

Healing Space Guidelines

From the Vulnerable Child to the Authentic Essence

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The goal of the Healing Space is to help the client develop a compassionate relationship between the adult self and the vulnerable child. This relationship encourages the emergence of the authentic essence which is hidden within the child. The Healing Space gradually enables a repair of attachment wounds and internalization of an open, curious, accepting and loving relationship between the client and the child. This process is assisted by the therapist's modeling to the client how to gradually approach the child and acquire her/his trust.

The therapist facilitates the integrative dialectical movement by:

1. Making the adult self (or other positive figures) and the vulnerable child accessible as well as alternating attention from one to the other frequently.
2. Recognizing and legitimizing vulnerable or denied aspects of the child
3. Validating the opposites of the child (such as: weak- strong, sad-happy, unworthy-worthy) which paves the way to their acceptance by the client.
4. Providing repairing experiences by approaching the child in a way which is dialectically opposed to his/her expectations and projections (dialectical attunement).
5. Identifying, validating and making accessible the authentic essence of the client which strengthens vitality and a sense of wholeness.

Explanation

“The goal of the Healing Space is to enable a compassionate relationship between you, the adult of today, and your inner child. We will learn to do it step by step so that you will be able to be in contact with the child whenever you wish. We often feel empathy and compassion toward other people, children and animals but it is much harder to feel it toward the child within us. We shall go through this process together and you will gradually learn to be with your inner child

¹ *The guidelines to the Healing Space will be adjusted to the needs of the specific client*

and accept her/him without judgment even when she/he feels anxious, insulted, or guilty. When we, as adults, can accept the feelings of our vulnerable child her pain and loneliness begin to heal and we can connect to our true nature”.

1. Picture

The therapist asks: “Are you, the adult, now sitting with me in the room, willing to go back in time and meet the child you were? Can we be with and support the child so that she/he won’t be alone anymore?” If the answer is positive the client is asked to bring an image of the child, or a photo. The therapist asks: “Just look at the child, look with curious eyes...how old is he/she?...What does he/she look like? How is he/she dressed?...Where is he/she?... (if the client finds it difficult to connect to the child begin with a present distressing, but not overwhelming, picture, and float-back to the child).

2. To be with the child

The therapist asks: “Is there anything more that you see?...When you look at the child’s eyes... can you see his/her feelings?... If there is a difficulty therapist may ask: ”Was there a time when the child was fearful? or maybe angry? Or perhaps he/she wanted something very much and was frustrated not getting it?”. When some distress comes up the therapist addresses the child with a soft and accepting tone and expression: “I see that you are sad...afraid... angry...now I am with you...you are not alone anymore”. The client is invited to say it to the child if possible. This sentence (“Now I am with you... you are not alone anymore”) is repeated often to enhance the child’s trust in the adult client. (*Begin slow continuous bilateral stimulation with eyes closed*).

3. How do you feel about the child?

If the client can begin relating positively to the child the therapist asks: “How do you feel about the child?”. This question can enhance the compassion for the child. (*slow continuous bilateral stimulation with eyes closed alternating attention to the child’s and the adult’s sensations*).
Move to step 5.

If the client is hostile, or disconnected, from the child it is probably because protective parts came up. In this case move to step 4.

4. If the client is negative, or disconnected from the child, move to a brief and focused processing (*bilateral stimulation with open eyes*).

Several strategies can be used:

- a. Recognize the defense, or the protective part. Thank the part for its attempts to protect the child from emotional pain over all these years. Remind the client that her/his adult self can now learn to support the child in a different way with the help of the therapist.
- b. Strengthen the differentiation between the child and the adult self: What's good about knowing that you are not stupid...weak...naïve...or soften the defense: Or soften the defense: "What's good about avoiding relating to the child"? Notice your body sensations...(*Knipe*)
- c. Dialogue with the protective part: "What are you concerned about approaching the child? What will happen if you stop behaving like this?", What do you need to be less concerned? (*parts work*).

