

MNRI® Trauma and PTSD Recovery

Dates: Aug 6-7, Aug 13-14

Online Course With Pamela Curlee



MNRI®: TRAUMA AND PTSD RECOVERY

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(Edition by: Patricia Shackelford, Ph.D.)

The Masgutova Method® is a set of programs focused on the restoration and maturation of primary movements, reflexes, coordination systems, and skills for optimal performance of natural mechanisms, developmental processes, brain functioning, and sensory-motor integration. The Masgutova Method® is oriented on the stimulation of reflex patterns in order to awaken natural, genetic motor resources, self-regenerating programs, strengthen motor memory and sensory-motor coherence, PTSD Recovery. This achievement innately carries the implication of the fulfillment of all potentials within sensory-motor coordination, motor abilities and learning skills.

The Mission of the Svetlana Masgutova Educational Institute® Neuro-sensory-motor Reflex Integration, LLC is to provide children and adults reliable knowledge and safe tools for the use of natural, genetic motor resources to facilitate successful neurosensorimotor development and joyful learning.

Course Objectives

Participants of this MNRI® program will participate in both the course discussion and hands-on supervised practice. In the course, participants will be introduced to information about neurophysiological aspects of the reflex integration and its benefits for brain function and recovery from Post Traumatic Stress Disorder. The focus of this program is information on the effects of stress, specifically Post Traumatic Stress (PTS), and its consequences expressed as Reflex Integration Disorder. The program will also focus on the neurological, psychological and physical functioning of individuals and the use of MNRI® Integrating exercises as an effective tool for treatment of survivors of traumatic events.

Any negative stress or trauma triggers the protection response of the brain on the physiological level and activates automatic survival responses. This program will offer the 'missing link' on ways to bring integrity on: the neural level for protection and survival, the integration of the brain and associated functions of sensory processing, motor activity, routine behaviors, emotional processes, memory, and learning.

The course is based on traditional neurophysiological and recent scientific evidences in brain research demonstrating how stress and trauma activates automatic survival responses which are genetically inherent unconscious behaviors reflecting the state of the nervous system. The original and simple concepts of this MNRI® work with Post Traumatic Stress Experience and PTSD is the recovery intervention based on the idea of reflex integration using the sensory motor links of the reflex circuit to channel brain stem anchors (self-preservation, territorial and power instincts) for positive survival and transition to a safe and healthy here and now experience.

This course will provide data on the Reflex Pre and Post Assessment tool and the MNRI PTSD Protocol for the integration of sensorimotor reflex pattern repatterning and survival mechanisms.

The course will present procedures and techniques for the work with primary reflex patterns that serve to establish proper links for connection of sensory and motor neuronal tracts in physiological circuits, development and maturation of the neurosensorimotor–somatic aspect underlining the damaged integrity of the brainstem/extrapyramidal nerve net system and neurophysiological mechanisms of protection caused by neuro-sensory-motor-emotional anchors caused by the intense tragedy experience. The limbic system and its basal ganglia are responsible for the coordination of motor activity and other brain functions can serve as the basis for integration of reflex patterns and as the executive function of the brain for formation of internal control at all levels of cognitive and unconscious functioning (L. Vygotsky, 1986) – for physical development, emotional life, and cognitive functions.

The participants of the program will get information about the role of reflex integration affecting the neurosensorimotor-somatic and neurodevelopmental recovery interventions for PTSD that deals with emotional responses and behavior, long-term memory and skills, olfactory responses and feeling of comfort and safety, motivation and self-regulation and estimation, focusing and cognitive processes. Reflex integration affects the lower motor neurons of the extrapyramidal, peripheral, and also pyramidal pathways of the central nerve system involving the protection and survival areas of the brain – midbrain (tegmentum, tectum and pretectum areas) and also basal ganglia and its neurotransmitters. L. Vygotsky (1930) explained in his theory of child cognitive development through the pallidum system in brain development the reasons for poor neurodevelopment root in lack of integration of the sensory-motor system and their corresponding work of excitatory and inhibitory neurotransmitters. Reflexes play the determining role in the possibility of developing inner control and self-socialization with sensory-motor integration. This MNRI Program explains how the PTSD causes RID (Reflex Integration Disorder), which was missed in modern research and practical application. The MNRI Pilot Research shows that post-traumatic survivors are the individuals that have over 35% of reflex patterns functioning on the level of disorder and had combined with negative emotional anchors. Behavioral aspect of the RID – are lack of internal control, poor reasoning thinking, impulsiveness, challenging defensive behavior, improper decisions, lack of awareness, inability for better choices, depression, anger, immunodeficits and other.

