

Life, Death, Loss and Double Binds

Definitions and Protocols

by

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Modules six and seven of the training are now called: Life, Death, Loss, and Double Binds. Module six is devoted to exploring ancestral and twin dynamics and ART (Assisted Reproductive Technology). Module seven is designed to explore abortion dynamics, NICU experience, adoption, and the death of a parent or baby. The common thread through all of these experiences is that each of these situations creates double bind dynamics for the parents and the surviving babies. These situations leave imprints that weave double bind dynamics right into the core of the emerging being.

The subject areas are very broad. However, during these two modules we will be looking at what these subjects, which together form a substantial area of human experience, have in common. We will also be looking at effective approaches for sitting with families and in Womb Surround Process Workshops when the dynamics of life, death, loss, and double binds arise.

It is my observation that pre and peri-natal work brings to the forefront double bind dynamics. It seems that the more we delve into PPN imprinting the more double bind dynamics show up. I have observed in my decades of experience that in order to do our best job facilitating families and process workshops, it is necessary to understand double bind dynamics and have strong protocols to facilitate situations when these dynamics occur.

Several personal questions are pertinent for exploration regarding early imprinting in this module. Facing these questions provide the personal internal strength and fortitude to sit with others who are living in the affect of these dilemmas. The questions are:

1. What happened before life, before conception?
2. What are the primary ancestral influences that affect us in present time?
3. What unresolved losses and grief do we carry?
4. How have we survived the pain of the losses we've experienced?
5. How are these losses affecting us today?
6. What are effective ways to re-pattern and resolve the effects of these losses so that we are able to be more effective in our lives and our therapeutic work?

There are also several subject areas that consistently show up in the BEBA family work and in Womb Surround Workshops. These subject areas are:

1. Adverse ancestral imprinting
2. Violence during conception
3. Assisted Reproductive Technology (ART)
4. Violence during discovery

5. Abortion and abortion ideation
6. Adoption
7. Twin dynamics, twin loss or lost twin syndrome
8. Death, loss of parents, primary caregivers, siblings, or grandparents early in life. Or for parents, the loss of a baby during pregnancy, a still birth, or loss of a child.
9. NICU experiences
10. Near death experiences
11. Breech birth

Following will be a discussion of definitions of double binds and the origin of the phrase, "double bind."

It is a great help to me when discussing double bind dynamics to consider the individual layer, the relationship layers within the family system, and the group dynamic layers. So as you read, pay attention to which layer the discussion is addressing.

Double Bind Definitions

This paper contains traditional definitions of "double bind" followed by my definition and an approach that I developed designed to decompress double binds.

The first definition is from PRINCIPIA CYBERNETICA WEB
(http://pespmc1.vub.ac.be/ASC/DOUBLE_BIND.html)

DOUBLE BIND

A paradoxical interpersonal relationship involving (1) two or more individuals in an intense relationship, e.g., in family life, captivity, love, loyalty, (2) the communication of a statement that is manifestly contradictory to what it says, e.g., an order to disobey the order, a punishment that is assertedly done for love (see paradox), and (3) the inability of the addressee of the statement to step out of the relationship with the significant other, the inability to META communicate or to withdraw from the situation. The effect of a double bind is that the addressee cannot decide what is real and may develop pathologies. (Krippendorff)

Bateson coined the term double bind. In his work in *Steps To an Ecology of Mind - 'Toward a Theory of Schizophrenia'* - P.206-208. [ISBN 0226039056](#). Bateson describes the necessary ingredients for double binds as follows. I quote:

1. Two or more persons. Of these, we designate one, for purposes of our definition, as the "victim."
2. Repeated experience. We assume that the double bind is a recurrent theme in the experience of the victim. Our hypothesis does not invoke a single traumatic experience, but such repeated experience that the double bind structure comes to be a habitual expectation.
3. *A primary negative injunction.* This may have either of two forms:
 - "Do not do so and so, or I will punish you," or
 - "If you do not do so and so, I will punish you."

Here we select a context of learning based on avoidance of punishment rather than a context of reward seeking. There is perhaps no formal reason for this selection. We assume that the punishment may be either the withdrawal of love or the expression of hate or anger - or most devastating - the kind of abandonment that results from the parent's expression of extreme helplessness.

4. *A secondary injunction conflicting with the first at a more abstract level, and like the first enforced by punishments or signals which threaten survival.* This secondary injunction is more difficult to describe than the primary for two reasons. First, the secondary injunction is commonly communicated to the child by nonverbal means. Posture, gesture, tone of voice, meaningful action, and the implications concealed in verbal comment may all be used to convey this more abstract message. Second, the secondary injunction may impinge upon any element of the primary prohibition. Verbalization of the secondary injunction may, therefore, include a wide variety of forms; for example, "Do not see this as punishment"; "Do not see me as the punishing agent"; "Do not submit to my prohibitions"; "Do not think of what you must not do"; "Do not question my love of which the primary prohibition is (or is not) an example"; and so on. Other examples become possible when the double bind is inflicted not by one individual but by two. For example, one parent may negate at a more abstract level the injunctions of the other.

5. *A tertiary negative injunction prohibiting the victim from escaping from the field.* In a formal sense it is perhaps unnecessary to list this injunction as a separate item since the reinforcement at the other two levels involves a threat to survival, and if the double binds are imposed during infancy, escape is naturally impossible. However, it seems that in some cases the escape from the field is made impossible by certain devices which are not purely negative, e.g., capricious promises of love, and the like.

