#### Metaphysical Anatomy<sup>TM</sup>

# Metaphysical Anatomy Technique™

Complementary to the Metaphysical Anatomy Technique Online Healing Course

# EVETTE ROSE

Volume 2

Version 4

#### Metaphysical Anatomy<sup>TM</sup>

#### ... there is more

## Metaphysical Anatomy Technique Online Healing Course.

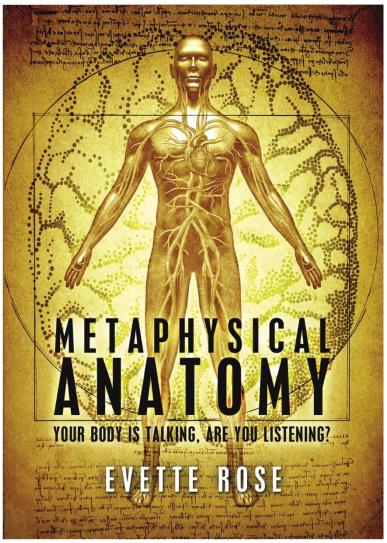
This course is designed to complement MA Volume 2 and for those interested in learning more about the Metaphysical Anatomy Technique. It is also a prerequisite if you are joining me in the live events where we will go even deeper into the structure and healing tools behind Metaphysical Anatomy! On the Online Healing Course, I will continue to update the page with more live demonstrations and extra exercises and you will be kept in the loop with new updates! www.metaphysicalanatomy.com

Metaphysical Anatomy Facebook page dedicated to Metaphysical Anatomy. The site includes updates with new medical conditions and inspirational quotes. New discoveries and new articles related to important and interesting topics will be shared. Evette will also answer questions that you might have.

Metaphysical Anatomy Forum that has been developed with the intention for subscribers who have completed the Metaphysical Anatomy Technique Online course as well as the live events to brainstorm new ideas, approaches and research that can help and support each other, whether it's for your healing / alternative practice or personal healing journey. You will also receive powerful transformational meditations designed and recorded by Evette Rose.

**ALSO**, make sure that you are subscribed to my website as I share many free healing meditations and online healing courses! Don't miss out!

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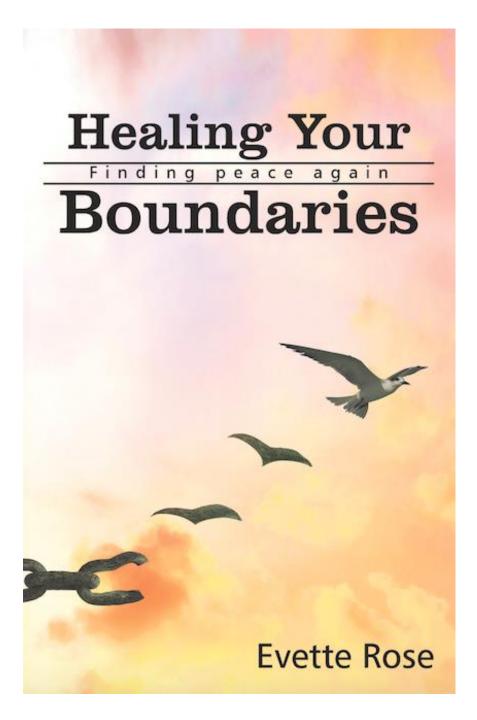


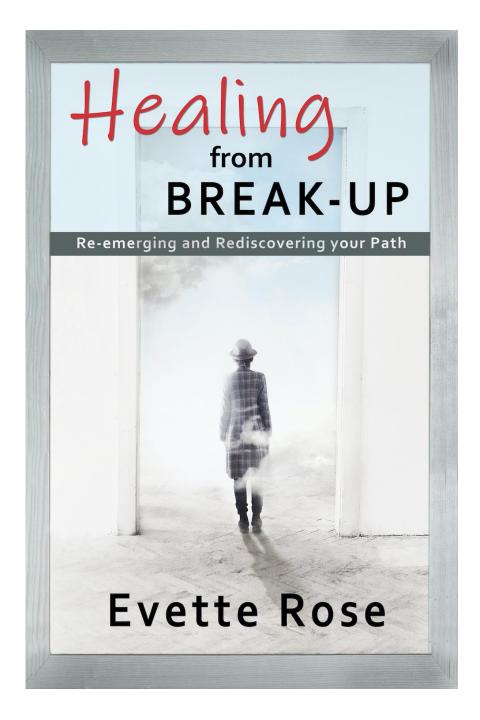
## Metaphysical Anatomy Volume 1

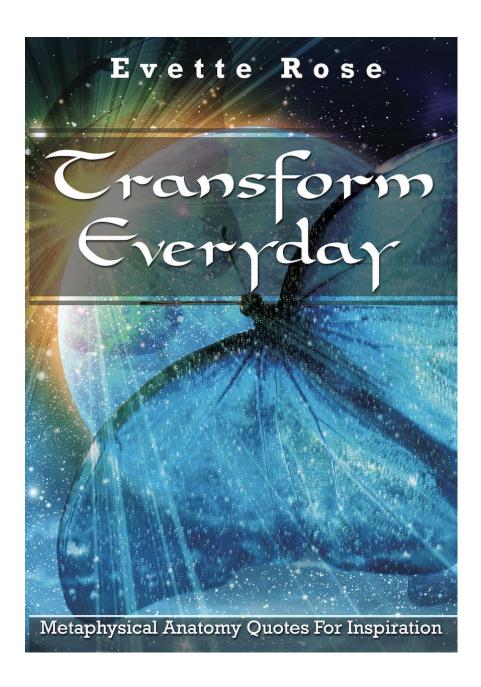
Metaphysical Anatomy includes step-by-step guide for identifying the psychosomatic pattern related to 679 medical conditions. These conditions can be activated by circumstances in your present life, your ancestry, conception, womb, birth trauma, childhood or adult life. This book complements Volume 2!

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## **ACKNOWLEDGMENTS**

Thank you to each and every client or student that I have met for your insight, support and willingness to share your life stories. I would not have been able to write this book without you!

Thank you to all my teachers and mentors who are mentioned in my book, research and studies!

> With Love, Evette Rose

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## Chapter 1: Understanding Metaphysical Anatomy™

Trauma is not what happens to us, but what we hold inside in the absence of an empathetic witness – Peter A. Levine PhD

Metaphysical Anatomy is a trauma-based personal development process that reminds you how to reconnect to your own healing ability that we are all born with. We have just forgotten how to use this amazing talent, which lies dormant in most of us. Now, you might be asking why some people are healers and others aren't. It depends on your genetic predispositions and any trauma that took place during conception (including yours and your mother's and father's), as well as birth trauma, and even events that took place in your life that can switch on or off this amazing self-healing ability.

What is important throughout this book, online course, and the live event is to be open-minded. Allow yourself to be a student, even if you've heard certain concepts before. There is immense power in simplicity! I invite you to just let go, completely let go, and enjoy the wave and new journey that you are about to embark on with me.

You'll learn new concepts, steps in healing, and how the body operates and tries to communicate to you. You'll learn how to give your mind, soul, and body a voice again so that you can reconnect with your true authentic self once again. Metaphysical Anatomy is my life's work.

I live and breathe this work every day, and I understand it inside and out. My work stems from my own research, and I have many mentors and leaders that I follow that inspired me to develop Metaphysical Anatomy, and I am a firm believer in giving credit

where it's due. There are too many healers out there who abuse the hard work of others and just stamp their name on it and own it, as if they had invested twenty years of their life in researching and developing it.

You'll see there is a reference guide in the back of the book where I give credit and thanks to every single person that I have learned from, whether I have personally met them or not.

Getting back to what I was saying earlier about healing, the key to successfully shifting an ailment and block in your life is based on your level of understanding and awareness of it—especially the reason—and secondary gain blocks that are holding it in place. The good news is that you don't have to know what the root cause is. You don't have to relive a painful memory. You don't have to focus on a singular belief tied to thousands of other beliefs that stem from one traumatic event.

What makes the Metaphysical Anatomy technique so simple yet powerful is that the language for a successful healing is emotion. Yes, that's right, plain and simple emotions. The key to remember is that it isn't just any emotion. There are certain types of emotions that we'll be looking at and why they are important throughout a healing session.

Remember that emotions are just a symptom of a traumatic event, and the memory of it is just a distant ripple effect of the event that holds it in place. You can heal the memory. However, that means that you cut off the links that it has to many other emotional charges in your body.

I'm sure you can guess the end result: you feel dissociated and stuck with emotions coming up, and you're unable to relate to where they're coming from, because emotions that weren't dealt with that were part of the memory are still triggered, but the memory and majority of the charge of it have been resolved. It's the same as healing a singular belief that was caused by a traumatic event, BUT what about the thousands of other beliefs that were also tied into that traumatic event?

A good example of this is like having an infected root in a tooth.

You can remove the tooth, clean out the infection, and have a root canal inserted, but the likelihood of the infection being

completely cleaned out and healed is much less likely, as it has spread.

You now find more symptoms such as fatigue (as the infection challenges the immune system) and a sore and swollen jaw. The initial pain of the infection is gone. However, you are now sitting with more symptoms that are bothering you, yet you don't know how to resolve the ripple effect of the root cause, as it was healed only halfway. You think there must be something else wrong, as the initial pain (in this case and example, the root cause) has been resolved. In reality, you just put a Band-Aid on a chronic sore. In this case, it will cause more symptoms down the line in different ways in the body. There is a beautiful quote that says:

"We must go down to the very foundations of life. For any merely superficial ordering of life that leaves its deepest needs unsatisfied is as ineffectual as if no attempt at order had ever been made."

—I Ching, Hexagram

Metaphysical Anatomy really is that simple. When you understand the theory and the structure behind my madness, you'll love it! It will become an important tool not just for clients but for others in your life! You'll find this healing technique amazing and powerful, especially if you're interested in self-healing. Ultimately, I don't want students and followers—I want to build and create leaders.

#### What is Trauma?

Trauma is not a disease, but rather a human experience rooted in survival instincts. - Peter A. Levine PhD

I personally believe that trauma (this could include physical, emotional, or environmental trauma) is the ultimate cause of our problems. Something happened that disrupted the natural flow of our harmonious state of mind and emotions. As human beings, we were designed to be peaceful and in harmony with one another.

If we were designed to always be stressed, anxious, and live in a world of conflict (internal or external), we wouldn't suffer from so many ailments. Yes, you might say many ailments were caused by medication, but there was a reason why medication was needed, and, again, that brings me back to what was said earlier.

What makes Metaphysical Anatomy different from other trauma therapies is that, in most cases, you don't have to ask the client (or yourself) to talk about or re-live an old trauma in order to resolve it. In fact, you can often resolve trauma easily through identifying its hidden benefit (known as secondary gain), without discussing the actual trauma and going into the details of it, which can often re-traumatize you or the client all over again.

It is important to understand the consequence of trauma and why unresolved trauma is significant to your well-being and emotional state.

Trauma occurs when you feel unsafe. The underlying cause of trauma is when you lose control, which leads to feeling uncertain. Trauma is the underlying cause for a loss of control, feeling unsafe, and all things after that are only symptoms. The person didn't utilize or have access to necessary inner resources, as they were suppressed at the time when the trauma took place.

When I refer to symptoms, I'm usually referring to the initial complaint. This is the starting point in the healing process. There are many layers to symptoms.

There is some debate about what symptoms are and what the real causes of a person's symptoms are. Each technique or modality has its own views. For example, some believe that a negative thought can be the cause of all your problems. Negative thoughts or voices are themselves caused by your response to trauma. This means that negative thoughts are merely symptoms. Resolving a singular negative thought won't resolve the underlying cause of the symptoms.

People's deepest instincts hold trauma in place, as our instincts are designed to keep us safe. However, these instincts sometimes become over-reactive when a situation is traumatic or if a stressful event is repeated enough. When a person becomes aware of and consciously acknowledges these instincts, they release suppressed,

negative feelings and disruptions to the biological function of the body.

Many of their emotional and/or physical symptoms could disappear. Though the instincts are placed deeper on the diagram (resolving over-reactive instincts could ultimately resolve trauma) this doesn't mean that instincts cause trauma. If you trace the instincts back to their very origin, you'll find the earliest trauma.

Now, when the body experiences a traumatic or very stressful event in exchange the body copes and tries to deal with the challenge in the best way possible.

Examples can include physical assault, an accident, injury, or other events, which involved a threat to a person's survival or emotional wellbeing. Witnessing harm to someone else (including seeing photos or videos that were disturbing) can also cause trauma.

Now, the significance of trauma lies in the fact that it has such a powerful role in changing lives. Your trauma can change your grandchildren's lives. For instance, childhood trauma can drastically change a person's life, influencing every aspect of their health, relationships, education, and career. The science of epigenetics demonstrates that trauma creates biological change, which can last for many generations. That means that the trauma people experience, even just witnessing it, can create physical and emotional changes in their own biological make-up that will have a ripple effect down the generations to their future grandchildren and great grandchildren.

# Trauma Can Be Passed Down To Your Children and Grandchildren

We must go down to the very foundations of life. For any merely superficial ordering of life that leaves its deepest needs unsatisfied is as ineffectual as if no attempt at order had ever been made ...

—I Ching, Hexagram #34 "The Well" (circa 2500 BC)

Yehuda et al (2016)¹ evaluated the DNA from the current generation and their parent generation on stress effect as a result of the Holocaust. The amount of cytosine methylation was measured within the gene encoding for FK506 binding protein 5 (FKBP5) in Holocaust survivors. The study chose a survivor and their adult offspring, demographically comparing each as an individual and family group, which amounted to 32, 22, 8 and 9 participants respectively.

They found out that Holocaust exposure had an effect on FKBP5 methylation present in both parents and their offspring. Methylation was higher for the parents compared to their children. The findings suggest that due to environmental influences, which were associated differently between Holocaust survivors and their children, they would react differently towards trauma. The conclusion for the study is that severe psychophysiological trauma can affect the DNA.

Another study which shares a similar hypothesis with the previous research is the Dutch Famine Case Study (n.d). It is the first direct proof that malnutrition during gestation increases the chances of contracting many diseases such as heart diseases, diabetes, airways diseases, obesity, renal disease, and cancer. In comparison with the control subjects, people born during the Dutch famine have twice as much cardiovascular disease and

<sup>1</sup> The Dutch famine birth cohort study (n.d) Retrieved from http://www.hongerwinter.nl/item.php?id=32&language=EN

Yehuda, R., Daskalakis, N., Bierer, L., Bader, H., Klengel, T., Holsboer, F., & Binder, E (2016) Retrieved from http://www.biologicalpsychiatryjournal.com/article/S0006-3223(15)00652-6/abstract

females had a five-fold hike in breast cancer risk. Early gestation is the most vulnerable period, because they had a more atherogenic plasma lipid profile, altered blood coagulation, unhealthy lifestyle choices, were easily affected by stress, and faced a doubled risk of coronary heart disease.

The women in that group also had the highest body mass index (BMI) and higher chances of getting breast cancer. They concluded that the transition from poor nutrition in early gestation to better nutrition later on may have lifelong consequences for health in later life.

In conclusion, scientists have found some connection between diseases and trauma which can be genetically passed down.

# Epigenetics is an important part of the science behind Metaphysical Anatomy.

It is, I claim, nonsense to say that it does not matter which individual man acted as the nucleus for the change. It is precisely this that makes history unpredictable into the future.

- Gregory Bateson

What matters is this: the original cause of a problem is likely to be trauma, whether it took place in your life or in a pre-existing trauma in the ancestry line that may have indirectly been activated. The great thing about Metaphysical Anatomy is that, in most cases, you don't always need to know what the origin of the trauma was. The focus in Metaphysical Anatomy is emotions!

Peter Levine said, "Trauma isn't what happens to us, but we emotionally experience and hold inside in the absence of an empathetic witness." That tells me that in the moment of trauma, the body is in shock and that momentarily there is a complete loss of control and a feeling of powerlessness.

All that the body wants and needs at that time is to reach out to a place or person for safety. You even see it in the animal kingdom; when a small buck or animal is in distress, they reach out to the mother immediately, just as humans do. Now this instinctive response to reach out for safety, especially to a family place or person, is programmed in animals, reptilians, and even fish!

What I'm saying here is that it is such a universal response that we can all relate to it in one way or another. Now, okay, I know some of you reading this might not agree, and the only reason is because you can't emotionally relate to it, especially if you didn't have that safe place or person to reach out to. So, what happens then?

You learn to cope and survive on your own by dissociating and numbing yourself to the circumstances. In my opinion, this doesn't build a strong character. Your threshold for experiencing pain and trauma just becomes stronger and stronger, which ultimately takes you further away from feeling and experiencing emotions in a healthy and safe way. This has a direct impact on the limbic system, medulla, and midbrain, which are located in the brain. We go deeper into this later in the book.

Here is a simple example—a person could experience strong feelings of threat and even abuse that trigger their hiding instinct. Due to personal boundary failures, they suppress their fighting instinct (the fighting instinct doesn't necessarily mean a physical fight; it could also mean that they have an aggressive response) and don't respond in a way to correct the event that took place. I see this as the person almost wanting to hide and become invisible to avoid experiencing trauma and abuse again.

The body is suppressing the fighting instinct, which means that the body isn't acting out on the adrenaline and cortisol that it has created in order to stay safe. This could suppress and not allow the adrenaline and other instinct-producing hormones to be released, which might even slow down their metabolism. The outcome? This person starts to gain weight, which could also start to serve them as a way of keeping them unattractive and safe.

Ailments that are brought on and triggered by events that caused emotional stress can often be more challenging to resolve. The reason for this is that there are so many emotions that can get triggered which could (if not dealt with) become a secondary gain, which would result in self-sabotage. As the body is just trying to survive by acting on instincts, it's the body's job to keep you alive. The brain, on the other hand, doesn't necessarily understand and relate to this. The brain only sees more problems, whereas the body

is trying to find solutions to deal with the stress. However, it can only do so much with the resources available to it.

The strongest need that we have is the need for safety. It even overrides the need for love, which is actually a secondary response to feeling safe. You'll only feel loved and love when you feel safe enough to do so!

Humans and almost all life forms that have an instinctive response system share the same core need, which is survival. Humans, though, have a much more complex response to the environment, relationships, and the need to survive.

# The Difference Between Trauma and Symptoms of Trauma

This is probably the biggest debate that most practitioners have with their patients, as the confusion and the fine line between the two are so incredibly foggy. So, the only thing that I'm going to explain here is my observation and experience that I have had thus far. As I explained earlier, when I refer to symptoms, I am usually referring to the initial complaint. There are many layers to symptoms. Each technique or modality has its own views on this, which is perfect, because there is an audience for everyone and people follow what they resonate with.

Remember that a symptom can only start when there is a trigger point (a stressful or traumatic event). The traumatic event is remembered and anchored into the unconscious mind and then symptoms can stem from this stressful event in the form of anxiety, depression, phobias, OCD, PTSD, paranoia, anger, rage, passive/aggressive behavior, and always being ready to defend yourself, or feeling overly vulnerable or sensitive in certain circumstances. And, the list can go on and on.

Let me use an example. Someone might have a great deal of anger, and sometimes they might have trouble controlling their outbursts.

Now, keep in mind this is a **singular example.** The root cause behind anger can have many different causes. This is just one example. This person might have had their boundaries overstepped and disrespected from a very early age and, as they mature, their

threshold for being disrespected and not having their boundaries respected will become higher and higher. However, they all have that popping point. And then, when they feel angry enough, they finally express their boundaries. And, quite often, they express it in a verbal and emotionally charged way.

What often happens is that they might associate the anger with expressing their boundaries and finally being respected and heard. I'm sure you've noticed how easy it is to say no when you're really upset and angry. The anger creates a false sense of confidence and the danger in that is that anger starts to serve the person and, from their perspective, it's a positive experience, as they finally get to express their boundaries.

Now, looking back at this example, would you say that the anger is the trauma or a symptom of the trauma? In this case, the anger is a symptom and the boundaries being overstepped and disrespected are the trauma and root cause. This can also lead to a low self-esteem, which, again, is not a trauma, it's a symptom.

So, this is an area where many people lose time during a session, as they focus on the actual symptom of the problem and not the actual root cause of it. This is discussed more in-depth at the live events.

#### The Difference Between Trauma and Emotions

This is pretty much the same as symptoms of trauma and stress, as we do have emotions that are already set in our biological make-up and our ancestral experiences play a big role in how we express these emotions based on how we react to our environment, stress, and circumstances.

And, just a reminder, trauma is an experience that leaves a person with either an emotional or physical scar, and the memory of the incident remains for a long period of time in the person's psyche, and these memories often turn into symptoms such as anxiety, depression, and so forth. Emotions can either be positive or negative, whereas trauma is negative.

Emotions can be a very positive experience. Emotions also stem from our instincts, depending on how we instinctively respond to a situation, whether good or bad. Emotions will follow after an instinct is activated depending on which emotion has been associated with the instinct.

Say, for example, that you experience a shock. If someone played a prank on you, you might feel shocked, and the running instinct or fighting instinct—or, like me, the freeze instinct—is triggered. Once you realize there is no real threat, your emotional response might be to laugh, or your response could be anger, as the shock prompted an old memory of an incident that made your body feel unsafe and, as a side effect, triggers the old instinct that served you and kept you alive at the time of the stress. Remember that the body's function is to keep you alive. It's all about survival and coping with stressful circumstances to the best of its ability.

And this is always where that fun question comes in: which one came first—the chicken or the egg? What came first? The emotion or the instinct? When you look at the definition of an emotion, it says "a natural instinctive state of mind deriving from one's circumstances, mood, or relationships with others<sup>2</sup>."

There is a predisposition for all the emotions that you are feeling. A baby crying when you take away a toy from him or her is a perfect example. There is a feeling of loss. But, what does a one-year-old child know about loss? There was a predisposed feeling of loss triggered the moment he or she lost something that they physically felt attached to and realized that it wasn't there anymore, creating an immediate shift and change in their environment that they became aware of.

# Anger Can Become an Emotional Boundary and Defense Tool

Healthy boundaries are a happy medium—a balance between weak boundaries on one side and rigid or over-corrected boundaries on the other side. There are pitfalls to both extremes, and most people trying to heal from abuse or a traumatic event that greatly challenged their boundaries (this could also be a result of long-term stress and doesn't have to tie in with a singular event) will vary between extremes before achieving a healthy balance.

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<sup>&</sup>lt;sup>2</sup> https://en.oxforddictionaries.com/definition/emotion

As a child, my boundaries were never respected. I grew up with very poor boundaries. Saying "no" was challenging, as in the past it always provoked confrontation and rejection.

As I matured, I over-corrected my poor boundaries and became explosively angry and resentful. I realized that this happened as a result of skipping an important step, loving myself enough to say "no." I didn't respect my own boundaries; so, why would other people respect them? I didn't even know what my boundaries should be. There was no guideline to follow.

I had to start clearing the abuse trauma first before I really had the strength and self-love to say "no." Then I started to establish my boundaries based on circumstances and how they made me feel. There were times when my boundaries provoked conflict. However, I quickly learned that the conflict was a result of the abusers' frustration. Suddenly, the abusers in my life weren't able to manipulate and control me anymore.

You should not have to over-correct your boundaries. If you do, then it means you are still in fear of not being heard and respected. When you over-correct your boundaries, it causes more problems, because the people that you are setting boundaries with can sense that you aren't coming from a place of power. When someone is being firm, you can feel whether that person is confident or fearful, or angry or insecure.

Any person can often recognize the difference between when you're coming from a place of power and when you're scared and fearful. It's also important that you recognize the difference between when you are fearful and when you are confident.

If you struggle with anger outbursts or post-traumatic stress disorder (PTSD), you may find after a session that there could be a delayed response from times when boundaries were crossed (emotionally or physically) and, once you start to go through a healing process, you finally reconnect with your sense of personal boundaries.

In many cases, I have learned from my students' and clients' reactions (including my own reactions) that once the dissociative state and shock wear off, a big flood of rage can start to surface. It is extremely important to be aware of this, especially when you deal

with any type of severe abuse, severe bullying, or people who have been harassed or stalked long term.

To sum it up, some people have endured a great deal of trauma, and they have never addressed it. If you are unsure of how to work with this, then I strongly recommend that you leave this for a more experienced practitioner, especially if you aren't familiar with Metaphysical Anatomy and you haven't attended the live event.

For more information about emotions, please refer to your Volume 1 book, Chapter 5: Emotions – Untangling Them, Recognizing Them.

# Understanding the Difference Between Healing a Trauma that Was Caused by a Traumatic Event and Recovering a Natural Emotional State

This question comes up quite often, and it's important that you understand the difference, as we won't cover Recovering Your Natural states in the Metaphysical Anatomy live event (this will be a whole new live event on its own).

We heal a trauma that is a result of a distressing event. Then we target and resolve a specific block/pattern/issue that stemmed from this event that is called consequences or ripple effect of a stressful event either physically or psychologically. Now, when recovering a natural state that you are born with, this state is often blocked by conception, womb, and birth trauma and even often trauma that we experience during our childhood or adulthood life, and the area where this state is blocking is normally 98% of the time the same for every single person. However, that is a whole new study on its own for another time. I just know that many of you do think ahead and have questions, which isn't a bad thing.

## Secondary Trauma

Secondary trauma is often caused when you hear or see something happening to someone else and this causes stress. The event may have triggered your own vulnerabilities and suppressed trauma. An example of this is when you listen to someone else's traumatic story and feel traumatized and upset about it for a long time and feel

unable to shake off the negative residue that it left behind in your mind and body.

# The Difference Between Completing Trauma and Surviving Trauma

These gyrations and undulations are ways that our nervous system "shakes off" the last rousing experience and "grounds" us in readiness for the next encounter with danger, lust and life.

- Peter A. Levine PhD

The philosopher, Frederick Nietzsche, said, "That which doesn't kill us makes us stronger." I had a slight knee jerk reaction when I read that for the first time. And here's why. It depends on how you react to trauma after surviving it. Trauma doesn't necessarily make you stronger. It can cause you to be less sensitive—meaning desensitized to future trauma—which, unfortunately, means you have successfully suppressed your past trauma.

What some people perceive as being strong is actually someone's ability to dissociate, numb themselves, avoid, or resist dealing with their trauma or real underlying emotional state. As humans, we seem to lack the animal ability to complete a trauma cycle after surviving it, whether it was emotional, physical, or sexual abuse.

Here's an example. If an antelope narrowly escapes an attack by a lion, it is probably traumatized. As soon as the antelope is safe, it goes through a process of shaking off the trauma. The shaking may resemble the physical action and movement that helped the antelope to survive the threat and pending trauma (e.g., running) as if the animal is completing the act of survival. After a few minutes, it has released the trauma, and it runs away, healthy and free from trauma. It starts grazing again, as if nothing had happened. This process is called completing trauma.

According to Dr. Robert C. Scaer, this process of completing trauma is a way of "discharging retained autonomic (nervous system) energy." According to Scaer's research, humans lack the ability to discharge this autonomic nervous energy. The human

physically survives the trauma but never completes a trauma cycle. The traumatic experience may be imprinted and stored in the brain and body. There is suppressed adrenaline in the body, and the muscles are still tensed as if the body still wants to protect itself from a possible threat. This behavior and pattern surface as tension and rigidity. This is why past trauma can create so many long-term symptoms in the human body.

When a human survives trauma, there is no release of this nervous energy, and the person keeps carrying that trauma for the rest of their life. According to epigenetic research, specific trauma, survival tactics, and patterns can be passed on to future generations. Trauma is a significant cause of diseases, which are the most common challenges that we are facing and having trouble healing. Any successful healing tool must enable you or the client to complete the trauma cycle, and the good news is that this cycle doesn't involve anything that is stressful. If anything, you should be blissfully unaware of it.

In a moment of trauma, the body will immediately try to find a way to be and feel safe. This may include either reaching out to someone for safety or taking comfort in either the going numb or freezing instinct. Every time you experience a similar trauma, you may revert back to the state of mind and gut instinct that initially kept you safe. This can have a long-term effect of allowing you to disassociate from many areas in your life.

For example, becoming numb or feeling paralyzed once served you in a positive way. However, the positive survival tactic has negative consequences. The numbness will influence every aspect of your life and, unfortunately, not always in a good way.

Finding your survival instinct within the moment of trauma may cause you to associate your trauma with survival. You may find yourself afraid of letting go of the trauma, because it may mean letting go of the survival instinct you've adopted, the instinct that kept you safe.

You'll also see this in the animal kingdom. The springbok (small antelope) in South Africa is a wonderful example. When a lion chases the springbok, it sometimes makes a miraculous escape and gets away unharmed. The buck will go to a safe spot and start shaking and trembling for a few seconds. After that, he will just

physically shake off the incident, complete the trauma and shock, and then continue grazing as if nothing had happened. The springbok has completed the trauma cycle in his body and can continue his usual routine. The buck still knows that a lion is dangerous. However, the buck isn't stuck in a state of trauma anymore; it does have an awareness still, but life goes on.

