Intrinsic Change
Training for Helping Professionals

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

Brainspotting Glossary

Quick reference

The session

Term	Meaning
Activate / Activation	Turn attention to the issue; heightened emotion or body sensation
Brainspot	Eye position linked to deeper inner experience (Grand)
Frame	Container of the session; client brings it, therapist shapes it
Setup	Flexible protocol; shifts with the client
Focused mindfulness	Curious attention held on the issue
Process / Processing	Step-by-step inner experience toward healing
System	Network of sensations, feelings, biology tied to an issue

The therapist

Term	Meaning
Attunement	Client feels seen, felt, understood
Dual attunement	Relational + body attunement, self and client, at once
Tail of the comet	Follow the client; never lead
Uncertainty	Most of what happens inside is unknowable
Felt sense	Whole-body knowing beyond words (Gendlin)
Limbic countertransference	Therapist's deep, often unconscious emotional response

The nervous system

Term	Meaning
Bottom-up	Body-based; lower brain
Top-down	Thinking, language; prefrontal cortex

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

Term	Meaning
Polyvagal theory	Nervous system states and safety (Porges)
Window of tolerance	Zone between hyperarousal and hypoarousal
Window of choice	Inside the window, nervous system regulated; room to choose
Fight, flight, freeze, fawn, flop	Automatic responses to overwhelm
Dissociation	Shut down, disconnected from feeling and body
Interoception	Sensing and reading inner body signals

Related approaches

Term	Meaning
Internal Family Systems	Parts work (Schwartz)
Mindful Self-Compassion	Kindness, common humanity, mindfulness (Neff, Germer)
Somatic Experiencing	Body resources for trauma (Levine)
Organic Intelligence	Emergent, gentle trauma work (Hoskinson)
Prolonged Exposure	Repeated, gradual approach to trauma memories
Liberation Health Model	Healing in the context of oppression

Culture, power, trauma

Term	Meaning
Cultural humility	Self-reflection, power balance, accountability
Clean vs. dirty pain	Growth pain vs. avoidance and harm (Menakem)
HIPP	Historical, intergenerational, persistent institutional, personal trauma (Menakem)
Socially engineered trauma	Harm from oppressive institutions
Somatic abolitionism	Embodied anti-racist practice (Menakem)

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

Addendum: full definitions

The session

Activate — To intentionally intensify or heighten internal experiences such as emotions, images, and body sensations. In a brainspotting session this is done with support from the therapist by focusing on what is bothering us. This is usually done toward the beginning of the session, before finding the corresponding brainspot.

Activation — A heightened inner sensation (such as an emotion or body sensation) that occurs when our attention is intentionally placed on the issue of focus in a brainspotting session.

Brainspot — David Grand's assertion that an eye position in the visual field is linked to deeper memories, sensations, and other internal experiences that are otherwise difficult to access and remain focused on. Finding a workable brainspot is often done in collaboration with a brainspotting therapist toward the beginning of the session.

Frame — The implicit and explicit worldviews, assumptions, norms, rules, limits, and boundaries of activity in a given brainspotting session. The frame is a container that can help focus the session. It is said the client "brings the frame" to the therapy session. Grand explains that the frame is amorphous: it changes in position, shape, size, texture, and so on. The therapist works in partnership with the client to "receive and shape the frame" in a way that allows access to the issue and lets healing occur within the session.

Setup — In brainspotting this term is similar to a therapy protocol. Brainspotting has various setups suggested for different situations to help guide therapist and client activity. The setup is part of how the frame is developed and shaped. Unlike many protocols or manuals, setups are not restrictive or directive; they often evolve and transform throughout the session in response to the client's needs.

Focused mindfulness — In brainspotting, the activity of placing awareness and curiosity on the issue of focus. The therapist and client partner to notice what occurs in the body, mind, and emotional self while keeping this focus.

Process — David Grand explains processing as "to emotionally and/or neurobiologically experience, internally, step-by-step … period of time." The purpose of processing is to facilitate healing, changed perspectives, and understanding related to the issue of focus.

Processing — Explained by Grand as "a client's internal experience." Processing in brainspotting can include many internal events and activities such as feelings, emotions, body sensations, memories,

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

and visualizations. The brainspotting therapist supports and guides this process through compassion and focused mindfulness.

System — A general term frequently used in brainspotting for the complex network of internal experiences, body sensations, and biology related to a particular issue.

The therapist

Attunement — A therapist's ability to connect with, understand, and respond to a client's presence (verbal and nonverbal), with the result that the client feels "genuinely seen, felt, and understood."

Dual attunement — The foundational intention and presence of the brainspotting therapist. Throughout the session, the therapist attends with compassion to the therapeutic relationship and to the body responses of both themself and the client, all at once. The skilled therapist allows the session to be guided and informed by these developing phenomena.

