The Body Comes to Therapy

By Tian Dayton PhD, TEP

_The body remembers what the mind forgets._
– Jacob Levy Moreno

The thoughts we think and the emotions we feel directly affect our health. Our sympathetic and parasympathetic nervous systems set us up to respond to situations in our life. ‘Despite that we’ve learned a lot about healthy exercise practices, healthy diets, and good medical care, the bottom line is that the most significant way of contributing to our own good health is through the quality of our thought processes. This power is a valuable gift, in light of the lack of control we have over other aspects of life,” explains Christiane Northup in *The Wisdom of Menopause.*

The bottom line, according to Northrop, “is that what goes on in your mind boosts either parasympathetic or sympathetic nervous system activity. Every thought and every perception you have changes the homeostasis of your body. Will it be the brakes or the accelerator, a health account deposit or a health account withdrawal?” She goes on:

...this, in a nutshell, is how your autonomic nervous system translates how your view of your world impacts the state of your health. The language spoken by the autonomic nervous system is translated to the rest of your body by hormones. The primary messengers of the sympathetic nervous system are hormones called norepinephrine and epinephrine, which are often referred to together as adrenaline. They are produced in the brain and in the adrenal glands. Every time adrenaline levels go up, levels of another adrenal hormone, cortisol, also goes up. While cortisol provides a much-needed boost in the short run, helping you get through an occasional crisis, it has its dark side. If you live in the SNS’s “fast lane” for a long time, prolonged elevation of cortisol can cause a number of problems. Initially cortisol sparks up your immune system, but if stress keeps the body in a constant state of flight or fight readiness, cortisol’s effects on the immune system quickly become a liability. White blood cells get pumped into the bloodstream, flooding the system with germ fighting warriors. Over time, the immune system and the bone marrow become depleted. Long-term overexposure to cortisol causes your skin to become thin, your bones to become weaker, your muscles and connective tissue to break down, your body to develop abnormal insulin metabolism, your tissues to retain fluids, your arms and legs to bruise more easily, and your moods to tend toward depression.

In these paragraphs, we see how stress undermines physical well-being, both present-day stress from fast-lane living and long-term stress that we carry in our biological systems from our early life experiences.

Emotional and psychological pain is held in our bodies, recorded in our neural networks. This is why, when we’re scared, anxious or angry, we have physical reactions like muscle
tension, stomach churning, shortness of breath, head pounding, and so on. Working through emotional and psychological pain toward forgiveness allows our bodies as well as our minds, to let go of pain. This is not to say that all physical pain is emotional, but certainly some of it is. Most of us know the feeling of self-recrimination, being mad at ourselves, and how it makes us feel in body, as well as mind.

It’s one thing to consider forgiving someone else, but what about all the stuff we’re holding against ourselves? Do we owe ourselves the same consideration we may be giving to someone else? There are two manifestations of self-forgiveness that I see clients struggle with. The first is rational. When our actions have directly hurt others, and we need to forgive ourselves in order to move on in our lives. An addict, for example, inevitably wounds those close to him during his addiction. Until he forgives himself, he may have trouble staying sober because the guilt and remorse he’ll feel will trigger him to want to self-medicate. This is why the amends part of the twelve steps is so important: The addict needs to make amends to those he’s hurt and take responsibility for his own behavior. The second is irrational. We hold ourselves responsible for pain that others have caused us, even though we could do nothing to change the situation and did not deserve to be mistreated. Sure, there is always something we might have done to make a bad situation worse, but the victims of child abuse, spousal abuse or rape did not deserve what their abusers inflicted upon them. The same goes, in my mind, for excessive criticism, manipulation or neglect. Especially for children who are totally dependent on their parents, these can constitute an abuse of authority. And they, too, leave us feeling bad about ourselves and in need of redemption of some sort. For many people, self-forgiveness is the hardest to come by. Often, we’re harder on ourselves than we are on other people. The feeling that our actions have caused another person pain can be very uncomfortable. So rather than feel it, we do one of those pathological rewrites we talked about earlier, “What I did wasn’t all that bad. They’ll get over it.” Or maybe, “They’re being too sensitive,” or “I don’t really care if they’re in my life, anyway.” But even if we tell our minds a story, our bodies usually know the truth of our deeper emotions.