6. Finally, the complete set of ingredients is no longer necessary when the victim has learned to perceive his universe in double bind patterns. Almost any part of a double bind sequence may then be sufficient to precipitate panic or rage. (End of quote by Batson)

Following are my comments on the double bind definitions above:

I have included the above definitions and the discussion of Bateson's work so that you have an appreciation of how the term "double bind" is currently being used in the professional world. Following are the criteria that I use to define and evaluate double binds in family systems and Womb Surround Workshops. There are a few different scenarios in which double binds tend to consistently appear.

- Double binds occur when two or more conflicting feelings occur at the same time.
- Double binds are usually created by life / death situations that appear to have more than one possible direction that one can take, but the outcome of each possible

direction appears to be a loss. The perceived outcome or the different possibilities appear to be a no-win situation.

- Double binds can also occur when something happens against one's will.

Here are four examples of double binds:

- Lost twin experience. With twins who are dedicated to staying together, the twins' statements would be: "If I live, you die." "If I die, you live." "I would gladly die for you to live." They love each other but there is not enough for both of them. If one gets his or her way, the other loses his or her way.
- Full term twin experience: Often there are external circumstances that keep both twins from thriving and cause them to compete with each other for resources. The twins can want to support each other, yet, when faced with survival needs, are forced to compete with each other. This competition creates a continual double bind for the twins because neither can have their needs fully met. If they do have their needs met, it appears that their needs are met at the expense of the other.
- Thoughts of abortion on the part of parents or abortion attempts cause double binds. The prenaté is doing everything he or she can to stay alive and experiences the people who are supposed to raise and nurture him attempting to eliminate him. This creates a double bind for the child because one is supposed to love one's parents. The child feels toward his or her parents, "I love you. But why do I feel so much fear and rage around you?" Feelings of terror, betrayal, rage, and shame are amplified.
- Sometimes a preconception being does not want to be conceived or a prenaté does not want to be born, yet it is his destiny to come into this life. The double bind is that he does not want to come, yet he has to. This sets up a double bind of wills that can show up as a conflict between what the parent wants and what the child wants. As the child grows up, these conflicts can show up as power struggles between the parents and child.

Double binds can be coupled with feelings of desperation, panic, terror, strong aggression, and betrayal. Double bind imprints have components from the whole stress matrix (see my stress matrix paper). Some people will fight. Some will dig in, hold a position, and not move with tremendous strength. Some will take flight. Some will collapse. Others will freeze. In any case double bind imprints are created by situations and experiences that at some point put the person into shock. To facilitate individuals, families or groups with double bind in their histories we must acknowledge that "shock" is part of the history. Double binds and "shock" imprinting go together.

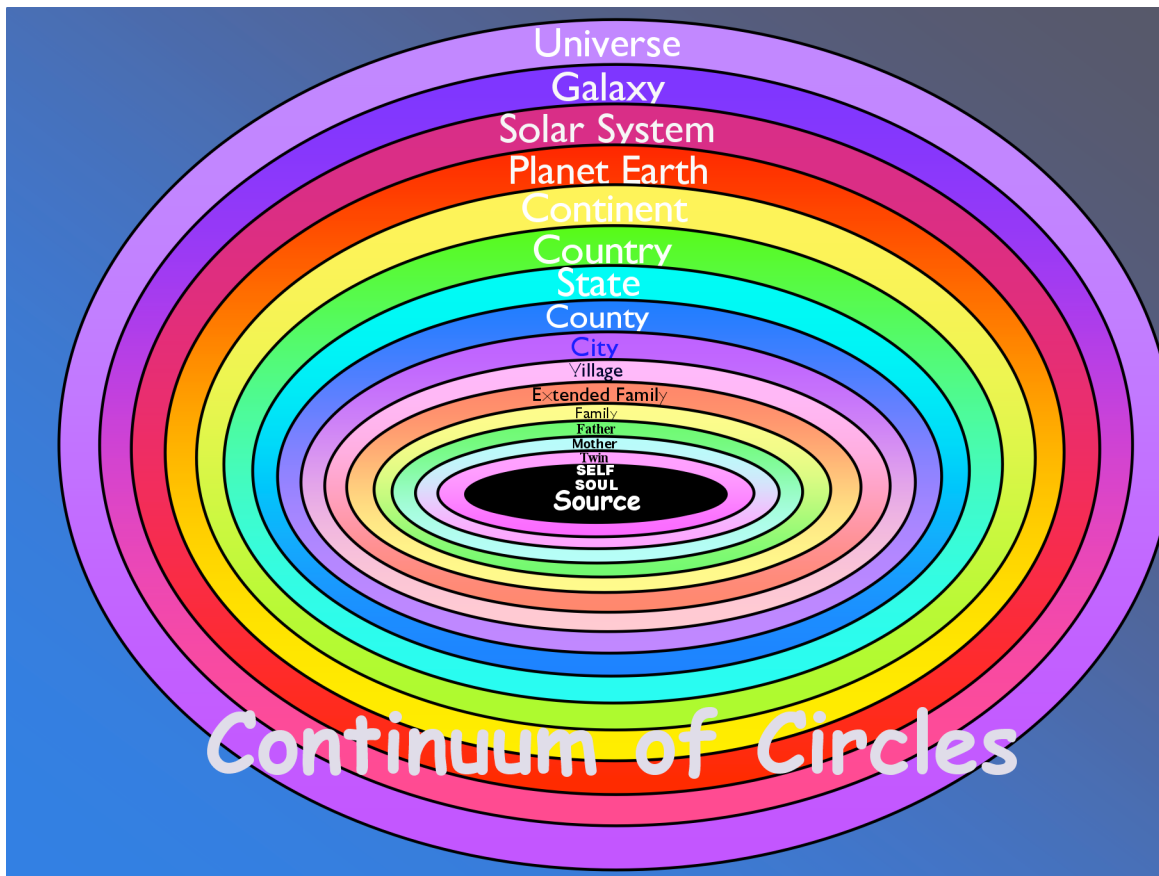
Double binds can show up when a person is telling a portion of his or her life story. Sometimes the telling of the story is enough to recapitulate the debilitating effects of the double bind and shock imprinting. The effects can show up both in the teller person, in the surround, in the facilitator and the assistant team.

