

AN “INSIDE VIEW” OF BRAINSPOTTING AND MENTAL HEALTH RECOVERY

By Katherine F. H. Heart, M.Ed.

Brainspotting (BSP) came along at the perfect time in my healing process to be a primary means of healing dissociation and mental illness after my experience of childhood trauma. I am telling my story to inform people about ways that this very promising discovery might assist them.

Background

From the ages of six to sixteen, I experienced sexual, physical and emotional abuse that stopped only when I told my school guidance counselor and was separated from my family. In 1972, people believed that incest was rare. My father was not arrested and I was sent to the psych ward of a local hospital, and then to a group home for “emotionally disturbed adolescents.” Three psychiatrists gave me different diagnoses: Adjustment Reaction to Adolescence, Major Depression, and Schizophrenia.

My aunt and uncle living in another state took me into their family and provided me with the personal support to complete high school, college and graduate school. I earned a Division I athletic scholarship, major leadership awards, and a graduate assistantship. In early adulthood, I had a successful career in nonprofit program management for 15 years – much of that time as a victim advocate and trainer.

In my personal life I had difficulty staying in relationships, felt moody, and had a confused sense of identity. I never forgot what happened to me as a child and looked for help as the true prevalence of rape and child sexual abuse publicly emerged in the 1980’s. I worked with a succession of private therapists who offered psychodynamic psychotherapy, as well as Jungian, feminist, gestalt, creative arts and mind-body approaches. I completed a two year certification program in psychophysical therapy and practiced for two years. These experiences offered me good insight early in my healing process. The continuous focus on recovery helped me to feel stable and productive.

A Triggering Life Event

My life abruptly changed in 1992. After many years living far away from my family-of-origin, I was called to return for a life-threatening emergency. My mother was in a diabetic coma and nearly died as the doctors had to amputate both of her legs at the hip. The lengthy, intense contact with my father triggered overwhelming emotions and an unstoppable flood of painful memories.

When I returned to my home in Pittsburgh, I was completely mentally disabled. My partner, who was a social worker, encouraged me to re-enter the psychiatric system for treatment. That first adult hospitalization lasted three months. For much of the time, I was catatonic – in such a deep state of depression that I was unable to talk, move, eat, drink, or take care of myself – to the point of losing weight and having to receive intravenous fluids and tube feedings. My mind was incapable of forming a single thought and my being was lost in profound nonverbal sadness.

Chronic Mental and Physical Illness

Because my moods could abruptly change, I was given the diagnoses of Bipolar Disorder and Post-Traumatic Stress Disorder (PTSD). I was severely and chronically mentally ill for 14 years. I was also diagnosed with Dissociative Identity Disorder (DID). The confused identity in early adulthood was my fragmented parts. I was hospitalized on 27 occasions, adding up to more than 18 months of my life spent in four psychiatric units. I was seen by seven psychiatrists who tried out 40 different medications and an untold number of combinations. They tried three rounds of electroconvulsive therapy – totaling 57 ECT treatments. I attended several partial hospital programs, including eight weeks in a DBT (Dialectical Behavior Therapy) Program.

I resorted to self-injury, knowing the act would release endorphins. Cutting my arm and exercising intensively for hours only temporarily relieved the emotional pain. My hopelessness felt so unending that I made several attempts to kill myself to try to stop the suffering. I lied about my suicidal thoughts at commitment hearings to stay out of the state mental hospital.

I was diagnosed with Medication-Induced Parkinsonism, a side effect of antipsychotic medicine. Three extra medications for severe tremors and uncontrollable muscle spasms were added to my daily regimen. By 2007, I was prescribed 11 psychiatric and neurologic drugs in a careful attempt to help me function.

The physical health I had enjoyed in early adulthood deteriorated. I began to smoke in the midst of a depressive episode and found myself hooked on the quick high. I gained more than 100 pounds, resulting in uncontrolled diabetes, severe nerve pain in my feet, and the added physical pain of eight injections a day.