And when it comes to pain that we’ve internalized from childhood, though whatever happened may not be our fault, it is our responsibility to work with it and resolve it, and forgiving ourselves is often an important piece of that resolution. Many of the clients I work with get marooned at this juncture, where pain from the past is getting mixed up with pain from the present, causing a sort of psychological and emotional logjam. At some level, they may still believe themselves to be “bad” as the victims of abuse. Though they blame the abuser relentlessly, underneath that is usually the unbearable feeling of the unhealed inner child, that something they did or something they are drew this abuse toward them. In this case, they need to forgive themselves. Even if it’s only forgiving themselves for being to blame in their own minds:

Forgive me for holding myself responsible for something that was out of my control as a small child, forgive me for my own self-hatred, for this dark narcissism that holds me in its grip and keeps me glued to a tragic place within myself.

This is a piece of forgiveness that we sometimes miss. Because we feel we did nothing
wrong, or a friend or therapist tells us we did nothing wrong, does not necessarily fix the deep and negative attitude toward the self that we carry. Our neural systems respond to reparative relationships, not only to insight; healing takes time and new relationships in which we can experience ourselves in different ways and explore new patterns of behavior, as we’ll explore later in this chapter.

Until we honestly confront and work through our deeper truths, our bodies will hold us responsible. We may respond to situations in the present day as if the earlier pain were happening all over again. This is often referred to as “getting triggered.” We’ll meet the situations in our current life, bracing ourselves with our fight/flight/freeze (or connect-and-nurture) apparatus in full gear, assuming, at some unconscious level, that a crisis is at hand. Our adrenal system goes on high alert, and our bodies pump out stress chemicals and experience feelings that accompanied previous hurt, even if none is intended in the current situation. The line between the present and the past blurs, and we feel as if we’re being hurt all over again, even though it may be mostly yesterday’s pain that’s being triggered. But we don’t know that; we see it as belonging exclusively to today’s offence. We get caught in a negative feedback loop, in which the stress chemicals in our bodies trigger or stimulate painful memories, and our painful memories stimulate more stress chemicals. This becomes a place that it’s tough to get out of, and our thinking can become distorted and fuzzy. Our bodies and our minds are interacting in a way that sinks us further into a stuck place. This is why we need to resolve deep emotional issues that we may be carrying from our past. Otherwise, we interpret situations today through yesterday’s distorted lens. Seeing current situations through the lens of our hurt thinking places us repeatedly at that center of our old pain, both physically and emotionally. If the meaning we make of the situations of our current lives is based upon the meaning we made as helpless children, in circumstances we could do nothing about, we live by that old interpretation, whether it is currently appropriate or not. Our bodies, minds and spirits are living off an old script. Forgiving ourselves, whether or not we’re actually at fault, can be harder than forgiving someone else; it makes us feel vulnerable, needy, confused and hurt all over again, but it is critical for full healing to take place.

Think of September 11 and the constant TV replays of the planes crashing into the Twin Towers. Many children across America thought that this disaster was happening over and over and over again. They had no way of understanding, as youngsters with limited capacity for reasoning, that these were instant replays. Their line between reality and replay was blurred. So many of the especially young ones experienced September 11 as being as many days’ long as the replays that appeared on our television sets if no adult explained otherwise. Our child minds are really not much different. They stretch out our past through the landscape of adulthood, replaying over and over again those memories that we found traumatic as youngsters. Often, the adults in our lives were too preoccupied with their own pain to help us make sense of a painful situation; or they thought that because we were silent or uncomplaining we were not being affected. How often I’ve heard adults say, “Kids are so resilient.” Because children have the capacity to laugh and seemingly let go of pain, we assume they aren’t being affected. But nothing could be further from the truth. Children are like sponges, soaking up their environment and holding it in all the tiny spaces they have
The brain is uniquely wired to best remember memories that are powerful in emotional content, whether the memory is of a wonderful clown at a child’s fifth-birthday party, the circus with grandparents who made it seem magical, or repeated abuse by an adored or feared relative. However, if the memory was traumatic, the mind also has the capability to block it out, to selectively “forget” what made life as a dependent child feel too threatening. Here is a case in point:

**How Emotion Travels Through the Body**

“The body is the unconscious mind,” says Georgetown University research professor, Candice Pert in *Molecules of Emotion*, “repressed traumas caused by overwhelming emotion can be stored in a body part, thereby affecting our ability to feel that part or even move it... there are infinite pathways for the conscious mind to access—and modify—the unconscious mind and the body.”