The Continuum of Circles

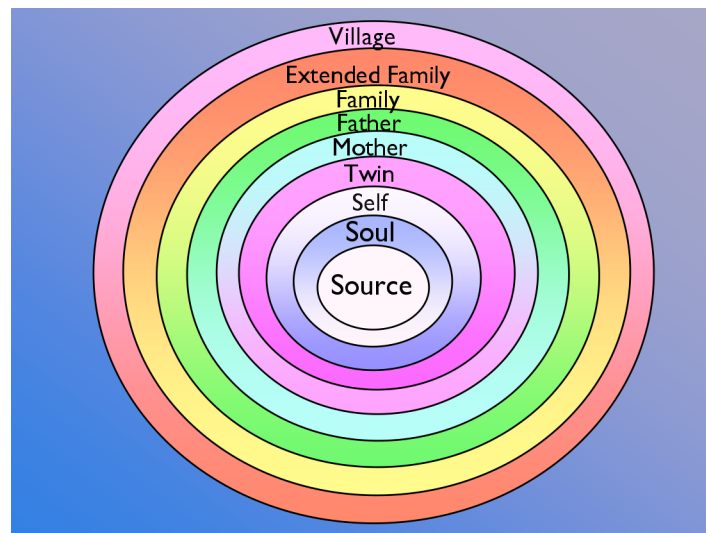
It is at this point in the training that a major conceptual element of this training comes full circle. In Module 1 the Continuum of Circles was introduced. The Continuum of Circles

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is a key tool for assessing double bind dynamics, and the inherent personal and collective resources within any given individual, family or group. First consider the concept. Look at the two diagrams below. The first shows the continuum from the Source to the Universe. See that each circle defines a layer of relationship from the most internal aspect of one's being to the Universe. The continuum progresses in steps from the inside to the outside.



The next diagram displays the Continuum from the Source to the Village. It is primarily this set that I use when assessing and facilitating individuals, families and groups with double bind dynamics.

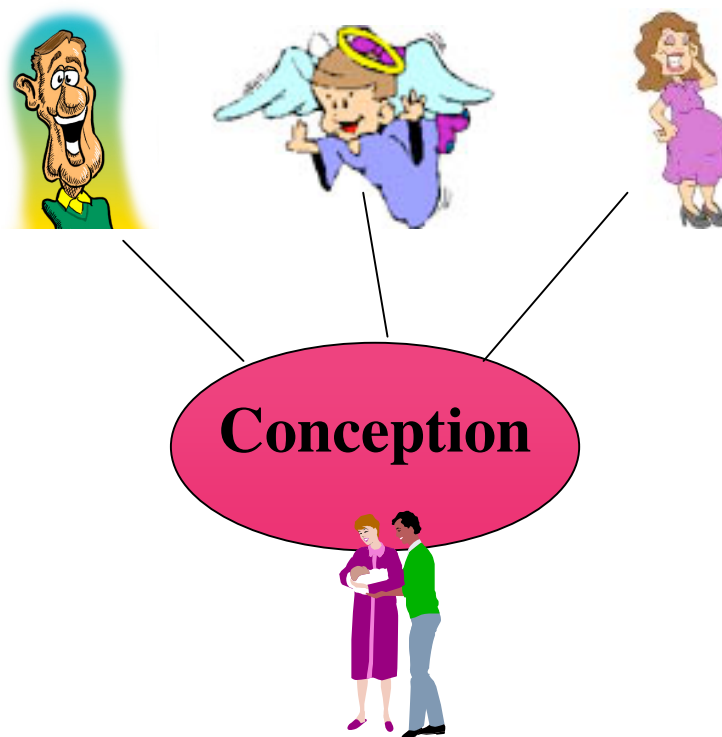


When you read the double bind protocol below you will see how I use the Continuum of Circles to assess and facilitate individuals, families and groups with complicated double bind and shock imprinting.

Ancestral imprinting

In the exploration of my own personal work and history I found that attention and differentiation work with my ancestral roots was essential for me to do my best job facilitating others with double bind dynamics. It appears that ancestral imprinting provides primary layers for internalized double bind dynamics. Without sufficient understanding of these imprint layers in myself, tracking double bind dynamics in individuals, families, or small groups is greatly hindered.

When thinking about the preconception and conception journey there are three historical lines that I consider: The father and his ancestors; the mother and her ancestors; and the incoming consciousness. The ancestral lines coalesce and compress during the conception journey with the incoming consciousness. This is a lot of information for the incoming consciousness to integrate. In my experience the conception journey itself is a shock for most people. I have done hundreds of sessions that focus on ancestral imprinting. I have never facilitated an ancestral session that did not include shock and double bind dynamics as part of the imprint.



Following is the Castellino multilayer double bind protocols designed to help facilitate, decompress and re-pattern imprinting from double binds for individuals, families and small groups.