Repatterning techniques and exercises for damaged reflex patterns are necessary to create a sufficient neurophysiological basis for development of inner control for cognitive skills – focusing, decoding, memorizing, thinking to lower the irrational frustration, fear and emotional anxiety in an individual experiencing post-traumatic stress. Development and maturation of the group of reflexes concerned with the work of with PTSD is aimed at the development of the links between motor coordination and inner control for behavior, emotional life, and cognition. This program offers examples of techniques, games, and activities to make the integration sessions using MNRI® exercises interesting and motivating for children and adults for recovery and normal life. One of the most important goals of the course program is to demonstrate self-social development through activation of neurophysiology of imitation – work of mirror neurons

MNRI® REFLEX INTEGRATION AND PTSD RECOVERY program can be used with children and adults with challenging behaviors and immature emotional spheres resulting in PTSD, with the PTS memory deficits; motor and speech delays; poor social skills and disorientation, decoding and modeling and

“mapping” and imitating problems; and, as a stress/distress release program. Course participants will also learn about the assessment of the level of stress, and primary reflexes, as well as, specific exercises to integrate reflexes and prevent the neurodevelopment delays.

Upon successful completion of the three-day, 24-hour **MNRI® REFLEX INTEGRATION AND PTSD RECOVERY** program, participants will:

1. Develop knowledge of the neurosensorimotor reflex integration basis for the successful support of psychological trauma, solving neurodevelopmental complications, and into provide positive changes in sensorimotor integration, motor, behavioral and emotional responses, hyper vigilant/arousal states, avoidance behaviors, reliving past experiences, and cognitive hands-on tasks.
 2. Discuss the importance of the proper Reflex Circuit functioning in the development of positive physiological strategies for the development of stress self-management
 3. Investigate the behavioral-cognitive links in individuals with challenges and create the “anchors” based on natural innate mechanisms of neurodevelopment and neuroplasticity for formation of the inner control through balance of sympathetic and parasympathetic systems and balance of excitatory (glutamate, substance P) and inhibitory neurotransmitters (acetylcholine, dopamine, GABA).
 4. Explore the rules and basis for creating these behavioral-cognitive anchors through reflex repatterning.
 5. Investigate the following survival reflexes and their specific involvement in the development of imitation and inner control mechanisms and cognitive skills to release:
 - **Shock and Denial:** Fear paralysis, Moro, Visual Convergence, ATNR, Foot Tendon Guard, withdrawal, Crowning and Biting/Jaw Clinching
 - **Pain and Guilt:** Bonding, Fear Paralysis, Babinski, Visual Convergence, ATNR, Withdrawal, Crowning, Biting/Jaw Clinching
 - **Anger and Bargaining:** Bonding, Fear Paralysis, Moro, Visual Convergence, ATNR, Foot Tendon Guard, Automatic Gait, Withdrawal, Crowning, Biting/Jaw Clinching, Foot Grasp and Trunk Extension
 - **Depression, Reflection, Loneliness:** Bonding, Fear Paralysis, Babinski, Visual Convergence, ATNR, Withdrawal, Crowning
 - **The Upward Turn:** Bonding, Fear paralysis, Foot Tendon Guard, Visual Convergence, ATNR, Leg Cross Flexion-Extension, Hands Supporting, Foot Tendon Guard
 - **Reconstruction and Working Through:** Bonding, Foot Tendon Guard, Foot Grasp, Visual Convergence-Divergence, Babinski, Hands Supporting, Trunk Extension, Fear Paralysis and Automatic Gait
 - **Acceptance and Hope:** Bonding, Foot Tendon Guard, Foot Grasp, Visual Convergence-Divergence, ATNR, Automatic Gait, Hands Pulling, Fear Paralysis
1. Explore how these reflexes are involved in motor programming and control, and emotional and behavioral responses.

2. Explore how these reflexes are involved in inner control, the social behavior system, and how they help to overcome the addictive patterns of over production of stress hormones.
3. Discover the basis for the development of inner control, cognitive fine motor coordination, speech, self-regulation, and self-management through role games.
4. Discuss the basis for the formation of primary coordination: kinesthetic memory-emotional response; Moro and Fear Paralysis and protection; positive memory activation and creating anchors; and protection, fear, and amygdala relations as the reason for challenging behavior.
5. Facilitation of non-cortical (non-classical/subcortical) auditory perception and processing using developmental potentials of the basal ganglia, thalamus, and amygdala through reflex patterns development.
6. Discuss the basis for the formation of motor-cognitive coordination and fine motor skills: cognitive differentiation-memory anchoring, hand-eye, hands-auditory-articulation system, and auditory-vestibular system.
7. Investigate examples of games and activities to enhance the MNRI® process of integration exercises in an interesting and motivating manner. The role of metaphors for limbic system and basal ganglia.
8. Discuss the correlation of reflex patterns, emotions, behavior and learning skills.
9. Explore reflex patterns of the neurotypical child and one with PTSD and the differences between children and adults with PTS, and PTSD
10. Evaluate and develop appropriate strategies to incorporate the use of the MNRI® Reflex Integration and the Basal Ganglia Program in daily practice.
11. Receive supervised hands-on-training to:
 - Conduct assessments using this MNRI® Program to discover nonintegrated or immature reflex patterns causing protective responses and emotional and behavioral challenges.
 - Develop individual programs using this MNRI® Program to repattern, activate, and integrate these reflex patterns.
 - Work with specific techniques for dysfunctional and pathological reflex patterns.
 - Explore non-verbal techniques of reflex integration in reconstruction of positive protective mechanisms.
 - Explore the possibilities of positive changes in body structure, posture, and movements, emotional and cognitive presence, and behavior.
 - Apply this MNRI® Program to develop individual corrective programs based on assessment techniques and exercises for integration of given reflexes to enhance overall emotional, motivational, behavioral, and motor challenges.

