Using the Neurosequential Model to Individualize Treatment for Clients with Developmental Trauma

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OBJECTIVES

• Develop a basic understanding of Neurosequential Model of Therapeutics (NMT) concepts and how they relate to complex and developmental trauma
• Identify appropriate sequence and types of interventions based on NMT framework
• Demonstrate knowledge of how to integrate NMT concepts and interventions into current practice through a sample clinical case presentation

WHAT DO WE DO AT THE DTC?

- Trauma assessments and Psychological assessments
- Parent education classes
- Therapy: home, office, group
- Therapeutic Preschool-South office

WHAT IS THE NEUROSEQUENTIAL METHOD OF THERAPEUTICS (NMT)?

• Dr. Bruce Perry, Psychiatrist, Neuroscientist
• Child Trauma Academy: http://childtrauma.org/
• A framework for conceptualizing cases and treatments through a developmental trauma lens

safer, healthier relationships for children and families
TRAUMA WITHIN AN NMT FRAMEWORK

- What are common symptoms in clients with developmental trauma?
- What part of the brain would be primarily responsible for each symptom?
  - Brainstem
  - Midbrain
  - Limbic
  - Cortex

HOW DOES NMT INFORM RECOMMENDATIONS AND TREATMENT?

- Cortical Modulation Ratio (CMR)
- Dr. Perry’s 6 R’s of positive therapeutic experiences
- “Dosing” interventions
- Interventions are recommended based on the results of the metrics
  - Sensory Integration
  - Self-Regulation
  - Relational
  - Cognitive

SENSE INTEGRATION INTERVENTIONS

- Music
- Movement
- Yoga
- Drumming
- Massage
- Sensory interventions

REGULATORY INTERVENTIONS

- Breathing
- Music
- Structure and routines
- Creative art activities
- Healthy Physical Habits
- CBT activities
- Animal based therapy

RELATIONAL INTERVENTIONS

- Regulatory Relational activities
- Parallel Play
- Animal assisted therapy
- Extra-curricular activities
- Mentoring

COGNITIVE INTERVENTIONS

- TF-CBT interventions
- Imagery assisted therapy
- Cognitive therapy
- Social skills interventions
- Speech therapy
- Journaling
BUT I'M NOT TRAINED IN NMT... HOW DO YOU KNOW WHERE YOUR CLIENT IS DEVELOPMENTALLY?

- Specific symptoms
- Patterns of behaviors
- Relational skills
- Ability to regulate
- Response to sensory input
- Ability to apply learned skills and concepts outside of therapy room

IMPORTANCE OF PARENTS AND FAMILIES

- Framing recommendations for caregivers
- Developmental vs. chronological age
- Recategorizing the “problem” and “solution”
  - Progression of the behaviors over time
  - Brains don’t change with one hour of therapy
- Use dependent functioning

IMPORTANCE OF PARENTS AND FAMILIES

- Role of the family system
- Consider the stress and needs of the caregivers involved
- Families dynamics inform interventions
  - Co-regulation/state-based functioning
- Attempt to minimize stress of intervention on the family
  - Utilize pre-existing strengths and resources
- Interventions for the family as a unit can help everyone

CASE VIGNETTE

- 10 year old African American male
- History of neglect, physical, and sexual abuse
- Presenting concerns
  - Physical aggression
  - Self-injurious behaviors
  - Poor social skills
  - Racial/identity issues
  - Dissociative behaviors

QUESTIONS OR COMMENTS

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