Tail of the comet — David Grand uses the analogy of a comet and its tail to describe the relationship between the brainspotting therapist and the client. The therapist is tasked with diligently following the client's experience through the session, just as a tail follows the head of the comet. He reminds us that "the moment the therapist thinks they know where the comet is going, they fall out of the tail." Being in the tail requires skill, practice, trust, and letting go of the "expert" perspective.

Uncertainty — A foundational understanding in the brainspotting session that the brain and body (and reality itself) are infinitely complex. David Grand states that "Most of what goes on inside a person is unknowable, and when therapists intervene in their system, the true outcome is just as unknowable." Knowing that causes, effects, interventions, and "evidence-based practices" are uncertain gives us the freedom to use the intuition, spirituality, and creativity in the therapy session that are essential for healing.

Felt sense — A common term in brainspotting developed by Eugene Gendlin. The felt sense can be similar to intuition. It is a way of knowing or understanding that is beyond verbal or written language, received all at once rather than in a logical, detailed manner. In brainspotting, the therapist strives to connect with this way of understanding the client in addition to working with verbal and body language.

Limbic countertransference — David Grand postulates that limbic countertransference is a common phenomenon in a brainspotting session, where the therapist has deep emotional reactions as the client shares experiences, thoughts, and emotions. This type of countertransference can be largely subconscious and activates the limbic part of the nervous system.

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

The nervous system

Bottom-up therapy — A general term for therapies that focus on body-based interventions in order to access the lower and less conscious parts of the brain, such as the limbic system. Brainspotting incorporates many bottom-up strategies.

Top-down therapy — Therapy approaches that use cognition, including logic, language, and problem solving. This type of therapy is said to work with the prefrontal cortex, where conscious thinking occurs. Brainspotting incorporates some of this approach, especially before and after the processing of trauma.

Polyvagal theory — A model of nervous system functioning created by Stephen Porges. It describes three states: safe and connected (ventral vagal), mobilized for fight or flight (sympathetic), and shut down (dorsal vagal). The body senses safety or danger below awareness (neuroception). Therapists also often use Paul D. MacLean's three-part brain model: reptilian (survival), mammalian (emotion, limbic) and primate (thinking, neocortex). Both models help conceptualize and communicate about brainspotting and trauma. Brainspotting aims to work with the lower parts of the brain to resolve trauma, memories, and other deeper mental barriers.

Window of tolerance — The zone where we can stay present, think and handle stress (Siegel). How we respond to stressful stimuli by either hyperarousal (becoming angry, etc.) or hypoarousal (becoming numb, etc.). In either state we are outside our window of tolerance and not in a good place to do many things, including working on healing and therapeutic goals. Brainspotting aims to support the individual in staying within the window of tolerance during the session, and ultimately to create a bigger window of tolerance related to triggers.

Window of choice — A term used in therapy practice for what the window of tolerance makes possible. When the nervous system is regulated, we have more room to make choices rather than react automatically.

Fight, flight, freeze, fawn, flop — Common responses our bodies naturally have to traumatic events. These are usually automatic responses that occur when we experience or witness events that overwhelm our ability to cope, and are associated with lower-brain automatic functioning.

Dissociation — Grand explains dissociation as being shut down, in shock, and disconnected. In this state an individual has limited or no access to emotional experiences and body feelings.

Interoception — Our ability to be aware of internal experiences within the body and to interpret these signals. In brainspotting this ability can be used during trauma processing.

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

Related approaches

Internal Family Systems (IFS) — A therapy approach founded by Richard Schwartz that works with an individual's various internal parts of self to facilitate healing. Also called "parts work," this model is frequently integrated with the brainspotting session.

Mindful Self-Compassion (MSC) — An approach developed by Kristin Neff and Christopher Germer that focuses on the practice of compassion and acceptance for ourselves. MSC practices are based in common humanity, kindness, and mindfulness. MSC and other self-compassion approaches are often integrated with the brainspotting session.

Somatic Experiencing — A therapy approach developed by Peter Levine that uses resources of the body to heal trauma. Brainspotting incorporates many aspects of this approach.

Organic Intelligence — An approach developed by Steve Hoskinson to work with trauma in an emergent and gentle manner. The therapist supports the client in noticing what is arising within their internal and body experience. Brainspotting uses similar ways to support clients in processing trauma, and Grand often describes the brainspotting process as organic.

Prolonged Exposure Therapy — A trauma treatment that helps clients gradually and repeatedly approach trauma-related memories, feelings, and situations they have been avoiding, so that their distress decreases over time. A brainspotting session will likely use a similar approach when relating with trauma.

Liberation Health Model — An approach to therapy that honors an individual's experience and identities in the context of oppression and social forces. These factors are incorporated into treatment, and the approach also emphasizes social justice engagement. The liberation model often incorporates healing modalities outside standard Western approaches. It welcomes new perspectives on healing, new ways of seeing the world, and new ways of being in the world from a place of acceptance. Brainspotting works to include many aspects of this model.

