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## Who Are We, What Do We Do, and Do We Do It Well?

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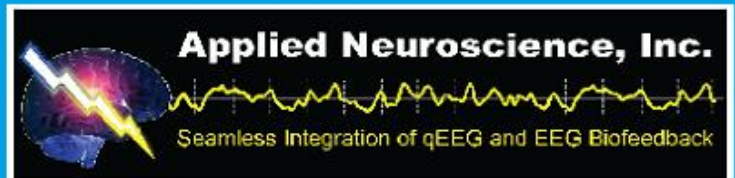
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## EDITORIAL

### WHO ARE WE, WHAT DO WE DO, AND DO WE DO IT WELL?

It was Volume 15, Number 1, 2011, that “Standards of Practice for Neurofeedback and Neurotherapy: A Position Paper of the International Society of Neurofeedback and Research” was published in this journal. Members were invited to express their thoughts and to provide critique of the position paper in order to further refine and strengthen standards of practice for the field. Some may recall that as the deadline for comment approached there was a very lively and energetic discussion in the ISNR listserv reflecting on the perceived strengths and weaknesses of the paper’s positions. The goal was to take the responses and revisit the standards and then produce a new document intended to help both professionals and the public better understand the basic elements of quality practice. By now you will have already had the opportunity to have read and discussed the latest iteration of ISNR’s offering of standards as published on the ISNR website.

The first thing you will undoubtedly have noticed is that we changed the way we refer to the standards. We have changed them to “Guidelines for the Practice of Neurofeedback.” It might be thought that this is a relatively minor and simple change. However, it was the product of a great deal of discussion and argument as we sought to find the best way to take the next step in formalizing the “field” of neurofeedback. And it is exactly that question, “What is the state of the field of neurofeedback?” that drove the argument. Standards, some thought, implies a homogeneous profession; most of the time the professionals within the field have some form of licensure or certification and are regulated by external, generally governmental,

agencies. Many of us understand this reality well as we function as licensed practitioners in a variety of professions. I am a Licensed Marriage and Family Therapist. The Society has psychologists, physicians, counselors, neuropsychologists, social workers, and many others. Each of these various professions has their own unique standards of practice that pertain to their particular function and work. These standards were developed within each profession through some sort of organized consensus building process so that the standards made sense for each particular profession. The profession, usually through its professional society, then interfaced with governing bodies and legislatures to style laws and regulations that would give force to the standards to regulate who could become part of that profession, what the minimum requirements are and for the protection of the public using the services of the licensed professionals.

One of the things that became clear in the discussion that followed the publication of the first position paper is that neurofeedback is not a profession. We are an affiliation of disparate professions which have discovered that the procedure known as neurofeedback is a remarkably useful and effective tool for treating a wide variety of conditions as well as a wonderful adjunct to optimal performance training in which no deficits are present. This fact makes the creation of standards for those who use neurofeedback in their professional practices a tremendous challenge. It is also a fact that licensure and regulation in the United States is an individual state concern. There are no national standards, and there is no national regulatory board or enforcement arm. Other countries around the world have very different

educational, professional, and regulatory demands that represent another challenge to a singular set of standards. Although I see this as a wonderful opportunity for the Society, I also recognize that regulatory boards and legislatures are generally lacking in creativity and openness. So, how do we come to agreement about good ethical and professional practice of neurofeedback while remaining open to the rich variety of professions, licenses, unlicensed performance training, home training, and teaching, as well as some form of control over the manufacture and sale of equipment and software?

To take the last issue first: I believe the field took a large step forward when ISNR facilitated the process that led to agreement about technical standards for equipment with the Institute of Electrical and Electronics Engineers, Inc. (IEEE). The document details the results of a process mediated by the IEEE that was a consensus of the interested parties in what are minimal standards for the instrumentation and application of the technical elements of neurofeedback. It covers such details as the 10/20 system, electrode materials, application and cleaning, and minimal amplifier characteristics. Manufacturers who want to develop equipment for the field and those who are already involved can now look to a specific set of criteria and standards and know they are within the parameters of quality.

The aforementioned "Guidelines for the Practice of Neurofeedback" are a next step in the effort to generate some consensus about minimal criteria or standards surrounding the more "hands-on" aspects of the field. Finding consensus and creating reasonable guidelines for practice are critical aspects of helping the field of neurofeedback grow and mature. It is my belief that the ongoing development and refinement of guidelines can serve as the mechanism for establishing a dialogue that will eventually result in a clear vision for the field, and its becoming an independent, licensed,

recognized modality of health care and disease prevention. I believe that the techniques of neuromodulation are simply too powerful and effective to not eventually find their way into the mainstream. The critical question then is, Who will determine what that adoption looks like? Will those who have developed and fostered the field be at the table, or will the control and leadership be ceded to the traditional authorities and managers of the med/surg, insurance cabals that are currently in charge? Members may not be aware that many paths to acceptance are currently being explored and pursued, but there is no clear vision or leadership behind these attempts. This is not due to the fact the past boards of the Society have been uninterested or incompetent. It is the result of the common pains of a growing and constantly changing organization and field. Indeed, I would clearly state that the field has come as far as it has precisely because the former board members have provided excellent and sometimes inspired leadership.

That brings me to the point of this article: We need a vision and a common purpose. I believe that the field and the organization have grown to the point that we must decide who we will become and what purpose we want the organization to serve. I am writing this a month before our annual conference. At that conference we will have had the first meeting of a group of people who will be invited to start a process that we hope will lead to a process to discover the consensus of the members for a vision of the future of ISNR. We all know the good we do and the incredible future that neuromodulation has for establishing even better and more powerful ways to enhance and improve people's lives. I hope that you will agree to engage in the process that will enable us to be the leaders.

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