We have a different way of completing trauma. The problem starts when we hold on to the trauma either consciously or unconsciously, as we might think that it could protect us in the future against similar incidents. Humans have more or less the same reaction. We often also shake or shiver after a traumatic event has passed. When a traumatic event takes place, your heartbeat increases and often increases your blood pressure as well. However, in other cases, it can actually drop your blood pressure causing you to feel cold. But, as the shaking and shivering start to dissipate, your heart rate returns to normal.

Note: It's important to remember this when doing a session on either yourself or someone else. This also explains certain root causes of heart problems and heart palpitations that are discussed more in Volume 1. I have found that as the shivering in the body completes so does the trauma cycle and initial shock, which also decreases the heart rate. However, during this moment, it also either could have triggered or caused a memory and programming in the heart rate to increase every time the person is stressed, even if the stress experience is unrelated to the initial cause. This means that it is a trauma cycle that has not been completed properly and the heart palpitations can surface later in time when activated as the body is still trying to complete an unresolved trauma cycle.

When the heart rate is elevated, it is crucial to bring it down and allow your body to return to a place of calmness, neutrality, and feeling safe. This is especially true if an accident took place, or if you had surgery and were either traumatized or stressed by it. If it's possible, it's very important to bring the heart rate down before moving to a new location; otherwise, what can happen is that you break your state and dissociate from the trauma, thinking you are out of harm's way, just to have anxiety, depression, or PTSD develop in the following days or weeks after the event.

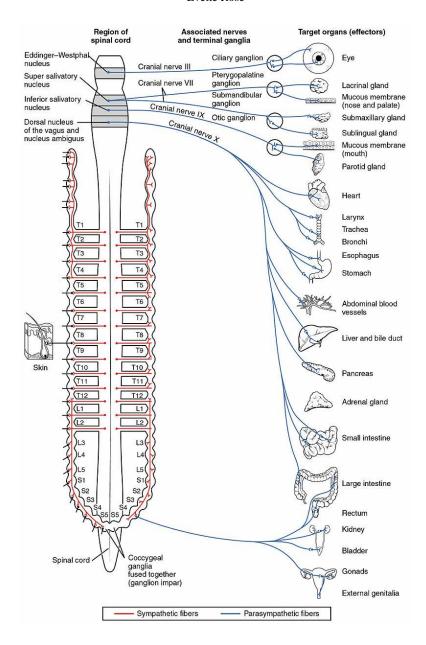
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Also, as Peter Levine so accurately explains—and what I have found in my research and studies of trauma as well with clients—is that a person's heart rate has a connection with the autonomic (involuntary) branch of your nervous system. The autonomic nervous system largely controls the organs in the body such as the heart rate, digestion, arousal, urination, and many more other points.

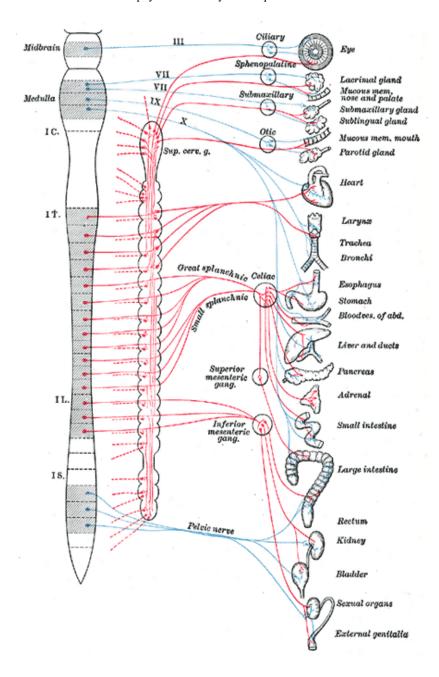
This just fits in so beautifully with Metaphysical Anatomy and the concepts that have been explored over the years. This shows how the stress being experienced and activated in the autonomic nervous system (depending on what kind of stress it is and how it fits with the psychosomatic language and patterns of each organ and body part) affects different parts of the body. Just this image and illustration alone along with my book, Metaphysical Anatomy, Volume 1 is a powerful toolset!

To say that I was excited and overjoyed when I found this illustration that confirms my research and explanations in Volume 1 is an understatement!

#### Evette Rose



<sup>&</sup>lt;sup>1</sup> Autonomic Nervous System (ANS). Wikipedia. October 2010.



Autonomic Nervous System (ANS). Wikipedia. October 2010.

When you look at the first image, you'll see the link between the heart and the cranial nerve X. In the Metaphysical Anatomy language, the heart is about giving and receiving love. This also includes how well we were able to establish our space and territory in our home environment while growing up.

When someone has problems in the cranial nerve area, that would immediately tell me that the heart is affected in one way or another and not necessarily in a serious way. However, what this means is that both the psychosomatic root causes for the cranial nerve and heart area should be combined (you'll find all this information in Metaphysical Anatomy Volume 1) to get a much more accurate message from the body and what the emotional stress and contributors are to any stress that is experienced in this area.

If the area is affected—for example due to a car accident—then look at the section of accidents then the cranial nerve area under spinal cord and then explore the heart section in Volume 1. You'll be amazed at the accuracy of what the body is telling you!

I have also learned that we often use our past trauma and fear to establish boundaries with others.

By letting go of a trauma, you might fear the feeling of being vulnerable and weak and open to attack. In addition, you might be afraid to let it go, as you are so familiar with the abusive or challenging circumstances and anything that doesn't fit into that box is considered as being outside of the comfort zone.

Any change in circumstances may cause you to feel unsafe and stressed. Familiarity often overpowers common logic, as you don't always know how to survive in a new set of circumstances that feel unfamiliar.

In many cases, the original trauma that has affected a person may have occurred before their birth. It may relate to their time in the womb, or at conception.

People may even be expressing unresolved biological trauma from their grandparents or other ancestors, especially trauma from your mother's mother, as you already existed when your grandmother was pregnant with your mother. Trauma patterns and medical conditions often repeat and surface every third generation.

Now, the critical question is, "Do people need to know the origin of the trauma?" The short answer is "no." It is important however to acknowledge and understand that there is a trauma or unresolved stress that created and triggered instinctive responses, which sometimes cause an instinct to stay switched on.

Instinctive responses are meant to switch on when there is a threat and, when the threat has passed, the instinct should switch off again, as it's not needed. We'll go a little deeper into instincts in the module.

## The Nervous System and Trauma During Infancy Stages

The nervous system and other functioning factors in the brain, alongside our hormones, are the life force drivers in our body. These influences help us to create our reality, such as how we feel about it, react to it, and experience it on a minute-to-minute and day-to-day basis. However, if the life force cannot be expressed freely, it can cause the sympathetic nervous system to release epinephrine and norepinephrine, which results in an adrenaline rush.

When you look at the nervous system, we have a sympathetic nervous system and parasympathetic nervous system.

The difference between a sympathetic nervous system and a parasympathetic nervous system are balanced opposites working to protect our bodies. As mentioned earlier, the sympathetic nervous system helps to keep us from perceived danger by activating our instinctive responses (such as the fight or flight response), while the parasympathetic nervous system is in charge of the homeostasis (or the rest and digest).

A sympathetic dominant person who has a chronic low level of stress is known to have sympathetic dominance. For instance, as infants need to have constant contact and comfort or food, they will resort to crying if those needs are not met. This is a healthy aggression. Normally, the mothers will figure out what is wrong and try to comfort the baby. The baby's healthy aggression could be turned into anger if the needs are not met in a prolonged situation. Lack of adequate response will lead to aggressiveness and anger which often does not resolve easily.

As a result of this, the infant will feel resentment and instinctively perceive the caregiver to be unreliable creating a mistrusting bond and also a bond of uncertainty. The infant will probably grow up and constantly be in high arousal, anxious irritable, hot tempered, fearful, and may even experience panic attacks. The development of a variety of survival techniques are a defense mechanism to protect oneself from the lack of comfort or if trauma was experienced during an infant's need for safety.

When the outcry of a child is ineffective, the long-term sympathetic arousal will overload the nervous system. Subsequently, the child will shut down the protest and the needs and move into the parasympathetic dominant freeze response. It causes the child to be more detached from their needs and emotions. In Metaphysical Anatomy, this is known as the dissociative state.

Once the emotions are increasingly unified, the other symptoms will diminish. Additionally, core needs that are satisfied will strengthen the life force and need for comfort, which would ultimately lead to a less sensitive nervous system.

Trauma is the direct consequence of the nervous system being hyper aroused and defragmented. Due to this, traumatized individuals can dissociate with their body by relying on their mind, numbing their body experience, or even both. More information is discussed based on this concept under the limbic system.

# Dissociating from Trauma Instead of Healing and Resolving It

If it were always a fist or always stretched open, you would be paralyzed. Your deepest presence is in every small contracting and expanding. The two as beautifully balanced and coordinated as birdwings. —Rumi (1207–1273)

In healing and personal development language, dissociating is a way around an obstacle, usually a trauma. Many healing modalities are based on this idea of dissociating; this is one of many reasons why people don't always heal.

For example, in psychiatry, medications such as anti-depressants are often used to enable you to move on from a significant problem or trauma (which I have also used in the past to help me to cope with my life until I was ready to start my healing journey). No one pretends that this is dealing with the underlying issue. Rather, it is giving you, as it gave me, an ability to move on and build your strength in order to deal with the real issue when you're ready.

I have also seen where people are taught tools to smooth over certain traumas and reduce the stress, which is a wonderful way to help you cope, and it certainly did for me in the past. I can't speak highly enough of it; however, be mindful that it doesn't become your crutch and excuse to avoid looking at the root causes.

It's common to heal and change a voice or a singular feeling. This can make you think or feel differently about a subject. This is an excellent example of bypassing trauma (meaning changing how you feel about a person rather than healing what the person did to you or how they contributed to your pain) and dissociating from it—it is generally a fast way to make you think that you have healed the entire root cause.

Nevertheless, all you have done is changed a thought or singular feeling. This singular feeling could actually be connected to many hundreds of similar feelings that were caused by one traumatic event. But, because the root cause was bypassed, the issue will come back, and often in different ways, which only feeds and contributes to your inner conflict.

So, healing one singular feeling doesn't mean that you actually healed the root cause of it, which is often much deeper and bigger than just a feeling. The possibilities are endless, as it could be due to womb trauma, stress in your life, epigenetics, or an actual event that triggered a predisposed "emotional state of trauma that is hidden in your genetic programming."

Imagine the voices, thoughts, or feelings as a neural highway in the brain, the pathway is holding a program and memory to feel and react a certain way; it holds important messages.

Changing just one aspect of this belief or feeling is exactly like building a side road on the highway—you have cleared a path around the obstacle, but you haven't cleared the obstacle itself. Therefore, it is possible to resolve the root cause of the trauma by working on the points that will clear the obstacle. Without it, it's almost physically impossible, because it's the wrong tool for the job. It's like building a house from paint instead of wood or bricks.

The original symptoms will always return. It may take years, but it will occur the next time something happens to trigger or activate the underlying unresolved trauma.

## Perseverance: The Good, the Bad, and the Ugly

#### The Good

Perseverance can have its good qualities, but only if it's treated and understood with respect. Perseverance enables you to cope with your own challenges and attend to your needs and others' needs in a way that is healthy for everyone. It gives you the strength that you need just when you think that everything is about to collapse.

Perseverance is when you can see that there is a deeper meaning to your circumstances, and you know that there is a great meaning and cause taking place, instead of just seeing challenges and stress. This is a state of mind that has helped me through some tough and even dark times in my life with only good results to follow! But then ... there is always a dark or negative side to the things we perceive as being a strength or a positive quality.

#### The Bad

Any human being can only handle so much. Perseverance can easily turn into a dissociative state. It's a dangerous state of mind that anyone can move into without even realizing it. Circumstances often become so stressful that they detach and dissociate from the reality and stress that is taking place in their life.

Being able to cope with high levels of stress for long periods of time, or intense challenging moments, can often be seen as a strength, and the topic at hand here is perseverance. However, perseverance does have its down side. The down side is when you fail to recognize where your limits are in terms of dealing with challenging circumstances.

You may fail to recognize when it's time to reach out for support and admit that you have reached your limit. We often lack the ability to gracefully cope and handle our challenges.

## The Ugly

But when does perseverance cease to be just perseverance, and when does it become debilitating to the point that you have completely dissociated from your reality and you moved into what I would call an "autopilot state of mind." Even worse, you revert to using substances to cope with your reality and challenges. The down sides to this gift with a dark twist is that people would rather suffer in silence than reach out for support and admit that they have crossed their own limits in terms of coping with their stress.

I have been there many times, and I have paid a price every time when I felt too proud to ask for support when I needed it most. I had such a negative association with support. Being supported to me meant that I was weak. Being supported made me feel incompetent and stupid. It also made me feel that I owed the other person something back for their support (in hindsight this was always a result of bad communication!).

When I realized that I had a negative association with being supported, I found it much easier to identify my blocks around support—especially from my childhood and early twenties. I also realized that now, as an adult, I was in control of my life and the type of support that I received.

Trauma doesn't necessarily make a person stronger. It can cause a person to be less sensitive to future trauma, which unfortunately means they have successfully suppressed their past trauma. What some people perceive as "being strong" is actually someone's ability to dissociate by avoiding and resisting dealing with their trauma. Humans seem to lack the animal ability to complete a trauma cycle after surviving it.

Always keep this in mind, as practitioners often fail to see and realize that what might be traumatic to them isn't traumatic to you and inaccurate projections can be made.

If the mother experienced abuse or her environment caused her a great deal of stress, then she will have higher levels of the stress hormone, cortisol, in her system. This sets up a strong predisposition for addictions. The fetus matures into their adult life, becomes prone to having addictive behavior, and becomes addicted to substances and even activities, such as extreme sports.

#### The Benefit of a Dissociative State

Dissociating can be wonderful, and it isn't our intention to criticize any therapy. The biggest benefit of bypassing trauma is that it can be created quickly, and it can be vital in an urgent situation. It can save a person's life, especially if there is insufficient time to deal with the trauma effectively.

## The Problem with Dissociating or Bypassing Trauma

In my previous discussion, I mentioned that a dissociative state is rarely permanent. Strictly speaking, the dissociative state creates a new route (or neural pathway) around a traumatic memory, which is hard coded into the memory of the brain, especially when instinctive responses are still at play. This means that you can deal with day-to-day situations without feeling the symptom. You think you have healed. However, the underlying trauma is still there. Sooner or later, something will happen to directly activate the trauma.

The easiest way for this to happen is if the same thing happens again. For example, you can bypass sexual abuse trauma by changing some beliefs, and you might feel better. Nevertheless, any form of abuse or invasion not necessarily physical can take place in the future, and it will activate the old wounds and undo the dissociative state that was achieved.

It should be clear from this discussion that the true goal of healing is always to do your best to resolve the underlying trauma or conflict. A dissociative state has its place and does help people, as it helped me during very challenging times. The problem only really arises when either you or a client confuses a dissociative state with a successful healing. Unfortunately, most therapists make this mistake every day.

As a result, you may think you have moved on from a certain issue or problem. The real problem isn't the dissociative state, but the lack of understanding it and recognizing it. How do you recognize when you have bypassed a trauma instead of dealing with it?

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When you look at an event that would have been traumatic for you and you see yourself just looking at a picture, then it means that you have dissociated from it, whereas it's a successful healing if you can imagine yourself within the traumatic event and you feel at peace and even have a deeper understanding of what really happened and how it played out.

The reason you see the past event in a different light is because all the negative symptoms (associations, judgments, resentments, pain, and sadness), which greatly disable your ability to see things from a healed perspective, aren't there to influence how you see, experience, and evaluate your past and how it used to make you feel.

## Evette Rose



**Chapter 2: The Triune Mind Model** 

The Triune Mind Model serves as a powerful and authentic platform for you to reconnect your emotional body back to your spiritual body. When these minds are in alignment with your emotional body, complete coherence takes place and feelings of blocked energy and emotional blocks start to shift. It is still important, though, to resolve the biological blocks that we experience in the body that hold old traumas in place (current or ancestral) along with negative emotions that stem from the trauma.

These minds aren't chakras, they aren't part of your aura, and they aren't soul copies either. These amazing and powerful minds are parts of you that are completely connected to all that there is.

They are connected to the essence that you stem from, unhindered and not affected by your human experiences.

They serve a purpose to help you stay true and connected to your true authentic self, your journey, and your life's purpose. These minds serve as a refuge when you feel that you have lost track of your true identity, journey, and purpose. Reconnecting and regrouping with these minds remind your brain mind (in human form), body, and emotional body why it's here and how to move forward again when times become challenging. Do keep in mind that all these concepts will be discussed in much more detail during my live events.

**Spirit Mind**: This mind is responsible for connecting with information and frequencies that hold valuable information that isn't consciously accessible to us in human form. As humans, we seek to see, feel, read, and understand information intellectually that comes forward. However, the spirit mind is responsible for helping us to connect and digest information and frequencies that come forward that can help you grow, evolve, and heal. The spirit mind is the go-to mind when you're stuck and unable to resolve a block during a healing session.

**Brain Mind:** In the physical brain, you have an area that's called the neo-cortex. This is where you experience life from a human and biological perspective. You are aware of your surroundings because you can see them and also because the reticular activating system (RAS) is responsible for filtering information in and out of your conscious reality.

In the physical brain, this area is responsible for words, logic, and conceptual ideas that make each and every one of us unique. On an interesting note, when you are facilitating a healing either on someone or on yourself and only words are being used during the healing process, then the frontal brain is being accessed and used during a healing. In the Metaphysical Anatomy language, the process excludes the white light, nervous system, master cell, and other different parts of the brain that you use to facilitate a healing. You also connect to this mind when you need to make a sound and

clear decision, yet feel conflicted about what to do and what not to do. This mind is clear and unaffected by past memories and trauma.

**Heart Mind:** In the Metaphysical Anatomy language, this area in the biological body is connected to the limbic system, which I will discuss later. As you'll learn, or probably already know, the limbic system is responsible for feeling emotions and arousal, just to name a few roles that it plays. It is in this area that you program a great deal of emotional stress, especially between you and your mother (or the main caretaker that you had during your infancy and development years).

When the emotional body is feeling blocked in the heart, it's often described as feelings of pain, pulsating, tension or like there is a stone in the heart area. That means that the heart mind is out of sync with the heart center and limbic system.

**Body-Center Mind:** This area is connected to our instinctive responses, which is connected to the reptilian brain. In the biological body, this is where we feel in our gut or stomach that something about a person or situation is off or not right. These instincts may include the urge to run, hide, freeze, fight, go numb, or vomit.

Remember that not all instincts are necessarily about being in a threatening situation. We also have more positive instincts such as wanting to have a child (reproducing instincts) nurturing instincts, and regrouping instincts (wanting to be part of a community or crowd). We are actually biologically designed to co-exist in groups, as being in groups in the past increased the survival rate of our ancestors. If you lived alone many generations ago, you didn't have the protection and cooperation of a group for the purpose of surviving.

When you resolve and rebalance an instinct during a healing session you'll be addressing the body-center mind, heart, and gut area and the reptilian brain. These parts join together spontaneously during a Metaphysical Anatomy Technique session.

**Base Mind:** This mind is located between the pelvic area and the feet. The base mind is the part of our brain that is responsible for

creativity, sexuality, and our ability to connect and channel messages that we translate into our own reality and perspective. It is then our unique way of expressing this information that attracts people who resonate with that interpretation and message.

Unfortunately, when spiritual teachers or leaders use sex to manipulate people, it's a clear indication that this area is blocked and out of sync with their base mind. Highly creative people, such as artists, actors, and performers, tend to be very connected to this mind, but they also abuse the power and essence that can stem from it. This mind is also responsible for creating that emotional euphoric high that can stem from being in a very creative space and channeling too much energy.

This can actually cause the emotional body to feel overwhelmed, and that's when a person reaches out to substances, such as drugs, alcohol, and medication, to relieve them from the influx of energy that is flowing in from this area. In the research that I have done, I have found that sexual abuse trauma can suppress this mind from fully expressing itself including causing a lot of trust issues with family connections and close relationships. It is a result of the suppression that it overcompensates, and the mind and body does not channel this creativity in a coherent and constructive way for the individual.

Roots Mind: The name of this mind almost says it all. This mind helps you to be in sync with your ancestry without being influenced by their values, beliefs, or karmic ties. This mind also connects you to the core essence of mother earth and repels energy and influences that aren't designed to be in alignment with your mind and body, especially frequencies that do not match your purpose. Certain religions, belief systems, and values aren't always designed to serve you as an individual and your growth. However, some are designed to control, dominate, and manipulate you instead. This takes you further away from your true authentic self and blocks the spirit mind from aligning you back to your source and your true authentic self.

All the minds discussed above are meant to be in harmony and work together, almost like a team. When they aren't in alignment and coherent, there is a disruption between these minds and their connection to the emotional body. Physical, emotional, and spiritual

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problems arise when we are disconnected from any part of our minds. The reason behind the disruption of these minds and why we aren't always connected and coherent with them is because of a trauma.

Trauma creates a shockwave that disconnects and defragments your sense of self from these minds. Traumatic events create a very dense frequency that disrupts the delicate frequency flow between these minds and the emotional body.

## Evette Rose

## Chapter 3: Is Trauma My Karma?

The past is not dead, it is living in us, and will be alive in the future which we are now helping to make - William Morris

The answer to this question can be sensitive and does need to be answered with respect and understanding that we are all here to have different experiences in life.

What might seem like a karmic cycle could actually be the start of one. That doesn't mean that if something bad happens to you that it's because of past karma. In some cases, it can be, for example, ancestral karma that has not been completed.

In other cases, new karmic ties can actually be created in this lifetime. Here is a good example: during one of my seminars, I once had a mother come up to me in tears. She told me that her daughter was fourteen years old when she was raped. She asked me if it was her daughter's karma to experience that. The answer that came out of my mouth even surprised me, as it almost felt like the information that came forward was a divine message that prompted me to do even more research regarding these situations.

## Abuse Can Happen to Anyone - But It Doesn't

Abuse could happen to anyone. You have, at some point in your life, walked down a street at night, or, as a child, been left in the care of someone who might not have been the upstanding citizen your parents thought them to be. Therefore, in theory, it could happen to anyone.

It's true that sometimes, bad things just happen. There is such a thing as an unlucky person in the wrong place at the wrong time. My belief is that unlucky is the exception, certainly not the rule. There are other factors, patterns, and generalizations that can explain a great deal.

#### The Histories and Habits that Makes You Who You Are

The most important factor is the family history. Most of my clients who have experienced childhood abuse and/or domestic violence have parents or grandparents who have shared the same experience. Just like physical patterns and characteristics, abuse runs in families. I'm talking here particularly about child abuse, though abuse to adults (especially from a partner) is also a family pattern.

There are several distinct issues here to consider:

- Evidence that abuse runs in families;
- Mechanism for how this might occur; and
- How it impacts your feelings and reactions.

#### Observations

My evidence is largely based on personal experience and observations made from hundreds, if not thousands, of clients and students. In almost every single case, in the event of childhood sexual abuse, there is a strong family history of abuse, usually stemming from the mother or maternal grandmother, and, in some cases, the father. There might be exceptions, but it's hard to know for sure because you never have perfect knowledge of the grandparents' or indeed great-grandparents' experiences.

The ancestral abuse can take a different form. For instance, a pattern of emotional or physical abuse to the mother might be associated and experienced as sexual abuse in the child.

The same observation applies to domestic violence among adults. Almost every single client who was abused by a husband had a mother or grandmother who had been similarly abused. I can't think of a single exception.

The issue of trans-generational or inter-generational transmission of abuse has been confirmed in psychological studies.<sup>3</sup> The actual significance is much higher than these studies have been able to prove, because they only looked at abuse to parents (ignoring grandparents) and because of a lack of evidence (they rely on self-

<sup>&</sup>lt;sup>3</sup> See for example, DSM-IV® Sourcebook, Volume 3, pages 772-3.

reporting of abuse by the parents in a survey). In reality, the ancestral pattern can often skip a generation, and it isn't something that people like to write about in a survey, so the academics may never know the true scope of inter-generational trauma.

But why? What are the mechanisms for inter-generational abuse? There is no simple explanation for why abuse runs in families. I think that there are many explanations, each accounting for some part of the story. Here are some possibilities.

## (a) Heightened Vulnerability

A woman, who has experienced abuse as a child, is more likely to have at-risk children. For example, if a family member abused her, there is a risk that this same family member will abuse her children. No woman is an island, and you must imagine this woman in the context of the environment, which allowed the abuse to occur. Unless she has taken significant steps to change her life and family pattern, her children are likely to be at risk from the very same factors that placed her at risk. The same factors apply to adult domestic violence. A woman who grew up in a family, culture or environment (such as ethnicity or religion) that was willing to overlook domestic violence, is much more likely to marry into that same abusive culture.

The emerging science of epigenetics has changed forever our understanding of inter-generational trauma. Put simply, epigenetics means above genetics, and it means that an entire layer of experience is transmitted from mother and father to child, above and beyond the physical DNA.

Trauma such as sexual abuse doesn't change the DNA (there is no gene for abuse). However, any significant trauma can leave epigenetic markers. These markers are transmitted between generations and have the effect of switching specific genes on or off.

Wide ranges of medical problems, from diabetes to depression to cancer, are caused in part by epigenetic factors. What that means is that the unresolved abuse your grandmother experienced may be the cause of physical and emotional changes in your body.

That much is already well understood by geneticists. What isn't clear is whether this epigenetic pattern contributes to trauma

recurring in later generations. For example, if your grandmother was sexually abused, does this mean that you inherit a pattern that makes you vulnerable to abuse? I believe the answer is yes.

Of course, it's not the abuse itself that is inherited. It is a chemical makeup, which affects your emotional state. Just as your precise brain chemistry can create symptoms of depression, other brain chemistry can create strength and confidence. Ask yourself, which child is more likely to be abused—the weak and depressed one or the strong and confident one? Abusers, like any predators, prey on the weak and vulnerable. In this way, the trauma of your ancestors (not necessarily abuse trauma, but any trauma) can make you more vulnerable to harm.

This knowledge has important considerations in the healing context. A good practitioner knows that you aren't merely healing abuse, but preventing the cycle of abuse from recurring in future generations. This means identifying and resolving the emotional state which made the client a target of the abuse in the first place.

## (b) Family Systems (Energetic Explanations)

The family system is, in over-simplified terms, the consciousness or awareness of the family unit. It represents the unified wisdom and experience of many generations.

The significance of the system in relation to abuse is that the system creates a certain energetic pull in order to resolve trauma within the system. In this way, experiences that happened to your grandparents (and even great-great-grandparents) can be recreated in your life. We call these "system issues" when there is no other explanation—there is no heightened vulnerability or normalization, nor any clear epigenetic component. What is left is a desire (within the family, not necessarily within the client) to resolve old wounds and to restore the flow of love between the generations—grandparent to parent and parent to child.

Most cases of inter-generational abuse can be understood in their own right, without needing to mention family systems. Family systems are important, and they are acknowledged in my work in a way that resolves the systemic issue without needing to spend too much time on it.<sup>4</sup>

The above explanations were a much more in-depth explanation than what I gave the mother who asked me about her daughter that was raped at such a young age. My short answer to her was that her daughter could have had a predisposed vulnerability to being raped and sexually violated. Sexual predators are very sensitive to people who have experienced abuse in their life or people who have a strong predisposition for it. It's the same in the animal kingdom.

Often, you'll see a lion concentrating on only one buck. When the lion launches the attack, ten other bucks run right past it; however, the lion keeps its focus on one particular buck and, in most cases, that buck was the weakling in the herd. The lion could sense that the buck would not be able to escape as quickly as the other bucks and that would make it an easy kill.

I have also worked with rapists who were released after completing their sentence who wanted to heal the root cause as to why they were behaving and feeling the way they did. To make a long story short, what I discovered was that the rapists actually looked for women who looked weak, who had a certain body posture that would indicate to them that they would not be able to put up a fight.

Almost all of the rapists experienced emotional or physical trauma with their mother. They also had a strong rapist predisposition. Combined with the rapist predisposition and unresolved hatred and anger toward to the mother, they acted out their rage and need to 'punish their own mother' onto the victim. The victim's personality traits would normally be the opposite of the rapist's mother's abusive character. In short, there was a strong need to punish, have revenge, and dominate. So, in this case, it would make sense that the rapist would select someone who they would perceive as being 'easy to dominate.'

They all also said that they had an intuitive sense and just felt drawn to specific types of women. Finding Peter Levine's research that also discovered the same theory as I did, confirmed to me that

<sup>&</sup>lt;sup>4</sup> For more information on the origin and treatment of family systems you might research Hellinger's Family Systems Therapy (or Family Constellations).

#### Evette Rose

I was on track with my conclusions and the importance of inherited abuse.

In this case, I am using rape as an example as this is a great example that explains the research that has been done. This can apply to many other experiences in life as well, other than just abuse.