Until recently, emotions have been considered to be location-specific, associated with emotional centers in the brain such as the amygdala, hippocampus and hypothalamus. While these are, in fact, emotional centers, other types of centers are strewn throughout our bodies. Emotions travel through our bodies and bind to small receptors on the outside of cells, much like tiny satellite dishes. There are many locations throughout the body where high concentrations of almost every neuropeptide receptor exist. Nuclei serve as the source of most brain-to-body and body-to-brain hookups. Nuclei are peptide-containing groups of neuronal cell bodies in the brain.

Emotional information travels on neuropeptides and is able to bind to its receptor cells through the binding substance of ligands. The information is sorted through the differentiation of receptors. That is, certain information binds to certain receptors. So our emotions are constantly being processed by our bodies. This clearly paints a dynamic, rather than static, picture of development; not nature versus nurture, but nature and nurture. The brain and body are exquisitely intertwined systems that are constantly interacting with the environment. All five senses are connected to this system and feed information that determines our unique response to anything from petting a soft rabbit to being slapped. The more senses involved in an experience, the more the brain remembers it. The smell and taste of Grandma’s cooking—as well as her gentle touch, familiar voice and the sight of her standing at the stove—all engrave themselves onto our memory systems, along with the feelings associated with them because every sense is involved. The same is true in the case of trauma: Karen remembers the smells of the house in which her abuse occurred, various details of how it looked, with the sound of her uncle’s voice, his touch, the bitter taste of fear in her mouth and how she felt (or shut down feeling) at the time.

One way the commonality among all humans of this mind-body connection can be illustrated is in the study of the universality of facial expressions. Emotions seem to have an inborn genetic mechanism for expression. Whether you are observing Hungarians, Indians, Africans or Eskimos, their facial expressions for anger, disgust, sadness, anticipation and joy
will be the same. Not only are we a vast mind-body network for the processing of the everyday emotions we feel, we also carry a genetic coding for experiencing basic emotions. So the emotional system is more or less like the endocrine system, and moves throughout our mind-body. So to review, emotions travel on neuropeptides, attach to tiny receptors on cells through the binding agent in ligands, and are sorted through as to type and to binding site because each receptor is designed to bind to particular emotional messages.

Darwin felt this system was highly conserved throughout evolution because emotions were so critical to our survival. The cavewoman who got scared when she sensed danger from a potentially threatening animal and removed her baby, whom she wanted to protect and nurture into adulthood, was the one who survived and kept our species alive. She is the DNA strain that led to us.

**The Positive Function of Fear and Anxiety**

Sometimes, though one part of our bodies is clearly relaxing, another part may still be holding onto stress. This is part of the split between the conscious and the unconscious mind. The following studies show how blocking our anxiety or fear can put us at risk. Fear can be productive in aiding some part of our minds, conscious or unconscious, to prepare for impending events like childbirth or surgery. Larry Dossey, M.D., in his book *Healing Words*, cites these studies that illustrate our need to be aware of feelings like fear so that we can use them to warn us of impending danger or discomfort. In a study done at the University of Cincinnati Medical School, it was discovered that pregnant women who had anxiety-ridden, threatening dream images toward the ends of their pregnancies had shorter, easier labors than those who had only happy thoughts and blocked their fears. “It’s as if the threatening dreams are acknowledging the painful event that is to come, while the more pleasant dreams deny that reality, just as perhaps the woman who is dreaming them is denying the pain that will be sure to accompany the birth,” surmise Jayne Gackenbach and Jane Bosveld who conducted the experiment. The women who were unable to block or deny their fears, even if only in their remembered dreams, could better use and integrate them in order to prepare for the pain they were about to experience and that preparation served them well.

