An Introduction to Deep Brain Reorienting (DBR)

March 27th 2021, 9.30 am – 5.30 pm

This workshop offers participants an opportunity to understand the key role of deep midbrain systems in traumatic experiences which have clinical consequences. There is an emphasis on attachment shock, which may be historic or recent, and early life adversity. A distinction between circuits for shock and circuits for affective and defensive responding underlies the clinical approach of Deep Brain Reorienting (DBR).

DBR is a trauma memory processing modality that has developed from an understanding of stimulus-response sequences in the upper brainstem. Tracking these sequences, with the knowledge of how they occur physiologically, activates a healing process and, optimally, complete resolution of the clinical consequences of the traumatic experiences.

DBR can also be useful when attachment urges are conflicted because of adverse experiences. For example, when the capacity to orient toward connection simultaneously triggers the impulse to move away, often with negative affects emerging, there can be a deeply conflicted urge to connect with significant others.

Key learning outcomes:

- To develop an understanding of the neuroanatomy and neurophysiology of threat and adversity response systems in the midbrain, the upper part of the brainstem.
- To be able to track deep sequences that have occurred so quickly that only their late effects have been recognized – and to wait with these sequences until full processing has occurred.
- To identify and differentiate the main components of physiological sequences underpinning conflicted orienting patterns in relational connections.

Who should attend? This workshop is for a range of professionals working in therapeutic and mental health fields; psychiatrists, psychologists, psychotherapists, and any other health practitioners working with early life adversity and trauma.

Frank Corrigan was an NHS Consultant Psychiatrist who latterly specialized in the treatment of post-traumatic and dissociative disorders. He is now in private practice and retains a specialization in complex trauma disorders.
He is co-author of *Neurobiology and Treatment of Traumatic Dissociation: Towards an Embodied Self (Lanius et al., 2014)* and co-author of *The Comprehensive Resource Model: Effective Techniques for Healing Complex Trauma* (Lisa Schwarz et al 2016). He is currently involved in a clinical and neuroimaging study of online DBR with Professor Ruth Lanius, University of Western Ontario, Canada.