Patterns of interaction between a caregiver/parent and child are formed at infancy. The parent responds in an attuned way to the baby's signals. These responses reinforce patterns that become Neural~imprints in the brain over the first three years. The brain utilizes this as a working model for how to anticipate responses to attachment figures/ parents/ caregivers. If a toddler is spanked when trying to get a need met, he/she learns to ignore the needs, internalizes the lack of self worth. If a baby is fed when crying within a reasonable time frame, he/she internalizes some control over the caretaker for a time. A balance between meeting needs and not exceeding that balance is crucial.

Many children and adults have insecure attachments from historical misattunments. Therapeutic play binds positive unfamiliar interpersonal experiences based on healthy secure interaction, and intermixes it with unconscious relational knowledge of what it has been like to be in an insecure unhealthy relationship. This disrupts the insufficient Neural-imprint. This implicit (unconscious) information invites new brain development, known as neural plasticity. So, with treatment, one can rewire painful internal experiences.

When resistance is re-framed into reciprocal play, a child gets to experience positive inner strengths such as, intelligence, potency, and self-worth. A new way of "being" with new expectations of "receiving" coming on line, allowing factual long-term growth. A child responds by playing well with others, following instructions without chaos and more.

Emotional attunement consists of adequate levels of rocking, feeding, touching, prosody of voice, pace of movement and even facial expressions. These create the most favorable networks in the brain, starting the 6th month of pregnancy and moving into the third year of life. The way an infant gauges the world is based on the emotional states received from others' behaviors. A child from a disrupted home potentially grows into an adult with insecure attachments, unintentionally bringing it into romantic relationships and passing it onto their own children, known as intergenerational transmission. Meaning, new parents who have been parented by inadequate caregivers often pass forward the instability without intentionally doing so.

When care giving chronically lacks in strengthening an infant's nervous system the infant does not know self-soothing techniques or coping strategies to manage intense feelings. Further, the infant believes there is nobody who can help regulate the distress. As he/she grows this is manifested by children who "freak out, lose it, or are

over the top" As programmed, the child and even adult, unconsciously retreat from help, believing it is unavailable. There are various attachment styles that ensue; insecure, disorganized and avoidant adaptations are frequent. Sadly, these adaptations accidentally stop us from having good loving connections.

As Neural~Synergists, we mediate a physiological connection with the entire system connecting the body and the mind with the message of security. Depending on the intensity and age appropriateness, we create a customized plan. When a child is demonstrating a highly aroused adaptation, we help organize it through a least resistant redirected movement, while creating a structure through down regulating via interest and non-threatening engagement. Essentially, what this means is if a child is hyper aroused, they are given a less chaotic physical focus of choice, moved into a co regulated experience with a therapist by matched breathing, and eventually embraced by a softer more tender experience of internal dialogue, creating room for healthy attachments.

N~S~N serves to connect the Neural-imprint with internal acceptance, external attachment, tenderness of heart connection and finally the biological connection of well being. N~S~N posits when therapists remain attuned, create prearranged event strategies attaching all systems (brain, heart and biologic) results are new positive neural networks with a productive Synergistic~Afteraffect. Once this occurs the network is in place and will not revert, the attachment has been made via limbic structures.

The heart is attached through being present and engaged in fun filled, meaningful and deeply connected strategies. As a child comes to the realization he/she is sad, ecstatic or mad, they learn they can remain in connection. Through pre-organized events a child unconsciously experiences the shared emotion and the therapist remains in the present, while also remaining openly available for matching in positive affect. Children are taught all parts are welcomed and as critically important as the child themselves. When a therapist can hold the difficult parts, so can the child. The acceptance allows for a new window of tolerance and the child sees clearly that the emotion is not unwelcomed, but needs to be expressed in a more acceptable fashion.

Finally, biologically the child's immune system, digestive system and circadian system respond with less distress from internalizing isolation, fear, sadness, exclusion, ridicule, worry and anger. The outcome is a Neural-Synergistic~Network.