This Program can be used with children and adults with such challenges, as: Autism, Asperger syndrome, hyperactivity (ADHD, ADD), a tendency for addictions, and other behavioral instabilities, selective mutism, emotional instability and disorders, post-traumatic stress and PTSD, speech delay and pathologies, sensory processing disorder, deep disorders and challenges in learning, (dyslexia, dyscalculia and other), intellectual

development problems, bipolar, genetic disorders, brain injuries, post-stroke pathologies, Alzheimer's, Parkinson's, cerebral palsy and other.

This MNRI® Program is based on the extensive experiences of Dr. S. Masgutova working with post-traumatic stress disorder (PTSD) working with victims of the Chernobyl disaster (1986-1996), the Baku conflict (1990-1991), the earthquake in Armenia (1989-1999), the train crash in Ufa (1989), the Chechen War (1996-1999), conflicts in Israel (2001-2005) and other traumatic situations. Her work with PTSD became the foundation of the MNRI® Program, opening resources for survival and beyond, including her last work with MNRI® Team using Reflex Integration PTSD Protocol with individuals who experienced trauma in Newtown USA (January-February, March-May 2013; 218 MNRI Sessions).

Course Hours: 24

Course Agenda:

Day 1

Hour 1: Neurosensorimotor reflex integration basis for the successful support of functions of psychological trauma

Hour 2: Reflex Circuit in the development of positive strategies for the development of stress self-management

Hour 3: Behavioral-cognitive links in individuals with challenges

Lunch 1 hour

Hours 4-5: Survival reflexes

Hour 6: Reflex patterns are involved in motor programming and control, and emotional and behavioral responses

Hours 7-8: Reflexes and inner control

Day 2

Hour 1: Basis for the development of inner control, cognitive fine motor coordination, speech, self-regulation, and self-management

Hours 2-3: Basis for the formation of primary coordination: kinesthetic memory-emotional response

Hour 4: Non-classical auditory perception and processing

Lunch 1 hour

Hours 5-6: Reflex patterns form basis of fine motor skills

Hour 7: Reflexes reaction to stress

Hour 8: Role of metaphors for limbic system and basal ganglia

Day 3

Hours 1-2: Correlation of reflex patterns, emotions, behavior and learning skills

Hour 3: Reflex patterns of the neurotypical child and one with PTSD and the differences between children and adults with PTSD

Lunch 1 hour

Hour 4: Continuation of Hour 3 (Reflex patterns of the neurotypical child and one with PTSD and the

differences between children and adults with PTSD)

Hours 5-6: Assessments of this MNRI®

Hours 7-8: Develop an individual corrective program based on assessment techniques

Additional Information and Registration

For more information or to register, visit <https://masgutovamethod.com/events?2078>.

You can also contact the local MNRI® coordinator for this course:

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Financial Disclosure: Pamela Curlee receives a stipend based upon an enrollment percentage.

Non-financial Disclosure: Pamela Curlee is co-owner of SMEI, however, she receives no profit from this ownership status. Income is only derived from her work at Courses, Family Conferences, Clinics and Administrative Duties.

Course Disclosure: *The Svetlana Masgutova Educational Institute has developed and patented a licensed technology trademarked as MNRI®. Because there are no other like-kind products available, course offerings will only cover information that pertains to the effective and safe use of the above-named products. This presentation will focus exclusively on MNRI® and will not include information on other similar or related products or services.*

Special Needs Requests: If you require special accommodations, please notify SMEI at events@masgutovamethod.com at the time of registration so that needed accommodations can be made prior to the course.

Course Completion Requirements: Full attendance is required to receive a certificate of completion and any available credit hours or CEUs.

Target audience:

Speech Language Pathologists, Speech Language Pathologist Assistants, Occupational Therapists, Certified Occupational Therapy Assistants, Nurses, Physical Therapists, Physical Therapist Assistants, Educators, Psychologists, Physicians, Massage Therapists, Mental Health Counselors, Other Health Care Providers, Parents.



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