Similarly, British psychologist Anne Manyande of University College in London, “examined blood levels of two stress hormones, adrenaline and cortisol, in patients just before surgery and two days following surgery.” The patients were divided into two groups. The patients in the first group were taught relaxation techniques, and had lower blood pressure, lower heart rate and required less pain medication after surgery than the second group who received no training. *However, their bodies told a story with a significantly differing subplot.* The group who had used relaxation techniques had significantly increased levels of the stress chemicals adrenaline and cortisol, while, in the group that received no training, the levels for these hormones *did not increase.* In other words, though the “relaxed group” had lower blood pressure, lower heart rates and needed less medication (which is a good thing), their levels of stress, as represented by elevated adrenaline and cortisol went up, (which is not such a good thing). Again, the split between the unconscious and conscious mind manifests in the body. Even though we can seem to be in control of our stress
response, another part of us clearly is not. The hypothesis of the researchers was that our bodies seem to need a little worry and fear before surgery so that we can accurately plan for potential pain and immobility. Wipe out the worry and fear, and we wipe out some of our conscious connection with the real experience. Our unconscious, however, seems to be aware of what’s coming up and expresses its fear through elevated levels of stress in the body.

So blocking our ability to experience feelings of, let’s say, “normal” fear and anxiety—even with something as seemingly helpful as relaxation techniques—means we can’t feel, integrate and interpret their messages to us. Again, in Candice Pert’s words, “The body is the unconscious mind.” We need access to our authentic feelings so that we can use them to guide us toward what we need to do to resolve our life situations. We need to know how we really feel, or our bodies will let us know in some other way, usually in the manifestation body aches or disease.

The Power of Thought

What we think about all day becomes who we are. We are the product of our own thoughts, at least to some extent. In a study done to explore the connection between thoughts and their relationship to health, people from similar backgrounds and of similar age were divided into two groups. The first group was repeatedly shown movies of Nazi war acts while the second viewed films of Mother Teresa’s work attending to the sick and needy. After viewing for the same length of time, each group was given blood tests. Group one exhibited a reduction in immunity while group two showed elevations in immune function. These results persisted over a period of twenty minutes then returned to normal. When this test was repeated, the testers asked the subjects to continue to “rerun the movies or imagery through your minds throughout the day.” When the groups continued to image what they had seen on the screen and allowed it to play in their thoughts throughout the day, the group imaging Nazi war acts experienced a depressed immune function throughout the day, while the group imaging Mother Teresa showed elevated immune functions throughout their day.

We are what we think about all day. The thoughts we think stimulate emotions, which stimulate specific biochemical reactions within our bodies. We can’t get away from ourselves. And our bodies won’t let us get away with negative thinking. Our systems translate our thoughts into biology.

The Role of the Limbic System

Altering deep emotional patterns is slow and painstaking work. Limbic bonds imprint themselves onto our emotional systems. The limbic system “sets the mind’s emotional tone, filters external events through internal states (creates emotional coloring), tags events as internally important, stores highly charged emotional memories, modulates motivation, controls appetite and sleep cycles, promotes bonding and directly processes the sense of smell and modulates libido,” according to Dr. Daniel Amen, author of Change Your Brain, Change Your Life. Our neural networks are not easily altered, “early emotional experiences knit long-lasting patterns into the very fabric of the brain’s neural networks,” says Thomas
Lewis, M.D., in *A General Theory of Love*, “changing that matrix calls for a different kind of medicine all together.” Our emotional life is physical, it imprints itself on our bodies. When we have problems in our deep limbic system they can manifest in “moodiness, irritability, clinical depression, increased negative thinking, negative perceptions of events, decreased motivation, floods of negative emotion, appetite and sleep problems, decreased or increased sexual responsiveness or social isolation,” says Amen. Our neural system carries with it our emotional sense memories from childhood. Familiar smells, sounds or places can send a cascade of memories flooding through us that either wrap us up in their warmth, or challenge us to maintain our composure. Along with the memories, comes the cognitive sense we made of what happened at the time. That’s why when we go to the circus with our children we, too, can “feel like a kid again”; or when we get hurt by someone we love, we can also “feel like a kid again”—but this time, that means vulnerable and helpless. Our early emotional memories are being relived in each case. When the memories are wonderful, this is a great boon in life, our child selves color our current experience with innocence and gaiety. When the memories are painful, they can color our current experience in darker hues.