Double bind protocols

Since 1990 I have been working diligently to create individual and group structures to support safety when working people who have strong double bind imprints in their history. At first I began by looking at double bind issues on an individual basis and how to best facilitate in a dyad, one to one basis; that is, one therapist and one client. Then I began looking at these imprints in relationship to group and family system dynamics. I found over and over again the most challenging situations in process workshops are when the turn person presents with a history that is layered with double binds. These participants often grew up in families that actually needed major interventions just to secure the physical safety of the children. This occurs when there is pathology in the family system including ritual abuse, sexual abuse, parent drug and alcohol use, physical beating, and abusive neglect. These histories can be complicated by abortion attempts and abortion ideation. They can also be complicated by medical interventions, death of significant others and near death experiences.

I have puzzled with what happens in process workshop group dynamics when double binds present. The four most challenging types of situations that I have experienced are:

1. When the turn person expects a specific outcome and is not capable of any level of satisfaction unless those conditions are met.
2. I, as the facilitator, get so lost in my own counter-transference issues around the double binds that are presenting within the group dynamics that I lose my power to hold the integrity of the group.

3. The support surround identifies into the double bind dynamics presented by the turn person, and begins to collapse and implode on itself during the session.
4. A participant in the group becomes oppositional and non-cooperative.

To effectively work with each of these situations, five protocols and strategies are extremely useful:

1. Double bind protocol for the turn person.
2. Double bind protocol for the facilitator.
3. Double bind protocol for the group.
4. A protocol for working with oppositional, non-cooperative participants.
5. A protocol for repair.

The double bind protocols have developed in three distinct stages. 1st was with the turn person, 2nd with myself as the facilitator, 3rd with the surround. The oppositional and repair protocols are steps that I have done for many years and articulated during an advanced training for foundation training graduates in 2005. The turn person protocol works well in the single client practice. The turn person plus the facilitator protocol works well in family and small group settings. In addition, I developed a protocol for how to work with participants when they become oppositional. Lastly, if something happens that requires repair, a structure within which for the repair can happen is very useful. Each of these protocols is necessary to more fully support families and process workshops with double bind dynamics.

While working with individual clients early on in the 1970s, I found that it was very important to support a client's resources and especially his or her survival strategies. During those years I was primarily working as a practitioner one on one. It was during this period that I discovered and developed the turn person protocol.

As I learned more about double bind dynamics in family systems and group dynamics, I found that the tension field in the groups was extremely dissonant on many layers. During my earlier trainings, when these dynamics appeared in the group the conflict energy seems to line up in thirds. One third of the group wanted to continue with the activity, another third of the group wanted to modify the activity and the last third was apparently neutral. This left two large fractions of the group in opposition with me as the facilitator attempting to integrate the conflicting energy. It became apparent I was incapable of integrating the conflicting factions. The layers were so stacked and complicated I easily became overwhelmed. When these conditions arose, I as the facilitator invariably found that no matter how good and well grounded my facilitation skills were, I consistently missed something important. As a result, it became very clear to me that I needed a protocol for myself as the facilitator, hence the facilitator protocol.

Double bind dynamics in family systems are tragically common. In every Womb Surround Workshop there is at least one person and often more who have histories layered with double binds. The multiple layers of double binds occurred in the form of abuse in the turn person's family system of origin. Sometimes outside intervention was needed to protect the children and insure the children's health and welfare. These dynamics appeared consistent with pathology in the family system of the turn person as well. When these dynamics were present in process workshops there was often more than one person in the workshop surround who did not have the personal skills to stay

resourced. This sometimes meant that the surround itself would implode and collapse. For this reason I had to develop the surround double bind protocol.

The oppositional and repair protocols evolved naturally as double bind situations arose with in the group dynamics. In 2005 I presented the oppositional and repair protocols in advanced workshops, and now I include them as part of this chapter. There are two circumstances that require the oppositional and repair protocols. They are when a participant becomes non-cooperative and oppositional, and when, as facilitators, we may offend a participant or do something that inadvertently triggers a participant's betrayal imprints.

Individual client or turn person double bind protocol

The following began as an 11-point protocol that I wrote in the early 1990s. This protocol is excellent when working in dyads with a single facilitator and single client, and is also very useful for group settings. There are two more historical developments that I have added to this protocol making it a 13 point protocol that help broaden its use for group work especially in process workshops.

1. Name that there is a double bind happening.
2. Slow the tempo down or find the tempo that the client can most readily orient and resource themselves.
3. Identify and name the components of the double bind.
4. Differentiate the components. Show how the parts are different.
5. Make lots of space for decompression. Remember that these situations are usually recapitulations from the past and are likely imprinted from life/death or no-win situations.
6. Take one part at a time. If the situation requires an action, discuss what the action step might be. Do not take the action step before the other parts are discussed and the action step options are stated.
7. If more than one person is involved, point out to each person his or her own different or similar survival needs.
8. Support the survival needs of the turn person or client. Survival compensation habits always remain an option. Never attempt to get rid of survival patterns. The goal of the therapy is to increase the choices for any given situation. Usually in the present day situation the survival mechanisms are no longer viable choices but the person keeps using the survival compensations that helped them survive his/her early traumatic experiences. Support the turn person or client to develop new more functional choices for his/her present life.
9. Differentiate the past from the present. Discover and show how the double bind pattern existed in the client's family system before he was born. Usually the double bind existed in the parents' generation or even earlier ancestors, or came from medical situations. Have the client name the people from the earlier generations. Support each person to realize that they are not the people who were in the original life/death double bind situation. Note how the client identified with his or her parents or ancestors.
10. If the client is projecting onto others in the group or family, ask the client to identify whom the other person represents. If in a group situation, have group members name whom they are identifying with. Remember that these projections are imprints from early shock experiences or trans-marginal stress. The degree to