## Chapter 4: What is the Soul?

"Oh soul,
you worry too much.
You have seen your own strength.
You have seen your own beauty.
You have seen your golden wings.
Of anything less,
why do you worry?
You are in truth
the soul, of the soul."
— Jalaluddin Rumi

I believe that the essence of the soul is perfect and not in need of healing. I do believe that the soul can be traumatized by stressful events that the body experiences hence why there is a dissociative state. The soul can associate the body with negative experiences. A dissociative state is also when the soul temporarily (either short or long term) moves its consciousness out of the body, to remove itself from the stressful frequency that is being experienced by the body.

In most cases, when a trauma cycle is completed, the soul moves back into the body. This feeling is normally described as feeling at peace with the physical body, because there is a recognition that the body is trying its best to serve and help the soul to fulfill its purpose.

There is also a feeling that is described as not feeling alone or isolated anymore. Remember that even if it turns out that the soul feels somehow traumatized, you'll see here that **healing the biology is what changes the soul's experience.** The soul isn't traumatized; it is merely responding to a traumatized body.

Many people feel that they are isolated from God or that they have been kicked out of heaven's gate. This feeling is only there as a result of the body experiencing stress and the soul trying to avoid the experience that the body is having. The soul's frequency is designed to be in sync with the body, and there is a great need for coherence. When this coherence is disrupted, the relationship that the soul feels with the body is disrupted as well. My opinion is that the soul's frequency has been changed slightly to adapt to the denser frequency of the body.

When the soul leaves the body, it is harder for the soul to connect to its source or to God. As some might say, there is a temporary frequency incompatibility, as the soul has not fulfilled its purpose.

Now, if the soul refuses to return to the body and the body doesn't have the support and guidance of the soul, then it's common for people to suffer from depression and suicide.

In my opinion, from what I have seen and learned through my research, when someone does give in and commit suicide, the soul either stays with its source (and the intention for the soul and conscious experience has changed to something completely different), or the soul comes back (and faces the same challenge until it can master and build a wonderful relationship with the human body in order to fulfill its purpose). The human body is here to serve the soul to fulfill its purpose. The physical body has no other purpose. That purpose can be anything. It could be to have children, become a teacher, become a gardener, and the list goes on and on.

It is also common to feel that you might fail your life's purpose. The problem with that is that we often think that a purpose equals doing something rather than perhaps just being and experiencing life, emotions, relationships, love, disappointment, and compassion. Living in the here and now always seems like the most dreadful way to be. If you did live in the here and now, then I would say that at least eighty percent of your psychological stress will fall away. When you are being present, your focus will be in the present. Your focus will not be elsewhere, such as in the future or past. Your focus can only be in one place at a time.

Yesterday can't be corrected and tomorrow hasn't even happened yet, so why worry? I'm not telling you to be irresponsible. I am saying that you should know what is important to worry about and what isn't.

#### Metaphysical Anatomy Technique Volume 2

Superficial fears can dominate and control your life. The reason for that is because you can usually distinguish the difference between a valid fear and a superficial fear. Superficial fears can often have such a strong and intense feeling that your mind is convinced that it must be real. Your body then responds to the 'perceived' threat as though it is real and prepares to defend it, reverting back to old coping mechanisms that are not serving you and your body in a healthy way, psychologically or physically.

## Evette Rose

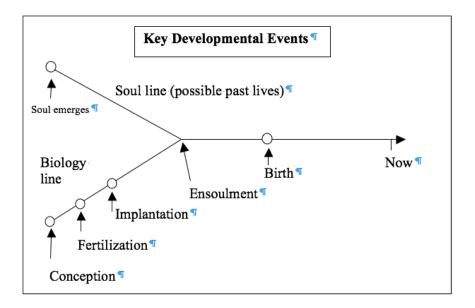
# Chapter 5: The Sperm and Egg Development and the Important Role They Play

When the sperm and the egg unite and the embryo is formed, your biological existence starts to develop, grow, and, ultimately, transform into the person that you are now. The moment the sperm and the egg unite is when ancestral values, predisposed trauma triggers, and programming are also uniting and forming part of your biological makeup. It serves as a platform for you to grow and experience life. Ultimately, from that platform, you'll create and design your own life and establish an identity that resonates with your true authentic self.

The journey to rediscovering who you truly are as a being without all these predisposed traumas and genetic programming can often be either a fun or challenging journey. It depends how you view it. Many people are happy just being who they have become and live life as any other normal person. Then there are some of us, who aren't happy with how our lives played out and that is when we begin the quest to change and turn it around.

Values are often also genetic programming, it's not just taught to you by your mother, father, teacher, or mentor. Values are simply a guideline that was created by a collective consciousness, formed by people who strongly believed in living life a certain way.

As I said earlier, these values serve as a guideline. You are allowed to graduate from these values one day and form values of your own that you can relate to. You can create and form values that complement your life and journey. Don't get me wrong! Our family values are valuable! They hold great experiences and wisdom which is what formed these values in the first place.



In Metaphysical Anatomy, we don't have to trace trauma back to the original point when it started. As you can see by just looking at the model above, you'll embark on a healing journey that will never end.

## It is impossible, in principle, to explain any pattern by invoking a single quantity - Gregory Bateson

The way that the sperm and egg united—and the emotional states that your parents were holding during that moment—has a great effect on your consciousness and your level of awareness. The difference between people who are born with a strong conscious awareness and those who aren't is simply a function of biology. Specifically, it is the trauma (or lack of it) in our biology that determines our levels of inner peace and other aspects of enlightenment.

For example, the state of oneness and feeling connected to all that there is, is affected by the levels of stress that were present at your conception. The oneness state is a very gentle state that allows you to feel less attached to the ego. Competitiveness and that drive and need for artificial material things—which we have all experienced at some point in our lives—doesn't give us the

fulfillment that we wanted and searched for as we were searching for an emotional aspect in us that felt blocked and we tried to fill the void with concepts, behaviors, and physical belongings.

The question we are asking is: what is the trauma that blocks us from feeling levels of enlightenment, and how can we find and clear this trauma?

You can even go as far as saying (if you believe in past lives) that your past life karma could determine the kind of parents you pick. This includes their spiritual awareness, consciousness, and so forth.

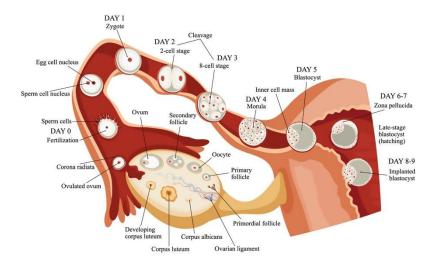
I believe that there is a genetic blueprint for the biological body that is free from trauma and stress, almost like a memory of a clean slate. There is an aspect of our biological makeup that knows what it feels like to live and exist without trauma and stress, hence why we have these amazing positive states of consciousness in our biology. However, we aren't always able to access it due to blocks and trauma. That alone tells me that the body knows and does have a reference point for inner peace, joy, happiness, gratitude, compassion, and love, just to name a few positive and harmonic states.

The reason why I also argue that the biology does have an original blueprint that it can function from (before the predisposed trauma and genetic programming takes place) is that the process and places to heal and resolve trauma in order to access these amazing, positive states of consciousness is almost 99% the same for every single person on this planet! If that doesn't speak volumes, then I give up. No, I'm just kidding. However, there is so much power in that, which, once again, proves my point. We are all universal beings who are having different experiences. It's our unique experiences and the duration of them that alters the body's threshold and ability to deal and cope with stress.

When I talk about consciousness, I'm also referring to the reticular activating system (RAS) that is affecting (or shall I say filtering information in and out) our ability to see and take in everything that is around us. The RAS is greatly affected by our conception and any trauma that took place in our life (and don't forget our ancestors!).

#### Ovulation

#### FROM OVULATION TO IMPLANTATION



Ovulation takes place when a woman's ovary releases an egg into the fallopian tube. It happens once a month, normally about two weeks before a woman would expect her period.

The process of ovulation is dependent on different signals and changing hormone levels in the body hence why period cycles can change if a great deal of stress is being experienced by the woman, as it has a direct impact on her hormones. The signals are sent from the hypothalamus gland, the pituitary gland, and the ovaries.

Ovulation plays an important developmental phase in the life cycle of the egg. At this point, I'm not one hundred percent sure if trauma (meaning the impact of the mother's stress, diet, and environment) at ovulation creates epigenetic changes (I haven't researched this enough to give an opinion).

#### **Consciousness of Ovulation**

What I have learned so far is that our ability to feel connected (intuitively and also shyness related to communication can often stem from this phase ... not always, but I have found this to be the case for several clients). This stress takes place when one egg leaves the other eggs, as the eggs are connected to one another on gridlines that allow communication (not intellectual communication as I am writing this and talking to you, but more of an awareness of presence).

## Programming of the Egg

The egg that you were formed from already held the life experiences and trauma of your mother and grandmother. Often, their traumas, patterns, and characteristics are more dominant than your ancestors that stretch beyond the three generations. However, they should never be excluded! As I have mentioned in many of my videos, articles, and books, the BBC documentary *Ghost in Your Genes* is a wonderful example of how epigenetics play a role in our daily lives.

Coming back to what I was saying earlier about the programming of the egg, remember that you, as an egg (including the consciousness of it), already existed when your mother was in her mother's womb. This is why I always make a point of looking at the maternal grandmother's patterns and trauma.

What I have found quite often in my clients' behavior when we are dealing with challenges is that they express and relive trauma that their grandmother experienced. This is especially true when the client feels feelings of abuse or some sort of strong emotion that cannot be linked back to their childhood.

## Journey of the Sperm

Before we get to the programming of the sperm, let's look at why certain ailments can stem from the sperm and when that crucial moment was. Sperm regenerates every two to three months. So, if there was an ailment that surfaced from the father's side, I would be asking the question, "What happened in the client's father's life

at least six months before the client's conception?" You need to remember that six months is a very generous grace period to ensure that the actual regeneration phase is taken into account and also the stress that was experienced during that time.

Another important timeframe is what was the father experiencing when he was twelve to thirteen years old? Was he drinking, or taking strong medication, or using any substances with strong chemicals in it, or was his physical environment toxic? It is during this age that the initial programming of the sperm takes place.

More about this topic will be discussed during the live events, as this topic can become gulf deep.

The programming of the sperm is to be competitive; it's a race to make it to the egg no matter what. The sperm has one task and that is to reach the egg; fertilizing the egg equals survival. Here you can already see a beautiful example of how even a sperm has an instinctive response programmed into it, even though it doesn't have an intellectual brain to understand what it is doing or why.

An interesting observation that I made about the sperm's journey and the consciousness of it was that there was a strong negative association with evolution! Even though the sperm doesn't have an intellectual brain, it does have a consciousness and a certain level of awareness that is intelligent enough to become aware of such a shift in its environment. This will click more into place when I make my point at the fetal development stages, especially when the fetus is around two months old. Make a mental note here.

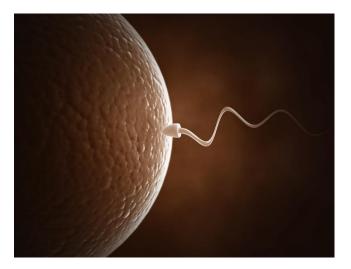
The concept of finally reaching the egg also relates strongly to abundance—being part of an abundance of other sperm cells and then suddenly being disconnected from that mainstream collective consciousness, once the sperm enters the egg. Once again, there is a shift in the sperm's consciousness and its awareness of its environment and sense of identity.

There is a fun video that you can watch from National Geographic's 'Sizing Up Sperm'. Here you will see a fun yet quite insightful journey about the sperm's journey to the egg.

I always find it very entertaining when people say, "Look, Evette, you made it. One out of millions of sperm cells!" I don't even know if I should justify and explain myself, but here goes. The

sperm did have a consciousness. That one specific sperm that created me along with the egg, had the same programming as all the other millions of sperms; so, either way, I would have made it! I'm sure that many of you who understand my work would appreciate this joke.

#### **Fertilization**



Fertilization is probably the most powerful step, as this is where and when a new life is born (depending on the mother, father, and the new soul's contract of course), as most eggs and sperm cells will never make it to this point, and often the embryo or fetus doesn't either.

The miracle of fertilization occurs in the context of the death of 99.999% of the sperm. So, this begs the question, what kind of association does this create, such as life equals death / loss?

Also, what happens when the sperm merges with the egg? It loses its tail. Clients and students have reported this as feeling a loss of identity. A sense of self-sacrifice for the sake of evolution, reproduction, and, ultimately, survival. Students have reported the following sensations and feelings when the sperm finally merged with the egg:

Feeling trapped and suffocated

- Losing sense of self and individuality
- If I win I still lose
- The only escape is the death of my identity
- I have no freedom of choice
- Despair

The above-mentioned are merely a few points that were reported, as the list can go on and on.

During the live event, I will be teaching you many more powerful points of this phase of developmental stages that would be greatly beneficial in understanding the human behavior and also how to use developmental stages to address delicate points and severe trauma that perhaps you or a client has experienced.

Now, it's not only the sperm that has a loss of awareness and shift in consciousness. The egg also has its own experience. Just a side note: it's funny, but I sometimes find that students refer to the egg as "she" and to the sperm as "he." Please do remember that the egg and sperm are actually genderless! It's easier to relate to the egg as the female aspect because it's being hosted by the mother.

The fact that the egg holds more of the mother's feminine programming is what convinced me of this. However, it still doesn't mean that the egg is a female and the same concept applies to the sperm!

When the sperm penetrates the egg the consciousness of the egg shifts as well.

So, by now I know that you understand my work well enough to ask the question, "But what if this is the client's or student's emotional experiences or predisposed traumas that they are projecting onto a sperm and egg based on their life experiences, and how they would respond to them with the intellectual mind?"

The answer to that is, "I don't know." What I do know is the consistency in answers and physical responses that were given by students and clients who were taken through this process. Almost every single student reported a feeling of a physical boundary being challenged.

This challenged me because it's the egg's choice which sperm gets to merge with the egg! I then realized that it was more about the other sperm cells that the egg didn't choose that continued to

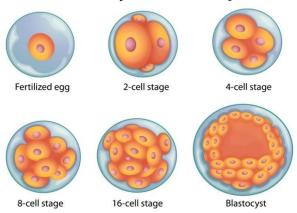
#### Metaphysical Anatomy Technique Volume 2

bump into the egg that challenged its physical barrier and boundary even after the egg "made a decision." This also resulted in feelings of disempowerment and, interestingly enough, a feeling of numbness and the urge to freeze, which are instinctive responses. Students have reported the following sensations and feelings when the sperm finally merged with the egg:

- Fear of losing control of its environment and space
- Feeling violated (side note, this is a classic example of predisposed sexual abuse trauma being triggered!)
- Loss of space
- Robbed of privacy
- Feeling numb and not able to have things my way

## Segmentation

## **Human Embryonic Development**



Segmentation is where the magic happens as this phase is all about transformation, transition, and the beauty of a cell rapidly developing into an embryo that will ultimately transform into a fetus and infant.

Any sense of self-awareness rapidly shifts and changes along with the zygote and its rapid growth. The zygote used to be a round egg, and now suddenly it merged with a sperm. The zygote transforms into two cells, four cells, and then eight cells faster than it can probably keep up with. This would be the perfect place to explore how well someone can make changes and adjustments in their life.

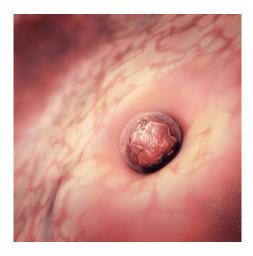
The emotional state of the mother plays a big role during the segmentation stages. Her emotional state along with the fast pace that the zygote transforms does have an impact on the zygote's (which will ultimately become the infant and adult) ability to adapt to changes, make changes, and make decisions in life. It could even be resistance to change. The list is endless, as not every mother will feel the same during this phase.

Students and clients who went through this process reported feeling

Loss of control

- Loss of one's ability to make their own decisions
- Feeling pushed into doing things
- Not ready for change but has to change

## **Implantation**



Implantation takes place when the blastocyst attaches itself to the uterus wall. The blastocyst can't attach to the wall of the uterus unless it releases a protein that allows the blastocyst to stick to the uterine wall. In the Metaphysical Anatomy language, protein means love, needing love, or reaching out for love.

I have noticed a discord in a mother and child's relationship where they had trouble bonding. This can often relate back to the blastocyst not being able to connect properly to the uterus wall. That would also tell me that the emotional state of the mother could have been that she wasn't ready to become a mother, or that she didn't have a suitable partner to raise a child with. She could have had a deep fear of projecting her unresolved mother and daughter stress onto her future child, as the uterus wall also secretes a chemical that works along with the protein secretion from the blastocyst that makes the uterus wall sticky and allows the blastocyst to attach to the uterus wall.

This tells me that the mother's emotional state at the time of the blastocyst attaching itself to the wall has a lot do with the readiness and the amount of chemicals that the uterus wall secretes. I have had students report that during this process they also felt the following feelings surface:

- I can't do this, I can't connect
- I don't feel grounded
- Feeling rejected by the mother
- There isn't enough love available (not enough secretion of the chemical from the uterus and blastocyst that is needed in order to connect properly)

Questions to ask and also explore: How does the uterus respond to the embryo presence? Is the need for love met? Is the embryo receiving enough nutrition? Does the embryo feel under attack by the mother's body? The reason why I say attack is that technically speaking the mother's body would have detected the blastocyst as a parasite, as an invasion in the body that needs to be fought against.

The only reason why the mother's body doesn't react in this way is that the blastocyst releases a hormone that allows it to fly under the radar so the mother's body and immune system doesn't attack the blastocyst. This to me is such a brilliant example of a hidden instinct that is already triggered (in a good way) and active.

I have had students report that during this process they also felt the following feelings surface:

- Invisibility, having to hide
- Needing to hide and be invisible in order to survive

The above-mentioned points seemed to have been more metaphors rather than actual activations at that point.

If this blastocyst conception was conscious then there would be less chance that the blastocyst would hold the burden of feeling as though it was in the way. This might create deep unconscious feelings, such as feeling unwanted and feeling like a burden to society, once this blastocyst matures into an adult. It could also feel that it doesn't belong in the world.

## Chapter 6: Medical Ailments and Pregnancy

## Thyroid Problems and Pregnancy

This is a topic that sounds familiar to thousands of women. It's so common that we seem to take for granted the influence it can have on women that are expecting an infant. What concerns me is that we are not educated enough about the symptoms of these conditions in order to recognize them before actual damage has been done to the biology. This is an ever-increasing problem, and I decided to explore this issue on a completely new level.

Our lives are busy with endless appointments and errands to run, and we ignore vital signs from our bodies. Our physical health has taken the back seat, while we focus on everyone around us, except ourselves. This is a clear indication that we are in need of new boundaries and enough self-respect to say no when our body tells us to.

Boundaries – When we have healthy boundaries, we can speak our truth with confidence without feeling we have to justify it or fight for it. When we have healthy boundaries, we know when to say no and when to say yes, without feeling overwhelmed and manipulated. Healthy boundaries are an indication of self-respect (having enough respect for yourself).

The average woman tends to suppress her truth and voice because of unhealthy boundaries and not feeling worthy enough to express herself. We seem to feel that we aren't allowed to take up people's time by expressing our opinions and views.

It's in our genetics to think that we can provoke a confrontation if we speak up. When we suppress our truth for a long period of time, our bodies will start to react to that suppression and will try to communicate to us that there is a problem, a problem that goes much deeper than just a medical symptom.

When we ignore the messages in our body, physical issues can start to develop that cause us to stop and listen. However, sometimes we don't know how to interpret these messages, which can cause a challenge in dealing with the issues.

Due to this old historical pattern, our bodies have suffered enormous suppression by holding back our truth. Your thyroid might swell up a little bit and feel congested when you find yourself in a situation when you feel the need to say something, but you hold back from taking the opportunity of speaking out.

People with hypothyroidism normally experience a great deal of stress that relates to speaking their truth. They will hold back and suppress as much as they can until one day when they've had enough and start to speak up. When they finally speak up, it's by means of an outburst.

These outburts can be quite defensive and harsh due to the long-term suppression of their truth/opinion/needs. They can also suffer from a subconscious, bitterness towards people and society. They feel robbed of their right to speak up, normally due to communication problems with loved ones during their childhood or a genetic inheritance. It is extremely important that they explore how to communicate in their daily life and if there are specific people who trigger their ability to speak up and why.

Common symptoms of hypothyroidism in a pregnant woman can be tiredness, weight gain/loss, nervousness, feeling warm, fast heartbeat, trouble sleeping, and nausea. As you can see, all these symptoms can be normal for a pregnant woman and can be easily dismissed as normal pregnancy phases. Consult with your doctor immediately if you suspect that you might be suffering from hypothyroidism.

You can determine whether you have hypothyroidism by doing a simple blood test. Doctors can easily treat this condition with medication. However, I have strong opinions about this (I would never rule medication out though), as I would rather go on a raw food juice diet to balance my thyroid, but let's be honest, this will not always work for everyone.

Hypothyroidism is autoimmune, and it's common to have diabetes along with this condition. It's always important to get tested for both conditions if you suspect that you might have either to rule out the possibility.

A pregnant woman with hypothyroidism can influence the fetus's brain development and the baby's growth. Birth defects seem to be a rare occurrence with this condition; however, it's not impossible.

The question in the back of my mind is if pregnant mothers with hypothyroidism can give birth to children that have a predisposition for Type 1 diabetes?

I have also once noticed that there is a possibility that pituitary problems can result in hypothyroidism as a secondary issue.

If you are planning on becoming pregnant, then take note of symptoms such as irregular periods, heavy periods, loss of periods, tiredness, weight gain, or a congested sensation just above your collarbone in your throat where your thyroid is located. These could be symptoms of pending hypothyroidism.

Possible emotional blocks in your life to take note of:

- What stops you from speaking out?
- Do you know how to speak your truth with harmony and calmness (without fearing that you're going to provoke a confrontation or without fear of rejection)?
- Do you feel worthy of expressing your needs to others?
- Do you respect your own needs?
- Do you know what your boundaries and limits are?
- How much do you value yourself?
- How important do you feel in a crowd of people?
- How easy is it to say no without feeling guilty?
- Can you communicate yourself to an authority figure with ease and grace (with no fear or lack of confidence)?

I once learned that it's common for women to have thyroid problems after childbirth. The fetus thyroid puts out antibodies against the mother, which in turn causes her thyroid to underfunction. This does beg the question: why do some mothers struggle with thyroid problems after giving birth and others don't? My

opinion would be that it depends on the emotional stress that the mother has been under during her pregnancy, especially when you combine the psychosomatic patterns as described in Volume 1 under Thyroid Problems.

Also, during pregnancy, the mother's pituitary gland puts out large amounts of thyroid hormones, which are needed for the infant's growth. It begged the question: could this be one of the many causes of obesity in children from a very young age, especially if the mother's pituitary gland was not functioning as well as it should (depending on many possible influencing factors) and created an imbalance in the release of the hormones?

It is crucial for the thyroid to work properly so that the body can absorb necessary minerals to support the body as it matures.

# Can Cancer Cells Affect a Developing Fetus?

I've been asked this question by many of my students and clients. The answer to this still remains a bit ambiguous for me given my perspective on how genes and ailments express themselves in the human body.

First of all, we all have cancer cells in our body. Every single person does including you and me. The reason why the cancer is not active and growing in everyone's body is that the body does have a defense mechanism against these cells.

There was a case that came forward where doctors thought that if a pregnant mother has cancer that it can move through the placenta and affect the fetus.

Kean (2009) reported an interesting article which was to confirm pregnant women who suffer from cancer could pass down the ailment to the fetus although it is very rare.

During early 2007, a twenty-eight-year-old Japanese woman gave birth to a girl. The mother was hospitalized thirty-six days later with unruly vaginal bleeding. The doctors diagnosed her with leukemia, and she died shortly after. Everything was fine with the baby until she reached eleven months, when a huge tumor appeared on her cheek. A biopsy determined it was a leukemic tumor trapped in her cheek. One of the staff at the Institute of Cancer Research in

Sutton Surrey, United Kingdom, whose name was Mel Greaves, investigated the infant's condition with the help of his colleagues.

The tests proved that the cells came from the mother, as there was no genetic material from the father. This indicated that the transmission path was from the mother to the fetus. Greaves said, "The cancer succeeded, because it was immunologically invisible."

If this is in fact true, my opinion would be that the cells were transferred and not detected by the fetus's immune system, which would indicate that there was already a very strong predisposition for cancer, so much so that perhaps the fetus's immune system was already weak and not able to fight off the cancer cells, which triggered the already existing cancer that the fetus already had in her body. No study or evidence has come forward regarding this specific case whether the health of the baby girl's immune system was tested. The psychosomatic patterns behind this dynamic can be found in Volume 1 under Cancer and Leukemia.

Despite the result of the study, Greaves claimed that mothers do not have to worry, as there were only a few dozen cases of mother-fetus cancer transmission reported since the first case in 1866. With the help of modern advancements in the medical field, transferring advanced cancer to infants is not necessarily fatal. The Japanese girl was successfully treated and is still alive.

The psychosomatic side to this case still fascinates me, as it would indicate to me that there could have been a great deal of resentment, fear of being attacked, and a great need to be invisible and "fly under the radar."

It's unknown what the mother's circumstances were and, based on the article, it seems that the father was absent when genetic testing was being done. This already tells me that the mother must have been under a great deal of stress, as she could have been in doubt as to whether the father would be there to support her or not. Also, the reason for the father's absence could have been due to a challenging dynamic that took place between the mother and the father. Stress in this relationship could have activated and triggered a range of deep and intense emotions depending on how stressful the relationship or the mother's environment was that could have caused these ailments to be triggered in her biological make-up.

Ultimately, the emotional stress had a ripple effect on the fetus's development and immune system.

# Toxic Exposure and Autism

There has been a long-standing debate as to what the real cause is for autism. One aspect that seems to remain consistent through historical research is that one of the contributing factors is the vulnerability towards noxious environments found specifically in pesticides.

What is the relation of pesticides with autism?<sup>5</sup> The scientific jargon, prenatal exposure of chlorpyrifos (CPF), a common agricultural pesticide has been found to cause a lack of working memory index and full scale IQ on seven-year-old children. (Rauh et al, 2011)

Bouchard et al (2011) conducted a similar study to examine the associations between prenatal and postnatal exposure to OP pesticides and cognitive abilities in school-aged children. Their sample consists of predominantly Latino farmworker families from an agricultural community in California.

The methodology for that study was by using the urine samples from pregnant women and children with varying ages (six-monthsold babies, one-year-old to three-and-one-half-year-old children, and five-year-old children). They found that the mothers who have average dialkylphosphate (DAP) concentrations in their urine scored less for working memory, processing speed, verbal comprehension, perceptual reasoning, and full scale intelligence quotient (IQ).

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<sup>&</sup>lt;sup>5</sup> Bouchard, M., Chevrier, J., Harley, K., Kogut, K., Vedar, M., & Calderon, N. et al (2016). Prenatal Exposure to Organophosphate Pesticides and IQ in 7-Year-Old Children. Retrieved from <a href="https://www.ncbi.nlm.nih.gov/pubmed/21507776">https://www.ncbi.nlm.nih.gov/pubmed/21507776</a>

Rauh, V., Arunajadai, S., Horton, M., Perera, F., Hoepner, L., Barr, D., & Whyatt, R (2016). EHP – Seven-Year Neurodevelopmental Scores and Prenatal Exposure to Chlorpyrifos, a Common Agricultural Pesticide. Retrieved from <a href="http://ehp.nichs.nih.gov/1003160/">http://ehp.nichs.nih.gov/1003160/</a>

Rzhetsky, A., Bagley, S., Wang, K., Lyttle, C., Cook, E., Altman, R., & Gibbons, R (2016). Environmental and State-Level Regulatory Factors Affect the Incidence of Autism and Intellectual Disability. Retrieved from <a href="http://journals.plos.org/ploscompbiol/article?id=10.1371/journal.pcbi.1003518#s2">http://journals.plos.org/ploscompbiol/article?id=10.1371/journal.pcbi.1003518#s2</a>

Samsel, A. & Seneff, S (2016). Glyphosate's Suppression of Cytochrome P450 Enzymes and Amino Acid Biosynthesis by the Gut Microbiome: Pathways to Modern Diseases. Retrieved from http://www.mdpi.com/1099-4300/15/4/1416

Similarly, children with the lowest DAP concentrations quartile had significantly higher IQ points (by 7) compared to those children who were in the higher quartile. However, the DAP concentration in children were not very consistent with the cognitive abilities so there might be other factors besides exposure to pesticides.

If you're not yet convinced that one of the causes of autism is due to the chemicals used in the foods we eat, there are more studies that found the claim to be just that. In 2015, a study was published. The study conducted by Samsel and Seneff found that glyphosate, a popular herbicide used worldwide—typically found in corn, wheat, soy, and sugar—have the ability to interfere with our body's systems.

Glyphosate's contains the cytochrome P450 (CYP) enzyme that is toxic to mammals, as it detoxifies xenobiotics in the system. In addition to that, glyphosate increased the side effects of other foods that had chemical residues or environmental toxins. The repercussions of glyphosate is built up gradually and long-term; it causes inflammation, which destroys cellular systems in the body. As a result, obesity, diabetes, heart disease, depression, autism, infertility, cancer, and Alzheimer's disease are typically linked to Western food.