Every medical and mental health practitioner I encountered gave me the same prospects: I was “too damaged” ... “would always be in treatment” ... “must take medications forever” ... “not to hope for a full recovery.” My experienced psychotherapist of seven years told me outright, “You are hard-wired for self-injury.”

Turning to Brainspotting Therapy

I reached a point of profound frustration and came to believe that there was nothing more I could do with talk therapy or traditional treatment. I was at a dead end and ready for a change. I turned to Lisa Schwarz, a gifted trauma specialist who worked with Dr. David Grand to develop Brainspotting (BSP). We began to use BSP as a primary therapy on a weekly basis.

Here is a basic description of how Brainspotting works. The therapist acts as a guide, but you are in charge of your own process. You might begin with a few minutes of relaxed breathing and listening with headphones to BioLateral sound (www.biolateral.com). You pay attention to the place in your body where you feel the most distress. You give a ‘0 to 10’ rating for the level of distress you feel, and then the therapist helps you find an eye position (“brainspot”) - a point in front of you where the eyes naturally focus when your pain feels the strongest.

The therapist acts as a support and facilitator in helping you to slowly and safely move through the awareness that unfolds inside after finding the brainspot. You and the therapist focus deep moment-to-moment attention on the troubles presented by this one neural pathway.

What comes up? This is different for every individual and in every session. It may be visual images, memories, a few words, sensations in the body, forgotten sounds, and various feelings. The point is to allow and witness these natural “leftover” responses from the trauma to surface. The individual is free to just experience the associations or they can share it in words with the therapist as they go along. You may periodically re-rate the distress and shift to another brainspot.

By the end of the session, your rating of the distressed state is most often lower and your “felt-sense” of the suffering is lessened. A gentle release of energy happens with the process, which may be felt physically as tingling, slight shaking (like from a chill), or a need to stretch. This is the body’s natural response to “unfreezing” what was held from the past. You are also likely to experience a lasting mental relief upon realizing that this disturbance from long-ago is no longer upsetting to you.

An after-sense of change stays with you outside the session in everyday life. When Brainspotting is facilitated within the context of a caring therapeutic relationship, it feels safe, noninvasive and contained. In my experience as a client, this type of intervention feels like a precise laser beam, versus the impact of a sledge hammer - the often overwhelming side-effects of medications and ECT.

The Impact of Brainspotting

Brainspotting does not require “reliving the trauma” as much as it “releases the trauma from the memory.” After a number of BSP sessions, I no longer saw the images of those disturbing memories, or felt the pain, upset and distress from hundreds of incidents of trauma. As a result, many signs and symptoms of trauma in my system - depressed and fluctuating moods, excessive anxiety, flashbacks, and dissociation - gradually became resolved and disappeared. Even the uncontrollable tremors of Parkinsonism ended.

I practiced paying attention to what was happening inside at each moment (called mindfulness) outside of sessions. This gradually helped to end my need for dissociation. My ability to safely re-associate thoughts, feelings and sensations became more of a continuous state of being. Brainspotting never felt like “a technique” that was “done to me.” I was nurtured and supported in a therapeutic relationship that helped to solve dilemmas and disturbances created in childhood and held by each part.

It was every bit as transformative to experience a close and safe relationship with a helping professional that held an unquestionable belief in my innate capacity to become well and whole. This belief in our human capacity for mind-brain healing and wholeness in a basic philosophy of Brainspotting Therapy.

Some of the healing happened as I struggled to find language to describe moments of integration. I began to understand the story I had been telling in therapy throughout my life. Finally, the different parts of me realized that there was not only a beginning and middle of the trauma experience, but they could play a valuable role in creating an *end to the suffering* - not an end to my life - that was satisfying and victorious. All the parts yearned to be remembered heroically for the jobs they had done so well over the years.