- which the client holds onto the projection directly correlates with the degree the client is wounded. This usually requires tremendous compassion and very strong boundaries from the practitioner.
11. When the charged energy begins to settle, ask the client to feel the sensations in his or her body. Where is the settling sensation? What qualities does that sensation have? Stay with this long enough for the client to anchor these sensations with his or her memory of the imprint. Find sensations that are settling and resourcing for the client.
 12. Remember that the prenaté and infant and young child is not differentiated from his/her mother. The prenaté's and infant's experience is the mother's experience plus his/her own experience. The embryologist Jaap van der Wal noted that the mother's body is the outer body of the prenaté. The prenatal imprint does not change. The "little one" is always identified with the mother's experience. The "little one" says, "I am my experience." The prenatal self is not differentiated from his/her experience. Do not attempt to change the experience of the little one. The goal of the therapy is to increase choices and more functional options. If you attempt to get rid of the symptoms that are coupled with prenatal experience, the prenatal self will read that as someone attempting to get rid of them.
 13. Have the client take his or her "little one" along. Do not leave behind the little one who experienced the original double bind.

Facilitator double bind protocol

The facilitator protocol is for the facilitator. I designed it for me. This protocol came out of the need to give myself permission to do my best and be human with overwhelming circumstances. The key ingredient for the facilitator protocol is support and listening to the others' perspectives. I am not able to perceive all of the layers at the same time.

1. Sit with the double bind tension field in the energy. Feel it. It is not comfortable. Build the muscle of sitting with the tension field. Realize that it takes time to perceive the layers and decompress them. Do not go to solution too soon. If you attempt to reduce the tension field too soon you will often create a solution that will ultimately fail because my immediate solution will only address the layers that you can perceive.
2. If the tension field feels overwhelming to you, name this immediately. Learn ways to translate your own counter-transference into useful interventions that support you, the surround, and the turn person.
3. Give yourself permission to miss key information or layers. When double bind dynamics show up in the group there is likely to be a point in time when the facilitator will miss something of consequence. Often the facilitator may very well not perceive that he or she missed something.

This step gives me, as the facilitator great relief. It allows me to be human and to do my best without excessive expectations on myself. It allows me to actually settle and expand my perception of the dynamics and the situation. If I miss something, the situation may require repair. I will say more about the repair process in the group double bind protocol.

4. Listen to your assistants. Receive the support of your assistants.

In my experience my assistants are often aware of the missing layers. I instruct my assistants to name their experience of double binds when they perceive them happening. At first this was very strange for me because in my perception I was fine. Actually I was not aware that I was missing something. My assistants at my instruction take a pause and make an “I” statement of their experience. My job is to listen to them and to incorporate their perception even though I do not perceive what they see. I expect my assistants to speak up even when it appears that they are disagreeing with me. What I have found is that when this is so the assistants and I are usually perceiving different layers of the coex system.

5. Pay attention to where, what or with whom you are identifying with.

I need to know where I am placing my identification. Where I place my identification shapes my perception. Know that you have choices here. You can chose where you place your attention and with whom you identify. I am differentiating here between two different kinds of identification. One has to do with where in the space you are placing your attention. Often I find that I am identifying with the quality of the energy of that particular space.

The other form of identification has to do with whom you are identifying. Commonly people identify with the turn person, the child, the mother, father, or grand parents.

6. Get up and move around. Move to check your perception in different parts of the room. If you stay in one place in the room you perceive from that perspective. Move and change your position in the room to see if your perception changes. This helps broaden your perspective and helps you better understand the dynamics of the situation.
7. When the session is complete, debrief the situation with your assistants and/or your supervisor. This is an essential step to understand your own counter transferences in the situation. During the debriefing make sure that each assistant examines his/her own counter transferences as well. A healthy debriefing process will not only reduce the tension field for you and your assistants, but the next time you will see if the tension field in the group or family you are working with is reduced also. I consistently find that when I do work on my own counter-transferences the tension field with the group or family I am working with also reduces.
8. Have immediate access to support. This can be by phone or with able assistants.
9. Have access to follow up supervision with a supervisor who understands and has experience with coaching practitioners with double binds.

Group double bind protocol

Facilitating small groups in this form requires special attention to the womb surround. It is essential to realize that double bind imprints came from circumstances beyond the control of the prenat or infant. These imprints were caused by circumstances that the

prenate or infant was powerless to change. The child never caused the problem that set up the double bind. These are the kinds of dilemmas that a person can go to therapy for, for years and years and never change the sensations associated with the imprint. In fact if the client or turn person attempts to rid themselves of associated ANS symptoms they run a good chance of actually amplifying the symptoms. This is because the young part of the person who had the traumatic experience is identified with the experience. The prenatal or infant consciousness is identified with the traumatic experience as him/her self even though they are decades older in the present time. Therefore, the turn person will not be able to solve these double bind dilemmas or actively re-pattern them by themselves. It will take the participation of others to do this. The womb surround is an ideal body for actively addressing these double bind issues. It will take the womb surrounds active participation to support re-patterning for the turn person. When the womb surround members begin to identify with the turn person's family history and begin to experience feelings about the turn person's early life, the womb surround becomes primed to support the turn person to explore new possibilities and resilient sensations with regards to the early double bind sensations, beliefs, and survival mechanisms.

In preparation for the process workshop make sure that the participants fill out their history forms. Know the histories of the group participants. Make sure that you pre-read the application forms for the Womb Surround Workshop.