Rzhetsky et al (2013) utilize Truven Health Analytics MarketScan Commercial Claims and Encounters Database which covers one-third of the US population and poisson distributed count data to infer that neurodevelopmental maladies such as autism spectrum disorders (ASD) and intellectual disability (ID) could be formed via environmental factor. They found out that certain birth defects were linked to parental exposure to the environment. The environmental factors include pesticides, environmental lead, sex hormone analogs, medications, plasticizers, and other synthetic molecules.

Children who suffer from autism or intellectual disability were statistically linked to parental occupations such as janitor, maid, or landscaper just to name a few.

These four scientifically proven studies, which had been conducted by different researchers, came to the same conclusion: environmental hazards may be one of the factors that cause autism. Those studies having similar results, show that the theory is not only

#### Evette Rose

proven, it also has a higher reliability, as they correlate with each other.

There have been speculations and research done regarding immunizations that could also cause autism. In my opinion, this is most likely true. However, from my perspective, I would say that there was already a high sensitivity to toxicity and perhaps the fetus/baby's immune system had been challenged to a point where it was not able to protect the body from the chemical influences found in immunizations or other toxic exposures from his or her environment (this can include the mother's diet and medication she took while pregnant with the infant).

# Chapter 7: Fetal Developmental Stages

Womb trauma can take place from the time of conception to the very last moment that the fetus was in the womb. Womb trauma or stress takes place when the mother of the baby experiences a great deal of stress or shock. Womb stress also takes place when the mother experiences repetitive negative emotions such as anger, feeling abused, etc.

When the mother experiences physical pain/trauma, it can affect the fetal development during any period of his or her womb stages from seventeen weeks to nine months. At this point, the fetus can experience the mother's emotional stress at the time of the emotional stress and/or physical injury. The mother's trauma or stress creates shockwaves that can be felt by the fetus, as there is a disruption in the mother's heartbeat, and an increase in adrenaline, cortisol levels, and even hormone levels. The fetus can sense that his or her environment has been compromised in one way or another, as the fetus is normally used to the soothing rhythm of the mother's heartbeat.

I also would like to make a very important point here, as you'll notice that I make many references toward the mother and what her emotional state could have been during you or your client's fetal developmental stages. However, that doesn't mean that because she experienced certain strong emotions or trauma that it is her fault that perhaps certain ailments developed in you or the client.

Life happens. Emotions are meant to be felt, and it's impossible to go through a smooth-sailing pregnancy. That is very rare for most women. No one is to blame here. This is how the body is designed and how the programming takes place during stressful times. I strongly believe that we choose our parents, family, culture, and

ancestry line to support or challenge the purpose of our journey in one way or another.

What that purpose is, is different for each and every one of us. What could be a curse to you could be a blessing for someone else. It all depends on what our goals and purpose are.

The more I researched and typed, the more I realized I was going to end with yet another 700+ page book similar to Volume 1, and that wasn't my intention for the purpose of this book. The examples that I share are from my research, and I touch on certain points, so as you go through the points you might have your own insights and see pieces in your own life starting to click into place! Here I share just a few examples of what I have come across.

The womb phases are the stage of growth and development that fascinate me the most. There is so much happening during these fetal stages. It ranges from the programming that takes place between mother and baby, how the organs develop and the programming that takes place, how the fetus observes and becomes aware of their environment, and even the ailments that can start during these stages due to stress experienced by the mother. Not all ailments start or are triggered and transferred during the segmentation stages, as many traumas are still carried over and programmed into the fetal biological make-up. Predisposed ailments can also be triggered later in life, such as during birth, infancy years, childhood, and adult life.

During the womb stages, so much is happening that it's almost like a chaotic structure being perfectly planned, or almost like artwork that is being designed. This includes spiritual decisions being made (during this phase soul contract negotiations are still taking place), how the fetal body responds to the mother's diet, medications, and allergies that she has, and so forth. The list is endless!

A big victory moment was when I finally found research done by scientists that confirmed that the placenta does not in fact serve as a barrier between the mother and the child, especially in the sense of emotional stress that is experienced.

It has been discovered that the protein cells between the inner and outer lining of the placenta start to record the mother's stress and emotional states (especially when elevated by mood swings, anger, and so forth). This is even more re-enforced when the mother experiences physical pain, as the pain felt by her body sends a shockwave throughout her body, which disrupts the peace that is experienced by the fetus in the womb. The fetus can feel and sense that there has been a change in his/her environment, and it's not a positive one.

The fact that a fetus at the developmental stage of two months knew that he/she was going to be aborted and die when the mother went for an abortion, shows and proves that the fetus does in fact have a survival consciousness already fully intact, even though it doesn't have an intellection brain.

There was a study done where an abortion was filmed, and it showed how the fetus tried to move away from the instrument that tried to abort it. The fetus knew that his/her environment had been invaded (compromised) and that there was danger that he/she needed to get away from.

The same consciousness applies to the sperm and egg that knew what to do in order to fulfill their roles and what they were programmed to do. There is a coded program and genetic instructions that allow these amazing cells, sperm, egg, and fetus to be aware of their environment and have a basic instinctive sense of what to do in order to survive. Ultimately, the body and mind, at the core level of its programming, are designed to survive. If it wasn't, you probably wouldn't be reading this, and I wouldn't have made it far enough in life to write this sentence.

Now, let's look at how the fetus develops when certain organs develop and how the fetus's environment can affect this process. I will be explaining this in broader terms, as this section alone deserves so much more than just one chapter.

Keep in mind that the timeframes that I use in this model are based on estimated timeframes. I have done a great deal of research on this and everyone seems to have a different timeframe.

#### Week 1

During week one, the kidneys will start to form along with the thyroid tissue (important note: people with thyroid problems should be exploring this development phase and find out what was taking place in their mother's life that made her feel out of control, unable to speak up, or feeling unheard when she did say anything). If the thyroid is overactive, explore out of control circumstances or a feeling of urgency that is always in the back of your mind even though nothing in your external world would justify you to feel that way. The groove in the middle of the back also starts to form (this area in the Metaphysical Anatomy language is where we hold shame, family secrets, and humiliation) if you have problems in that area of your back, it begs the questions, "What shame or humiliation did my mother feel at that time? What family secret was she avoiding or knew of and chose to give it a blind eye?"

## Week 4

As we approach the four-week mark, the heart starts to beat. The eyes, ears, and stomach are forming. Now it starts to get interesting.

I had a client who was born with tinnitus. When we worked together, we found that his mother and father were building a house at the time when his (the client's) ear developmental stages started. The mother would regularly go to the house, and there would be a lot of drilling noises and loud construction-site noises. This all clicked into place when I also explained that he couldn't handle any kind of grinding, drilling, and hammering noises!

At such a young developmental age, he already formed negative associations with the sounds that were around him, as it clearly also irritated his mother based on what she told him from the time the house was being built. The noise also disrupted his peace and harmony in the womb, while his ears were being formed. In the client's case the noise and stress were being recorded and programmed into that area of the fetal development.

Remember that it wasn't just the sound alone. If you have ever been close to a construction site, you'll understand how intense the noise can become and, oftentimes, the loudness of it feels like its vibrating right through your body. When damage and loss of the tiny sensory hair cells in the cochlea of the inner ear occurs, that is when a person can develop tinnitus.

Once again, when you look at the Metaphysical Anatomy language for this ailment, it's all about what you don't want to hear, needing to block it out, "What I hear irritates me," and so forth.



Remember that the eyes and stomach also develop at this point. Again, if someone has eye problems, my first knee-jerk response would be to ask what their mother was going through during the client's early development stages. Was the father cheating? Was there abuse that she was in denial of? What did she perhaps not want to see or acknowledge in her own life at that time?

The same concept applies with the stomach. Did the mother have family trouble, especially with the in-laws or even her own mother? In the Metaphysical Anatomy language, the stomach normally represents your relationship with your mother. Many people say "What can't you stomach in your life?" That's just following yet another symptom that can take you ages to get to the bottom of. Excessive gastric acid plays a role that is connected to anger and resentment, which in short will lead you to failed personal boundaries and not knowing how to communicate these boundaries in a healthy way.

Instead, I would suggest exploring female relationships within the family. I have even heard clients say their relationship with their mother was great, but that was only because they didn't know any better, because other than the relationship they had with their mother, there was no other healthy reference point. After asking the client a few more questions, the point that I was trying to establish became clear.

### Week 6

During week six, the stomach starts to develop and the sex glands become either female or male. I know, the big question, does this moment determine whether the person is gay? In my personal opinion, the answer is no. Some might say that the mother might have had a lot of responsibilities and had to take on a masculine role while she was pregnant with a female baby and vice versa. Being gay is a genetic predisposition and could also be a result of womb stress and hormone imbalances. It's just like any other gene that can get switched on or off. It's the same reason why people can become attracted to people from a culture that is foreign and different from their culture.

Genetically, we are programmed to stay within our culture. It is almost the same as in nature. Lions mate with lions, not with tigers, or elephants, etc. Any mixtures that are there are due to human manipulation and intervention. In other words, humans play god with the laws of the animal kingdom. The reason for this is to ensure the survival of the animal species. There is no other reason other than the survival aspect of it.

As humans, we have intellectual brains and more complex emotions, which means that we see and experience life differently from that of an animal. It is also for this reason that the emotions that we experience are a result of our relationships and environment which can alter our genes due to the intensity that we experience them—meaning was it positive or traumatic?

We are more prone to creating unnecessary trauma and drama that the body isn't designed to deal with, whereas animals are much more simple and straightforward with their actions and reactions. This, however, is just my personal opinion and observation. During this period, the skeleton is also forming. We often hold emotional resentment toward the mother in the skeletal system. Resentment that relates to unhealthy support is also held in the skeletal system. This could be a result of support that was given wasn't shown or taught in a structured and logical way that is easy to follow and understand which also strongly relates to the skeletal system and especially the spine. If the mother wasn't supported in a healthy way during her pregnancy then that can energetically show up in this area as well.

If the mother had an unhealthy diet, then the bone structure and the strength of it could be affected. This can be reflected in a person not feeling emotionally strong or feel "I am weak. I am not emotionally strong enough." There is also a breakdown in communication, perhaps in the mother's life, that could have caused her a great deal of stress. In the Metaphysical Anatomy language, bones, blood cells, and the nervous system strongly relates to communication and stress or trauma.

The baby's developing nervous system is regulated and programmed by the mother's stress within the womb. Once the baby is born, this process continues to develop and be programmed by their interaction with the mother or primary caretaker. This is further discussed under the limbic system.

Muscle mass also starts to develop during this stage. In the Metaphysical Anatomy language, muscles emotionally represent rigidity, stiffness, or an unwillingness to change or compromise due to a lack of trust in oneself and the environment, just to name a few. This makes perfect sense when you also see that the brain develops at this point. That means control, control, and control! If we don't have a brain, we cease to exist as a normal, functioning human being. The brain is the center hub, or like the motherboard of a computer.

Muscles and the brain area almost speak the same language or hold the same role and psychosomatic patterning. The need to control represents the brain. The muscles, on the other hand, is about being rigid with the intention to control and be in control either emotionally or within one's environment. In this case, it would be good to explore how the mother was feeling during this developmental period. Did she feel like she was losing control and

needed to overcompensate by being too rigid and stubborn? In some cases, it can even be the other way around.

Rigid muscles are also related to the freeze instinct cycle that never completed after a shock or traumatic event took place. This can take place in the womb, especially when the mother experienced physical pain while she was pregnant.

### Week 8

During week eight, the head area, limbs, ears, and heart start to take more of their final form.

The spinal cord formation also starts to form. I often notice that people who suffer from scoliosis tend to find stress points during this developmental stage. It could be that there is a predisposed program already in place that was transferred during the segmentation stages that are being activated at this point, depending on the stress that the mother was feeling in her life at that time. This can also include built-up stress and tension that has taken an emotional and psychological toll on her.

It also relates to unhealthy support that was given. The mother could also have felt torn between two families due to conflicting values—perhaps the mother wants to do something or live a certain way that isn't accepted (this is just an example amongst a list that could be endless).

Then you also have divisions of the future vertebras that start to form, and the heart tube, face, and neck start to form. The heart development area is particularly important at this point, as the heart is responsible for beating and allowing blood to flow throughout the body.

If the mother was feeling a great deal of stress, this is often the end result of conflicting instincts that aren't completing their cycles—the body feels confused as to which instinct to respond to. So, you end up in what I would call a stalemate: the body starts to feel stressed, as it knows it needs to do something with these instincts, but it doesn't know how and when to act. This often leads to stress and anxiety, but it's not necessarily the root cause of anxiety and stress.

So far in studies and research, I have found this to be the case when someone suffers from heart palpitations, heart arrhythmia, and heart problems in the general. This topic can become quite complex, so much so that I could even write a book about it.

If the mother was living in a highly stressful environment or was with an abusive partner, then the development of the heart during this stage can be affected and programmed with stress, anxiety, and so forth. The heart can also be affected by the thyroid, as they hold very similar psychosomatic programming and patterning. The neck in the Metaphysical Anatomy language relates to being controlled, feeling unable to move in the direction that you want to move in, due to feelings of obligation and responsibilities that you might not be able to move away from.

The lungs also start to form during this time. However, in my research, I've noticed that often programming and stress takes place after the lung development. However, unless of course there was a genetic predisposition activated during segmentation, then it potentially starts to show signs here. If the mother was going through a period of grief and/or experienced the death of a loved one, then the heart and lung development can be affected as a result of the emotional stress from the mother.

The liver starts to develop and be seen. Remember that the liver holds anger, which is the end result of feeling powerless/vulnerable/loss of control. The anger, though, does seem to be drawn more to the liver than to other body parts, unless there was an actual injury or weakening in the tissue, then the anger can move to that area and surface as pain.

The pain is there to show you that there is a message and an unresolved emotional stress in the body that needs to be addressed. Pain isn't meant to debilitate you. It serves a purpose, and that is to help the body get your attention when something isn't working as well as it should or if you're holding onto an emotional trauma and state of mind that isn't serving the body and your purpose in a healthy way.

The gallbladder, along with the liver, also forms during this period. The gallbladders along with the kidneys are the holders of resentment. The gallbladder relates more to resentment that's often related to violation, sexual abuse, or feeling emotionally bitter due

to boundaries that weren't respected. There is a difference though between feeling bitter and feeling resentment. Any high levels of bitterness and resentment that the mother might have felt during her pregnancy (especially if she had a negative association with intimacy due to past trauma) can be strongly programmed into this area. The same applies to the kidneys. However, the kidneys are more related to resentment toward a partner or authority figure (teacher, mentor, leader, etc.).

The pancreas can be a complicated situation. I would highly recommend that if someone suffers from diabetes Type 1 or 2 to watch the "Psychosomatic Root Causes of Diabetes Type 1 and 2 on my YouTube channel." It gets really interesting.

If the mother was feeling an overwhelming sense of responsibility towards people to whom she, in reality, didn't really need to be responsible for, then that level of stress can be seen and programmed in the pancreas. If pancreatic problems started to form during developmental stages, then that means in the Metaphysical Anatomy language that there was some sort of betrayal in the family OR that there was another child that was conceived outside of the family. This can mean that the father cheated on the mother and she found out (which would cause other forms of stress as well) and emotionally withdrew from the marriage. However, she still felt responsible and obligated to the husband, as she may have been too scared to leave him. This could be a result of the fear of raising a child by herself and losing support and security.

Then you have the rectal and urinary passage forming as well. I haven't found a great deal of consistency in my research of the rectal development. It seems that this area is more affected as a person matures during their infancy years to an adult. The same applies to the urinary passage.

Now the eyes are also forming. There could be a genetic predisposition for bad eyesight or other types of eye problems. However, I have seen cases where a baby was born and given glasses to wear when the parents discovered that he/she had poor eyesight. Normally, the first question would be: which parent wears glasses. If neither of them does, then I would ask which grandparents started to wear glasses during their life. It's also important to explore

what the mother didn't want to see in her marriage or life while she was pregnant.

Was she looking at the world through the eyes of pain, anger, abandonment, feeling trapped, and so forth? Normally, you would be looking at people and circumstances that are in her immediate environment.

The blood starts to flow and connect to the yolk sac that nourishes the embryo while the placenta is forming. That's why these early periods of development are so important, as the placenta has not fully developed to serve as a gentle barrier between mother and child. At around seventeen weeks, the placenta is formed and then it serves as a barrier between the fetus and the mother. However, the protein cells in the lining of the placenta still record the mother's stress and trauma that she experiences during her pregnancy.

The lymphatic system also starts to development at this point. If the immune system is challenged in the baby after birth, then I would ask the mother what stress she experienced during this phase.

What unhealthy relationships, friendships, or dynamics did she have? Who was toxic in her life that she was unable to move away from to avoid this person's circumstances or dynamic? Also, in this case, medication that the mother was taking during pregnancy could have a big impact on the development of the immune system of the fetus.

If alcohol and drugs were involved, then this can also greatly contribute. Alcohol is known for destroying vitamin C, which is crucial for the immune system. If the mother was drinking large amounts of alcohol during the early pregnancy stages, then the immune system could be challenged.

Hair follicles also start to form during this point. If there was too much testosterone in the mother's system, then this could affect the hair growth phase, whether it's evident after birth or later in their adult life. If the mother had too much testosterone, that would indicate to me that she lived through emotional or physical hardships (or either grandmother may have suffered hardships).

Too much testosterone in a woman's body would normally indicate to me that there were high levels of stress during her own womb stages. The mother of this person almost had to be the man

and the woman in the marriage. It also relates to having to endure hardships and not having any choice other than to go through with it, but with a very strong masculine approach that suppresses the feminine side.

Too much testosterone in women and men can often be seen in people who love adrenaline types of sports, such as skydiving, paragliding, extreme sports, etc. A woman's body shape would look very masculine. As a side note, hair loss can also be genetic. However, it doesn't make my observation redundant. Perhaps these experiences just took place much earlier in the ancestry line.

## Week 10

The neurons at the end of the spinal cord start to develop during week ten. This brings me back to the scoliosis topic. Once again, it's important to explore what the mother was feeling during this phase. The neurons relate to communication, and the lower back relates to financial stress and stress about being a good mother.

Now the testosterone traits in males become more obvious and take a more solid form in the biological makeup and expression. The same concept of the testosterone levels that I mentioned for women also applies here, only now it's in the context of men. On the flip side, I have also noticed that too much stress can actually challenge the body's ability to produce enough testosterone. That would tell me that the mother could have adapted a more submissive state and strategy during either abusive or stressful circumstances.

## **Fetus After 3 Months**

Now all organs have developed and are functioning. The mouth palate starts to form during this phase. If the mother abused alcohol or took medication that was unhealthy for pregnant mothers to take, then this area could be affected. In the Metaphysical Anatomy language, it would often relate to "I can't say what I need to say. I have to sedate myself from my environment in order to cope," or "I want to escape." It begs the question which boundary or truth

needs to be expressed and where does this person feel stuck and trapped?

The thyroid also starts to secrete hormones. It depends on the mother's level of stress and genetic programming how this plays out. However, as I mentioned in Metaphysical Anatomy Volume 1, if the mother had high levels of stress, then the baby could have an overactive thyroid, whereas if the mother took the submissive stance and her hiding instinct was dominant then the baby could have a very strong predisposition for an underactive thyroid that could be activated during womb stages or later in life.

Now things become even more interesting. Remember the part where I discussed the pancreas? During this phase, insulin becomes present in the pancreas. This could emotionally relate to the mother: "Who can I trust in my environment? Whose opinion or truth is right? What is my truth?"

There could also be stress associated with feeling stuck between one's parents' conflicting values, not knowing who is right and who is wrong. Ultimately, in one way or another, I have noticed that this pattern becomes internalized—the baby who then matures into an adult can often unintentionally become self-destructive. This would be due to the mother who internalized her pain that inevitably became destructive and reflected in her relationship with herself.

In most cases, pregnant women who find themselves in these situations don't have the option to really stand up for themselves, or they haven't come to the realization that they are worthy and entitled to do so. It could also relate to the mother being in a relationship with a husband or partner who was abusive and didn't know how to deal with this emotional state and consequences thereof, just to name a few options.

## Week 16

The teeth start to form in week sixteen, and teeth strongly relate to joy and decision making. There is often conflict regarding a decision that needs to be made. In most cases, the decision is often a big decision, such as "Should I leave the relationship or stay," or "I want to say and express to someone how much their behavior is hurting me, but I'm scared."

I have discovered in my research that people who have crooked teeth (that has not been corrected by braces or other types of dental interference) would report that their mother felt extremely unhappy and depressed during this stage. There was a complete loss of joy. The reason behind the loss of joy should be explored or even just the ripple effects thereof.

This also sparked the question for me, what stress was the client's mother experiencing while the client was in her mother's womb? Many people reported that there was even physical abuse taking place when the client's mother was in her mother's womb. Remember also what I explained earlier, dominant emotions and stress often express themselves again every third generation.

Even though the circumstances might be different, it still doesn't change the emotional response. For example, if the grandmother was beaten, hit, or emotionally abused, it would traumatize her (often, this would have taken placing during her childhood only to be repeated in her marriage).

Your mother was in her womb at the time when that happened, and you already existed in your mother during this stage. That is why it anchors or programs the trauma even stronger than any other period. These are just a few examples of many. However, this specific example has been the dominant one thus far in my research.

The teeth should normally be aligned next to each other and any disruption in that would raise the question, what disrupted your mother's joy and peace? What disrupted your grandmother's joy and peace?

Even though I have been focusing a lot on the maternal side, the paternal side should never be excluded.

The scalp hair also starts to form at this stage. Here the programming for it took place earlier in the embryo development stages, and it can be reinforced here, along with a predisposition for it.

Gastric fluid, intestinal glands, and sweat glands also develop during this stage. I have found that if the mother experienced a great deal of continuous stress during her pregnancy due to feeling dominated or physically / emotionally threatened, then these glands tend to be overly active, depending on the instinct that was active in the mother and the instinct that became active in the baby once he or she was born and experienced life.

## Week 20

The final lower limbs start to develop at this point. If the mother's diet was bad or she was malnourished, side effects of that can show up during this phase.

If there are any issues with the lower limbs, it's important to look at why the mother had a bad diet (if there was no strong emotional stress during her pregnancy). Was she ill? Did she use medications that could have influenced and altered the fetal development? Was she not eating enough because she felt self-conscious about how she had physically changed during her pregnancy?

Sexual shame and guilt can also show up in how the legs are formed. I have found in my research that people who have knock-kneed shapes tend to have a great deal of sexual shame. This could stem from sexual abuse, rape, and so forth in his/her life or from a strong predisposition. The client's mother may have had a strong negative association with intimacy and sex and this could have been present during the client's conception, which could have reinforced a strong predisposition for sexual shame.

If a person has bow-legged shaped legs, this would normally indicate malnourishment during the fetal development stages and show a lack of vitamin D and a lack of calcium (in the Metaphysical Anatomy language, vitamin D represents joy and calcium represents support and masculine protection, feeling safe and strong within oneself without needing outside influences).

Iron is also stored in the blood during this phase. Iron goes along strongly with the fighting instinct. If the mother was in a situation that made her feel defensive and on guard for long periods of time, then it can greatly affect the amount of iron that is stored in the blood. This also applies when the mother felt a great deal of anger. However, she may have suppressed the anger out of fear of expressing herself (unsure of the consequences, she didn't want to challenge the husband or other figures she saw as her superiors).

These intense emotions deplete the body of its natural energy resources, as it takes a great deal of energy to always be in a defensive state of mind. It also takes a great deal of energy when the fighting instinct is always activated, or suppressed and not acted out on.

What makes this phase even more interesting is that the spinal cord myelination begins. Myelin is a fatty tissue that surrounds the axon of a nerve cell. In the Metaphysical Anatomy language, the nerve cells would represent communication and fat represents protection and insulation.

Myelination takes place at a slow pace. It starts during the fetal development stages, and it continues to grow and form throughout a person's life into their adolescent stage. So, any physical issues with the spine, nerve cells, and myelination process can be backtracked to this stage, and then you would continue exploring the expression of the underlying issues.

Questions to ask and blocks to observe: Is trauma associated with communication? Is the client feeling unsafe or unprotected in their environment? Was there physical or unrelenting emotional abuse? Who and what did you or your mother need to protect yourself from? Who failed to support you or your mother during challenging times? What kind of stress was associated with asking for support? Did you or your mother have a positive association with support?

#### Week 24

Now the brain is mature and the alveoli<sup>6</sup> (small air sacs) start to appear in the lungs. Surfactant is a complex substance that is formed as a result of lipid and protein cells combining. Surfactant, in short, prevents the small air sacs from collapsing when a person exhales.

If there is a strong predisposition for asthma in the family line, then exploring this period (week 24) might reveal a few interesting factors as well as the time right after birth. If the mother was going through a stressful time, such as the loss of a loved one, or feeling

<sup>&</sup>lt;sup>6</sup> http://livehealthy.chron.com/fetal-lung-development-1062.html

suffocated and trapped in her marriage or environment, this level of stress with these emotional components can be programmed here.

## Week 28

During this period, the fetus's level of awareness of his/her environment starts to become more acute. The eyelids start to open and the eyebrows start to develop.

If the mother had high blood pressure and circulation problems in her body, then this can possibly have an effect on the fetus. This could surface as obesity and metabolic problems. A predisposition for schizophrenia can also be reinforced here if the mother was experiencing high levels of stress, especially if the grandparents went going through a time of war or events that caused extreme levels of emotional or physical trauma.

This has not been researched enough, though, and this is just one of several observations that I made. If this happens to be the case for a client, I would be looking at circumstances and dynamics in their environment that would make them feel fear, terror, unsafe, trapped, powerless, or feeling that they were at the hands of mercy.

In most cases, it isn't related to people around them but, rather, how circumstances make them feel. Their environment is triggering a strong predisposition for the above-mentioned emotional responses. (You could ask these questions of people that are close to this person and maybe they could help with the answers.)

## Weeks 26 to 36

At this point, the fetus is getting ready to be born. By now, the soul has moved into the body. The fetus has already become familiar with voices that are in his or her regular surroundings.

## Why Do People Respond Differently to Womb Stress?

Now, here is the one-million-dollar question. Why do some babies mature into adults that seem perfectly normal (the definition of normal varies from person to person but, for the purpose of this question, bear with me), but their mother went through very stressful or even traumatic events while pregnant?

My answer to this is that this person has a genetic predisposition for handling and dealing with high levels of stress. This can either mean that they are desensitized to stress to a certain extent or their threshold for dealing with stress is very high. This would mean that there is a certain level of dissociation that has taken place that serves the person.

I wrote in Volume 1 about this concept. The philosopher Frederick Nietzsche said, "That which doesn't kill us makes us stronger." In my opinion, I personally don't agree with this statement. It depends how a person reacts to the trauma after surviving it.

# Associations Form as Early as in the Womb

The mother and child have a strong bond that goes beyond words and emotions. There is a level of awareness of the mother's presence and emotional state that I would call more like an intuitive connection. The mother is the baby's only reference for security during the womb stages and that means when her emotional state is disrupted in a negative and stressful way the fetus does become aware of this shift. When the fetus's environment is disrupted he/she will naturally seek reassurance that everything is okay.

When the mother experiences physical trauma or shock, the fetus becomes aware and instinctively reaches out to the mother for comfort and reassurance. The fetus can form an association with reassurance or the need for safety or security with the emotion that the mother felt at the time of the physical trauma. The programming that can take place, for example, is: needing security or reassurance equals what the mother was emotionally feeling at the time.

Here are some examples of unhealthy associations that can be formed during times of physical trauma or extreme and continuous stress by the mother.

Mother's	Fetus reaches out	Association is formed
emotional state	for security	
Felt abused or	Security	Need for security is met by
powerless		abuse or feeling powerless
Felt ugly and	Comfort	Need for comfort is met
unattractive, not		by feeling unworthy, ugly,
good enough		not good enough
The mother was in	Security	Need for security is met by
some type of		shock. This person could
accident		attract turbulent
		circumstances needing a
		shock in order to feel safe.

## Evette Rose

# Chapter 8: Birth and the "Illusion" of Separation

Birth is a natural process, and it can be smooth for some or a very challenging process for others. There are several types of births that take place that have their own unique impact on a baby.

Generally speaking, there is a loss of personal space after birth. There are no physical boundaries around the baby, and a sense of loss (loss of connection from mother) is felt by the baby, especially when the baby feels stressed and is searching for the mother's security and reassurance and feels nothing in return.

Often, students would feel that they had lost their sense of self the moment they were born. Their comfort zone completely changed and the physical interaction from the medical staff activated a strong freeze instinct or feeling numb instinct (also known as a dissociative state).

If anesthesia or an epidural was used during the baby's birth process, feelings of fogginess, dazedness, and a strong feeling of losing control could be felt. These feelings are often programmed from the mother as the baby is being born. Once again, the reason for this is that the baby is still physically connected to the mother. The baby's need for security is met by the mother's fogginess, dazedness, and a feeling of losing control.

