Deep Reversals and Dissociation

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BLUE DIAMOND HEALING

Exploring Transpersonal and Transdimensional Aspects of Energy Psychotherapy

KARNAC

Points to cover

- Origins of the concept of psychological reversal – what Callahan said about it – and his ways of countering it

- Deep reversals and the link with dissociation

- Traumatic dissociation: 'I am not here'

- Psychodynamics of reversals

- Conflict of parts
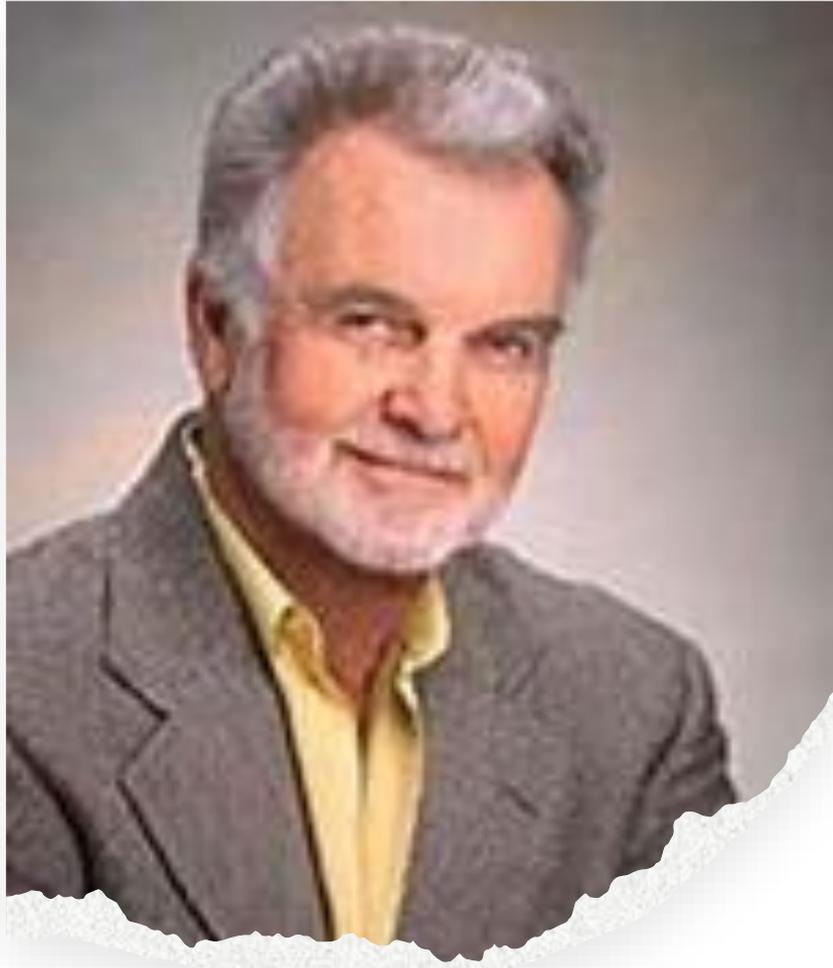
Roger Callahan's discovery of psychological reversal through muscle testing his patients

- "I found to my chagrin that a large number of my clients got weak when they thought of getting better and stronger when they thought of getting worse. No wonder psychotherapy is so difficult!" [1985: The Five-Minute Phobia Cure, p 49].

Importance of reversals

- One of Dr Callahan's most important discoveries was that of psychological reversal.

- Reversals are psychological (unless due to energy toxins or deep malformations in the energy system) *and* energetic.

- Reversals will block therapeutic progress within any therapeutic modality.

ILLNESS & REVERSAL

- States of illness are always reversed
- A part of the body that is ill will register a reversal
- These are literal reversals of voltage – Callahan's explorations with voltmeters

Energetic and mental dimensions

- Reversals have both an energetic and a cognitive-emotional dimension.

- They may also express psychodynamic conflict – a less conscious anxiety is maintaining the conscious anxiety.

- Through combining language and muscle testing we correlate the information in the mind and in the energy field.

- Precise wording – like unlocking a computer code.

Precision of language in locating reversals

- The human bio-computer is exquisitely sensitive to precise nuances of meaning. The following sentences are very similar yet may evoke different muscle responses.

- "I want to be over this problem"
- "I want to be completely over this problem"
- "I will be over this problem"
- "I will be completely over this problem"
- "I will remain completely over this problem"
- "I believe I can be over this problem"
- "I believe I am over this problem"

Forms of Reversal

The main forms of psychological reversal identified within TFT:

- Massive/Global/General.
- Specific
- Recurrent
- Mini
- Level 2 [Future: "I will be better"].
- Level 3 ["I want to be even better"]

- Later investigators focused more on the psychological motivations behind reversals

Callahan's three ways of correcting reversals

- Tapping side of hand (small intestine meridian)
- A statement of self-acceptance – "Even though I have this problem, I accept myself"
- Bach flower remedy Rescue Remedy

Massive/Global reversal

- "I want to be well" tests no (muscle weak)
- "I want to be happy" tests no (muscle weak)
- "I want to be alive" tests no
- "I want to be sick/ill/miserable" tests yes