We were naturally disempowered as youngsters to a greater or lesser extent because of the inevitable power imbalance between parent and child. This power imbalance can affect us in all sorts of ways. We can have the wish as adults to restore that secure and comforted feeling we had as children, which is why most of us enjoy creating a comfortable home. Or, if we felt overly disempowered, we may have a deep wish to “get our power back,” which can manifest in healthy or unhealthy ways. All of us experienced some sort of power imbalance, it goes with the territory, but these imbalances can vary greatly along the continuum. We need to find real and sustaining ways to feel whole and solid. Relationships are part of what helps us feel we have a comfortable place in the world. Damage from youth needs to be repaired so that we don’t pass it along in harmful ways and so that we can have reasonably healthy relationships in our current lives.

Psychotherapy is one way of repatterning our limbic systems, along with other healing relationships of all kinds. Because “Describing good relatedness to someone, no matter how precisely or how often, does not inscribe it into the neural networks that inspire love or other feelings,” says Lewis. “The limbic system is associated with our emotions and the neocortex is associated with critical thinking. Both are operative in processing emotions.” While the neocortex can collect facts quickly, the limbic brain does not. Physical mechanisms are what produce our experience of the world and we need new sets of physical impressions to change or alter those impressions.

Emotional impressions shrug off insight but yield to a different persuasion: the force of another person’s Attractors reaching through the doorway of a limbic connection. Psychotherapy changes people because one mammal can restructure the limbic brain of another. . . . The mind-body clash has disguised the truth that psychotherapy is physiology. When a person starts therapy, she isn’t beginning a pale conversation; she is stepping into a somatic state of relatedness. Evolution has sculpted mammals into their present form: they become attuned to one another’s evocative signals and alter the structure of one another’s nervous systems. Psychotherapy’s transformative power comes from engaging and directing these mechanisms. Therapy is a living embodiment of limbic processes as corporeal as
digestion and respiration.

The body is part of the therapeutic process. One of therapy’s ultimate goals is to restore our ability to care and be cared for in reasonably functional ways, to learn to love and be loved. The three neural “faces” or “expressions” of love are limbic resonance, regulation and revision. It is relationship that heals. We’ve probably all had the experience of loving a subject in school, not because of the subject but because of who was teaching it, we responded to them so we responded to it. Most research done on the efficacy of therapy arrives at the same point: Ultimately, it is the quality of the relationship between client and therapist, or between group members, that is core to the healing process. Insight is helpful in understanding and cognitive restructuring, but the relational patterns encoded into the limbic system do not necessarily respond to insight, they respond to the slow repatterning or recoding of the complex brain and body systems that hold the story of us, the sum total of our experiences written on them. We take in information through all of our senses; the more senses that are involved in our learning, whether it’s the alphabet or emotional learning, the more the brain absorbs and stores it. The more powerfully the memory is encoded in us, the more it takes to alter the patterning.

All self-help books should probably come with a warning that reads something like: Caution! This book must be accompanied by a network of sustaining relationships. Do not attempt to get better in isolation. Most women don’t need to be told that relationships are core to our sense of well-being, we’re wired to understand this. And most therapists have always understood intuitively; that there is a repatterning of neural networks that accompanies a long and successful therapeutic relationship, no matter what name or discipline it has operated under.