The baby doesn't have the intellectual mindset to understand what is happening. However, his/her instinctive responses are already activated and fully functioning. In this case, crying is an instinctive response, as it indicates to the mother that the baby is either hungry, needs a diaper change, feels sick, or is unsettled.

## **Prolonged Birth**

This takes place when the baby is stuck in the birth canal. Students who were stuck during birth had common thought patterns and feelings—I feel stuck in my life. Everything is closing in on me. I feel held back, controlled, and smothered by my mother.

There is a tendency to feel stuck in life, and they tend to get stuck in unhappy relationships, as they feel there is no way out for them nor do they feel that they can find the solutions to their problems to resolve it. They also felt challenged to start projects and goals.

A great deal of the mother's stress can be programmed into the spine, neck, and head area of the baby, as these areas will be under the most pressure. Anxiety can also be programmed in the heart area during this time.

## Forceps

If a baby becomes stuck, forceps are used to pull the baby out of the birth canal. Students have reported feeling that people are always getting in their way when they want to do something or start a project. They feel overwhelmed very quickly in day-to-day life. They feel that they are being "jerked around" in all directions by influential circumstances and events. They struggle to complete tasks and projects that they start. They don't feel competent enough to complete a task or to start one.

I see this as almost resembling the aspect of them that moved through the birthing process and got stuck, and then they weren't able to complete the process on their own. This could also be a point where the pain of the procedure is programmed in and around the head area, which could lead to head aches or even migraines as the baby matures, especially when this person becomes stressed and feels emotionally under a great deal of pressure.

They don't feel like they have a choice in what they choose to do in life and tend to be told by others what to do throughout the majority of their life. They feel pulled in all directions.

I've also noticed in students and clients who were born with the assistance of forceps that they find it challenging to have people in their personal space, and they can become defensive at the slightest hint of a possible oncoming confrontation.

They can project a presence of helplessness. They can create situations where they feel that they need continuous help and assistance from others and feel that they aren't capable of doing things by themselves.

#### Caesarean

This procedure is done when the mother is unable to give a natural birth. I have noticed that children born via caesarean tend to struggle to connect and experience their own emotions due to drugs used during the caesarean process.

The mother's emotions also have an impact on the child. As the baby matures, they want to do things in their own way and show their independence and strong character, as they felt robbed of that opportunity to do it themselves. There is a need for them to prove to everyone that they can do it, even if there is no one questioning their efforts or capability.

They don't often ask for support, as support would make them feel that they aren't capable enough of doing it alone.

## Induced Labor

They feel pushed too far beyond their boundaries and limits. Students reported feeling a violation of their right to make their own decisions.

They tend to develop a rebellious streak as a way to regain their independence and sense of self. They don't feel ready to take action and tend to need a "push," figuratively speaking, in life. Most students reported feelings such as panic and a loss of control. As the baby normally released his/her own hormones, that would have triggered instructions in the mother's body to prepare for birth. In this case the baby didn't release the hormones.

## Missing Twin

Many students have reported the "missing twin" in the womb. What if there was no evidence of an actual twin that died during the womb stages? It could be that the fetus felt the residues of a fetus that died in the womb before he/she was conceived.

It has also been traced back to being the umbilical cord that was cut off suddenly and the disconnection from the placenta, which was perceived as another living being/organ during the fetal womb stages.

Disconnection from the umbilical cord causes a sense that they have lost a part of themselves and that there was a twin with them in the womb, but the other twin "didn't make it." They feel incomplete and almost like they're grieving for someone that was supposed to be there with them.

## **Premature Births**

The baby often needs support to breathe, as they aren't able to do so on their own when they're born prematurely. Instinctively, the baby knows that he/she is meant to start breathing when they're born; however, the biological aspect of the body isn't ready to carry out this task.

Students have reported that they felt their body failed them. They could feel that they were supposed to start breathing but couldn't. They also felt that they were always in a rush and felt rushed by everyone. They always want to give up, and they feel frustrated because they don't want to do something anymore, because it was too hard or too overwhelming. Feelings of isolation and self-doubt are often the underlying feelings about a stress that took place. By just touching a premature baby, for at least ten minutes a day, it starts to promote their brain development and gives them a sense that someone is there, or mum is still there.

The mother could sometimes even be unaware how her emotions and physical habits could be affecting the baby in the womb. It's important to remember that tension-filled emotions feel like quite the norm to us. However, it can feel 100 times more intensified for a new being.

A premature birth can be brought on by smoking, anxiety, excessive stress, tension, food poisoning, or poor nutrition.

The baby felt stressed and overwhelmed in their environment and needed to escape. I have noticed a strong underlying feeling of resentment between mother and child. This is often due to the relationship that the mother had with her mother while she was an infant. These old memories are triggered by the new dynamic in the mother's life, where she often unconsciously repeats the mistakes she made with her mother during her childhood.

## Placenta

Students who struggled with feelings of suicide often traced it back to the moment when the placenta was dying even though the baby and the placenta were physically separated. There was still a connection, as the DNA of the baby was still active and alive in the placenta for a short period of time.

This is also the reason why children tend to be drawn to having a security blanket or toy. They found comfort in their placenta during their womb stages and, once they were separated, the separation anxiety surfaced (often the hiding instinct can be activated), and they needed a substitute for the missing placenta. People have described that the placenta felt like a twin to them while they were in the womb hence the "missing twin" concept, which many clients feel when they explore their womb stages.

Students who also struggled with overly active sweat glands and hot flushes actually reported they could feel their placenta being burned right after it was disconnected from them. I had a few students ask their mother's about these concepts. To my surprise, they confirmed that what they had sensed during this process was accurate.

I have also learned recently that leaving the placenta attached to the baby until the placenta dies isn't always the best approach. I found in my research that, as the placenta is dying, the tissue can become infected (often undetected by the naked eye), and it greatly challenges the baby's immune system. As the baby matures, he or she might be plagued by a weak and challenged immune system, which means that they are prone to the flu and infections.

## Associations with Life

The moment we are born, we are connected to our family and our new environment. We are given a name, a nationality, an identity, and often a religion and strong family values to follow. All these aspects contribute to who we become, whether that means we accept these guidelines or not, it shapes us in one way or another.

Associations are also formed during and after birth and not just during the womb stages. In fact, we never stop forming associations. The only aspect of associations that change is the way

that we form them as we mature throughout our life, since they become slightly more complex. Trauma and stress that affected the mother's womb can create a false association for security.

## **During Birth**

The baby is still physically connected to the mother and the associations formed here are formed in the same way as they would during the womb stages. The associations here would depend on the type of birth a person had. The associations formed during this phase are often closely related to the emotional states that are described at each birth section in Volume 1. The information mentioned there are glimpses of the research that I have done and can be great kick-starters during a healing session if needed.

### After Birth

After birth, the mother is absent, meaning that the baby isn't physically connected to her anymore. Associations are now formed along with the instinctive responses that the baby feels. The instincts are still basic such as feeling hungry, sick, or unsafe. It would depend on the baby's genetic predisposition which instinct is more dominant than the other instincts.

Associations are made fast as the baby's awareness and senses are almost over stimulated as it's adapting to a new environment that has light, temperature, and physical obstacles. For many, this association will be life equals coldness, or life equals anxiety, abandonment, loss of personal space, etc.

# Chapter 9: Where Is Trauma Experienced and Recorded in the Body?

It is stored in the brain, physical body, muscles, nervous system, master cell, and in soul copies. It also includes the fascia.

So, the short answer is anywhere! Emotions and trauma are stored in different parts of the body. It's recorded in what I would call the mind model, heart model, and reptilian model. It's also stored during your womb phases in the fascia—a fibrous connective tissue that is present throughout the entire body—neural pathways and synapses, mirror neurons, the nervous system; limbic system, spinal cord, brainstem, midbrain; and then, last but not least, the master cell.

During this chapter, I'm going to teach you how to resolve emotional stress and trauma in the body in a very effective, deep, yet gentle way. We'll explore easy steps to resolve stress in the body by using the language of emotion. Throughout the steps, we'll gently remind the body how to gracefully complete a cycle without being re-traumatized.

More observations about the nervous system and how trauma affects it, is shared under the limbic system.

# The Difference Between Emotions and Emotional States of Mind

What is the definition of emotions? Emotions are driven by an instinctive response from the body. They also relate to our circumstances and experiences with others, especially to our nearest and dearest. In my experience, it often stems from a place of unresolved trauma or stress.

This often relates to negative emotions that aren't always serving us in a positive way, as they stem from a place of unresolved pain and negative experiences. I know what you might be thinking, but what about the positive emotions? They are there and they are wonderful experiences to have.

However, and here is the big but, we also have what is called positive trauma and/or positive emotions. These sensations are experienced when we laugh or experience moments of ecstasy and bliss. This means any positive emotion but, in this case, to the extreme. It's like when you laugh and then you start crying from the laughter. Once the positive emotion wears off, you feel tired in the end after having experienced it. Let me explain by introducing the concept of positive trauma in the language of Metaphysical Anatomy.

Our natural states are calm; there is no trauma associated with our natural states. This means that when we experience the gratitude state for example, you feel a gentle and calm state of gratitude towards yourself, others, or your environment. States are natural and gentle. States are not heightened emotions. It's almost like playing classical music in the background or just a pleasant presence that is always there. Even when you get upset, this state always returns. When you experience a state, you feel calm and peaceful along with the description (symptoms) of the state that is being experienced.

We all have different states of mind that are being experienced, as we have different predisposed traumas and patterns that are playing out in our lives, and these predispositions can be blocking certain states from being experienced and felt depending on the amount of trauma that we have experienced and which kind of state it can be blocking.

Our natural states are calm and peaceful. There should be no positive or negative charge. Even heightened positive states such as nervous laughter or even excitement can and will drain your energy and, even though you associate positive experiences with these emotional reactions, it doesn't mean that they're always necessarily good for us.

Anything that can potentially drain the body energetically is considered trauma (yes, that includes positive trauma). Positive

trauma is trauma, and it depletes you either way. Our natural states are consistent and gentle and don't cause any stress to the body. Our natural states are there to keep us calm, in harmony, and coherent within ourselves and within our environment.

Our gentle and natural states of mind come forward when our head, heart, and gut are in alignment and are in sync and harmony with the same message, and the body has a clear understanding when a threat is real and when it's not. This is the best state of mind to make a decision and this can easily be achieved by meditation. Yet, to hold and maintain a natural state of mind, some deeper digging might be necessary to establish this and find the answer and root causes that are blocking these states.

When your natural states are coming forward, you're in harmony with your intuition and your environment. You're also able to see and experience your life in a way that is not influenced by trauma. Keep in mind that when a natural state is recovered, that doesn't mean that all your traumas have been healed. You will still feel a state of gratitude or happiness, for example, but that doesn't mean that you won't experience anger or frustration at some point again. There are underlying drivers that can trigger the anger or frustration, for example.

When the anger or frustration wears off, you go gracefully back to your state of gratitude, joy, or whichever state is dominant for you at the time.

## **Our Inner Resources**

An inner resource is a feeling or instinct that exists in your natural state of mind (free from trauma). Some examples include love, joy, or abundance. It's how you were meant to feel, how a healthy person feels. The reality is that most people don't access these types of feelings and certainly not all the time. Some people might briefly access them, for instance, feeling joy in some contexts (e.g., eating, shopping), but rarely permanently. In relation to working on one specific trauma, we can define the resource as the inner ability that you or the client would have needed to have in order to have prevented or not attracted the trauma from happening.

## The Nature of Ego and Beingness

Spiritually, we experience the ego as the part of whom we are, such as in our biological make-up and character. This experience also contributes to us feeling separate from others. There is nothing wrong with having an ego—it is often a necessary illusion. Without an ego, in most cases, we would not achieve or aspire to our goals within a competitive environment, which is what we seem to be faced with on a consistent basis.

It is how we go about achieving our goals that define whether the ego is being used in a constructive or destructive way. Your ego is part of your biological makeup, but it doesn't have to control you. When you become coherent with your higher self, you start to move beyond the ego and into a place of compassion, tolerance, and understanding with clear discernment. That is the essence of you that 'just is'—you exist, and it's that place of existence that I'm referring to here.

To be honest, I would not ever suggest eliminating the ego, as it's part of our healing journey and personal growth. Instead, I would suggest working toward a coherent and harmonious relationship between your identity as a spiritual being and your ego identity as a human being having a human experience.

The reason why I introduce the concept of beingness is that it enables you, as a practitioner, to focus on the part of you that is consciousness and detached from materialistic expectations, pressure, and emotions that are driven by your biological make-up. This is for you to create a space for yourself within yourself where you can give yourself permission to step into a sense of power that you once thought was only meant for evolved yogi's, gods, or chosen healing practitioners.

It's an invitation for you to gracefully step into a place of awareness where it's just you and your intuition, which ultimately is your soul guiding you and serving as a channel between your consciousness and your physical reality.

I invite you to realize that by just being you and being coherent with your soul and biological body that you have no need for anything outside of yourself, as you already have all the resources that you could possibly need spiritually and physically in order to achieve your desired results.

This does bring a more complicated topic forward, what about those that don't heal, especially if they have all the resources that they need physically and spiritually; then what is the deal here? We always have to remember that we are all here to have different experiences and how those experiences play out will be unique to each of us. What you perceive as a flaw in someone might be a gift to him or her. Allow yourself to go with the flow of life, especially when participating in a healing session.

A wonderful way of connecting to that aspect of your deeper sense of self is to imagine a beautiful ball of white light that is above your head. Feel the essence of it, the purity and the lightness of it. Then, allow it to gently drop onto your head and slowly move down to the heart space. Allow it to just sit there for a while. To hold that state of awareness can be challenging as it shifts your mindset and perspective to such a gentle state that it would be hard to keep, as the world right now doesn't support this level of interaction and connection quite yet. Your daily stress can pull you out of this state. It's a good practice to reconnect back to your authentic self.

#### Perception of Truth

When a bird looks at the world, it changes its reality completely and how its consciousness exists within it. What you see and experience doesn't matter to it, because the bird doesn't see it nor is it aware of it. It even changes the existence of the sun! So what is the truth?

It depends on what your definition of the truth is, because it might be different to what another person's definition is. So, here you have two people telling the truth, but to both of them, it seems that the other one is telling a lie, because their values and definition of what the truth is, is different. So, who's wrong?

Neither person is wrong, because one person's truth is their truth, and your truth is your truth. The only way to see eye-to-eye is with a willingness to compromise and to meet each other halfway. That's when a more solid foundation of truth has been reached, when two people can agree on a value and belief in a non-

confrontational way that leaves both parties at peace with their final conclusion.

For example, 2 + 2 = 4. It is a fact, and therefore the truth, because we all agree on it. We accept it without creating war or conflict over it. As humans, we created the concept and the algorithms, but what's important is that this invention and algorithms work, and it works universally. Whether you like math or not, it just works, and it's something that we all agree on.

It doesn't really matter whether you see or hear the knowledge. It's really just a question of how you feel most comfortable receiving new knowledge.

We have a filter in our mind that is called the reticular activating system (RAS) that filters information in and out of our reality and greatly influences our truth and what we perceive to be our truth. The part of the brain that controls the RAS has an important job. It's like a gatekeeper at a soccer game. The RAS is composed of several neuronal circuits connecting the brainstem to the cortex.

This little bit of brain matter is responsible for filtering the massive amounts of information your sensory organs are constantly sending it. It then selects pieces of information that are most important for your conscious mind to pay attention to. Why do you need this little gatekeeper? Well, your senses are constantly feeding so much information to your brain that you can't possibly pay attention to all of it. The RAS never gets a break!

The clearer the filter, the clearer our connection to truth is. So, how do you know when you have reached a place of truth? In my opinion, we don't really. What actually happens is that we find a middle ground where we can see eye-to-eye and gracefully accept something as true and factual. The truth is born when there is a collective agreement and acceptance.

# How To Recognize The Difference Between a Fear and Your Intuition

When a man has learned within his heart what fear and trembling mean, he is safeguarded against any terror produced by outside influences.

—I Ching, Hexagram #51 (circa 2500 BC)

Fears stem from negative experiences you had in the past, which could have been a result of trauma or stressful circumstances. I always like to refer to trauma and stress as two different types of experiences. Stress is when you drive a car and you get stuck in traffic or you're late for that important appointment. It's not an experience that will necessarily alter your state of mind and cause negative long-term psychological ripple effects.

Trauma often causes the body to move into a state where strong instinctive responses are triggered. However, and here's the catch, while a traffic jam could be stressful for me, for someone else it could actually be traumatic. It depends how the person deals with and overcomes the traumatic event that will determine how strongly the emotional consequences and memories are stored and also whether the trauma cycles of the person are completed or not.

When a fear is triggered, it affects the nervous system, which is triggered in the reptilian brain. The messages of distress are then moved to the heart area and only then does it reach the gut area. This is why people feel conflicted in their heart when they need to make a decision. It's not that there is a discord between the mind and heart. There is a discord between an emotion and an instinctive response. That means that there is conflict between the limbic system and the reptilian brain that is trying to compare your current circumstances with past experiences (negative and positive experiences with the intention to make a judgment call whether your next move and decision will be good or bad).

The body is designed to keep you safe and alive, so if an old trauma is triggered, it can affect your ability to make healthy decisions and decisions that are based on a healthy perspective that is not influenced by an old trauma.

Now don't get me wrong, fears do have their place, as they tend to remind us that if you do X then Y is going to happen and it triggers old emotional stresses and consequences to stop you from repeating the same mistake again. In most cases, a fear can become debilitating, especially if it starts to sabotage your progress and personal growth.

I have found in my own experiences that often a fear tends to trigger a physical response, like my heart might start to beat faster, I can feel my thyroid pulsating, or my stomach starts to vibrate.

Often, an intuitive decision can actually challenge us as it creates a feeling of the unknown, whereas making a decision based on a fear can give a feeling of relief. The reason for the feeling of relief would indicate what I mentioned earlier. An old trauma was triggered, and you made a decision that would not challenge or trigger past negative experiences. So, your body feels relieved, almost as though it just escaped a threat or challenge it was not ready or wanted to deal with.

Every time I need to make a decision and I feel conflicted by my heart and gut response, I ask myself a series of questions:

- Is my response related to low self-esteem or a fear of losing control?
- What in my life could change that I have a fear of changing if I go ahead with this decision? Is the outcome of this going to cause me harm? Will it sabotage my success or the progress I have made, or will it cause more problems and then give me positive results?
- Shift your awareness to your gut. What instinct do you feel is activated? What do you feel the instinct is keeping you safe from? Is the answer to this question really legit based on the decision that you're trying to make?
- Pretend that you have made a decision. Does the outcome have a relieved tone to it or a more neutral compassion tone? If you feel relieved, then perhaps you triggered an old trauma, which should be explored. If you feel a more neutral response that causes the body to feel coherent with the **Triune Mind Model**, then that would be an intuitive response and message coming forward, as you will feel less emotionally attached to the message

- or vision you receive. There is a gentle and subtle flow between the minds.
- Ask yourself, is your decision going to be the safest option but, perhaps, not the healthiest or best option? If so, what or whom are you trying to keep yourself safe from? Is this an old memory that surfaced again? Always be skeptical of long-standing fears, as often this is a clear indication that an old trauma is being activated, and it's clouding your judgment.



If you're still feeling too overwhelmed and emotional to make a decision, then do a Breathe in the Light exercise, calm down, and then feel into the feeling once again as stress disrupts your mental state and ability to think clearly. It's always a great idea to ask advice from someone who is not emotionally attached to the decision and potential outcome.

If you ask advice from someone who might be emotionally attached to the decision and potential outcome, then they could be projecting their fears and emotional triggers onto you, which will only complicate matters even more.

Continue to practice the points that I mentioned. The more you practice it, the quicker you'll come to learn how to listen to your intuition. We all have different ways of accessing our intuition. It's only a matter of you finding your unique way of listening to your higher self. Remember, it's your body's job to keep you safe, and it's your soul's job to guide you. These questions will help you to determine whether you are responding to fear or your intuition. I

#### Evette Rose

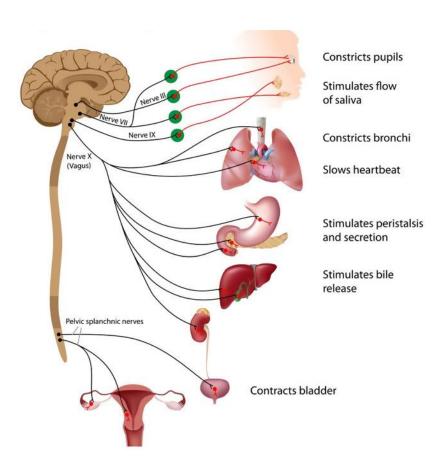
share more ways how we are intuitive in different ways under the section **Different Ways Your Intuition Can Come Forward**.

Fear is the mind killer. Fear is the little death that brings total obliteration. I will face my fear. I will permit it to pass over me and through me. And when it has gone past me, I will turn to see fear's path. Where the fear has gone there will be nothing.

Only I will remain.
—Dune by Frank Herbert

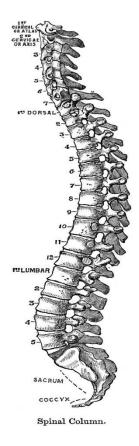
## Chapter 10: The Nervous System

Here I will go over the nervous system and what roles each part plays, and when you come to the live training, you'll learn how to use and fully utilize these parts of the brain during a healing session.



## Spinal cord

It's a column of nerve pathways in the vertebrae of the spinal column, and it receives sensory messages from organs (muscles, joints, skin etc.) and carries them via a nerve connection to higher brain centers. This is also where we store ancestral values and beliefs. When we heal old family values that are in conflict with new values that are forming, it's very common for a person to develop back problems, back pain, and spasms etc. Values are healed the same the way as soul copies.



## Medulla/Reptilian brain short explanation

Your instinctive responses will also come into play, as many fears will start to surface when you try to move away from what the body is programmed to cope with.

The interesting part here is that if there was abuse during your childhood, the body has programmed itself to cope and survive in these circumstances. If the environment is changed to a healthier environment, there is a possibility of sabotage and attracting abusive people or circumstances once again. The body doesn't recognize how to cope and survive without challenges. This also includes the associations that you have formed during your childhood or even adult life. We get into associations later during the model though.

#### **Survival Instincts**

Survival instincts are behavior patterns that keep us alive. What makes an instinct become a survival instinct is that it directly and immediately leads to your survival, whether it's emotionally or physically.

Survival instincts are also called animal instincts because they relate to base animal responses—something that all animals or at least all vertebrates (fish, birds, reptiles, and mammals) share.

The most basic part of the brain function in say, a fish, would make the connection between the survival instinct and the act of survival and reaching safety. For this to occur, the survival must be immediate. The best-known example is the fight or flight, freezing, going numb, hiding, or vomit responses. This we'll explore when we get to the nervous system and talk more about the reptilian brain.

Most traumatic events and the physical and emotional ripple effects thereof are held in place, as the body didn't complete the trauma cycle. This means that the instincts that were activated at the time have not been fully rebalanced and come to the realization that the trauma or danger has actually passed. The body often stays in a fight or flight response, leaving the person oversensitive and often even defensive. It's not deliberate; it's unconscious, as the body is still expecting some sort of threat or danger to surface. The body

has not realized and fully calmed down to the point where it feels safe and in control of its environment.

It's like becoming stuck in a cycle that has no exit. The unresolved trauma can get triggered again. A similar event from your past can trigger it, or it could be a new event. The instinct is activated, emotions take over, the trauma cycle and root cause of the stress aren't resolved or completed, and the instinct remains on defense mode.

What I have learned in my studies is that once a trauma is activated, it's important to discover which instinct is activated, as this instinct needs to complete itself one way or another. For example, if a person experienced a traumatic event where he or she needed to run but couldn't, then it would actually even be a good idea to get the person to stomp their feet or jog staying in one spot. This will help the body to complete the need to act out the instinct.

Another example is if a client was attacked and couldn't fight back—then hitting a pillow or even just acting out the actual need to push someone away could help complete the incomplete cycle. By pushing against someone's hands—both practitioner and client would, in this case, be pushing hands together, almost like giving someone a high five. The client, in this case, would be pushing against the practitioner's hands to re-enact the need to fight and push the danger away. Jumping up and down and shaking the whole body also has a wonderful way of shifting and releasing this blocked energy cycle. However, this should only be done after the emotional stress and trauma has been dealt with!

In some cases, you see a person from a very young age that has a very dominant fighting instinct or stubborn streak (this could be a dominant fighting instinct or even a conflict between the fighting instinct and the running away instinct). Another child might become very shy again (dominant hiding instinct). So what sets these two children apart if they didn't actually experience anything particularly stressful?

Once again, this can be a result of genetic predisposition. An instinct doesn't necessarily become active and triggered in one's life. A dominant trauma can already be switched on and dominant as part of the younger person's biological make-up before birth.

This is an important note to make for when you're going to do healing sessions during the live event.

I have also learned that numbness or immobility can take place when a person is suffering from anxiety, depression, or any type of psychological disorder that causes a person to lose interest in life, activities, and goals. In the Metaphysical Anatomy language, it is important to explore how this immobile instinct keeps you safe. When and how did it start to serve you (explore possible secondary gains or hidden benefits)?

When a person is going through a healing session and they start to shift from a feeling numb or a freeze instinct, it is very common for the body to sometimes move into the fight or flight response. If this is the case, jumping up and down and shaking the whole body from arms to legs greatly helps to release the blocked energy and cycle that is finally completing itself.

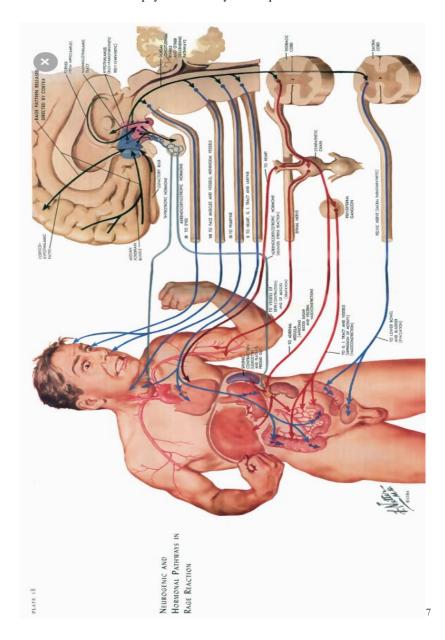
When you or someone finally completes a blocked fighting instinct, it is always important to discuss boundaries. Please watch my video Psychosomatic Root Causes of Anger and How to Deal With It. The last thing you want is for a fighting instinct to be activated while it is halfway resolved. How do you know it's halfway resolved? The person will experience anger, or they will show signs of mild irritation after a session.

This is where the associations exercise is the most powerful. Associations will be discussed later in the module. It is important that when you address instincts—either your own during a healing or with a client—that your trauma isn't just your own. It is part of a collective system/collective consciousness known as your ancestry. Instincts aren't just for your own survival. They are for the survival of your ancestors too, and it also helped and served them along their journeys in life.

Whenever we acknowledge and resolve trauma cycles during a Rapid Growth MAT session it is important that we hold an intention and awareness of the importance of the ancestry and also the instinct. You can simply do this by adding words to the effect of "I acknowledge the family history and pattern of this trauma." Also, when you become aware that the instinct is protecting the family (or system) and not the individual, you should state: "I acknowledge how this instinct keeps my family safe." It is important

#### Evette Rose

that we become aware of which instincts and coping mechanisms are serving us in a positive way in our life, rather than trying to follow a way of life that is tailored to our ancestors. In most cases, you will find that many coping tactics that worked for them do not work as well for you.



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<sup>&</sup>lt;sup>7</sup> Image: Frank H. Netter, Physician (Surgeon), one of the foremost medical illustrators.

https://en.wikipedia.org/wiki/Frank\_H.\_Netter#Biography

# Trauma Cycles Completing Themselves and How Our Instinctive Responses Play a Role

Crying can also be a way of completing a trauma, yet many people may have been punished for crying, so crying has become a negative way for the body to complete a natural trauma cycle.

You may have made a negative association with crying that can leave you feeling conflicted and unsafe when you begin to cry. This blocks the trauma and emotions from being resolved. In other cases, people often feel safer by just crying, as that is their way of healing and dealing with emotions that can't or aren't allowed to be voiced.

In this case, for example, you would look at healing the stress associated with expressing yourself or the client expressing them. The urge or need to cry should never ever be healed. It's normal and a natural trauma cycle that the body is transitioning through. It's okay to heal the reason WHY the person feels sad, but if they have a need to cry, then hold the space for that person to cry.

Keep in mind that, in my practice, I don't touch the client while they're crying, even though there have been exceptions, as you don't want your client to make an assocation with the touch and the negative feeling that they are experiencing. Also, when a client cries and they are touched or hugged, it disrupts the body's natural abitiliy to complete the release cycle. So, even though you want to show compassion and comfort, it could actually disrupt a very import cycle for the client.

