

Module 1: Understanding States of Activation

Module Focus: This module is all about the history of SPT and beginning the journey into neurobiology where we will learn about the brain, states of activation of the nervous system and regulation.

Supportive Tenets:

1. The child's symptoms are understood as expressions of the **activation of the autonomic nervous system**.

Reading: Read Chapter 3 (Understanding the Nervous System), Chapter 4 (What Regulation Really Means) and Chapter 6 (The Basics of Regulating) from Aggression in Play Therapy: A Neurobiological Approach to Integrating Intensity to further understand regulation.

Learning Objectives:

- 1. Explain the link between nervous system states and the symptoms that show up in the playroom.
- 2. Describe how Synergetic Play Therapy was inspired, the tenets, the history, and its main play therapy influences
- 3. Describe the importance of regulation in the playroom.
- 4. Explain what regulation is and isn't according to Synergetic Play Therapy

Handouts Needed: Primary Influences, The Brain, Nervous System Symptoms

What is Synergetic Play Therapy®? (Also known as SPT)

Synergetic Play Therapy[®] (2008) is a research-informed model of play therapy blending together the therapeutic power of play with nervous-system regulation, interpersonal neurobiology, physics, attachment, mindfulness and therapist authenticity.

Its primary play therapy influences are Child-Centered, Experiential and Gestalt theories.

Synergetics (a term coined by physicist <u>Buckminster Fuller</u>) is the study of systems in transformation, with an emphasis on total system behavior unpredicted by the behavior of any isolated components.

Synergetic Play Therapy honors both the <u>therapeutic power of play</u>, <u>the science that governs</u> <u>relationships</u>, and the <u>development of the therapist</u>, recognizing that it is ultimately **the interplay between these three systems** that support deep transformation for both therapist and child.

The word itself is also reflective of what is happening in the playroom and how integration and healing occurs. As the therapist attunes to their own internal systems and then attunes to the internal systems of the child, a union of systems occurs. In this union, a synergy forms, allowing

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for co-regulation to emerge. The co-regulation supports both the therapist and the child in their ability to move towards the uncomfortable thoughts, feelings, and body sensations that they would not have been able to move towards as easily on their own.

During this "synergy of systems", the therapist and child enter something akin to a "Synergetic field' where right hemisphere to right hemisphere communication emerges, allowing for integration and transformation.

Although Synergetic Play Therapy[®] is a model of play therapy, it's also referred to as **a way of being in relationship with self and other**. It's an all-encompassing paradigm that can be applied to any facet of life, and subsequently any model of play therapy can be applied to it or vice versa. Synergetic Play Therapy is both non-directive and directive in its application.

The Introduction to Synergetic Play Therapy course focuses on non-directive application as a foundation.

Allan Shore says that we use the relationship to allow our patients "to re-experience dys-regulating affects in affectively tolerable doses in the context of a safe environment, so that overwhelming traumatic feelings can be regulated and integrated into the patient's emotional life" We are constantly working with our clients window of tolerance to expand their ability to hold strong emotions of all kinds (pg. 37). Schore, A. N. (2003). Affect regulation and the repair of the self. New York, NY: Norton.

Understanding the Brain:

Brain Stem/Reptilian Brain

- It is the most active part of the brain at birth.
- The Reptilian brain is responsible for your autonomic functioning including arousal levels, sleep cycles, and breathing patterns.
- We are consciously aware of very little of what we experience in any given moment. We feel so much more than we are aware of.

Notes:

Diencephalon

- Referred to as the relay station helping the sensory data move to higher levels of the brain.
- Olfactory data bypasses the diencephalon.

Notes:

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Limbic/Amygdala/Hippocampus

- The limbic brain develops between ages 0-5.
- One of the roles of the amygdala is to assign valency (pos or neg evaluation) on experiences.
- The amygdala assumes "guilty until proven innocent"
- The therapist is part of the checks and balances system to the amygdala helping organize and bring in more data to the child's awareness. This helps soothe the amygdala while creating context so the child can integrate their experience and put a cohesive narrative together.

Four Threats/Challenges of the Brain: (Lisa Dion)

1. 2. 3. 4.

<u>Notes:</u>

Prefrontal Cortex

• This part of the brain is responsible for abstract thinking, executive functioning, future planning, and decision making.

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• Developed by roughly 25 years old.

Notes:

Understanding the Nervous System

- Your autonomic nervous system (ANS) has two branches; a sympathetic branch to rev you up and a parasympathetic branch to slow you down.
- All activation of the ANS is based on perception and perception changes moment to moment
- All "trauma" is also a matter of perception as there is no such thing as a universal trauma.
- You can be in multiple activations simultaneously and can freeze at any point in the process.

You will feel the child's nervous system dys-regulation in The Set Up/Offering!

Notes:

What is Regulation?

- Conscious regulation means "connect to modulate". It does NOT mean calm.
- It is a myth that you can always be regulated or even attain a state of consistent regulation. Regulation is not better than dysregulation and both are needed for growth.
- Regulation also means being ventrally activated.
- We use regulation to move towards the uncomfortable sensations, not to get away from them.

<u>Notes:</u>

Reflective Questions:

- What did I learn that inspired me about the brain and the nervous system?
- What do I tend to do in sessions when the child is hypo-aroused? Hyper-aroused? What do I do when I am hypo-aroused? Hyper-aroused?

To Work On:

- 1. Get curious about the different states of dysregulation that I am experiencing in the playroom.
- 2. Get curious about how I want to model regulation in the playroom.
- 3. Don't forget to make observational statements! It isn't all about me and my experience.