It’s Never Too Late to Limbically Revise

My own discipline is psychodrama, sociometry and group psychotherapy, the brain child of Viennese psychiatrist Jacob Levy Moreno and later his wife Zerka Moreno. It is essentially a role-playing method and a group-therapy method combined to allow clients not only to talk about their lives and passions, but act them out as well. In psychodrama, clients have the opportunity, for example, to speak to an empty chair or a role-player representing a person to whom they have something to say. This allows more senses to get involved more directly in the therapeutic process which, we believe, creates more opportunities for healing. To quote Moreno again, “The body remembers what the mind forgets.” If it didn’t, none of us would breathe, walk or ride a bike. Scene-setting is also important in psychodrama. Memory is “state dependent”; that is, we tend to recall something more fully when similar conditions represent themselves. Creating the environment in a psychodramatic enactment tends to encourage a more complete recall of a particular situation which, when used properly, can be therapeutic. This of course assumes that clinicians will keep in mind that recalling something with full intensity is not always desirable and should be used carefully. But therapy that allows us to reconnect with our deepest selves, our passions, hopes and dreams can open a door to living more fully and passionately in the present.

So, if it’s the relationship that ultimately heals, let’s take a deeper look at what’s going on
with this process of neural repatterning.

**Limbic Resonance**

We are always giving off emotional signals or rather an emotional essence for other people to pick up on. Our brains are designed to pick up on these signals and translate them. We know much about people without exchanging a word, we get a sense about them, what their essence is, and how we relate to them. In psychodrama we call it *tele*, the connection between people that is nonverbal but says everything, what we “get” about another person and they about us. Lewis likens it to listening to a piece of music:

The first part of therapy is to be limbically known--having someone with a keen ear catch your melodic essence. A child with emotionally hazy parents finds trying to know herself like wandering around a museum in the dark . . . she cannot be sure of what she senses. . . . Those who succeed in revealing themselves to another find the dimness receding from their own visions of self. Like people awakening from a dream, they slough off the accumulated, ill-fitting trappings of unsuitable lives.

The experience of being *seen* for who we really are, of feeling understood and “gotten” by another person or people can be fundamentally altering and healing.

**Limbic Regulation**

We, as humans or mammals, are physiologically patterned to resonate to each other at a deep neural level. Lewis says,

Our neural architecture places relationships at the crux of our lives, where, blazing and warm, they have the power to *stabilize*. When people are hurting and out of balance, they turn to regulating affiliations: groups, clubs, pets, marriages, friendships, masseuses, chiropractors, the Internet. All carry at least the potential for emotional connection. Together those bonds do more good than all the psychotherapies on the planet. A parent who rejects a child’s desire to depend raises a fragile person. Those children, grown into adulthood, are frequently those who come for help. . . . If patient and therapist are to proceed down a curative path, they must allow limbic regulation and its companion moon, dependence, to make their revolutionary magic.

Working in the addictions field over the past three decades has taught me endless lessons about limbic regulation. People who have been traumatized by inadequate parenting, who are living with addiction or are addicts themselves, need to put in the time that it will take to heal in therapy and twelve-step programs. The ones who do poorly are invariably the ones who, for some reason or another, won’t put in their hours. Maybe they go to twelve-step meetings and are bothered by what people do or don’t say, maybe the idea of groups creeps them out, makes them feel vulnerable, but sooner or later they will need to come to terms with their aversion to connection that makes them want to pick up a book, read it and walk away better. Books like this one can point us in the right direction, but words alone don’t make for a full healing, they need to open the door to deeper, more meaningful connections
with others, to light a path toward the right kind of healing experience. Lewis feels that because

. . . people do not learn emotional modulation as they do geometry or the names of state capitals. They absorb the skill from living in the presence of an adept external modulator, and they learn it implicitly. Knowledge leaps the gap from one mind to the other, but the learner does not experience the transferred information as an explicit strategy. Instead, a spontaneous capacity germinates and becomes a natural part of the self, like knowing how to ride a bike or tie one’s shoes. The effortful beginnings fade and disappear from memory.

As a client depends, she internalizes this regulation, and it becomes a part of her. Gradually, she feels more whole, capable and confident, until eventually she is ready for independence and self-regulation.

Limbic Revision

According to Lewis:

When a limbic connection has established, a neural pattern, it takes a limbic connection to revise it . . . coming close to the patient’s limbic world evokes genuine emotional responses in the therapist--he finds himself stirring in response to the particular magnetism of the emotional mind across from him. His mission is neither to deny those responses in himself nor to let them run their course. He waits for the moment to move the relationship in a different direction. . . . And then he does it again, ten thousand times more. Progress in therapy is iterative. Each successive push moves the patient’s virtuality a tiny bit further from the native Attractors, and closer to those of the therapist. The patient encodes new neural patterns over their myriad interactions . . . with enough repetition; the fledgling circuits consolidate into novel attractors. When that happens, identity has changed. The patient is no longer the person he was.

