## The Fear-Driven Brain: Reflections From the Cheap Seats

What do Vicky Kelly, Sebern Fisher, and duct tape have in common? Well, they all pertain to a day-long seminar presented at the 2007 ATTACh conference in Rhode Island.

For those who, like me, attended this wonderfully informative talk by ATTACh president, Vicky Kelly, and neurofeedback guru-extraordinaire, Sebern Fisher, you were witness to a real treat. Perhaps more than any other single seminar I have heretofore attended, the paradigm shift within attachment work was most elegantly articulated. Said paradigm shift of course has to do with therapies for children that avoid <u>coercion</u>, vis-à-vis the old Rage-Reduction Model, Rebirthing Therapy, etc.

The initial premise of the presentation was neuroscientist Joseph LeDoux's assertion that fear is the core emotion in all psychopathology. And fear originates in the brain —precisely the limbic system. The limbic system is that deep brain structure underneath our temples that automatically perceives threat. Or the part that kicks in during road rage: "How dare that sorry &\$\*#@ encroach upon my personal patch of pavement!"

Well, it turns out that limbic development begins in utero, coming on-line at the 5<sup>th</sup> month prenatally. So, if the fetus is bombarded by drugs, alcohol, and/or high maternal stress, this structure is usually harmed. Moreover, the right hemisphere of a neonate is rapidly developing between birth and 24 months. And it is the right hemisphere that rides herd over emotional regulation. When maltreatment occurs (neglect, abuse, abandonment), the right side of the child's brain undergoes an assault similar to the '68 TET Offensive.

Perhaps researcher and neuroscientist, Allan Schore, puts it best: "The early social environment, [impacted] by the primary caregiver directly influences the final wiring of the circuits in the infant's brain that are responsible for future social and emotional coping capacities of the individual." This has aptly been described as how an emotionally healthy mother "downloads" her right orbito-frontal cortex directly to her infant. Such then promotes emotional regulation of the infant, enhancing the child's ability to attach.

Moreover, when a youngster with a history of early maltreatment undergoes an *amygdalar moment*, wherein the brain is in essence highjacked by the right hemispheric amygdala—how on earth can interpersonal attachment occur? Correct. It almost always <u>cannot</u>. The child is way too busy dealing with code red hyperarousal to bond with anyone.

Vicky and Sebern conclude with comments about EMDR and neurofeedback. These modalities are often effective in the treatment of children struggling with attachment issues. Both modalities have the capacity to directly impact young, impressionable brains besieged by early maltreatment/trauma.

Oh yeah. What about the duct tape mentioned in the top paragraph of this piece? Well, were it within my power to duct tape key individuals—judges, legislators, social service personnel, mental health providers, etc—to a chair and require they listen to Vicky and Sebern's talk, this would be a good thing. Then surely our field could procure adequate funding for effectively healing the hurt child.

Now this kind of coercion I can support.

By the way, *paradigms* do not merely constitute 20 cents. This is in contradistinction to the pair-a-dimes that as a young 1960s era lad I needed to purchase a delectable hamburger at Morris Neal's hole-in-the-wall rapid food emporium down on the market square of my small hometown.