Understand how the Continuum of Circles is used as a tool for evaluating the turn person's family system and the resources in the womb surround. Remember that the Continuum of Circles outlines layers of relationships from the source to the Universe.

When the turn person has abuse from his/her family, you can see on the continuum that the children were at risk to abuse. This will mean that to secure the safety of the children in that family, support and interventions needed to come from the extended family, village, or a larger circle of influence, the village or the greater community. A larger circle of influence beyond the family was needed to intervene to stop the abuse of the turn person. The key to maintain the resources in the surround will rest in how you prepared the surround ahead of time and what you do when the situation arises in the group. The surround must be prepared and willing to take pauses. And, the surround needs to understand that they will not be able to provide the support the turn person needed when they were a prenat, newborn, or child. If the surround members expect themselves to handle the situation, it will cause overwhelm in them. As facilitators we will literally call up the quality of the energy that it actually takes on the part of the greater community to bring safety to the turn person as the child in the dysfunctional family.

Here are the steps that I routinely take to work with the turn person and the group to create the foundation for re-patterning in these situations:

1. Assess the ability of the members of the support surround to hold the container. This will vary from group to group. Occasionally there is a group of professional psychologists, social workers, and medical people who have direct experience doing interventions on families. These people can be very capable to sit in the presence of very complex histories and conflicting tension patterns, stay resourced, and not take what is happening personally. However, in any given group it is likely for there to be one or several people in the surround who readily

- identify with the turn person's child self. These surround members can then easily lose their ability to hold their adult perspective and the surround containment. If you as facilitator have the slightest indication that there are surround members who can easily become overwhelmed either by listening to the turn person's history or by the tension field in the energy, then name it immediately.
2. Name the abuse pattern and the tension in the energy field immediately. Be proactive. Do not wait until the surround shows signs of stress. Name that the turn person has already lived through this. Name that the situation is overwhelming. State that if the womb surround members continue to identify with that family system they will reproduce the dysfunction of that family. Discuss what was needed to be done with the turn person's family and the turn person when they were a child to make sure that the children were safe. Find out if anyone in the womb surround has actually taken those actions. For example: They have organized a family crisis intervention. Called the child protective agency and made sure that the children were safe. They have taken children into their family to protect them. They have protected their own children.
 3. Coach the surround members to resource themselves, to make contact with others in the group and especially to think about what they would want to give to the turn person that he/she was not given, and/or what the surround members were not given themselves. Support the surround to identify with what they actually want to give the turn person today. This situation is similar to what every parent who wants to improve their family's condition as compared to their family of origin must do. They must give their children something that they were not given themselves. Have the surround members think about what they would personally want to give the turn person when they were little. (I will make use of this in step 5 below.) **Support the surround members to be their present age. What would the surround members do now at their present age with their present skills.**
 4. Set up protective exercises. Remember the protection exercise from Module Two. This is a creative process. A pattern that I often follow is to negotiate with the turn person to take his or her hand and walk around the room. Often, I will have a co-facilitator or female assistant hold their other hand. This sets up a protective healthy daddy-mommy support system for the turn person. Many times it has been the case that the turn person never experienced their mother and father do something as simple as walk with them holding his/her hands. I tell the turn person to just walk where they feel like going.

I invite the surround to walk around at the same time. I have the surround members make contact with each other and connect with each other in a way that supports their felt sense of resources.

The turn person will most often walk outside of the established seating area for the surround. This is a very important thing to do because when they were little abuse came from within the family circle. They had to go outside of their family circle to find support and protection. I am remembering a Womb Surround Workshop that I completed where five of the seven sessions ended up outside the established seating area of the surround. The primary theme in that workshop was double binds due to overwhelming abuse.

5. Pay attention to the energy in the group. When the energy shifts to a resourceful state and you sense the potency building, coach the surround members to come together as a group. Have the surround members talk with each other about what they would each want to do for the turn person when he/she was little. When this step happens, the turn person and I usually watch what the surround members are doing from outside of the circle. The turn person stays on the level of the Continuum of Circles where they perceive safety.
6. At this point, pay attention to the group and the turn person. Talk with the turn person. The turn person will guide you to the next steps. Do not anticipate these steps. The turn person will negotiate their way back into the group or not. In one workshop the turn person stayed outside the circle behind a couch with my co-facilitator, Mary Jackson. I acted as a liaison between the turn person and the group. The turn person requested that members of the surround visit her one by one as if she were a new baby in a healthy family. In this case the surround members went to the turn person as if they were meeting her for the very first time. The surround members followed the principles of contact by negotiating and titrating their contact with the turn person. In this session, like a new baby, the turn person discovered that they could only have four of the seven participants visit her. This was an amazing re-patterning for her as she was supported to have realistic boundaries that supported her to integrate her experience from moment to moment.
7. Remember the wounded prenatate or child. During the re-patterning phase of the session it is essential to remember the wounded little one. Do not forget the little one who experienced the trauma of the double binds. If this is not done it encourages the turn person to create a new split in his/her psyche. The intention of the work is to integrate the energy of the double bind layers with each other and to build new sensate options into the turn person's range of choices. Before when the trauma memories were triggered the only option available to them was to be overwhelmed by the sensations stored in their implicit somatic memory systems. He/she did not have the capability to realize a host of different options available in the present moment. Remembering the wounded prenatate or child while the turn person is experiencing the sensations of a healthy womb surround serves to integrate the wounded little one.
8. Repair: If for some reason the situation does not resolve, it may be that as the facilitator I missed something in the process, and the turn person's or a surround member has his/her feelings hurt from something that I said or did requires repair. See the repair protocol below.

