

A detailed 3D rendering of a human brain against a dark blue background. The brain is primarily a translucent blue color, showing internal structures like the cerebral cortex and white matter tracts. A bright yellow glow emanates from the pons and midbrain regions, highlighting these specific areas. Small yellow dots are scattered across the brain's surface, particularly concentrated in the highlighted areas.

**Brain Connect Program**  
**Pons Level Focus**

ALEXANDR  LILY

*Brain Development Coach*

# The Brain Connect Program Pons Level Focus

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Developmental Movement Consultant (DMC) educates about the Developmental Sequence and related activities. The Developmental Sequence includes patterned movements, mobility, and multi-faceted sensory experiences to encourage a richer quality of life as it pertains to the client's goals.

It is important to note that DMC does not clinically diagnose any medical conditions such as ADHD, Autism, Asperger Syndrome (ASD), PDD-NOS, and other ASD's (autism spectrum disorders). The DMC subscribes to a holistic approach based on neuromotor skill development. DMC are educators, and many are not physicians, psychologists, or credentialed mental health workers. DMC consultation services' scope does not include the treatment or diagnosis of specific illnesses or disorders. If a client suspects that they may have an ailment, illness, or mental health concern that may require medical attention, they are encouraged to consult with a licensed physician without delay. Please note that while people generally experience richer life experiences due to implementing the Developmental Sequence activities, DMC does not promise or guarantee a cure or treat specific symptoms.

# Introduction

Hi! In case we haven't met, I'm Alexandra, a Brain Development Coach. My son, Cameron, was diagnosed with epilepsy from three years old and was told he would never exceed a nine year old's intellect. Sitting in the doctor's office, I was offered a pamphlet on community living for when he turned 18 years old. I knew if I accepted it, I would be accepting the limits placed on my child. Unfortunately, I had no opportunity to realize that he would not live a typical life. All I had was a bucket full of limitations, an intellectual disability diagnosis, and countless hospital visits to define Cameron's future. Even at ten years old, he still could not read, only knew how to write his name, and could not be left alone to play in a playground due to lack of coordination and balance. I found myself dwelling on the child that I didn't have, thinking it wasn't fair that we had to go through the anxiety, the seizures, and uneasy nights where I listened to him sleep.

I have been called determined and even strong, but that title comes with the hopelessness of recycling the same ineffective solutions, which left me financially drained. I did everything possible to identify the root cause myself and what I could do about it. As a mother, I wanted to believe in my son's potential. Still, after trying every over-exhausted option and seeing little to no results, I felt the need to become a Developmental Movement Consultant. I became educated on neuroplasticity and discovered that using specific methods can enable the brain's capability to change. Cameron was more than a label; he had a promising future, and learning about this program allowed me to rewrite his story.

**Now I want to share that with you so that you can rewrite the limitations of your child's diagnosis.**





# What is the Brain Connect Program?

The Brain Connect is a program that you, as the parent, will implement at home with your child. Our program is a non-invasive, drug-free, movement-based program that uses the developmental sequence of all humans to close gaps in the brain caused by damage or lack of developmental opportunity. This program consists of neurodevelopmental movements, such as creeping, crawling, whole body reflexive patterns, and vestibular; by implementing these movements every day, you build new brain connections. When you create new connections, you start to see your child's improvements in various areas such as emotional regulation, learning abilities, behaviours, and motor skills.

To see success in this program, you must be dedicated and consistent in doing this daily, at least 5 x weeks minimum.

Every day that you are doing this program with your children, you are growing new brain connections. If you stop for a few days, then start again, and then stop, it will take you a lot longer to see results, and you're just going over the same ground! Consistency is key! Eventually, the connections you are growing are going to connect. Once these connections are in place, you longer need to do this program.

The Brain Connect Pons Level Focus Program consists of activities laid out for you to do weekly and support through our private Facebook group. In the group, you can post questions and concerns. In addition, once a month, we will have live coaching sessions.

If you would like one on one coaching, you can book by emailing me at [info@alexandralily.com](mailto:info@alexandralily.com).