Sometimes a person might have a need to go for a power walk or run to discharge the nervous tension and energy in their physical body.

Another way to complete a trauma cycle, especially if the body is overwhelmed and in need of rest, is to start hyperventilating. This will help your body to release build up nervousness and anxiety. The body has hit its limit and threshold. Epilepsy is also a good example. The trauma cycle is often stuck if epilepsy cycles keep returning, which means the root cause of the cause of the epilepsy isn't addressed. This is from a study I did where both mother and child had epilepsy. With the knowledge that you have now, this is a great example of predisposed trauma being activated.

I had a recurring problem with irritable bowel syndrome. I realized that my mum had it and so did her mother! I worked on the stress that I could relate to—that took place in my grandmother's life—and then the symptoms resolved by ninety-five percent. I mentioned earlier that most ailments tend to repeat themselves every third generation due to the buildup of that stress; it seems that the body's threshold for experiencing stress and trauma almost snaps at the third generation.

A trauma cycle will only complete once the body has come to the realization that it is finally safe from the perceived danger and threat. Sometimes, an event can be so traumatic that the body still feels as though the danger isn't over yet, even though the conscious mind can see there is no threat. Your body is merely trying to keep you safe and protected from future harm. Remember that your body is designed to help you survive. It's your best friend, and it's here to help you to fulfill your life's purpose.

Part of your body's protection strategy is that when you experience a threat, your body's instinctive responses will kick in immediately. And, here's the interesting part; we all have different dominant instincts, depending on which instinct served us the best during our childhood.

I have observed cases where two or even three survival instincts were in conflict, which leads to anxiety, as the body doesn't know which instinct to act on. The body goes into a meltdown and state of confusion. In the research that I've done, I've found the fighting instinct, hiding instinct, running instinct, going numb instinct (also known as dissociating), vomiting instinct, freeze instinct, and passing out instinct (this is the freeze instinct and the going numb instinct that are in conflict).

In the past, when a trauma was experienced, any one of these instincts could be activated, and it was the activation of the **instincts** that set the emotional response off and then symptoms of the traumatic event started to play out.

People often ask me which came first: the instinct or the emotional stress. Well, let's talk about it briefly. Let's use the spring buck as an example. The buck only knows that a lion is dangerous and causes it a great deal of stress when it sees a lion, because it's programmed in its biological makeup that a lion is dangerous and

unsafe. So, when it does see a lion, its instinctive response is set in motion to either freeze or run and, in most cases, that buck will run for its life. However, here's a question: how did the buck know that it had to run? Was the instinct just downloaded from nature? In my opinion, the answer is no.

Down the DNA lineage of the buck species, they learned that lions equal danger. Bucks from previous generations saw other bucks being killed by a lion and an association was made that a lion is dangerous, and they need to run whenever they see a lion. If the buck just stands still, it will die. As a result of biological make-up and inherited instincts and survival responses, bucks in the new generation will know how to respond due to genetic programming.

It's the same concept with the vomit or nausea instinct. Perhaps someone in your ancestry ate a certain food type, got food poising, and nearly died. The body was programmed in the biological makeup that a certain food type wasn't safe, and that's why people have anaphylaxes. The body sometimes just recognizes that you ate something that the body didn't perceive as being healthy for you and wants to get rid of it.

Another interesting observation I made is that perhaps you ate a certain food type while you were in distress and your body associated this negative feeling with the food type and wants to get rid of the food because, in reality, it wants to get rid of the negative feeling and stress it's experiencing. I do acknowledge that sometimes people actually make a positive association with food when they're in distress, as they are searching for comfort, so they associate food with being nurtured.

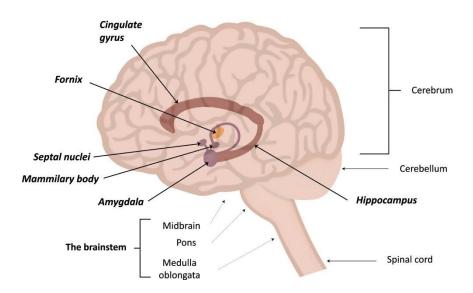
#### Midbrain

This part carries sensory/motor nerves messages to and from the brain to coordinate patterns of movement and also modulates pain. This is normally where you'll also be able to see physical trauma that a person experienced in their life such as accidents, physical abuse, and stress related to old injuries.

## Limbic System

People who lack solid early attachment bonding to a primary caregiver, and therefore lack a foundation of safety, are much more vulnerable to being victimized and traumatized and are more likely to develop the entrenched symptoms of shame, dissociation and depression - Peter A. Levine PhD

## The Limbic System



The limbic system (hippocampus) is the emotional brain. It holds functions such as arousal, feelings, and expression. It isn't just a singular part in the brain. It is composed of structures in the brain that deal with emotions (such as anger, happiness, and fear) as well as memories. The amygdala is the emotion center of the brain.

The hippocampus plays an essential role in the formation of new memories about past experiences. And, just to narrow it down a little bit more, it deals with three key functions: emotions, memories, and arousal or stimulation. This area of the brain is responsible for us bonding with our family. This area is also greatly affected by how our family members expressed themselves to us. This has a direct impact on the development of this part of the brain, as it is in this area that we ultimately learn to feel, bond, and express ourselves. Problems that we experienced in our family life during our childhood are held here.

Our survival and the evolution of the human race are not just driven by needs coming from instinctive responses. We also have emotional needs, which tie in with our instinctive needs. Instinctive needs are related to the reptilian brain and emotions are related to the limbic system. Both these factors and needs that are programmed into our biology are crucial for our wellbeing and ability to survive.

We have the fight instinct, run away insight, and so forth. We also have our core emotional needs as well. These needs can be summarized by safety (which is not just an instinctive need, it's an emotional need as well), comfort (I will explain in a minute why I don't use the need for love even though it is such a strong universal need, understanding, and concept), connection, and sexuality. I used the word comfort instead of love, as we can all immediately relate to what needing comfort feels like, whereas needing love and our definitions of it can be quite diverse so much so that, often, we cannot relate on a bigger collective level based on this concept alone. Here's the reason why.

Needing comfort is a direct result of feeling unsafe, where love is a secondary experience that follows after being comforted. Comfort is just as straightforward as an instinctive feeling, need, action, and reaction. Whereas the concept of love can be contaminated by abuse, and it can completely change our perspective on what love is and the way we feel about love.

Comfort always seems to be and come forward as just that, needing comfort, which means needing to feel safe. Once a person is comforted, that is when the feelings of love start to surface, not the other way around. Positive emotions tend to surface when we feel safe, and we only feel safe when we're in a place or with a person that gives us comfort.

The way our needs are met during our infancy greatly challenges and changes how we express and attract dynamics and relationships to have these needs met. If your needs were met in an unhealthy way, then you can expect to attract unhealthy

relationships, interactions, and dynamics in your life. In most cases, when your needs as a child are not met at all, then it creates great confusion. For example, what should love really feel like, especially if their need for love was not met? This creates a discord in their ability to be and feel safe within themselves.

I found during my research, as many other researchers and teachers have found, that high levels of stress, shock, and developmental trauma affect our developmental stages in life and our body's ability to function in ways not destructive to our mental health.

Trauma does have an impact on the body's genetic programming for breathing, heart rate, blood pressure, digestion, sleep patterns, alertness and sixth senses. Trust is not just an instinctive response; it's an emotional response and need. Ultimately, our need to be able to trust relates back to our need to feel safe—an instinctive survival response that helps us to survive and have our needs met.

To recap on what I said earlier where trauma does have an impact on our nervous system during developmental stages, I have noticed a consistency in my clients who suffer from addiction problems. They all had stressful experiences during their womb stages. Often, the mother was going through high levels of stress, or she was abused physically or emotionally, or her environment was unstable, which tested and challenged her.

There were high levels of stress that would hit a peak and then calm down, and then the mother's emotional state would hit a peak again. In my practice, I call this silent bipolar. The mother may have been too scared to express herself, defend herself, or even change her circumstances, feeling there was no other option except to endure emotional stress or physical pain. This can be related to even doing a type of job that could have made her feel this way. It does not necessarily have to relate to her relationship with her husband, closest friends, or relatives. In my research, though, I have found this emotional response related to a stressful family dynamic.

It has been said that the baby's connection with the mother or primary caregiver functions as the regulators of the nervous system, which means the way that the mother or primary caregiver interacts and bonds with the infant. If this bonding and interaction process was stressful, then you can assume that there will be a disruption in this bond, including the effect it has on the baby's nervous system. However, in Metaphysical Anatomy, this is just another secondary issue that could reinforce the stress stored and programmed in the infant's nervous system.

My opinion is that if the fetus had harmonious experiences and low levels of stress and didn't have a strong predisposition for experiencing high levels of stress, then the connection between the child and mother/caregiver can actually be harmonious and a healthy bond is formed that doesn't disrupt or activate the nervous system in a way that trauma and abuse would activate it. But, life happens and stress is experienced when a new baby enters the world.

What people often fail to see is that it's not just a stressful experience for the mother/primary caregiver; it's stressful for the infant as well. The infant is going through tremendous adjustments just as the mother is going through new learning experiences. The mother or primary caregiver's ability to soothe the baby has a tremendous impact on the infant's developing nervous system. If comforted in ways that calmed the baby down, then this sets the nervous and limbic system up for a healthy way of regulating itself.

If there was insufficient comfort, then this sets the nervous system off, and this person will be sensitive and prone to emotional and stress-related disorders and anxiety. Stress can be soothed quickly when there is a presence that makes the baby feel safe. It allows the stress or trauma cycle to actually complete itself, and the nervous system almost resets itself to functioning in a normal, healthy way. This has a big impact on the baby's ability to connect with its body and, most importantly, establish healthy connections with others.

What is interesting, though, is that this could greatly contribute to the root causes of addictions (in my opinion). The mother might do everything right physically to comfort the child. However, if the mother was anxious or very stressed, then this state of mind does affect how well she is able to comfort the baby and soothe the baby's nervous system.

I've noticed a pattern where students were not able to feel an emotional connection with their mother (because she herself felt greatly challenged to feel her own emotions), and they use addictive substances to calm down, as they are looking for safety and comfort from a mother.

The addictive substance is like a reset button when they have felt and experienced too much stress and need a relief or need to feel safe. This is not a conscious thought or act. Ultimately, the body is searching for reassurance and comfort when it's in distress. If that contact is disrupted or is emotionally unavailable (even though she might be there physically), this can set up a strong pattern for addiction. This also tends to be the case when different caretakers were used, and the baby was moved from one day-care center to another.

The baby now matures into an adult, looking for substances to soothe their nervous system with the intention of resetting the system to regulate and function in a normal and healthy way again. However, the act of resetting it with tobacco, alcohol, or drugs does not have a long lasting effect, and the emotional reward wears off. This causes the person to reach out to the substance once again, with the intention of resetting the nervous system, but this is only a search for comfort and reassurance.

In most cases, the need to soothe and comfort the nervous system is due to a lack of comfort from a caregiver. Also keep in mind that it's not that the caregiver or mother physically did anything wrong, but their emotional state and emotional availability can greatly affect the baby's nervous system and cause a person to look for an escape. No matter how destructive drugs or other substances can be, the emotional "reset" reward and instant gratification it provides makes it worth it.

#### We All Need Comfort

This is a feeling and concept that we all universally and collectively share and understand as infants. Needing safety and comfort is a strong instinctive programmed response, as it will ensure the baby's survival. Babies react on instinctive responses, as their brain has not developed to its full intellectual capacity to understand complex emotions

As children mature, not receiving the love and nurturing they need, they tend to continue searching for that connection, yet they fear it at the same time. It's like a "Come closer. I need you, but don't come too close, as I don't trust you or know what to expect" dynamic that plays out. There is a complete discord in their ability to connect or even relate to people, as there was no safe place or space for them to explore this level of connection.

If you don't know what something that you are programmed to need and experience feels like, then it's normal to want to reject or even sabotage it when it's given to you. The reason for this is that you didn't have enough experience to explore the limits and boundaries that would be needed in this type of situation.

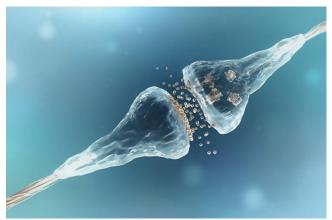
So, when a child's needs are not met, they don't really recognize what it is that they need. They can feel that something is missing. However, the intellectual part of the brain has not developed to the extent where he/she would know what that specific need is or even how to have that need met. Ultimately, it would only trigger the body's instinctive survival response. A good example is when you look at someone who you might say is very selfish and self-serving. In most cases, there is actually a reason for that, based on the theory that I just explained.

## Neuropathways



An actualized neural pathway is an order and sequence of neurons that fire off. It's like a finely grooved road in the neurology. If a habit is an actualized neural pathway, it's a road we are used to taking. Many people say it takes twenty-one days to change a habit. I say no, not if you have the right tools. Even if you took the same road day in and day out to work for twenty-one years, how long would it take you to change the road that you chose if someone showed you a shortcut? It could happen in an instant if the person chooses to take the shortcut. So, when we pave new neural pathways for a change, it's like paving new roads in the neurology so that we can allow ourselves to go places that we never even dreamed were possible before.

Before the imprint period of the ages zero to seven (the imprint period is according to sociologist, Dr. Dorris Massy, who wrote the book *The People Puzzle*), a baby is like a little sponge where the neurons are firing off. As the baby matures, he/she starts to lose thousands of synapses per second, which aren't being used. What this means is that the neural connections of the synapses, which are the spaces between the neurons, are forming new neural connections.



Synapses

Interesting research that was done by Paul King, Computational Neuroscientist, explained that, as adults, we each have about 100 billion neurons, each of which connects to about 10,000 other neurons. By some estimates, there are over 100 trillion

total connection points or synapses in the human brain. Talk about having an active inner dialogue. The brain is designed to hold this amount of activity.

And we've heard about neuroplasticity before. This is the ability of your neurology to reshape and rework itself inside like a map. All the pathways and roadways are on the map that you can take to get some place. The map is what you can relate to your neurology.

You have all these different roadways and routes that you can take to get to get to different places. But, if you are habitually finding yourself feeling depressed, for example, it's just because you have roadways that are highly lit roads in your neurology that take you consistently to that destination. You may not have roadways lit up in your neurology that are intended to take you to happiness, or inner peace, or joy. It's just because you were imprinted in the period of your youth with the "cookie cutter" imprint of the beliefs and values of your parents and your environment, and you have an impoverished reality.

If you want to change your world, what you need to do is expand your neurology. It's like installing in your car for the first time a GPS that you never had before and previously you were just operating off of an old map that didn't have any roads on it that led to any place new. So, you can overhaul the system and upgrade it to allow you to go wherever it is that you want to go, because all things are possible.

By the age of nine, your neurology starts to slow down and the neural networks become set. However, it's not that we don't have the capacity to learn beyond that (we do) but we just slow down based on preconceived biases and preconceived notions of how we expect the world to show up. It's a function that is hardwired into the system because it's a survival function, which relates to the reptilian brain (which we'll discuss shortly). Now, if you were consistently looking at the world through the eyes of a child then you could step out into the road and get hit by a car, because you couldn't have made the determination that when cars go by they are dangerous.

So, it's our assumptions that we make. It's our extortions that we make, and it's our generalizations that we make. Once we see a

car go by, we realize it's dangerous, and every time a car goes by it's dangerous, so we keep ourselves off the road. It helps us to survive in the world, as the information is sent to a network containing specific memories of cars and what we were taught about them in the past.

There is so much happening during our childhood, including epigenetics, predisposed characteristics, and medical conditions. The survival patterns of our ancestors, which are hard coded in our biological makeup, also play a tremendously big role in how we ultimately express ourselves within our environments and relationships.

These neural pathways serve and help to communicate with the unconscious mind, comparing old stored memories with new information that it is taken from its current and present environment, just as you are reading this right now and feel emotions coming and going as they are being activated by certain words, explanations, and concepts. That information is constantly being transferred back and forth between the conscious and unconscious mind.

Side note: the unconscious mind isn't located in the back of the mind, as many people would explain. It is located throughout the entire brain.

When we talk about the subconscious, this is generally regarded to be everything in the brain below the top layers of the neocortex. I always see the bulk of the conscious mind as located in a very small portion in the frontal lobes, as this is the area that I would see as always sharing information that it perceives in the present moment and comparing it with older similar memories.

According to Mc Gill's, the hippocampus takes simultaneous memories from different sensory regions of the brain and connects them into a single episode of memory. For example, you may have one memory of a dinner party rather than multiple separate memories of how the party looked, sounded, and smelled.

This makes perfect sense to me as its part of the limbic system, also known as the emotional brain. Memories are played through the hippocampus, the connections between neurons associated with a memory eventually become a fixed combination, so that if you hear a piece of music, for example, you are likely to be flooded with

other memories you associate with a certain episode where you heard that same music.

The more the information is repeated or used, the more likely it is to be retained in the long-term memory and that is how associations are formed.

#### Associations

This is one of my favorite parts of the healing. You can form a negative association with an emotion or emotional need if it is repeated enough during your childhood. It can also set in as a result of a one-of incident, which causes the patterning.

It's like being programmed with incorrect reference points due to trauma or stress. It's similar to linking up certain wires in a machine incorrectly. The machine won't necessarily explode; however, it won't work very well either. The human brain is the same. For example, if you were in need of love and you received abuse instead, normally you would feel hurt and rejected, but you wouldn't stop functioning. If a child does something with the intention of getting positive attention and gets reprimanded instead, their need for love was met with punishment.

A child's language of requesting love and attention is different from that of an adult. The child will unconsciously adjust their behavior to get more attention by misbehaving. It's at this point, where they have made an association that misbehaving equals attention. This is often the case when the child's parents are emotionally unavailable due to a stressful lifestyle. The child did not experience a positive reaction from the parent, but the child is happy with any reaction from the parent, regardless of whether that reaction is positive or negative.

For example, a child is crying, in need of comfort, and the mother ignores the child. Instead of comforting the child, the mother is frustrated and emotionally unavailable. If this pattern is repeated enough, the mother's emotional absence can have a negative effect on the child's psychological development.

When the child grows into an adult and starts building relationships, they might find that they are attracting people into their lives that are emotionally unavailable when they are in distress or need of comfort. They are preprogrammed for abandonment when in need of comfort, as that is how their needs were met during their childhood.

This is also a good example of how adults sabotage relationships. We all want comfort in our lives. However, if you have a negative association with it, chances are you might sabotage relationships that can bring you comfort. Your programming isn't allowing you to receive it. For example, I really want and need this emotional resource from a person or situation so come closer, but don't come too close because I don't want to be abandoned again.

When someone is yelled at repeatedly during his/her childhood, the child could start making assumptions "I deserve this treatment, my parents are my authority, and what they are doing is right." Unfortunately, they make those assumptions because the child doesn't know any better at that age. They look to their parents for guidance and validation even though the parent's behavior might hurt and upset them.

Children believe that what their parents or authority figures are doing has to be right. I have learned from my work that you can only address negative patterns and associations when you become aware of them. It is a deep, inner personal realization that takes place. Once you have made that realization, the self-awareness journey becomes so much easier and smoother. Your willingness to heal becomes stronger and you finally make one important decision—and that is to change for the better.

A very common problem is that people make associations between things that aren't necessarily the same or connected.

#### For example:

- If I'm unattractive, I'll be safe;
- If I drink alcohol, I can relax; or
- If I work long hours, I'll feel appreciated.

You bring awareness between two concepts that aren't supporting you and your lifestyle in a healthy way.

## Associations and Our Identity

Self-sabotage and secondary gains often become more challenging to release when you're starting to identify with it. It's no longer just a feeling or an emotion. It becomes part of your identity. This is just a state of mind, though there is no truth in that. If you have been abused, you could identify yourself as a victim. "I am powerless, I am weak, and I am unworthy." Often, when an instinct is very dominant, such as the hiding instinct, you could even say that you feel invisible. People don't see you.

In these cases, it's always good to acknowledge the difference between your identity and the false association.

- I acknowledge the difference between my identity and the hiding instinct;
- I acknowledge the difference between my identity and being a victim.

#### **Mirror Neurons**

These neurons help share information between each other without needing to verbally communicate. It's like mind reading but not quite. You can sometimes look at someone and get a sense of what they're going through at the moment. You can tell whether they're going through a hard time or if they feel happy. That is because your MN is observing their MN and you can sense and feel a response. The receiver (in this example you) can recognize their state of mind.

Mirror neurons have not been researched to a great extent so this topic is still quite new. What if there was a possibility that the neurons were able to record certain behaviors of people that we spend time with. Mirror neurons enable us to hold emotions and to project that outwardly within our surroundings.

Someone with healthy mirror neurons can copy someone else's facial expression and feel the same emotions that the person was trying to project. Someone who is severely depressed can copy those same facial expressions and not feel or experience any emotion or reaction while doing so.

This gave me an insight. What if the mirror neurons were able to record certain patterns of other people that might be beneficial to us? If so, then you would be able to express and act out certain behavioral patterns of others if there was a benefit within that behavioral pattern.

As a result of our need for survival, we always look for patterns that could improve our ability to survive emotionally, mentally, and physically. These neuron recordings often take place unconsciously. You don't just sit there, make a choice to copy, and act out certain behavioral patterns of others. This is an unconscious process, an attempt that your biology makes with the intention of keeping you safe.

Another observation that I made is that when a person is experiencing trauma they copy behaviors of the people that are within their vicinity. The reason why a person might copy the behavior (or certain aspects) of someone else is that they unconsciously sensed something in that person that they might not have had at that given moment that could help them to survive (emotionally or physically) at that given moment. Remember the unconscious mind is always searching for ways to keep itself safe and to improve the body's survival rate.

People copy certain aspects of others who are in their environment during times of stress, when they need comfort, or when they need to feel safe. I've had good results with people when resolving these pieces/fragments when working with issues of abuse.

For example: a client was driving on a highway when a young man jumped in front of her car with the intent to commit suicide. He died on impact. My client was incredibly traumatized by the event, and she felt a great deal of guilt and grief. The most challenging part for her was letting go of the guilt, as his family blamed her for his death.

There were several witnesses at the time of the accident that saw the man jump in front of her car. The more I spoke to her, the more I realized that it was not her guilt. She had processed her guilt a long time ago. The guilt that she was describing didn't come across as the type of guilt that someone in her position would feel. We worked on secondary gains and the direct trauma as well as the guilt,

but it would not resolve. She had lived with this trauma for almost three years.

We briefly explored the possibility of her mirror neurons recording the expression of the deceased man's mood, emotional state, and even his body posture before the impact. We explored this further, and my client spontaneously took a deep breath and looked at me with the utmost disbelief and relief. Her face lit up, and it looked like she almost grew five years younger as her stress dissipated. The guilt never came back.

The guilt and grief did not belong to her. It belonged to the man who committed suicide. In one way or another during her moment of trauma and stress, her mirror neurons recorded the expression of the deceased man's mood, facial expressions, emotions, and body posture. Her mirror neurons communicated with him and an exchange of information took place between them just before he passed away.

I have personally tried this approach on myself. I realized that I felt a great deal of shame and guilt. First, I worked through my own trauma, then I explored ancestral trauma. Nothing shifted. I began to explore my childhood trauma again, asking myself, "What if these emotions aren't mine?"

I searched for events where I could have copied or recorded these emotions from someone. I was searching for moments when I felt upset and traumatized. I found a few but there was one moment that stood out. There was a situation that I realized I had no way to escape from. I was traumatized and stressed at the time. I felt threatened and needed to feel safe. My neurons copied how this person felt at the time when they abused me. When I resolved this conflict, I didn't feel the shame and guilt anymore.

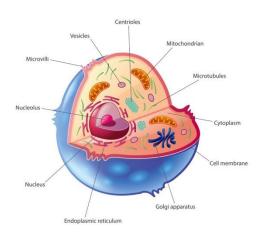
The person whose guilt I felt was the only person present in my environment at the time when the trauma took place. My mirror neurons could only communicate with his at the time and send information back and forth.

I also suspect that people who suffer from depression might have unconsciously suppressed the use of their mirror neurons. Their mirror neurons temporarily became dormant and didn't respond as well to their environment due to their dissociative state, which is a result of trauma or stress. When someone consciously loses interest, there is no longer any meaningful information being sent back to the brain. The depressed person has stopped interacting and being a part of society. This physical reaction is due to the person's emotional reactions when they started to switch themselves off from their surroundings. When you switch off certain aspects about yourself, it will start to energetically reflect throughout your body. Since discovering this topic, I have been keen to explore this phenomenon in our brain and to see how it fits in with our day-to-day life.

I have not been able to explore this discovery any further. Note that this research is a work in progress, and I can only share what I myself have learned up to this point.

#### The Master Cell

The master cell isn't just one cell, but one of many billions and trillions of cells in the body. When we work on the master cell, we only need to work on and view one cell, as any healing done in this cell will reflect in all the other cells. This is a wonderful cell to work with and intuitively view during a healing session. This cell is almost like the motherboard of your biology and how trauma, emotions, predisposing conditions, habits, and patterns from your ancestry play out in your lifetime.



#### Parasites Affect Our Emotional State

The physical body itself has its own consciousness that isn't always knowingly detectable by the head mind.

People often think that parasites, bacteria, and viruses are bad. They are actually just a part of nature. The parasites, bacteria, or viruses are doing what they are programmed to do and that is to survive even it causes a great disadvantage for the host<sup>8</sup>. Parasites and organisms have been around as long as we have. So much so that they have figured out the code and language of the body to manipulate it so that the parasite's needs can be met through the host, which in this case would be you and me.

Parasites and candida are known for manipulating what the body craves in terms of food and living environments. The parasite can manipulate its host to live in either cold or warm temperates. The preference, of course, would always be to support the survival of the parasite and not necessarily the human body.

The same rule applies for candida. The fungus loves sugar and carbohydrates. This is why people who have candida overgrowths tend to have sugar cravings, love sweets, wine, and so forth. The craving might have nothing to do with an emotional state that is activated; it is merely reflecting what the fungus needs the host to eat in order for it to survive. The consciousness of candida is so strong that once a person starts candida cleanses they often report feeling extremely depressed and even suicidal, almost like they're dying. That is merely a reflection of the candida that is dying in the body. The same concept applies to parasites.

## The Psychosomatic Patterns Behind Parasites

Parasites in a person's body relate to people or circumstances that may be parasitic and taxing on their time and energy. Influential people only expressed love when you followed their strict instructions. You are a people pleaser, causing you to exercise poor boundaries. This is strongly linked to your lack of worthiness. You

<sup>8</sup> http://jeb.biologists.org/content/216/1/1

often felt you had to work and sacrifice your happiness in order to be validated and loved.

You feel controlled by the decisions and lifestyle choices of others. You may feel that you aren't allowed to say no or stand up for yourself. You often land yourself in circumstances where others are always in control. This may make you feel useless, unable to do things on your own terms.

You are often a follower instead of a creator or leader. Influential people gave you no option to lead. You often fear to be in a leadership role, as you don't have discernment over where your responsibilities stop and start. You end up taking on more than you should. You have seen firsthand how needs and burdens can overwhelm people.

You feel that others only seek you out when they need you. You often feel guilty for expressing a boundary to someone that is demanding your time and energy. You allow others to take advantage of you because it makes you feel important and valued when you are needed.

There have been clients who reported that they feel immense loneliness and emptiness or a void within. Parasites that were present at an early age in their body were unconsciously almost accepted as company. This isn't the case for everyone. However, this possibility should not be ruled out.

#### Pain and the Fascia

The place where pain is held in the body is often not the original starting point or main root cause of the pain, especially if the pain is due to a physical injury. So, where the pain is, is the primary starting point. However, this starting point can also cause pain in other parts of the body as the injured part of the area can be pulling the fascia of the body in a different direction causing pain elsewhere—this is called secondary pain. The fascia also communicates with the midbrain.

## **Soul Copies**

Soul copies are what I would call memory pockets that are often stuck to your outer energy field. These soul copies often belong to people who caused a person a great deal of stress or trauma. It could also be a result of spending a great deal of time with someone and parts of his/her identity patterns were transferred to the client or you.

If your client feels emotional stress and you ask them where in their body they feel it. Is it inside or outside? If outside, then this is a soul copy! Ask the client what does it look and feel like. Does it have a familiar voice? Who does it look like?

Once this has been established, visualize your white light around you, and then visualize the client's own white light surrounding this bubble. You'll also see a cord from the bubble going into the client's body and being attached to the tissue of the body. Dissolve this attachment point to the body until the soul copy either bursts or dissolves completely. Be mindful that soul copies can have a personality of their own and often move around, so be patient.

## More Memories and Characteristics that Do Not Belong To You

As most of us already know, the Y-chromosome is the determining chromosome for males. Yet a recent study conducted showed a different result. A small minority of females have the Y-chromosome in their blood. So this prompts the question: "Where did it come from and how is it still inside the bloodstream?"