Culture, power, trauma

Cultural humility — A perspective on interpersonal relationships that honors an individual's culture and identity while also seeking to understand the societal context of inequity and oppression. Cultural humility requires that we practice critical self-reflection, address power imbalances present in a relationship, and hold institutions and structures accountable.

Dirty pain vs. clean pain — Resmaa Menakem highlights these two types of pain to help us distinguish between helpful and harmful painful emotional experiences. Clean pain can be a

Jesse Jonesberg, MSW, LCSW, CPS
414-306-5068 · jesse@intrinsicchange.com
intrinsicchange.com

foundation for growth, development, and wisdom, and can be associated with self-advocating, setting limits, and interrupting harmful behaviors. Dirty pain is usually connected with shame, avoidance, and fear, and can be associated with actions that ultimately harm ourselves or others.

HIPP — Resmaa Menakem's term for how we experience racialized trauma: historical, intergenerational, persistent institutional, and personal lived experiences.

Socially engineered trauma — Trauma experienced by individuals targeted and harmed by social institutions through oppression and inequality. It results from social inequity, discrimination, stigma, marginalization, and similar forces, and can be a focus in the brainspotting session.

Somatic abolitionism — Resmaa Menakem's concept of "embodied anti-racist action and culture building," based on the premise that most bodies have been "infected by the virus of white-body supremacy [WBS]." WBS is a major source of suffering that affects people of all racial and ethnic backgrounds, and it can be examined and healed.

Works referenced

APA (July 2017). Prolonged Exposure (PE). PTSD Guideline, Treatments. Washington, DC: APA. apa.org/ptsd-guideline/treatments/prolonged-exposure

Avruch, D. (2022). Macro MI: Using Motivational Interviewing to Address Socially-Engineered Trauma (presentation). Chicago: Motivational Interviewing Network of Trainers International Forum.

Avruch, D. & Shaia, W. (2022). Macro MI: Using Motivational Interviewing to Address Socially-Engineered Trauma. *Journal of Progressive Human Services, 33*(2).

Fischer, H. (2022). The Difference Between Top Down and Bottom Up Therapy, and Why It Matters. CPTSD Foundation. cptsdfoundation.org

Gendlin, E. T. (1996). *Focusing-Oriented Psychotherapy.* New York, NY: Guilford.

Grand, D. (2013). *Brainspotting: The Revolutionary New Therapy for Rapid and Effective Change.* Louisville, CO: Sounds True.

Grand, D. (2018). Brainspotting Limbic Countertransference (video). youtube.com/watch?v=GV8Ry-EG5KI

Gray, A. (1994). *An Introduction to the Therapeutic Frame.* New York: Routledge.

Hoskinson, S. & Ho, B. (2022). A Non-Directive Positive Reinforcement Framework for Trauma and Addiction Treatment. *International Body Psychotherapy Journal, 21*(1). organicintelligence.org

Kant, J. D. (2015). Towards a Socially Just Social Work Practice: The Liberation Health Model. *Critical and Radical Social Work, 3*(2), 309–317.

Kuhfuß, M., Maldei, T., Hetmanek, A., & Baumann, N. (2021). Somatic Experiencing — Effectiveness and Key Factors of a Body-Oriented Trauma Therapy: A Scoping Literature Review. *European Journal of Psychotraumatology, 12*(1), 1929023. ncbi.nlm.nih.gov/pmc/articles/PMC8276649

MacLean, P. D. (1998). In *The History of Neuroscience in Autobiography.* London: Academic Press.

Martinez, D. B. & Fleck-Henderson, A. (2014). *Social Justice in Clinical Practice: A Liberation Health Framework.* New York: Routledge.

Menakem, R. (2017). *My Grandmother's Hands.* Central Recovery Press.

Menakem, R. (2021). *Somatic Abolitionism.* Richfield: Justice Leadership Solutions. resmaa.com

Neff, K. (2011). *Self-Compassion: The Proven Power of Being Kind to Yourself.* New York: William Morrow.

Porges, S. W. (2011). *The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-Regulation.* W. W. Norton & Co.

Schmitt, C. M., & Schoen, S. (2022). Interoception: A Multi-Sensory Foundation of Participation in Daily Life. *Frontiers in Neuroscience, 16*, 875200. ncbi.nlm.nih.gov/pmc/articles/PMC9220286

Schwartz, R. C., & Sweezy, M. (2020). *Internal Family Systems Therapy* (2nd ed.). The Guilford Press.

Tervalon, M. & Murray-García, J. (1998). Cultural Humility Versus Cultural Competence: A Critical Distinction in Defining Physician Training Outcomes in Multicultural Education. *Journal of Health Care for the Poor and Underserved, 9*(2), 117–125.

Wylie, M. S., & Turner, L. (2011). The Attuned Therapist. *Psychotherapy Networker, 35*(2), 19–27. drdansiegel.com

Brainspotting Glossary by Jesse Jonesberg, MSW, LCSW, CPS

Grand, D. (2013). *Brainspotting: The Revolutionary New Therapy for Rapid and Effective Change.* Sounds True.