Prior to initiating the Group Double Bind Protocol I found that double bind situations came to light right when it seemed that the session was coming to a close. For a very long time I thought that this was the nature of double bind dynamics. But, what I've found is that in the family and group work double binds require some form of proactive intervention. In this work the intervention very often is naming the dynamic as soon as I become aware of it and to look at what was actually needed when the turn person was a prenatate, infant or child.

Confusion is a component that often occurs for the turn person, members of the surround, or the facilitator during sessions with double bind dynamics. When someone is confused, or states they are confused, my response includes the following statement: Confusion

means that there is more than one thing going on at the same time. Confusion is a common consequence from over compressed coex systems. To effectively work with confusion, find out what the components of the confusion are. What are the different layers in the confusion? As you discover the layers, simply take them one layer at a time. I have the person name the layers that they are aware of and then ask the person presenting the confusion to take them one layer at a time. Support the person to integrate each layer one at a time. The very process of doing this automatically decompresses the layers, supports differentiation of the layers, and promotes integrated healing.

A classic twin double bind stems from the early co-identification of the twins early in gestation. The twins are identified with each other. They are undifferentiated. The twin statement is, "I am my brother. I am my sister." In lost twin dynamics when one twin dies the imprint that is left leaves the surviving twin confused. "My brother/sister died. I am my brother. I died." The resulting confusion in the surviving twins feeling states and mistaken belief systems are complicated. To unravel this confusion I simply state that there is confusion. I define that confusion means that there is more than one thing going on at the same time. The surviving twin turn person states that they feel alive and dead at the same time. I suggest that we just consider one aspect of this dilemma at a time. I give them the choice of which they will consider first. It doesn't matter to me which part they choose first. The answer to the over compression is to decompress the system. Whether they choose the feeling of or of death first, either choice takes them to the place where one lived and one died. Finding the rhythm that supports the integration of this information can be life changing for the surviving twin. They report increased ability to set boundaries, less of a tendency to merge in others and loose their identity in relationship, more ability to differentiate themselves with others and more capability to form healthy relationships with clear boundaries.

In the Facilitator Double Bind Protocol a key component is facilitator support. When I facilitate by myself, members of the womb surround can often be concerned for my wellbeing. This can be similar to the prenat working to take of their mother. Prenates can often get very still when their mothers are feeling overwhelmed. When adults visit this prenatal place in womb surround sessions they often discover that they go very still so as not to overwhelm their mother any more than she already is. When this is the case, I name my support system to the group. I tell the group that I have immediate access to professional support by phone, plus I've got Sandra (my wife) available to me. I am well cared for.

In 2005 I was assisting Mary Jackson at a presentation she was giving to the California Midwifery Association. She began to feel overwhelmed during the presentation. As a result she asked me to sit next to her and hold her hand. Since I was her assistant I did what she asked and just sat there and settled while she continued to deliver what was already a brilliant presentation. About one month later I was leading a Castellino Training Post Graduate program on double binds. Mary Jackson was one of my assistants. There was a particular point in one of the discussions where the energy and sensations of a double bind tension field rose very high in the group. My perception was that I was fine and could easily continue the presentation and discussion. Several trainees called for pauses at the same time. This was one of those places where there were several layers happening at the same time. I felt fine because I unknowingly selectively perceived just some of the layers. I was actually missing some important layers in my perception. This

increased the tension in the group energy. As I listened to the concerns of the participants who initiated pauses I remembered what Mary had done with me at the midwifery conference. So, I asked Mary to come up to the front of the room, sit next to me and hold my hand. The consequence of that gesture was miraculous. The tension energy in the room immediately settled. I relaxed more. My tempo slowed and my perception expanded all at the same time. I was able to perceive more of the layers and take in the concerns of the participants.

Overwhelm is most often thought of as a high activation state. I become overwhelmed with emotion, grief, anger, sadness, or even joy. But, one of the common prenatal responses to overwhelm can be to become still, withdraw into one self. If the overwhelm persists the response can develop into a freeze or collapse. The withdrawal process dampens strong emotions and feelings. At the same time as I withdraw I am unconsciously shutting down my senses and capacity to act. The shut down can be affected in both the sensory and motor functions. In response to the overwhelming input I narrow the amount of information that I am taking in. This narrows my perception. I can temporarily hear less with my ears. With that I might find it more difficult to find my words and actually state what my needs or wants are. For me having physical contact with a person who has the capacity to settle even though I am in that state is more than useful. As facilitator, I have learned over time to enjoy receiving the support rather than feeling embarrassed by needing support in front of others.

Opposition and Creative Opposition Protocol

Translating opposition into creative opposition or non-cooperation to cooperation

In the mid 1980s I was facilitating a small workshop situation that was actually a precursor to the present Womb Surround Workshop form. There were two men in this workshop. One was a very skilled martial artist the other was his student. The martial artist teacher wanted to work on a problem that he had when he was sparing with his students. Instead of pulling his punches which meant that he would throw a punch but not make contact with the person he was sparing with, he often would extend his punch just a little further and actually strike the person he was sparing with. He actually took a kind of perverse pleasure from striking his students. His student was injured by him and made it a condition that he would not continue to study with this teacher if he didn't change his behavior.

I observed that this teacher had a tough attitude and was easily offended. During the session it became apparent that the teacher could trigger into rage very easily and began to challenge me verbally. I actually do not remember how he became triggered. But, when his anger arose, I immediately stopped the session. I acknowledged his anger and stated that I was not willing to go a step further with him if we did not establish safe ground rules that we all agreed to follow. I told him that I knew he could easily take me down, or maim or fatally injure me with a single punch. I reminded him of his intention to change his behavior and that I

would not be willing to continue working with him unless I knew he was willing to take coaching from me.