The answer to that question is due to pregnancy, specifically with a male fetus. Apparently, the cells from the pregnancy will reside in the mother's bloodstream and organs for the rest of her life. Despite miscarriage or a terminated pregnancy, the genes still remain in the mother's body. This condition is known as fetomaternal microchimerism<sup>9</sup>.

However, the Y-chromosome also exists in females who didn't give birth to sons. The study conducted by Yan et al (2005)

<sup>9</sup> https://en.wikipedia.org/wiki/Microchimerism

investigated that phenomenon by correlating prior pregnancies. The sample from the study was 120 healthy females categorized into 4 groups: Group A only had daughters (26 people); Group B had spontaneous abortions (23 people); Group C had induced abortions; and Group D were females who were never pregnant.

The frequency of male microchimerism was highest in Group C (57%), although the other groups still contained traces of microchimerism with 8%, 22%, and 10% respectively. Yan concluded that it is possible for mothers who do not have sons to have male microchimerism, and it is possible to have a Y-chromosome from a vanished male twin, unrecognized miscarriages, or even sexual intercourse. Hence, it is possible to have your partner's DNA by simply having unprotected sex!

Now, having someone else's DNA in your body is different to having a soul copy, as a soul copy is related to someone that you even just had a platonic friendship with, without any physical interaction.

The concept and understanding that I have with the research that was done is that it's almost the same as getting a blood transfusion. The receiver of the blood might not have been a smoker; however, the giver of the blood was. After the blood transfusion, the receiver of the donated blood developed a craving for cigarettes. DNA holds habits and characteristic patterns of a person, and this can be transferred to another person affecting your own personality, emotions, and thought patterns! Choose your partner's wisely.

## Breathe in the Light Work

Breathe in the Light work is a great tool to use when you feel stuck with a situation and you or your client can't see what the underlying issue is. This is a great kick-starter for a healing process. Breathing in the light helps the brain to move into a gamma state, which is the highest brainwave state.

When this state is achieved, the DNA strand in the master cell spontaneously stretches and allows for a quicker and gentler release of the issue that is being addressed.

**Beta brainwave state** – is great when you're working on physical healings and conflicts in values.

Here you will breathe in through the mouth out through the mouth ten times. On the last inhale, at number ten, hold your breath in for as long as possible until you can feel your body automatically deflating (in some cases you might not feel the "deflating" sensation, and that's okay). Imagine a white light around you and the client as they or you inhale, inhaling the white light throughout the process.

Use the beta state when people hold the following states: stress, worry, paranoia, fear, irritability, moodiness, nervousness, depression, anxiety, or anger. It can also help to improve a weakened immune system.

**Alpha brainwave state** – is great for emotional healings. This exercise resets the nervous system. This exercise works great when you're working on the limbic system, reptilian brain, master cell, soul copies, and womb.

Breathe in through the mouth and out through the nose ten times. On the last inhale, at number ten, hold your breath in for as long as possible until you can feel your body automatically deflating (in some cases you might not feel the "deflating" sensation, and that's okay). Imagine a white light around you and the client as they or you inhale, inhaling the white light throughout the process.

When a person moves into an alpha brainwave state, they are more relaxed. They will feel more creative and hold a powerful state of memory. This is a very harmonious and peaceful state.

Theta brainwave state – this state is great when you're working with a client who is struggling with feelings of numbness and a dissociative state. Also, if you're the practitioner, it's great to start your healing sessions by going into this state yourself. You and your client can do this together, as it opens up your intuition and sixth senses.

Breathe in through the nose and out through the nose ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel your body automatically deflating (in some cases you might not feel the "deflating" sensation, and that's

okay). Imagine a white light around you and the client as they or you inhale, inhaling the white light throughout the process.

This state helps you to access your intuition better; it creates a floating and dream-like feeling. You will also feel more connected to your environment and to other people.

**Delta brainwave state** – this state is great when you're working with a client who is going through a spiritual crisis. This means trauma related to religious acts. It's also wonderful for working on ancestral karma or when you have a client that suffers from abuse, such as sexual or physical abuse, near death experiences, accidents, or a fear of living their purpose.

Breathe in through the nose and out through the mouth ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel your body automatically deflating (in some cases you might not feel the "deflating" sensation, and that's okay). Imagine a white light around you and your client as they or you inhale, inhaling the white light throughout the process.

## White Light

The white light is your healing ability and, by visualizing this, you allow yourself to connect with that healing ability. This is a Godgiven gift that we all have; we are all healers. We all have this healing ability built into our biological make-up. It's just a matter of choice whether you choose to reactivate this ability and use it in your daily practice. Not everyone on this planet wants to become a healer and that's okay. We all have different purposes, and that's what makes the world tick. If you haven't already, watch my YouTube video, 'What is Your Purpose in Life.'

In many cases, we just stopped using this wonderful and powerful resourceful force within us.

What drives the successful outcome of any healing technique is the power of intention. If you set a clear intention, whether you are working with yourself or as the practitioner, if you know exactly what you are addressing and why, then your results will be much clearer and much more rewarding. A clear intention will gently bring forward the correct emotional stress points (the root issues causing the symptom) and allow you to get powerful results very quickly. The good news is that you don't have to find the specific root cause, the intention alone to find it already sets off a powerful ripple effect that the body will understand and respond to.

The intention should be discussed between you, the practitioner, and the client so you can both hold the same intention. In general, the intention of the practitioner (you, in this case) drives the focus of the session, whereas the client's intention will drive the answers they give (for example, which feelings or trauma points become activated and where they feel it in the body). Given how important the intention of the healing is, it's crucial that both practitioner and client agree what the intention will be before the session to achieve meaningful results.

An intention is exactly that, an intention. Under no circumstances do you ever go into someone else's energy field. You don't reprogram them with beliefs, "delete" or destroy whatever bad habits you feel they have, and so forth. Once a trauma point is resolved, the body will automatically adjust (a phase and pace that isn't meant for you to control under any circumstances). Remember, you are a healing facilitator, not a body and brain engineer.

# Identity Expansion Exercise and Decision Destroyer Exercise

The purpose of this exercise is to heal any false identification you have consciously or unconsciously programmed yourself with, because any negative thoughts you have puts boundary conditions on the unlimited boundlessness that is you. This concept and also the decision destroyer is discussed and demonstrated in the online healing course.

The decision destroyer exercise helps the client to heal and resolve a deep unconscious decision they made with the intention to protect him or herself from experiencing a painful or traumatic incident again. However, this decision is now hindering and potentially sabotaging their quality of life. It is now time to heal an old negative decision so that they can start to make healthier decisions.

## **Parts Integration Exercises**

When you or a client feels incomplete after a healing session, or if you just generally feel scattered, this is a great exercise to reconnect to your sense of authentic self and find balance again. Stressful events can cause a shockwave in our psyche that can leave your identity scattered. There is an incomplete life experience that isn't integrating, and the body is resisting the shift and transformation. This exercise is explained at the live Level 2 event.

## Fear of Being a Practitioner

What you think and feel during a session will in practice affect your performance. Establish what your beliefs and values are as a practitioner. We go into more depth of this in the live event, as we will do healing work around resolving the blocks. Here, I am planting the seed for you to start thinking about it.

It is also important for the client to take a certain level of responsibility for the healing including the issue that is being addressed. This doesn't mean making them wrong for anything that took place nor is anyone being blamed. For example, if someone is in an abusive relationship, then they aren't asked to take responsibility for the abuser's behavior.

Every person is responsible for his or her own behavior. In this case, the client would be taking responsibility for how he/she is going to move forward from this and what the outcome is going to be or should be. If they want to leave the relationship, they should focus on healing the trauma and the affect that the relationship has on them. Then they should take responsibility for how they're going to move forward from it, including their healing journey.

This is a tough subject hence why I chose it. Some people might say that it's the abuser's fault that they are in need of a session in the first place. I completely understand and agree to that. However, as someone who has also been through this cycle, I have learned that I had to keep my focus on my healing journey to avoid this from happening again. It does depend on the person's circumstances. If there was a crime, then the law needs to get

involved and people need to be held accountable. However, my example above isn't meant for this extreme type of case.

## Summarized: Students fail to take responsibility when

- They have an expectation that the practitioner is going to resolve the problem for them.
- They want to hold people responsible for how they're going to move forward and make changes (meaning, "I'm too angry to change; someone has to pay for this" etc.).
- They don't take healthy and reasonable advice that could help them improve their quality of life.
- They expect the practitioner to make a decision on their behalf.

## Taking Personal Responsibility

We carry within us the wonders we seek without us.
- Thomas Browne

The general interpretation of taking responsibility means acknowledging that you are the cause or source of something. My interpretation is that you are part of something that caused a setback in one way or another, yet now, you are taking control of something that is within your power to control.

The one thing that people are all responsible for is their future and how they choose to live their life. It is a person's responsibility to decide how they're going to move forward every day from their past. It is every individual's responsibility to be in control of their actions and reactions towards others and, most importantly, towards themselves. Taking responsibility is a stepping-stone in the healing process. It's a vital step that can't be skipped. The majority of empowerment comes through the ability to take responsibility for the future and for the ability to live life to the fullest.

Taking responsibility doesn't mean that the abuse, trauma, or the past will be forgotten or that an abuser will get away with their actions. It only means that someone is consciously taking their power back, standing strong, and becoming empowered throughout their daily life.

Once the client understands this, it takes a lot of unconscious inner conflict out of the picture and frees up the client's state of mind to focus on the healing process. This always seems to be a big self-sabotaging factor, as the client's understanding of these two concepts unconsciously sabotages the healing process, especially if the client was abused.

Also, remember that trauma takes place when a person isn't able to resolve stressful circumstances that made the body feel threatened either emotionally or physically. Trauma isn't something that happens to us, it's an experience that can greatly alter our psychological way of coping with life depending on the inner resources that we had available at the time to help us cope and survive the stressful event.

Just as a quick overview: When a person feels a negative feeling as a result of trauma, then we'll be exploring how this traumatic or stressful event made them feel without reliving the actual event.

Help the client to understand the forgiveness concept and taking responsibility. It's crucial to discuss this, as this sets a solid foundation for you and the client to work, and here's why:

## The Power in Understanding Forgiveness

The client should understand that just moving forward in life doesn't mean forgiveness. Moving forward does mean that a person no longer desperately clings to grudges and trauma anymore. Forgiving also includes moving forward, away from the issues at hand and, most importantly, the past. In this instance, forgiveness is accompanied by a sense of peace and understanding. Forgiveness is to understand their own actions and reactions to behaviors or circumstances. It doesn't mean they have to approve of what has happened. They just need to acknowledge that it did happen.

Often, you're in so much pain or denial that you can't recognize there is an issue or block waiting to be released in the first place, because you're stuck in a place of anger. Ignoring the obvious signs is a way to keep safe. It may not be until something from your past confronts you that you're forced to deal with the very thing you've

been running away from. Forgiveness means moving on, in whatever capacity you can. Always remember that forgiveness equals freedom and empowerment.

Forgiveness is a process that starts automatically unfolding when you truly understand the role you played and the role that the other person played. You understand the pain and trauma that caused certain behaviors in you, as well as for the person that you were in conflict with, to surface. Forgiveness comes naturally once the story from the past is understood.

## Sitting Position and Behavior for a Face-to-Face Session

When you're sitting down with a client face to face, make sure that you aren't sitting directly in front of them.

## When a Client Starts to Cry

If a client is in distress or crying, never ever touch a client. I acknowledge that it's a normal, compassionate response to comfort someone in distress; however when you touch a client while they are activated, it takes them out of the triggered state, which is exactly where you want to them to be.

Do keep in mind that the triggered state isn't always necessary. However, in most cases, it is quite helpful as the client is able to feel and access their emotions more quickly and easily. The body is also indicating to the client that a trauma cycle needs to complete itself. When you touch a client in distress, it immediately comforts them and dissociates them from the activated state they were in. This means that once they have calmed down it might be harder for them to access their emotions again.

When a client is crying, that is a good thing. They are completing a trauma cycle! However, in some cases, people tend to stay in the crying state too long, as this is a place where they feel safe to express themselves which, at the given moment, is perfect. You also might want to guide them to feel safe to express themselves with words so that others can understand their needs and personal boundaries. If the client continues to cry and there is too much emotional charge, then immediately take them into an

alpha brainwave state, as this will help the blocked cycle to complete.

## **Expanded Awareness**

Go into expanded awareness (this will be taught during the live event) whether it's a face-to-face, Skype, or phone session. In short, stay absolutely 100% focused on the client. You don't have to know how to go into expanded awareness in order for the content of the Level 1 Online Course to work. It will work.

This is just an extra step that I prefer to teach practitioners whether you work with a client or on yourself. This doesn't just include eye contact (don't stare at your client the whole time either; however, keep the connection and rapport open). Be emotionally present. Drop your awareness into your heart center and stay connected to what is being felt and communicated throughout the session.

Imagine the white light and then imagine a beautiful ball of light above your head. This light represents your consciousness, and it slowly moves from the intellectual head down into the heart opening up the gates of the limbic system.

#### Where is the Emotion or Stress Stored?

I would then ask the client where in their body do they feel the emotion that they feel challenged by? This would relate directly to the issue/goal that you and the client are working on together. Sometimes, the client might say "I can't feel where it is." This is when you have to become more playful.

If you're doing this on yourself, then I invite you to step into a more playful pretending state. Pretend that you know where the home for this feeling is, where would it be? Is this feeling inside or outside of the body (take note, it makes a difference whether this feeling is inside or outside of the body)? If the feeling is inside of the body then it's their emotional response, regardless of whether it is a triggered predisposed trauma. If the feeling is outside of the body, then it's a soul copy that belongs to someone else that this person had an interaction with at some point in their life.

## Working with Injuries

When working with injuries, the sooner you deal with it, the better the results. It is important to deal with physical injuries before the secondary gain patterns set in. When you work with a physical injury, you're working with the actual physical trauma, emotional shock, and the survival instincts that were triggered during the injury.

I always start by asking the client what they emotionally felt at the time of the injury. What stress was recorded or imprinted in the location of the injury at the time? When the body experiences physical pain, it creates a small (depending on the trauma experienced) weakening in the fascia where the injury took place.

The weakened area in the fascia records the emotion that was experienced at the time of the injury. Remember that the point of injury could be in a different area than where the fascia was weakened. When there is tension in one point of the fascia, pain can radiate and cause problems in other unrelated areas in the body. This makes it more challenging to find the origin of the actual pain.

For example, you twist an ankle and then the next day your knee is painful or your back becomes painful. Now, because the ankle, back, or knees are completely unrelated to one another, one may overlook that it might be due to the injury of the twisted ankle. The fascia in the foot may have been injured, resulting in the fascia creating a tension point. It could be pulling other parts of the fascia out of position, creating a secondary pain elsewhere in the body.

Please also always remember that physical injuries can also trigger old trauma in your body from previous injuries, so this possibility should always be considered. You often hold on to trauma as it's not being released in a healthy way nor is the trauma cycle completing itself. Instead of processing it immediately, the body suppresses it.

For example, when you experience physical trauma to your body as a result of abuse, attack, or an accident, the memory/impact of the trauma can remain in the injured part of the body. It can remain there until another physical impact or trauma triggers the old trauma (emotional or physical) that wasn't completed. This can then

recreate all the emotions felt at the time of the first initial injury combined with what you were feeling at the time of the second injury. So, now you can see how trauma piles up.

Early trauma can take place after birth. It may include medical intervention, an operation without local anesthesia, negative experiences in hospitals, or negative experiences in one's environment or in the womb.

The final results of trauma can surface several weeks and even months after the incident. I always ask my clients how they felt during the time of the injury, or just before. It's important to consider the actual trauma and emotions you felt at the time of the injury. It's always worth exploring what took place at least up to a year before the incident took place.

Explore self-sabotaging patterns and pressing issues that may cause you or the client to feel intense emotions. The more pain you're in, the more anger, resentment, and frustration are being suppressed (make a note of this). The energy put into being angry often moves to a weak area in the body, such as an area where there was a previous injury and the injury has not healed. The weakness in the physical body is like a magnet for anger.

In most cases, you'll find you may have felt vulnerable on the day of the accident or shortly before the injury took place. It is important to explore why you felt vulnerable and resolve the issue that led to those feelings. When I refer to feeling vulnerable, it means that something could have happened that disrupted your normal (normal from your perspective and experience) flow of emotional states.

Secondary gain of an injury often starts **after** the actual injury. You might feel more loved and cared for due to the injury, which could result in an unconscious desire to delay healing. If the injury is associated with love, attention, and less responsibility, this is a secondary gain.

## Surgical Intervention and Healing

Thoughts and organs each have a frequency, tone, or vibration. Past illnesses may have gone away; however, their vibration and energetic imprint haven't completely disappeared. A disease may have gone

into remission. However, the vibration/cellular memory of the disease is still in the body. This is especially true if you have had a problematic organ removed.

The emotional issue that caused the organ to become problematic has not been resolved. Only the physical aspect has been removed. The memory of the issue and tension remains in the area where the organ was. Once you have resolved the emotional conflict related to the physical area in the body, the tension or pain dissipates or can heal completely.

## Self-sabotage

Self-sabotage occurs when you undermine your own progress whether consciously or unconsciously. This can be in any aspect of your life. Your mind wants something but your actions do something else. For example, you do something knowing full well it's not a healthy thing to do, such as drinking, smoking, or overeating—but you do it anyway. It serves to help numb an emotional aspect of your life that you don't want to or aren't ready to address.

Another common example is when you, for example, unconsciously do something to destroy a relationship in its early stages, in order to avoid a chance at intimacy or to avoid getting hurt.

Popular examples of self-sabotage are fear of success or, to explain it another way, fear of getting what you want. Some people in relationships have a fear of commitment and this creates tension and arguments. They may even go as far as unconsciously provoking fights and arguments so that the other partner can't tolerate the strain in the relationship anymore. Eventually, the person breaks up with their partner. When this happens, the person with the fear of commitment blames their partner for leaving instead of taking responsibility for their own sabotaging behavior that contributed to the breakdown of the relationship.

Another example is when someone is single and has a fear of commitment or being hurt. They find fault with people that they meet. Nobody appears to be good enough. The person could do or say something silly which puts the other person off from dating

them. They can be nervous about meeting a new partner or go on a blind date. They can sabotage the meeting by creating a separate problem in their environment that would delay them meeting the person or ultimately cancel the date.

Doing the laundry is another good example. I have seen many people who dislike it so much that they sabotage their time just so that they can make excuses to get out of doing laundry, and they would rather spray their clothing with air freshener than wash it.

Self-sabotage also comes into play when someone wins the lottery, especially if they had an average income. These people are suddenly rich, but they will often lose all the money that they won in a short period of time.

The conscious mind is willing to achieve the goals that a person has in mind. The most obvious result of self-sabotaging tendencies is that goals and success are not achieved. Self-sabotage is the end result of your lack of self-worth and low self-esteem, which is a result of inherited traits, abuse in your childhood, or challenging times with a lack of support and guidance.

I've learned that the best way to break this cycle is to ask the question, "What is the benefit of sabotaging \_\_\_\_ in your life?" This brings me to the topic of secondary gain.

When we can let go of hidden benefits or secondary gains, we can accelerate in our healing process that pushes us forward in life until our biological makeup finally meets our spirituality. When this happens, you become more in sync with everyone and everything. By this point, what you once thought you needed and wanted has changed. You begin to understand the difference between what will help you achieve your very best and what will not. It is the difference between knowing what you want versus what you need in order to reach your full potential.

This begs the question, "How willing are you to allow your spirit mind to guide you without your biological mind needing to control the outcome?" That bridge may not have developed to its full potential. So, what stops you from allowing this to take place? When are you going to stop needing to control everything and actually believe that you are competent enough on a higher level? How many times do you have to sabotage wonderful opportunities that are presented to you? What is holding you back? Do you have

a fear of taking personal responsibility? Are your excuses too convenient? Is being disempowered easier than being proactive?

## Secondary Gains: Why People Don't Always Heal

I describe secondary gains as a special type of self-sabotage. It can be quite a big obstacle to process. Secondary gains are unconscious motivators that reward you in emotionally or physically ways for holding on to your problems and blocks. When a bad habit serves you, there is an unconscious benefit. Secondary gain is a recognized psychological term. I sometimes use the term "hidden benefits," because my description of these gains or benefits is a little bit different than the psychological definition.

You may have sought help and tried to change on many different occasions, but the problem hasn't gone away. When this happens, there is more than likely a hidden benefit at work—an unconscious sabotage of the healing process.

Let's return to the fear of commitment example I used. A person might do something to destroy a relationship in its early stages so that there's no chance of getting hurt. This is a type of self-sabotage.

A relationship fails because of the fear of getting hurt. The cycle continues and all relationships eventually fail. The hidden benefit is that the fear of being hurt provides safety. Hidden benefits are often the reason why people don't heal completely from their past and current hardships. Sometimes, by being a victim, a person receives more love and attention from those around them. Another hidden benefit of being a victim could be that people always come to the rescue, which creates feelings of security and being cared for.

A significant hidden benefit is avoiding taking responsibility, especially for your emotions and actions. I have learned that clients often want to blame their outbursts on their traumatic past or a painful recent event. They may not want to take responsibility for their future actions and reactions.

It is the recipient's responsibility to decide how they're going to move forward. I'm only saying this based on my own experience and the mistakes I made. My past mistakes resulted in my healing journey becoming painfully long and unnecessarily hard.

You may also become stuck blaming others and the circumstances surrounding you for your feelings. You can become so busy blaming others that you miss out on what is really important and that is reclaiming your inner power and sense of self.

It is important that you understand your role when it comes to taking responsibility for yourself in the present moment.

Taking responsibility for your future is the only way you'll heal and make personal progress—no one else can heal for you on your behalf. It is also a vital step in taking your personal power back. Blaming others for any problems, illnesses, or emotional states becomes a hidden benefit. People still greatly contributed to your pain, but only you can change how it affects you, which will ultimately lead to self-healing.

I invite you to understand that, as of right now, you are in control of your own life and future.

I acknowledge that some of you may see your past as crippling and not worth healing, but it isn't an excuse for not getting on with life and becoming the successful person that you are meant to be. I know, because I used to be that person.

An example of hidden benefits is the benefit of anger. A person might hold on to anger because it makes them feel powerful. They use anger to compensate for poor personal boundaries. The hidden benefit of anger is that it helps them to feel safe. It is very unlikely that this anger will dissipate until they work on their boundary issues. This is also an example of an association that was formed incorrectly, meaning anger equals boundaries.

We all have hidden benefits; we all have something in our lives that is serving us in some way. The most challenging step is to identify these patterns. Hidden benefits often serve people to such an extent that they unconsciously don't want to uncover them.

The hidden benefit of not taking responsibility allows you to keep blaming others for your problems and the choices you have made. I have surely done this in the past. The first step when dealing with hidden benefits is to become aware of them. It is important for everyone to learn to trust and rely on their own inner resources instead of relying on hidden benefits in order to get through the speed bumps of life.

Taking responsibility for yourself and the choices that you've made is very empowering! It is one of the greatest opportunities to finally heal from trauma and abuse if that was part of your history. It may also be difficult to recognize any hidden benefits. This is especially true if the hidden benefits are protecting and shielding you from seeing something in your life that is too painful to reveal. For this reason, it is best to work with a practitioner.

You might be wondering how best to identify these issues. I suggest exploring together with a practitioner those areas where you feel stagnant and stuck. Maybe it's the desire to start a new career, to heal from old hurt, etc.

Ask yourself, "If I healed from the old pain, what would change in my life that I don't want to change?" The answer might be that you can no longer blame and hold others responsible for your pain anymore. In many cases, there is a powerful fear, such as a fear of failure, abandonment, rejection, or success. Avoiding the fear is the hidden benefit. Where there is a hidden benefit to the symptoms of trauma or abuse, it is necessary to resolve the hidden benefit before the trauma. Many try to resolve the trauma directly without working through the hidden benefits. This is almost always unsuccessful because the hidden benefits will sabotage the healing process and cause the problem to come back.

I once had a client who was very good at her job. She was a female engineer. I asked her what her life would be like without her abuse trauma. She realized that she would be more compassionate, more sensitive and a more forgiving person, which would mean she would probably change jobs.

She also had a concern that she would not be able to access her anger and use that to build a barrier around her in the male-dominant environment she worked in. She loved her job and she was really good at it. She realized that if she had to let go of the abuse trauma, she would lose all the qualities that helped her to be good at her job. Letting go of negative aspects of her personality such as remaining distant, being one of the guys, and unafraid to show anger might disappear. She chose to stay the way that she was. She made a conscious decision not to let go of her past as the qualities that came from her abuse served her so effectively. Shifting it would have had a profound effect on her.

I learned that sometimes people just feel comfortable feeling uncomfortable.

The interesting part is that she would not necessarily have to change jobs by changing how she felt about her job. A person can't fear losing something if they don't have an attachment to it. The attachment she had to her job, in this case, was held in place by trauma. If the abuse trauma weren't present or activated (as a result of a strong predisposed abuse trauma) in her life, then she would have made different decisions and most likely chosen a different career.

When they have an attachment to something, then the reason why they have that attachment should be explored. If my client agreed to resolve the unhealthy attachment she had to her job and lifestyle, then she could have been a much happier person today. She might still have been in the same job, but happier, content, and peaceful. But, it didn't matter what I said. She thought that she needed her trauma in order to be successful. She also had a classic case of selective hearing during the session.

The identification of secondary gains can be delicate and should be introduced in a gentle and simple way. Sometimes a client can be so attached to their secondary gains that just the mention of the word can trigger them or make them feel that they are responsible for their emotional or physical suffering, which is not the case. For example, a person may unconsciously sabotage any ability to achieve goals in their life that would create success. This is a common experience: a grand opportunity presents itself in life, but they can't find the confidence and self-worth to grab it and claim it for themselves.

Your identity can sometimes be tied in so strongly with your trauma that the pain becomes a trophy—the story of your life. Many of my clients have reported that if they don't have their trauma to talk about, then they have nothing else to talk about.

If there were no secondary gains, then the issues would be resolved. The fact that you may still have issues/blocks in certain areas in your life indicates that there is an unconscious fear of achieving or changing something that unconsciously serves you. When I refer to serve, it doesn't necessarily mean there is a positive gain! It might be a fear of change, a fear of moving forward, or a

superficial fear of consequences that may follow if \_\_\_\_ doesn't change in your life. Superficial fears and the consequences thereof are just another means of deflecting rather than dealing with the actual issue at hand.

Remember that when you resolve secondary gains related to trauma, the body starts to remember how to complete the trauma in an easier way, as there are no secondary gains holding the trauma in place. This allows the body to naturally switch the instinctive reactions off and rebalance them, instead of them being "on" all the time.

I have also learned from my own experience that people who have been abused often become stuck in a victim state. It's okay to feel like a victim of abuse but only until a certain point. The time to move on eventually gets set in motion. Being a victim in the long-term suppresses your confidence and reinforces the fact that your trauma controls your life.

The hidden benefit of being a victim in my case was that I could always blame other people for my problems. I blamed others for how I felt and for my broken future. I just couldn't see the light at the end of the tunnel. I didn't have to take responsibility for my future and how I felt in my present life. I could avoid reaching my goals in life, because I gave my power away to other people. It's okay to have a setback when something bad happens, but the longer you dwell in this state of mind, the more you're going to try and cope with the issue instead of healing from it.

When you feel too challenged to change something that is emotionally debilitating and unhealthy for you, your body will look for the positive points within your circumstances. You might learn to live with how you feel as you hold on to the small positives.

You might have a fear that if you move away from your circumstances then you will lose the positive points. That's how hidden benefits start to form. It's very subtle and can become mentally, spiritually, and emotionally debilitating. Holding onto trauma increases your chances of attracting it again as you unconsciously keep sending out stress signals. Someone who matches that frequency will then respond or react (this could be someone you know or a new person coming into your life) and the experience that transpires from that could either be good or bad.

When the hidden benefit is fear, as in the above examples, you can resolve the benefit by using the Body and Brain Method, which isn't discussed in full detail in this book. However, we do dive deep into this concept during the live Level 2 Event.

After the fear is resolved, you'll often find that the underlying trauma or abuse has largely dissipated and is much easier to heal and work through.

#### Possible hidden benefits

- The disease or trauma makes it easier to express boundaries with loved ones.
- In sickness, one is less likely to be attacked, abused, or judged by others.
- It provides an identity; offers a heightened sense of compassion being expressed.
- It becomes a false identity—a part of who you think you are.
- Helps to avoid taking responsibility, which then begs the question, why are you avoiding responsibility? Have you been burdened in the past by taking on too much? Or do you just have poor boundaries? Secondary gains might seem simple to find yet the real deep root cause of it being there can often become complex if you don't stay focused on your client and what is being said.

## Different Ways Your Intuition Can Come Forward

The key here is to know that all forms of intuitive insight relate to the same concept—receiving information or knowledge in a manner that you can relate to. What makes us unique is how we interpret this information that is given and shown to us. It doesn't really matter whether you see or hear the knowledge.

