- *Memory Reconsolidation, toddler trauma, family systems content*
- *Variety of presentations and opportunity to network*
- *Mind and Body, Six domains of Self*
- *Everything*
- *Wonderful organisation and great location - Thank you to Andie and Jonathan*
- *All good and relevant*
- *Brain spotting talk*
- *Connecting with people*
- *None specifically - all good*
- *Most of the keynote speakers and presenters*
- *The diversity of fields presented*
- *The unexpected gems in presentations, the venue, the food and the overall atmosphere*
- *Networking and meeting likewise Neuropsychotherapy enthusiastic individuals*
- *Networking with other professionals in the Neuropsychotherapy field*
- *Amazing speakers covering a wide professional approach*
- *Catching up with people I met last year, indulging in all the information that was presented*
- *Excellent keynotes especially Thedy Veliz and David Collins*
- *Key note speakers*
- *Dr Roger Mysliwec and Thedy Veliz workshop and key notes*
- *Dr Roger Mysliwec, Tim Moore, Thedy Veliz, Roby Abeles*
- *Thedy Veliz, Tim Moore, Lyle Whan + the food*
- *Thedy*
- *David Collins, Thedy Veliz*
- *Thedy Veliz both keynote and workshop, David Collins both keynote and workshop*
- *Mary Bowles, Janine Gent and Catherine Devine*
- *Key note speakers especially Roger, Thedy and David (didn't hear Rita),*
- *talk on brain spotting, conflict resolution and family*
- *Thedy Veliz, David Collins. Being with such a diverse group of likeminded people. Tim Moore & Peter Janetski*
- *Keynote speaker Thedy Veliz from US*
- *David Collins key note*

- Particularly liked presentations from Carol Moylan & Loretta Parsley, Violeta Braach-Maksvytis and
- Lyle Whan
- The psychiatrist presented the self and mental health - insightful
- Connecting with the people that Pieter was connected with
- The opportunity to remember Pieter. As well as stimulating conversations with likeminded people

**Question: Do you have any feedback you would like to share?**

As Extracted from the feedback and suggestions section:

- It was great. Good location, lots of chance to hear new applications
- Highly organised and efficient, thank you!
- Very smoothly run, both as a presenter and attendee. Friendly, professional, supportive and accommodating in the lead-up and throughout the conference
- Good to have practical rather than research topics. Opportunities for cross pollination of ideas valuable across disciplines. Last keynote exploring applications for field warrants more discussion.
- It was great having shorter sessions for those offering less information and longer sessions for those offering theory and techniques.
- Catering was very good
- I would love to have sport specific stream
- The interaction with other neuroscience-aligned professionals was wonderful.
- The passion of all attendees plus the expertise and breadth of knowledge of presenters and organisers was
- refreshing and invigorating. Just to keep the same standard.
- The breaks were needed.
- Fantastic venue and way better than Brisbane. It was great to have everything close together. Brilliant catering as well
- The venue was excellent, great food (variety and quality), good toilets, and easy access, and they didn't increase the land fill with plastic cups and plates.
- Amazing and thoughtful organisation

- A wonderful experience with friendly welcoming people
- Organisation was great as was the venue. Thank you
- Longer presentations would be better - 30 mins are too short for many of them
- 30-minute sessions too short - presenters fine but too short a time span
- Access to presenters slides for note taking/augmenting personal notes would be highly valued

**3 - SPECIFIC POINTS IDENTIFIED AS LESSONS TO BE LEARNT AS PER THE INFORMATION EXTRACTED FROM THE FEEDBACK AND SUGGESTIONS SECTION**

**Question: Do you have any suggestions you would like to share?**

- Only one (suggestions) would be if we could have all talks on USB stick or somewhere we could download them from
- The schedule for each day needed more explanation - such as the timing of the workshops, or the workshops named as workshops
- Availability of all presentations on a specific conference USB stick
- The 30-minute sessions were a bit too short
- I would love to have easier access to slides
- All presentations should be shared so that we don't have to act like the paparazzi with our iPhones
- Tea and coffee all day please
- Please provide ppt for all presentations
- 30-minute sessions need to be longer
- I found the 30 minutes sessions a little too short
- More social program
- Perhaps 'hard copies' of the slides
- Be good to have some more overseas guest keynotes
- Would have liked a social option, breakfast one morning and/or dinner one night as an option to socialise
- More scientific research
- Disappointed some seminars were repeated from last year. This limited my choice and

*often had to choose a seminar that wasn't really relevant as I had attended the others last year*

- *More presenters. I would not go next year if this number of speakers was maintained*
- *Tables for individuals to be able to share resources and to be able to purchase these at the conference*

## IN CONCLUSION:

**First, again a big thank you** for all those who contributed to and attended the conference. The survey showed that overall the **average presenter star rating was 4 out of 5 stars (Std Dev: 0.5 -- Range: 2,4 - 4,8)!**

From all the responses received, it is fair to conclude that the conference was a great success! The opportunities to liaise and meet with colleagues, to learn more about the different ways to apply brain-based therapy and the

presenters that gave the attendees opportunity to actively participate and engage during the presentations all contributed to the success of the Conference.

**The lessons learnt** via the feedback will be taken into account in planning the 2019 conference. **The** overall feedback obtained from the participants provided enough positive and constructive information to assume that the 2019 Conference has every chance and potential to be as good as, or even better than this year and last year's Neuro-conferences.

**Lastly, a special thank you** to ALL our session chairs, to the resourceful Master of Ceremonies – Rita Princi – and to the Keynote and State of the Art Speakers – Dr Roger Mysliwiec, Thedy Veliz, Daren Wilson, Dr David Collins and Rita Princi.



**The Mediros Team**

## CONFERENCE VENUE: CATHOLIC LEADERSHIP AND CONFERENCE CENTRE, MELBOURNE.



# INTERNATIONAL CONFERENCE OF NEUROPSYCHOTHERAPY