To make this a positive experience for you and your child, act like a coach or a cheerleader either than a drill sergeant. A drill sergeant might be necessary at times. Treat this as a special time between you and your child. You are not making dinner, and you're not doing laundry, you're not on your phone, your attention is 100 % to your child. You are present and engaging. Program is hard work! A small daily reward culminating in larger weekly or monthly rewards is more effective than only one big reward. The large reward is when the client graduates. For instance, for a child, earning individual parts of a larger Lego set each day is a more appealing reward than a promise of a trip to Hawaii when he graduates. Dream up whatever is appropriate for your family and break that down into small, daily rewards. You have been emailed a PDF on reward ideas.

If you are pressed for time and cannot do the entire program, do a small amount of each activity. Doing a lesser quantity of each exercise will still move you forward, albeit more slowly. On the days that you know, you will not be able to do all the program activities, at least do the patterns. Patterns alone will not move you forward but prevent any backsliding. We recommend doing patterns first thing in the morning to ensure that you won't lose any neurological ground even if the rest of the day falls apart.

These activities address deep, nonverbal, emotional levels of the central nervous system; negative symptoms can sometimes worsen before they get better. Continue doing program activities; an escalation in negative behaviors typically lasts between one to three weeks, and then most clients see a significant decline in the issues. If this is an issue, don't hesitate to get in touch with me privately.

Any regression is a positive thing. Regression means progression! Many families find it effective to let their children know that they must do their program activities and not move on to any other activities until the program is accomplished. For example, no TV, playing with friends, or any other activity. To remove any power struggle, reiterate the expectation (for instance, crawling for ten minutes) and then reiterate that it is their choice to either do it in ten minutes or drag it out for hours.

As a caregiver, nurture yourself. You are under incredible amounts of stress as you manage your child's issues. Do something regularly that renews and restores yourself. Schedule regular social time with friends, a weekly or monthly date night, or simply time by yourself to read a book, go for a walk around the neighborhood, or take a long soothing bubble bath. Whatever it may be, nurture yourself so that you can nurture your child.

Lastly, I am here to support you! Use the private Facebook groups to ask questions. Don't be shy to post as many times as you need.

## **You can do it!**

Neurodevelopmental Movements are hard work, but the results are more than worth it.

**Behind every young child who believes in himself is a parent who believed first."**  
~Matthew L. Jacobson



## **Initial Assessment**

Complete before starting the program, this  
is a separate form that was sent to your  
email.

# Notes for Assessment

## What you are looking for in the assessment

### Deep pain

Watch their reaction; watch the face and movement if they try to move their hand away. Ask if they like it or don't like it.

Normal reaction: would be to jerk away, perhaps cry or get really angry.  
Also, make a note if the reaction is the same on both arms.

### Light touch

If they have trouble here, they may be sensitive to the textures of clothes.

### Point discrimination

Observe how close the client is to touching the exact spot you touched. Record how close or far away they are at attempting to touch the same spots you did.

The only thing you will say is:

"I am going to touch a spot on your arm, and you are going to touch the exact same spot. "Try it once with eyes open to know they understand, then say," ok, let's do it with your eyes closed."

### Face

Watch for accuracy on the face.

### Position sense

If their corpus callosum is functioning well, they should be able to match arms in any position. If their corpus callosum is not functioning well, when you move the left arm out to the side, they will move their right arm across their chest to the same as the left arm. This is referred to as "crossing." If they can't match well, make it a little bit difficult by asking questions and watching to see if they can keep up. Make a note of if they could not match, crossed, mirrored, or had time keeping up while answering questions.

### Stereognosis

Notice how easy it is for them to come up with the exact name of the item. Write down which items they were not able to identify and them again at the following assessment. If they can name all of them, they have good stereognosis and don't need to test again, but you can still do it because most kids love this game.

Stereognosis is knowing what is in your hand without looking at it, just by feeling.

# Notes for Assessment

## **Laterality**

Observe what hand they use as the dominant hand to find the writing on the pen or dice.

## **Auditory**

Place object in front of the midline. Tell them to listen, note what hand they pick up and the ear they place it. Do this three times and note which ear is dominant.