5. Validating the yearning

When the client can be compassionate to the child the therapist asks: "If you, the adult of today... would like to help the child...what do you think he would like to hear from you?... "What does he/she need?". The therapist validates and normalizes the child's desire: "Yes, you need to feel protected...you want to be seen...you want to feel loved...it's important for every child...every child deserves to feel protected, loved and seen". The therapist asks the client to say it to the child. The client may also ask the child if she/he wants a hand...a hug.... (*slow continuous bilateral stimulation with eyes closed alternating attention to the child's and the adult's sensations*).

6. Validating the opposites

The therapist recognizes and legitimizes vulnerable or denied, aspects of the child and validates the opposites: "You are OK the way you are...You can be weak and you can also be strong... insecure and also secure...sad and also happy...". The client is asked to say it to the child (*slow continuous bilateral stimulation with eyes closed*).

7. A safe and pleasant place in the present

The therapist asks the client if the child is now willing to come with him/her to a safe and pleasant place at home or in the countryside. The therapist guides the client to tell the child: "look at me...I am who you became to be...I will introduce you to my family, my job, my hobbies..." (*slow continuous bilateral stimulation with eyes closed alternating attention to the child's and the adult's sensations*).

8. Validating the essence

Following the compassionate relationship with the child, the client's essence often emerges spontaneously as a happy, free and lively child. The authentic essence is not influenced by social conventions and traumas. The therapist identifies the essence and asks the client to describe it (*differentiation*) thus making it accessible (noticing sensory, somatic and emotional levels). Connecting (*linking*) to the essence and validating it strengthen the client's sense of wholeness of the self.

9. Anchoring the connection to the child + mantras

The client is asked to locate the child in her/his body, put both hands there caringly. The client can choose 2-3 compassionate sentences as mantras for everyday encounters with the child. (*slow bilateral stimulation with eyes closed*). The therapist guides the client gently to open her/his eyes and gradually come back to the here and now. The therapist writes the mantras down and gives them to the client.

10. Daily encounter with the child

The therapist encourages the client to meet the child daily, to locate her/him in the body and put both hands there. The client may inquire about the child, if something bothers her/him, listen compassionately and communicate care and support via both hands. The client is reminded to tell the child that she/he is not alone anymore, say the mantras and hug her/him. The therapist explains the client that the daily encounter with the child will strengthen the child's trust in their relationship.

11. Pleasant experiences

The client is invited to bring into her/his life moments of pleasure, playfulness, joy and letting go to enhance the connection to her/his essence.

12. Reflective dialogue

At the end of the session, or in the next session, the therapist discusses the Healing Space experience with the client asking: "How was the encounter with the child? How was it for you to meet the child together with me?" Has your attitude toward the child changed? Did something new come up? Do you now understand things about yourself and the child better? How will it help you to cope? How was it to meet your Essence? How was it for you to let me know your Essence? Can you recall times when you have been connected to this energy?

Comments

Ideal figures: Clients with complex developmental trauma who lack an internalized consistent and containing parental figure have difficulties to feel compassion to their vulnerable child.

They can use other protective/nurturing/spiritual figures (real or imagined, animals or landscape images) and another child (real or imagined) without referring to distress. After establishing an accessible connection between a positive figure and a child without distress, the adult self and a vulnerable child can be introduced.

When? The Healing Space can be used in the preparation phase of EMDR to prepare to soften defensive parts and prepare for adaptive processing. It can also be used during processing to help the client contain negative overwhelming feelings of the child. At closure it can be a powerful resource. The Healing Space can be integrated into any therapeutic approach. The length of time can change from a brief intervention to a whole session. This procedure should be repeated and be adjusted to the client's needs.

How? A gentle slow and continuous bi-lateral stimulation with closed eyes on the outer side of the knees (a light blanket can be used to cover the legs). The Tac/AudioScan can also be used (with or without the earphones). If negative feelings come up switch to a brief focused processing with bi-lateral stimulation and open eyes.