As I worked with him and learned more of his history, it became clear that as a boy, his father and older brother physically and emotionally abused him. His father would shame him and slap his face. In other situations his older brother would beat him up. In his teens he began studying martial arts. As a man he had put the abuse he received from his father and brother out of his mind. This discovery gave me tremendous appreciation and empathy for him. It was easy for me to remember being bullied when I was a boy by older kids and one time by a 7th grade physical education teacher. I shared my history with him. By this point in the session he began to settle and perceive me as being on his side. As I thought about it later it seemed that he projected a 'father' transference on to me. His oppositional behavior was actually his defense against his abusive father.

When this became clear we restated the intention for the session and clarified our roles. I was facilitating the session. It was my job to coach him. His father and brother were abusive to him. I knew what that felt like too. He should have been protected from his father's and brother's abuse by other adults. In the session it was his job to take my coaching and remember that we were in a somatic re-patterning session. In this process he realized that during sparing sessions with his students, he would forget his position as teacher and feel as if he was getting even with his father and brother. As a result of this one session, the teacher apologized to his students, and learned to differentiate from his wounded abused inner child. He stopped the inappropriate behavior with his students and became a much more effective martial arts teacher. When the session was over he was deeply grateful for the support he received.

The key is to translate the non-cooperative oppositional energy into cooperative creative opposition. Following are the basic steps that I follow when there is oppositional energy in a session:

1. Acknowledge the turn person's oppositional perception
2. Maintain your own sovereignty and acknowledge the other person's domain.
3. State your observation of what the other person wants to do and state your limitations.
4. Put yourself in the other person's skin and demonstrate empathy for their position.
5. Clarify roles. In family work answer the questions, "who is mom, who is dad?" Clarify your role and your job.
6. Hold the boundaries of the form and safety.
7. Support the child or the turn person through their resistance. Maintain your sovereignty.
8. Advocate for the person's position and align your actions with the person's intention.

9. Observe the progression into an attuned state, harmonic resonance and cooperative activity and play.
10. If the person is unwilling to adhere to the principles governing the workshop it is necessary to evaluate the person's presence in the workshop. Three times since I began facilitating Womb Surround Workshop I have asked a person to leave the workshop. Each time I held the boundaries of the principles. The participants chose to leave because they were unwilling to do their best to practice the principles and take coaching regarding how they used the principles.

Repair

Repair is often a necessary part of a person's healing. As facilitator I can miss something or make an observation or assert an assumption that is not within the turn person's perception. The turn person may feel betrayed, angry or have their feelings hurt. When this happens to me as the facilitator, I can be experiencing my own counter transference while the turn person is projecting a feeling or role on to me as part of their transference. As facilitators we are bound to do something that will trigger our clients activations and draw transference on to ourselves. These double bind protocols are designed to maximize client responsibility, facilitator clarity and minimize our own counter-transference activations and client transference onto us. Yet, when a participant is unable to differentiate his/her material from us or genuinely feels wronged by us, repair with that person is necessary. When this happens here are the steps that I follow:

1. I put my attention with my midline. Do the mother earth, father sky exercise.
2. I look at the person with my adult eyes and listen attentively to them and really take in what they are saying. I do not counter what they are saying or their perception of what happened. What they are sharing may have historical relevance from their personal history and not be personal to me. I remember that what they are saying is not personal.
3. I ask them if they perceive me taking in what they are saying.
4. If the turn person's perception is oppositional, I acknowledge his/her perception and that it is oppositional in nature. (See the Opposition Protocol above).
5. I maintain my own sovereignty in the workshop or space and I acknowledge the other person's domain. I am leading the workshop it is my job to run the workshop. The turn person is a participant. The turn person has every right to his/her feelings and they need to work cooperatively with the principles of the workshop including the principle of choice and the right to say "no" and receive support for saying, "no."
6. I name what I did.
7. I name how I perceived that I transgressed the other person.
8. I truly feel remorse for what I did. I express that remorse and apologize to the person for what I did. At first, I do all this with out referring to the person's history. When I speak to the person I hold in my consciousness the wounded pre-nate, infant, or child. I speak to the person in present time and speak to the wounded self in the other person. It is important to name what I did first before I state that I am sorry. If I rush to being sorry it actually can dilute my statement.
9. I watch to see how the energy changes and how the other person is taking in what I am sharing.

10. I thank them for taking the risk of sharing with me. If in spite of my best effort the other person does not accept my apology or does not perceive the sincerity of my remorse, I do not attempt to convince them. They have a right to their perception. I will state my intention at attempting to do repair with them.
11. Most of the time my repair efforts contribute to a major re-patterning for the person.

Conclusion

The more I work with the double bind protocols above the more I am finding that when I use the Group Double Bind Protocol and have clear support from assistants, as facilitator I am actually being more proactive. This has actually made double bind situations in groups much more easy to facilitate. The double bind energy stays much more contained to the group process and the turn person's history. As a result the need for the repair protocol has been greatly reduced.

The Individual Double Bind Protocol continues to be very useful for one on one, one client one facilitator, sessions. If I attempt to use it without the Group Double Bind Protocol in groups as I did years ago the group dynamics become much more complicated and I would get much more activated.

The Double Bind Protocols have evolved since the late 1980s. They have made it possible for me to work with a broader range of people in the Womb Surround Workshops and sustain coherent energy with myself, consistent access to my midline and my connection with the long tide.

Ray Castellino
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