## **Hand dominance**

Which hand do they use to write?

## **Near point**

Get the tube and ask them to look through it. Get them to do this three times. Note what eye dominant.

## **Horizontal eye-tracking**

Watch the eye and make note if they track nice and smooth. Watch for skips or jerky movements. Watch for head and neck movements. There can also be restrictions, where the eyes cannot go all the way to one or both corners.

## **Vertical eye-tracking**

Watch the eye and make note if they track nice and smooth. Watch for skips, rolls ups, or jerky movements. Watch for head and neck movements as well. There can also be restrictions, where the eyes cannot go all the way to one or both corners.

## **Convergence**

Begin approximately two feet away from the child's bridge of the nose. Slowly move the spoon towards the child's nose, looking closely at the eyes, watch for the eyes converge or if the eyes give out. Make note of the length of where they gave out to the bridge of the nose.

## **Far point**

Stand 6 feet away. You, as the parent, close one eye and ask them to point to the open eye. Then ask them to switch hands. The eye you see as covered signifies the eye they are using as the dominant eye. If it shows up in the middle, it is mixed dominance.

# Notes for Assessment

## **Supination/Pronation**

It is the ability to rotate two bones of the lower arm around the one bone of the upper arm so that the lower arm can rotate while the upper arm is stable. Children who do not have this skill may have difficulty with fine motor, such as turning a faucet or jumping rope.

Note if they are able to do this, or they use their rest or flapping.

Note when you ask them to speed up if other body parts start to move. They may even jump up and down. This indicates to us how well the central nervous system is or is not able small to do a small task against a background of stillness. This is probably the same child who responds to everything with a whole-body response when you get them to hurry.

## **Cortical Opposition**

Observe if they are able to bring their index finger to thumb and what happens when you rush them.

## **Crawling and Creeping**

Observe and check off each movement

# YOUR HANDBOOK

## Tummy Crawling

In conjunction with other developmental activities, crawling grows the neural connections and organizes the pons in the central nervous system. Just as an infant is not taught how to crawl, we don't teach our students. When first given the opportunity to crawl, babies try several techniques before attaining a finished crawl. In the same way, students will experiment with many techniques before reaching a finished crawl. The various techniques, eventually culminating in a finished crawl, reflect the growth and organization of the pons.



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The floor is child's  
neurological workshop”

Ian Hunter

Here are the simple rules for crawling:

- The only instruction the caregiver should say is, "Bellybutton on the ground, moving forward, using all parts of your body that you want to." DO NOT GIVE ANY OTHER INSTRUCTION, COACHING, OR HELPFUL HINTS. Doing so will interfere with the process.
- Crawling should be done on a long, straight, smooth surface. Depending on the house, though, you may need to make an "L" shape or a big oval crawling surface around the edges of the living room. Hardwood or linoleum is perfect. If your house is carpeted, you can obtain 6x12-foot pieces of flooring vinyl. Cut the pieces in half and duct tape the pieces together to form a 3-foot-wide strip which can be rolled down a hallway or other area for crawling and then easily put away again when done. Or thick gym mats can be used if placed together to make the long straight surface desired.
- Crawling needs to be done with bare feet; do not wear shoes or socks.
- Do not carry anything in your hands or wear gloves or mittens when crawling.
- Crawling is physically demanding. When beginning, most clients cannot go for more than a few minutes at a time. Crawl for as long as the client can tolerate; her stamina will increase until she can do the entire amount at once. Until then, divide up the time to give the client permission to rest. The client should move forward at a nice, steady pace. If the client is tired, they can break up the time into segments such as five-minute increments.
- Crawling can be tedious. We don't want the client thinking about what they are doing because crawling needs to be a pons-level, not a cortical, activity. Because of this, it's essential to keep the client engaged while crawling. For children, this means that the caregiver acts as a coach or cheerleader, making up hundreds of games and activities to occupy the child.
- A child cannot be left to crawl on her own; a caregiver must be present and engaged. For younger children, games or simple inducements can be helpful. For the older children, a caregiver can assist with homework during crawling. In addition, radio programs, podcasts, or foreign language instruction can engage the cortex.
- Please do not watch TV, screens, or play music during crawling because it impedes natural visual development.