Transforming my life's tragedy into a success was a profoundly unifying and joyful mind-body-spirit experience. *After 10 months of BSP Therapy, I found my own way to personal Integration in a private moment in my sitting room on April 24, 2008 and finished therapy shortly afterwards.*

In the next several months, I took a break from the drug regimen in order to find out what my new needs might be after Integration. *Since my previous symptoms were resolved during BSP treatment, I required no continuing neurological or psychiatric medications.*

Lessons Learned from Brainspotting Therapy

I've never before felt this level of certain, vibrant mental wellness. Integration has caused me to revisit every aspect of my personal life, and enhanced my work and professional performance. Brainspotting has become a useful self-help tool. I use a favorite BioLateral tape and brief BSP process to relax and troubleshoot small problem situations that arise in daily living.

BSP has improved my self-regulation ability and taught me important lessons:

- My mind-body-spirit is a safe, fascinating, and resourceful Being that is naturally "hard wired for healing and wellness."
- I can change my own experience of distress at any time.
- I've reframed and transformed the moods that once resembled Bipolar Disorder. I can stop and change my feelings. Brainspotting a stressor allows me to take control and replace the reactivity with a relaxed mindfulness. My response to situations is reasonable, rather than at risk for escalating into extreme symptoms.

The process of becoming a whole, integrated person has been a lengthy, worthwhile journey. I am far more authentic, resilient and optimistic. Integration released fresh energy for living. And now I have a seamless access to the strengths and gifts of my former parts of self.

This sense of wellness is the ultimate antidote to mental illness and suicidal thinking. I have the capacity to call on deep joy in the present moment, leading to a very real and natural motivation to live a long, full healthy life. As a result, I've been able to quit smoking, lose significant weight and gain control over diabetes.

I call this overall state of being Post-Trauma Wellness.

Conclusion

In retrospect, I can see how BSP helped when talk therapy's usefulness had ended. A cognitive-behavioral approach usually demands processing information from the outside-in. This often felt overwhelming to my already flooded, over-stimulated system. As a trauma survivor, too much was already happening inside. Being expected to follow a specific mental or behavioral process, or describe experiences for which there were no words, simply did not relieve my distress in the same way as the BSP treatment.

At one time I believed the people who told me I was beyond repair. Now I believe in myself, because I have succeeded in ending the cycle of chronic mental and physical illness to become a happy, healthy and contributing member of society.

I believe that the reason I was given diverse diagnoses is because trauma can cause a lot of different symptoms of mental illness. The mental health system is dedicated to helping people who are living with the suffering created by unresolved trauma. Traditional talk therapy and medication treatment may assist and support recovery, but neurophysiological approaches such as Brainspotting further extend treatment boundaries into the realm of wellness.

I hope that researchers and providers will explore the potential for positive outcomes offered by the discovery of the brainspot and the promising practice called Brainspotting. This new path could lead from a restrictive disease orientation to full competence in helping trauma survivors to find the wellness that waits within them.

Notes

About the Therapeutic Methods - Each person's trauma history and coping mechanisms, along with the relationship between client and therapist, are unique. Therefore, the insights about methods that this author and her psychotherapist utilized in the course of therapy are intended to inspire hope and spark discussion, not to prescribe a specific process that will predict outcomes in every case. Trauma survivors are encouraged to carefully choose helping professionals that believe in their capacity for wellness, and take an active role as a treatment collaborator and expert in their own healing process. This article is not an endorsement of all practitioners who have received training in Brainspotting.

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About the Author - Katherine F.H. Heart, M.Ed. is a Writer, Health Educator and Grants Consultant. She is the author of ***TELLINGS: From Wound to Wellspring*** (Outskirts Press, 2008) about her healing journey prior to Brainspotting. Katherine's social enterprise company, HEART Resources, LLC, has raised millions of dollars in grant funding for innovative solutions to challenging community health and mental health problems. She speaks on healing dissociation and trauma at therapist training workshops. Look for her upcoming book, ***A JOURNEY TO JOY: Healing Dissociation and Finding Integration with Brainspotting*** and her blog "On the Path" at www.post-traumawellness.com.