- In this condition, the person will (probably) not respond well to any form of EP, or indeed any form of psychotherapy

Possible causative factors

- The person is very depressed and is suicidal
- The person is ill, or has recently been ill, or is currently affected by a pathogen or a environmental 'energy toxin'
- The person is alcoholic
- The person's energy system is adversely affected by medication they are taking
- The person's energy system went into reverse in response to a trauma – whether recent or years ago (MT for when – then target that experience)

Characteristics of deep reversals

- Reversals of the desire for life and love – features of the Freudian/Kleinian 'death instinct'

- A deep reversal will lead to long and unfruitful psychotherapy

- A dissociation from the core self

- A severance from the higher dimensions – monadic collapse – reversal of the spinning merkaba fields

- Deeply disturbed people – in states of psychosis, severe depression, alcoholism, addiction, etc. – are always deeply reversed

'Parts' reversals

- Muscle test may be strong to "I want to be over this problem"

  but weak to "All parts of me want to be over this problem".

- The human system seems naturally to be organised into parts (not just people with dissociative identity disorder).

'Parts not in the body' treat like a reversal

- Muscle test:
- "All parts of me are in my body"
- "One or more parts of me are not in my body"

- "Those parts of me are willing to return"

- Cross hands over heart chakra – welcome all parts home.
- NB. This process is not for severe DID

Part envy

- "Part of me would be envious of the rest of me if I were happy/free of this problem"
- This is likely to be a repudiated and split off part that has felt left out
- The 'false self' (negative ego) may envy and fear the 'true self'.
- NB. The 'true self' is always an unknown evolving self – the unknown Other within

Psychodynamic content of reversals

- Safety (to self and others)
- Deservedness/Guilt/Shame
- Identity
- Vengeance
- Intergenerational connectedness
- Feeling of betraying one's history and childhood self
- Wish for a long-term therapeutic relationship.

Anxieties and meta-anxieties

- Meta-anxieties are the hidden anxieties that hold the surface anxieties in place.

- The thought behind the meta-anxiety may be quite specific and idiosyncratic: "it is not safe to overcome this anxiety because …"

Trauma-based global beliefs about safety

- Those who have experienced multiple abuse or abandonment in childhood may have absolute core beliefs that it is not safe to trust anyone.
- "It is always dangerous to trust another human being".
-
- This can lead to a paranoid transference – the more the person begins to trust the therapist, the more the distrust is triggered

Vengeance

- "I want to keep this problem as a reproach and punishment to others".

- The underlying attitude/thought is: "If I get over this problem, they will have got away with what they did to me … as if it did not matter what they did".

Intergenerational connectedness

- "I will still remain lovingly connected to my mother/father/family/ancestors if I am over this problem"

- The underlying attitude/thought may be: "We are the kind of people who have this kind of problem".
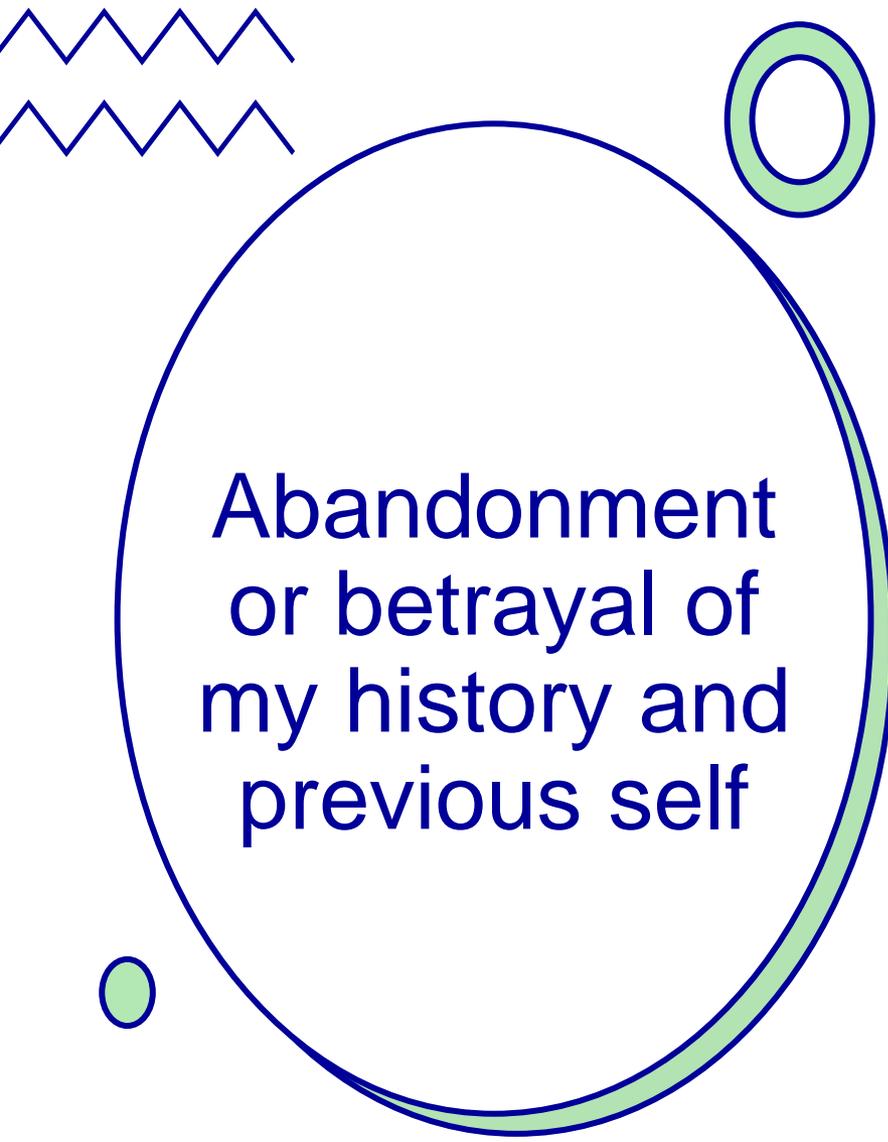
Abandonment or betrayal of my history and previous self