## Creeping on hands and knees

In conjunction with other developmental activities,

Creeping grows the neural connections and organizes the midbrain region in the central nervous system. Just as infants are not taught how to creep, we don't teach our students. When first given the opportunity to creep, babies try several techniques before attaining a finished creep. In the same way, students will experiment with many techniques before reaching a finished creep. The various techniques, eventually culminating in a finished creep, reflect the growth and organization of the midbrain region.



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**Here are the simple rules for creeping:**

- The only instruction a caregiver should say is, "On hands and knees, moving forward." DO NOT GIVE ANY OTHER INSTRUCTION, COACHING, OR HELPFUL HINTS. Doing so will interfere with the process.
- Creeping can be done on either carpet or hard floors. The carpet is better as it provides additional cushion, but it's not required. If creeping on the carpet, wear socks to avoid rug burn. Gym mats can also be used if they are long enough. It is recommended that three of the mats are put together to achieve the desired length.
- ANYONE OVER THE AGE OF EIGHT MUST WEAR KNEEPADS WHEN CREEPING. The structure of the knee changes at adolescence; failing to protect knees can result in permanent damage. Use soft volleyball or carpenter floor-layer knee pads; avoid knee pads that are hard or rubberized as they slide easily. Knee pads can be obtained at sporting goods stores for a reasonable price.
- Do not carry anything in your hands or wear gloves or mittens when creeping.
- The client should move forward at a nice, steady pace. If the client is tired, you can break up the time into segments.
- Creeping can be tedious. We don't want the client thinking about what he is doing because creeping needs to be a midbrain-level, not a cortical, activity. It's essential to keep the client engaged while creeping. For children, this means that the caregiver acts as a coach or cheerleader, making up hundreds of games and activities to occupy the child. A child cannot be left to creep independently; a caregiver must be present and engaged. For younger children, games or simple inducements can be helpful. For older children, a caregiver can assist with homework during creeping. In addition, the following can be beneficial to engage the cortex: audiobooks, radio programs, podcasts, or foreign language instruction.
- Please do not watch TV, screens, or play music during crawling because it impedes the natural visual development.

## Whole body Patterns

Patterns are exact, whole-body movements that infants do automatically to gain neurological function. These patterns trigger reflexes in the central nervous system, which lead to new brain growth. The brain growth triggers another set of reflexes, which triggers new patterns and additional brain growth. This reflex/movement/pattern brain growth cycle is how humans gain functional neurology and lay the basis for all emotional, behavioral, academic, and motor skills. Just as we observe infants acquiring new capabilities when performing new patterns, people's skills and capacities change as we trigger the cycle of reflex/movement/pattern brain growth. All of this has been observed, documented, and recorded in infants.

### Here are the simple rules for patterns:

- Since we are triggering reflexes, PATTERNS MUST BE DONE CORRECTLY. If they are not done correctly, patterns become a range of motion exercise, and most clients don't need a range of motion exercise.
- Patterns require one's whole body to move in a specific manner, similar to an intricate dance step. Because of this, they can be challenging to learn and tricky to do. QUALITY OVER QUANTITY; ten perfect patterns are better than sixty sloppy patterns. TAKE THE TIME TO DO THEM CORRECTLY. If needed, begin by doing a reduced number of repetitions and increase the repetitions until you reach the targeted quantity. For instance, if you are assigned sixty repetitions, you may begin by doing thirty, increase to forty-five, and then do all sixty.
- Caregivers can and should supervise or move the client to ensure patterns are done correctly.