This underscores the notion that a therapist’s first responsibility is to do her own personal work so that she can pass along as resolved a self as possible. The same would apply to parents, partners, teachers and so on. Who we are speaks louder than what we say on a neural level. It is the total self that instructs and enlightens, not simply the right words. This is also why we can’t will ourselves to forgive. As Lewis says, “A person cannot choose to desire a different kind of relationship, any more than he can will himself to ride a unicycle, play The Goldberg Variations, or speak Swahili. The requisite neural framework for performing these activities does not coalesce on command.” It takes time to change our neural patterning and learn new relationship styles and skills. Lewis continues, “The physiology of emotional life cannot be dispelled with a few words.” As we’ve already discussed, “describing good relatedness to someone, no matter how precisely or how often, does not inscribe it into the neural networks that inspire love.” Or forgiveness.

Many people miss this critical aspect of therapy and our current health-care system misses it as well. Deep limbic healing cannot occur in six office visits; rather, it happens slowly and over time. When I work with clients I do my best to help them to understand the importance
of a safety net, a network of recovery relationships and activities that will support their personal growth. This network can include twelve-step programs or faith-based groups. I also find that exercise and good nutrition play a critical role in a client’s healing. Oftentimes, clients want to get better fast, a let’s-figure-it-out-and-get-out-of-here sort of thing. And that can work to some extent for some people. But this quick-fix mentality ignores the limbic repatterning that is so critical to full healing. New awarenesses about how your parent’s divorce tore you up inside doesn’t necessarily heal the tear. It may be the awareness that starts the wheels in motion for other emotional learning, but healing is a process and it takes the time it takes. Twelve-step programs are one self-help option that often have a Transformative effect on the lives of millions of people world wide. People changing people.

The Limbic Bonds Between Parent and Child

One of the most fundamental human bonds is the one between mother and child, with that between father and child a close second and in some cultures, grandmother and child. A serious disruption in these primary bonds can affect the child. According to Amen:

. . . hormonal changes shortly after childbirth . . . can cause limbic or emotional problems in the mother. They are called the “baby blues” when they are mild and postpartum depression or psychosis when they are severe. When these problems arise, the deep limbic system of the mother’s brain shows abnormal activity. (The phenomenon has long been detected in animals as well as humans). In turn, significant bonding problems may occur. The mother may emotionally withdraw from the baby, preventing the baby from developing normally.

Other life events can also cause problems in the limbic system, such as divorce, death or loss of significant relationships or children in the home. Divorce can actually be a “a source of one of the most severe kinds of stress,” according to Dr. Amen. Partners who are deeply limbically connected can feel a deep sense of rupture or serious fragmentation when they are separated, and likewise with the children involved. He feels that this may be a part of why it’s so hard to leave even an abusive relationship, where partners have shared the same bed, table and life for years. The kind of deep fragmentation we experience over these sorts of separations or breakups can be with us throughout our lives. When we try to ignore the sense of fragmentation that can accompany significant loss, when we do not go through the grieving process, we condemn our unconscious to carry it in silence. The part of us that is fragmented has no voice or expression. However, it does not disappear, as we’ll see in our next case study; it waits for some circumstance in life to trigger it. It may then speak, but in the wrong words. We need to link it to the child’s voice that was silenced to make sense of what is being refelt. When there is a longstanding problem in our bonds from childhood, the unresolved pain associated with it can seem to lie more or less dormant for a time, as we focus on getting our careers going, for example. But when we reenter intimate relationships or have children of our own, that early emotional conflict gets triggered, along with all the thoughts and feelings associated with it. It’s important that we get some help if this is the case so that we don’t sabotage our relationships in the present with unresolved pain from the past.
This material is excerpted from *The Magic of Forgiveness* by Tian Dayton PhD TEP, Health Communications