- "If I recover completely from this problem, I will be abandoning my own history and previous self"

- This is a very common and profound internal objection to full resolution of problems

- Have the client tap side of hand whilst saying: "I can remember and honour my previous self and history whilst moving on completely from this problem"
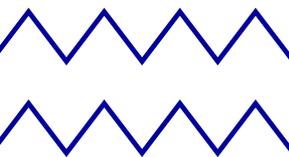
Wish for a long-term therapeutic relationship
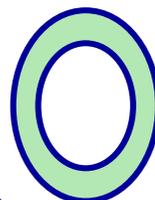
- The client's (partially unconscious) agenda may be to establish a long-term therapeutic relationship
- - that will provide gratifications and nurturance to compensate for the traumas and deprivations of the past.
- The promise of rapid relief through EP may be utterly at odds with this agenda.

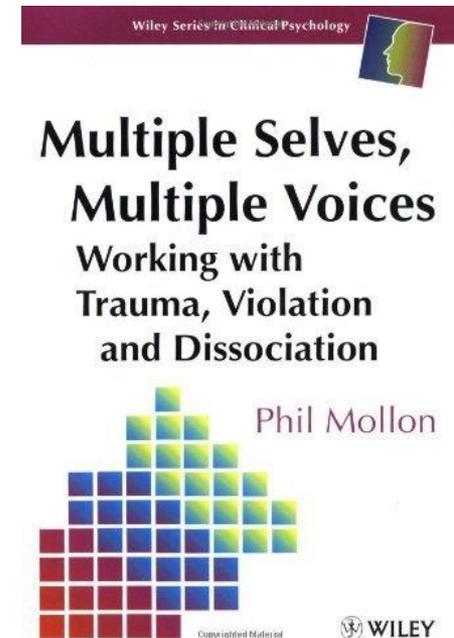# Reversals provide a rapid route to childhood traumas and conflicts

- Reversals can take us directly to childhood trauma and patterns of conflict

- On encountering a reversal, we are at a choice point

- We can neutralise it (tapping side of hand)

- We can enquire into its nature, content, and origins – by asking "what comes to mind?"

Deservedness and Safety Reversals

- Deservedness and Safety reversals provide particularly good windows to core childhood traumas and conflicts

- We can break off from the original target thought field and instead track the reversal

- The Thought Field shifts to "the roots and origins of feeling it is not safe/do not deserve to be over this problem"

Dissociative Identity Disorder

- A result of repeated interpersonal childhood trauma by caregivers – no escape other than through dissociation

- Dissociative parts may have a hypnotic or dreamlike quality, frozen in time

- Such parts are always reversed

- Working with DID is very challenging and hazardous – like family or group therapy with one person

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Origins of DID

- The origin of DID is a young child pretending 'I am not here – I am not experiencing this'
- The 'pretence' structures the personality
- Escape to other-dimensional realms
- Child parts, frozen in trauma and the mode of cognition of a child
- Other parts have evolved to cope
- The entire system may experience therapy as very threatening – danger of evoking internal 'civil war'

Reversal and dissociation

- Reversal and dissociation are both ways of opting out of living and expanding in the present

- They can both be responses to trauma

- Both can express a feeling that it is not safe or desirable or permitted to be alive in the present

The vertical split in the personality (Kohut)

- 1. An outward socially competent self
- 2. A hidden vulnerable depressed and anxious self
- Much of the time, the second self may be very hidden, but may be triggered by certain emotional traumas
- Kohut described this as a vertical split. The outward looking self gains approval and social reward
- This can be a feature of 'highly sensitive' people, or those who are somewhat on the autistic spectrum (but in a hidden way)

Vertically Split-off Sector   *Reality Ego*

Openly, displayed infantile grandiosity related to mother's narcissistic use of the child's performance

VERTICAL SPLIT

Low self esteem, shame propensity, hypochondria

HORIZONTAL SPLIT (Repression barrier)

Repressed unfulfilled archaic narcissistic demands, related to mother's rejection of child's independent narcissism.