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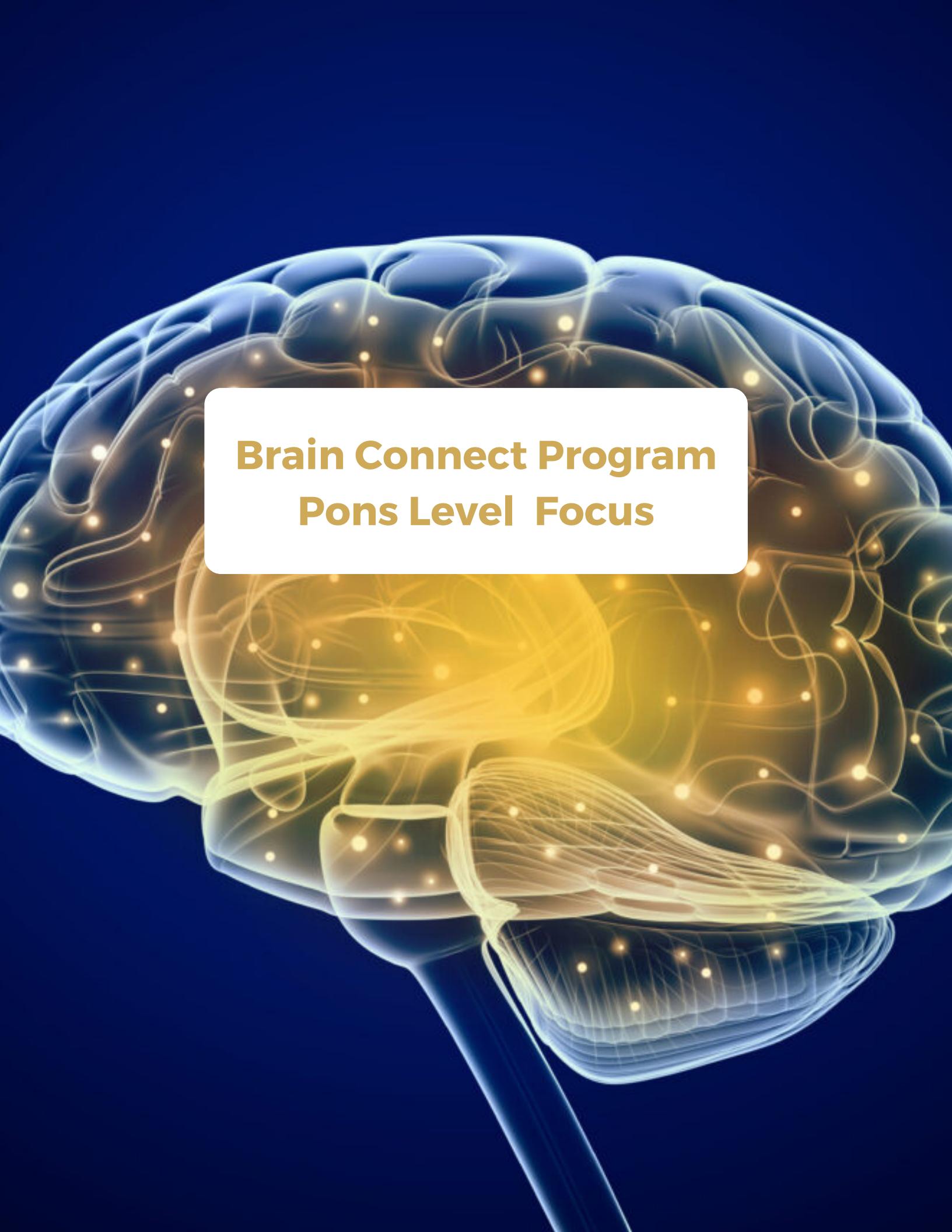
# Program Structure

## Pons Level Focus

You would have received your program Structure in a separate PDF in your email. Make sure you complete your assessment before starting the program. Every two months, re-assess your child to see for improvements. I have also included a journal to keep track of improvements because sometimes you will see improvements in the assessment, but we also want to make sure you see improvements in their everyday lives, or vice-versa.

## Equipment needed

Not much is needed for this program as long as you have a floor. The only things I recommend are a piece of vinyl flooring to place on the carpet for tummy crawling. Tummy crawling is difficult, and some children complain of pain on elbows or knees. Children cannot tummy crawl on the carpet; it is challenging, so a piece of vinyl on the carpet will give them a bit of cushion. The other piece of equipment is knee pads for children over seven years old to protect their knees..



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