It's really just a question of how you feel most comfortable receiving new knowledge. It's important to explore what your intuitive strength is because knowing this and practicing this will make you a much more confident practitioner and restore your trust in yourself as well. If you feel uncertain about how to use your intuition, my best advice to you would be to just relax; it will come. The more you practice the more you'll become aware of a pattern

of how information is brought forward. I will also be teaching you many different ways how to activate and use your intuition when you feel stuck. The following are different types of ways that you can be intuitive.

Clairvoyance is often called the sixth sense. It is related to the images that are always present in our minds that bring messages from other frequencies and realms. These images can be archetypes, colors, still frame, or animations. They can be anything. They can remain for a few seconds or much longer. Initially, it's easiest to see them with your eyes closed. As you develop your intuitive abilities, you'll be able to look at higher frequencies with your eyes opened.

Clairsentience means clear sensing. It is an intuitive ability that takes on several forms. The first and most common form of clairsentience is the ability to receive psychic insight by holding an object. In this particular example, an intuitive may do readings by holding a personal object, such as a watch or ring, belonging to their client. The intuitive senses the spiritual energy (also called prana or chi) contained within the object and can provide startling insight into their client and events surrounding the client.

Clairsentience does take on other forms as well. Sometimes a reader receives information from sense and stimuli such as a feeling of chills or tingles. They may feel a change in temperature (warmer or cooler). At other times, an intuitive that is clairsentient may pick up a strong scent (such as smelling another person's perfume or cologne).

Clairaudience is obtaining information by hearing sounds or voices that can't ordinarily be heard (they wouldn't be clearly picked up, such as a clear voice). Someone who is clairaudient can receive information in this way. It isn't necessary to hear it through the ears.

Claircognizance is simply the knowing or the prophetic sense. It's just knowing who's on the other end of the phone or what's about to happen. You didn't see it, feel it, or hear it. You just knew.

## Chapter 11: Things to Keep in Mind During the Session

If you're working on yourself, it's important to become your own source of support. And, it's healthy and important to have people that you can reach out to when you need support and help. However, especially when you're going to work on yourself, you have to start by building self-trust and a stronger relationship with yourself.

You need to reconnect to that inner knowingness that you can do this no matter what. Because after all, the only things that you'll experience are emotions, and these emotions are only echoes from the past. There is nothing more to it! It's how these emotions make you feel that can often challenge your willpower and determination.

If you feel it will help you as a reminder, then you can write this reminder on a posted notepad that you can have with you while you're working on yourself. "The only thing that I'll experience are emotions, and these emotions are only echoes from my past."

## Self-sabotage

Find the gain by exploring (feeling) your responses to these questions:

- What is the worst thing that could happen to me if I heal now? [To identify any fear, ask yourself this question while visualizing that the problem has gone.]
- What is the benefit to me of holding on to this?
- What would I have to do/go back to doing if I heal now?
- What would I lose/miss out on if I heal now?
- What would happen if I forgave/let go of \_\_\_\_\_?
- How does this symptom/condition make me a better person?

#### Exercise: What is your secondary gain?

Pick an unresolved issue (this doesn't have to be physical—it could be an inability to forgive someone).

Find the gain by exploring the responses to the following questions:

- What's the worst thing that could happen to me if I heal now?
- What would I have to do/go back to doing if I heal now?
- What would I lose/miss out on if I heal now?
- What would happen if I forgave \_\_\_?
- What would happen if I let go of \_\_\_?
- What would happen/change in my emotional life if I make this change?

It is important to become aware of the unconscious mind and your heart and gut instinctive responses when you explore these questions. These reactions will give you a lot of information and hints as to what your deepest blocks could be.

## Working with friends and family

You may have a friend who's going through a challenging time. Helping a friend raises a number of issues quite distinct from helping yourself. For example

- Should you get involved at all, and if so, at what point and to what extent?
- What type of support should you offer? Should you just be a listener, or take a more active role?

What should you do if your friend is being abused but doesn't want to be helped?

It isn't pleasant to hear your friend talk about challenges that they're going through, or did go through, and they're trying to heal the consequences of past events.

## Is Your Friend Asking for Help?

Does your friend just want to talk or are they asking for help? If you try to help a friend that is stuck in a challenging situation and they didn't ask for intervention, then this may create more problems. It's important to know what type of support your friend is asking for.

When support is given without being asked for it, it is unlikely to be welcomed, and will typically be rejected. If someone doesn't directly ask for help, then they may not be ready to take the first step in helping themselves.

It's challenging to help someone that feels stuck and discouraged by his or her circumstances, especially if they don't recognize how deeply their circumstances or challenges are affecting them and those around them. They might feel that your support is merely interfering with their life. They might feel that you're being judgmental about their lifestyle choices.

Your friend may feel that you're projecting your values and your will onto them. They may feel controlled by your suggestions and advice.

Where to Begin: The best place to begin is to be a receptive audience—listen without judgment. Demonstrate your ability to listen and be present. It is important that you don't have an agenda to save them, because they may feel quite threatened by it. If your friend is staying in challenging circumstances, it means that on some level they have weighed the options for themselves, and it's safer to stay in their freeze instinct and circumstances than to leave it or change it (secondary gains).

If you get involved, you threaten that delicate balance, and your offer of support might feel very unsafe to them. That's why it's important that you just listen.

Ask them what they intend to do about their circumstances. Talking about it isn't going to make things better for your friend. However, talking to them can help them feel that someone understands their situation and they are supported. In that way, when they need support, they know that they can approach you.

It's important for you to be honest with your friend. Be honest in an encouraging and tactful manner. Speak to them in a way that you know they will listen to you.

Keep Your Own Issues Separate: Be aware of getting emotionally involved in your friend's personal life. This can happen if you yourself have unresolved pain or hurt, possibly from past challenges. This could be in response to your own experiences and is a subconscious cry for help. I have seen people become overwhelmed and utterly stressed by their friend's circumstances because they also need to be saved in one way or another.

The reaction you have to your friend's situation might be an indication that you have unresolved issues that you need to deal with in your life. You are identifying with your friend's pain. It can be easier to help others rather than help yourself.

When you reach out to someone in need, it's important that you are clear about whether there is something within you that needs to be healed first, especially, if you've become overly involved in your friend's life. You'll only do your friend a favor by helping yourself first, before supporting them. This will allow you to be completely present and objective in your friend's circumstances.

**Creating a Supportive Environment:** If you decide to go beyond merely listening and want to offer support, the key is to show your friend all of the support that is available to them Essentially, you are helping to create a safety net.

Make sure that you can live up to the kind of support you've offered. It can have devastating effects on the friendship when they realize that the support they were promised is no longer available.

Decide ahead of time what type of help you want to offer. Be very clear within yourself what you are able to offer and be careful not to overextend yourself in the process. Giving too much of yourself could cause you to resent your friend when you realize that you have taken on too much.

Make sure that you keep communication open with your friend. Choose a day and time to contact each other and touch base.

To be honest here, I would not recommend working with a friend. This will immediately change the dynamic of the friendship in a way that might leave you feeling unhappy and burdened by your friend's problems. You might end up associating your friend with problems and negative experiences, which will ultimately weaken if not destroy the friendship.

Your aim should be to assist and facilitate the process with them and not for them. Don't become controlling. The last thing they need is to leave a controlling partner or environment only to be controlled by a friend. They have to learn how to be independent—if not, they will quickly find themselves in another controlling dynamic.

Don't pity your friend. Don't say, "Oh, you poor thing. I feel so sorry for you. Your life is so hard." They're already aware of the pain and distress that they're in. If you patronize them in this way, you're implying that they're weak and they lack the inner strength and resources to do something about it. Your friend does possess the strength to make a miraculous change in their life. They may not have made that final decision yet or they might lack the necessary support.

Remind them how important their freedom is, how amazing they are, how they may have forgotten that they were once strong, independent, and powerful. Remind them that they are just as important as anyone else and are worthy of respect, love and support.

If you approach someone in a difficult situation, one of the most effective things you can do is to remind him or her of their brilliance. They have only temporarily forgotten about that aspect of themselves. If your friend is in a dangerous and violent situation, always obtain professional assistance if your friend decides to leave the relationship.

Always consider approaching a community worker, trusted friend, lawyer, or trained professional. Be a friend, not a counselor. Be a source of support, not an imposer.

You need to know where your own emotional baggage stops and your friend's baggage begins. Don't impose your personal will

onto someone, even if you have strong feelings about their circumstances. Everyone has the right to choose for him or herself.

Taking action and making appropriate decisions can be made easier with your support. Ultimately, your friend has to be the one to take the first step. Be patient and continue to stand by them, even if you feel that time is running out for them to make a change.

If you feel your friend needs support ASAP, then you can always refer them to my Metaphysical Anatomy Technique Level 1 Online Healing Course or other online healing courses such as the online Healing Your Boundaries, Finding Peace Again healing course.

## Things to Be Aware of and Take Notes of When Working with Clients and Ailments

What's traumatic to you might not be for someone else. We all have different thresholds and trigger points. You also need to remember that we see the world differently. Do you think that the way that the world looks and functions is different when a mouse looks at it? Absolutely! What you see is not necessarily the same that others see. You may see the same objects, etc., but how you interpret it, feel about it, and evaluate it will be different. Always keep an open mind!

- Make sure your client has a positive association with support and change. If you are female, and they have trauma as a result of a female, then find this out, as it could sabotage the session.
- Does the client need permission from anyone to change or grow?
- If the client panics and you go into a panic as well, then the best solution would be getting you both into an alpha brainwave state (ten deep breaths in through the nose and out through the mouth).

## Being the Practitioner - What You Need to Know

All practitioners have their own personal issues that they're working through on a day-to-day basis. It's a process in life that is taking place at this very moment. They have their own experiences while helping clients experience their journeys.

It's important to always remember that, as a practitioner, you are still human. Practitioners often place themselves under a great deal of pressure to fix people. They might also find themselves placed on a pedestal by their clients, which can result in the practitioner becoming afraid to make a mistake and disappoint their client.

The challenge here is not worrying about being on a pedestal; it's the fear of disappointing the client. The practitioner will probably disappoint a client at some point. It is impossible to always have all the answers and be in control 100 percent of the time. You cannot always help and save everyone. Practitioners can only work with those who are willing to work with them and, most importantly, the people who want to be helped.

I have learned to only help people who ask for help. I acknowledge that sometimes a practitioner may need to take the initiative and extend a supporting hand. I have learned to be a better judge when and where to interfere with someone else's journey and when not to. When a client asks for help, they have come to a realization that they have lost control of a certain aspect of their life, and they need support. The client has now realized that they need a facilitator who can steer and guide them back on track. They finally have the willingness to cooperate.

Practitioners should also be wary of using the word *need* during a session. It creates an automatic feeling of lack. Never say, "You need \_\_\_\_. You also need to feel and do \_\_\_\_." No one needs anything. Clients want to be reminded of what \_\_\_\_ feels like as it may have been suppressed by trauma.

I believe I am a facilitator during the session. It is disempowering for someone to think that their personal progress is in the practitioners' hands and in their ability to fix the issues. The way, in which the practitioner facilitates their sessions, should be empowering. People are powerful beings. Everyone possesses the ability to heal and to get better. That ability can be reignited if all the key traumas that suppress it are resolved. The practitioner should support clients by reconnecting them to their own power and the confidence that lies within. While a person may be unable to access positive emotions due to trauma, they still have the ability to feel these emotions.

During a session, the client can experience such a big shift that they can't even remember what the problem/block was. In some cases, people can take days, even weeks, to integrate new transitions. The more control and secondary gain issues the client has, the longer it might take for them to heal, integrate, and change. The practitioner can help the client speed up the process by supporting the client in resolving self-sabotage and secondary gains. Self-sabotage can surface as a fear of change, a fear of success, or a fear of failure. The practitioner should make sure that they explore and exhaust all possibilities so that their client can get the most out of their session.

As a practitioner, the stronger your personal boundaries are the less likely you're going to feel an overlap of the client's stress and emotions. A fear of feeling the client's emotions also stems from being unclear as to what your responsibilities as the practitioner are.

Poor boundaries on the practitioners' part can often be the result of invasion/violation trauma (this can be emotional or physical). Sometimes a practitioner feels that there is no stopping and starting point between their boundaries and a client's boundaries. If there were no invasion or violation of the practitioner's boundaries (physical or personal space in the past) then there would be no fear of feeling others issues or fear of saying no.

Setting boundaries and saying no may have resulted in punishment or a sense of loss of something or someone that was important to you in the past. This again resulted in a fear of expressing and exercising healthy boundaries toward clients and the general public. Clients often trigger unresolved issues within a practitioner. The practitioner's body is trying to tell them that there are unresolved issues surfacing from their past. A practitioner should never judge himself or herself. They should make sure that they resolve this unresolved issue, as it will improve the quality of their sessions and also improve their confidence.

The practitioner should never silently work through their own issues during a session with clients. They should always give their undivided attention to the client. If the practitioner's trauma is too strong or overwhelming to continue the session, then they should politely excuse themselves and take a five-minute break and

privately acknowledge the trauma that surfaced and shift their focus back to the client.

The practitioner should never allow a client to see them lose control or look stressed in any way. If a client sees any sign of stress experienced by the practitioner, they may withdraw and question whether they can trust the practitioner to help them or not. It will affect the quality of the session.

There are times when a client's story really touches the practitioner or the client's history might be very traumatic, hard to listen to and even similar to the practitioner's past. The more painful the client's story is the more the practitioner feels like helping and supporting the client.

The practitioner can even become too attached to the outcome of the client's progress. This can result in the practitioner becoming too controlling and essentially, sabotaging the clients' session, as they may try to help too much and give too much overwhelming advice.

There are times when a client triggers an aspect within the practitioner that still needs to be saved or healed. This can unconsciously motivate the practitioner to push the client too hard to change. It is normal to resonate with a client's past trauma. It is always important for the practitioner to acknowledge that their focus should be on the client.

The practitioner might also project what they think the client should and shouldn't be doing. The practitioner does have a certain level of responsibility to make sure their client is doing better after the session, not worse. During the session, they should be handing over responsibility to the client to allow the changes to integrate into the client's life. This is even more important if the desired changes require the client to make decisions in their private life. The practitioner cannot do that for the client. The practitioner can only give them advice and the rest is up to the client. The practitioner can share their opinion; however, they should never project.

People who approach a practitioner already suffer from some sort of vulnerability. They are more than likely to listen and follow through on everything that the practitioner is saying. Practitioners should never take advantage of a client's vulnerabilities. It's up to the practitioner to recognize that the client is susceptible and take steps in how they convey their messages and advice to the client.

The clients should always feel empowered to make their own decisions. It is so important to learn how to love and accept others while they make their mistakes. Practitioners should guide, support, and facilitate a client's healing journey. Anything more than that will interfere with the client's journey and disempower them. Too much interference also leaves the client feeling incompetent, and they feel challenged to choose and decide for themselves. What the practitioner thinks the client might need or should do is not always in the best interest of the client. The practitioner should always keep this in mind.

# A certain amount of understanding the body language of your client is helpful

Shoulders hanged – this person's dignity and self-worth have been challenged to a great extent. They feel burdened by people's expectations.

Legs crossed – there is a boundary being expressed. It also shows fear / shame association with perhaps sexuality.

## The benefit of a Breathe in the Light exercise

If the client activates you—and they are activated as well—stay calm and imagine a peaceful ocean scene focusing on water or a mountain range to help sooth an overwhelming rush of emotions. Immediately start a Breathe in the Light exercise.

Take yourself and the client into an alpha brainwave state. Do the exercise with the client so that you can also go through the process and move into a more stable and controlled state of mind before continuing the session.

Never ever lose face; if you do, you lose rapport with your client and trust. It affects the emotional bond and quality of the session. Take yourself and the client into the alpha state (breathe in through the mouth and out through the nose) immediately and regain control of the session and your emotional state.

#### Working with Clients

In this Chapter, I describe some issues that may arise when working with clients, such as the practitioner's need to process their own issues, which could be activated by the client. I describe several different types of clients and what you need to know in order to help them. I also cover issues specific to working with children.

#### **Adopted Clients**

Adopted children often attract adoptive parents that will give them the soul experience that they were intended to have. They will also be attracted to a family that will have similar ancestral predispositions. People attract families that resonate with them or challenge them. The adopted child will carry with them the biological imprint of their biological parents as part of their journey.

Adopted children and adoptive parents attract each other to complete their unresolved experiences and also learn from each other. It is helpful to explore why they came together during the client session. The Re-Conception Method works wonders for people in these circumstances. See the Adoption section for more information in Metaphysical Anatomy Volume 1.

#### **Dramatic Clients**

The dramatic client may revert to a dramatic state that served them in their childhood. They may have associated being dramatic with being loved, cared for, and acknowledged. This often happens for people who grew up with siblings. The only way they were acknowledged is when they threw a tantrum or become dramatic. Deep down they feel invisible, lonely, and rejected, and they need to be heard and listen to.

Clients often play out this role with their practitioners. The more unmet needs they have, the more they're going to search for validation, acceptance, and love from the practitioner. They often only know one way to feel validated, which is by being dramatic, as this is when they get the result, attention, and outcome they wanted.

The problems start when the practitioner rewards this kind of behavior by being overly proactive. This can include hugging or holding the client's hand or trying to rescue the client. When a practitioner does this, they are validating and reinforcing a negative association the client has made with love, support, and attention.

I choose to make eye contact and say, "I acknowledge your tears and see that you are upset. Let's focus on why you're crying." Get to the bottom of the issue instead of rewarding the crying. Stay focused on the intention of the session. The more you reward dramatic behavior, the longer and more unproductive the session is going to be. Reward them with a hug after the session. This helps the client make an association that they are loved and acknowledged when they stop avoiding and deflecting from issues in their life.

As the practitioner, never give the client a tissue when they start to cry. They feel comforted when you do this. They instantly disconnect from their feelings, making it harder for them to identify what the issue is or was. Place a tissue box close to the client's chair before the session so that they can take a tissue when they feel they need one.

Never tell a client that everything is going to be okay when they start to cry. Their circumstances might actually be quite serious and nothing is okay to them at that point in time. Respond to the client by saying, "I acknowledge that you're upset. Let's explore how we can resolve this. Would you like to do that?" By asking this question, you give the client the power of choice. They are consciously deciding to explore their emotions, to let go and resolve the issue at hand, instead of feeling pushed or controlled by your good intentions.

When a client cries or laughs after a session, the session is not complete. Even if the client cries and says it's because of joy or gratitude, the session should not be considered complete. Tears are a symptom of trauma. Even when you laugh or feel gratitude, it's driven by suppressed trauma. When people cry because they are laughing (happy tears), it's a result of trauma.

It might be because of positive trauma. Trauma is trauma and it is important to resolve it so that the client can feel balanced and calm again. Positive trauma is still nervous energy. In reality, there is nothing positive about trauma. People can associate trauma with a pleasant feeling, because it makes them laugh and release endorphins that temporarily relax them. Nervous laughter is a sign that the session is incomplete.

People have become accustomed to personal development sessions that make them feel as if they're on an emotional high. The feelings become better and better until after only a few short days, they plummet down and fall into a mild depression. It's like a roller coaster ride.

The best outcome after a session is calmness, balance, and feeling peaceful in regard to their circumstances. Most sessions end in a high, and it seems to be expected these days. In my opinion, this type of end result is not the desired outcome. I personally believe that when you feel like you're on a high, a trauma is triggered; however, it surfaces in a temporary non-threatening way. The trauma will only reveal itself as the original old trauma when someone or circumstances trigger the disguised trauma. Always be wary of this possibility.

## The Blaming Client

Clients who avoid dealing with their issues and problems often deflect by starting to blame other people for how they feel and the circumstances they're in. They find it easier to blame others, because then they don't have to take responsibility for their problems or their future and current circumstances. They may also be stuck in a victim state, which causes them to only see what has happened to them. They cannot see a way out of their circumstances and feel stuck.

These clients are often very slow in terms of letting go of issues, people, and relationships that no longer serve them. The client holds on to these people, relationships, and circumstances so that they have a reason to blame something or someone for the emotional state that they're in.

They avoid focusing on their personal development session. They focus on how all the people in their life are making them feel. Yes, the client should process the anger and resentment that they have toward someone or a situation. Clients who only blame others become so stuck in their anger and resentment that no amount of help can reach them because of their need for revenge. The client has also found a new sense of power via their resentment.

The client who places blame on everyone else feels stronger when they hold onto their resentment and anger. Their anger has become their boundary, a boundary that was overstepped and disrespected in the past. People who blame others for their problems have allowed themselves to be disempowered by those individuals whom they are blaming.

They feel angry and stuck in the circumstances that they allowed others to inflict or bring upon them. They failed to set boundaries or take appropriate action in their past against people or circumstances. Their own sense of failure is now turning into a strong need to shift their feelings of failure toward someone else by expressing it as blame. They have lost their confidence and now someone needs to be blamed for it.

As the practitioner, you should explore why and how they lost their confidence and how it made them feel. Work on hidden benefits of the symptom of the problem and the trauma itself. When you work with a client that has been abused, you will notice a pattern of existing abuse in the person's life, their parent's life, or their ancestral line. This abuse could leave a tone or suppressed pattern of trauma and abuse in the person's unconscious mind. Abusers are often attracted to the people who have this pattern as they are easily overpowered, manipulated, and controlled.

## **Manipulative Clients**

Clients often become manipulative when the practitioner is treading too close to a sensitive issue, and they might become verbally aggressive. Their parents may have manipulated them during childhood and when this person followed their parents' manipulative instructions, they were rewarded with love. When you, as the practitioner, validate any manipulative tactics on the part of the client, they might feel that you accept or love them.

Manipulation is also a hidden form of control. The more you, as the practitioner, work and resolve your personal boundary issues, the easier it will be to express it and easily manage this type of client. You are offering your time and energy to the client by means of an exchange such as a payment or an exchanged favor. Giving in to being manipulated or controlled by the client is not included in the unspoken contract between you and the client. Have a structure that you can follow to keep you and the client on track and focused on the actual issue and problem at hand.

#### The Analytical Client

They feel much safer in their head mind (thinking about their emotions). They feel even more safe when they can understand what their emotional processes are, how they work, why they work the way they do, why, why and why? Sound familiar? What they truly feel takes second place.

They are fixated on the story of their life. During their childhood, they may have relied on their ability to process information and their emotions in their head mind. They feel and express their emotions from an analytical point of view.

Sometimes, the client can stall during the session and say, "I don't know how I feel. I don't know that." They're often stuck in their head analyzing the situation, and they may be avoiding making a decision, which is also self-sabotage. The best way to approach this is to ask the client, "What is the benefit of not making a decision?" You can also ask, "What is the benefit of always thinking about your emotions instead of feeling them?"

Often, it's because they have an unconscious fear of taking responsibility or a fear of change and moving forward. They also have a fear of being hurt, a fear of feeling vulnerable, or a fear of success. Address the fears that are most relevant as to why the client does not want to feel their emotions.

What their heart says often takes second place. They have made an association that living their life from an analytical point of view keeps them safe. They don't have to feel what is taking place around them or the emotions they are suppressing.

They think, learn, feel, and love with their head mind and the emotional aspects of these experiences are suppressed. They often argue a lot during sessions asking countless questions, which is their way of deflecting and avoiding facing their emotions. It could also be that you didn't explain the process and procedure well enough to the client and that could cause confusion or mistrust.

The client might even start asking many questions or analyze your responses. This is especially true when you get too close to a vulnerable topic. They may have been traumatized by circumstances in which information was withheld from them, which may have contributed to their traumatic experiences.

The result is that they now need to know everything before they make a move. Lack of information may have resulted in trauma and unpleasant experiences. Influential people may not always have explained things to them in a way that made them feel safe. Knowledge equals safety and being in control.

In reality, this is true. The problem starts when someone needs to know everything (even information and issues that do not concern them) and this need is driven by fear and trauma and not by rational motivation.

Traumatic and repetitive incidents may have taken place (such as continued exposure to unexpected moods) in their family that made the client dissociate from their environment. Rather than feel what is taking place in their environment, they revert to their intellectual mind and process their emotions by thinking about them.

It does beg a few questions. How does being analytical keep you safe? What is the benefit of being so intellectual about your emotions? What feelings are you avoiding? The answers will provide you and the client with a clearer direction of where the session will end up going. The client will also have deeper insights to their blocks and why certain blocks are not shifting. You can support the client in resolving their fears and trauma without needing to talk about it in much detail. If they don't know what the answer is then go with the emotions that come up and don't worry about the story behind it.

Note for practitioner: Always steer the clients back to how \_\_\_\_ made them feel, instead of validating their story. The client might also be expressing and sharing symptoms during the session that are unrelated to the issues that you have agreed to address.

Sometimes, the client doesn't want to talk about it; instead, the client will tell you about their hardships in life. And, that's okay. This is also deflection, especially if you're getting very close to a sensitive topic. Always gently bring this to the client's awareness and steer them back on track and focus on the actual issue.

Set a goal and intention with the client before the session as well. Take the available time you have with the client into consideration when discussing the client's goals during the session. It is also always best to send information to your client about how your practice works and what to expect during the session. This will save you and the client a lot of time, allowing you to focus on the client's issues and goals.

#### Resistance to Change

Resistance to change and lack of cooperation is often an issue when working with clients. I always have the occasional client that will try to challenge me and be as difficult as possible. They have a "no one can fix me" attitude. It's up to you to decide how they're going to approach this. I never validate or reward this kind of behavior. I always feel that if they approach me then it should be with the intention of moving away from their past. It's not my job to fix anyone. My role as a practitioner is to support, facilitate, keep the client on track, and create a safe space in which to process emotions.

I value my time and do not play into this challenging game with people. If you're ever confronted with a situation like this, it's always best to start with a secondary gain. Ask the client what the benefit is of believing that no one can fix them? This would also be a good time to express a gentle boundary to the client that it is not the practitioner's role to fix the client.

I always send out a client form days before the actual session. In this form, I express my boundaries and intentions so that there are no miscommunications or misunderstandings during the session. On some rare occasions, a client cancels or disappears after I send the client questionnaire. This tells me that the client had such a strong resistance to change, and they also didn't want to take responsibility for their own healing journey.

They saved my time (and their money) by cancelling, as I would not have been able to help them. Practitioners will notice a big improvement in their sessions when the client can take responsibility for their future and goals. This does not mean that you, as the practitioner, have no responsibility. You do play an important role in the client's healing journey, but only up to a certain point.

When I'm confronted with this type of client, I always try to establish whether the client requested the session out of his or her own free will. Did the client ask for the session or did their family members or a friend arrange it for them? There are times when a client only sees a practitioner to please their family, partner, or friend. The end results of these sessions are often not as good as it could have been if the client initiated their own healing journey.

People may also feel that it's unfair to change who and what they have become after being abused. They often feel, "Why should I heal when the people who caused my harm and trauma are not being as proactive as I am?" They feel judged and not good enough, almost like a broken piece of porcelain that has lost its value.

They may have been pushed around in their childhood to do things that they didn't want to do, and their resistance was the only way of keeping safe. When they're about to resolve a big block, they often become resistant and unintentionally sabotage the session, as they fear the outcome of new changes. The client may have made a negative association with change, causing them to resist or even sabotage any possibility of change.

It's important to address any trauma related to change. They may also have felt controlled in their childhood with very little room to make their own choices and decisions. They were dictated to and told what to do and when to do it. Now that they're adults, they often overcompensate for the lack of freedom and control they had. They become rigid, resistant, and even controlling when confronted with circumstances that might alter their way of life. Becoming resistant is the client's way of taking control of a situation. They use resistance to stop people from controlling them.

Even though you, as the practitioner, might have good intentions, they still have a fear that you might change something in their life that they do not want to change. It's important that the client understands that you will only guide them and help as much as they want to be helped. Clients could feel controlled by you when you try to help them too much. They have associated support from others with being controlled, manipulated, abused, or taken advantage of. Even though your intentions are good, the client can still sabotage the support you provide by becoming resistant. It

often helps the client to acknowledge the difference between being supported and being controlled or abused.

Note to practitioner: If the client is not willing to work through their sabotaging tactics, then the practitioner can empower them in other ways. There is no point in pushing someone to be ready to heal when they're not ready.

Offer to show them self-help tools that they can use at home. Remember, when you have a client who is resistant to change, it's an indication that there are secondary gains related to the issue. This client has been disempowered during their childhood and is searching for ways to reclaim their power. They want to be in control of their session.

Always ask, "Would you like to work on or resolve \_\_\_\_?" Give them a choice, as this will help the client to feel more empowered and trust you as the practitioner. Always resolve issues that made them feel resentful during their childhood. Their anger and resentment often feed their resistance to change. Look at their relationship with their parents and the parents' relationship with each other. Rigid clients often deflect and only focus on the symptoms of their issue. Gently guide them back to where they should be during the session.

The client also holds on to the trauma with the assumption that it will keep them safe from more traumas. A person can only be vulnerable to more traumas if they hold on to past traumas. What you resist persists. When a person releases trauma in the body, it discharges tension, physical pain, and rigidity in the body. The body gets a chance to complete an unresolved trauma cycle.

## Selective Hearing

Selective hearing starts when a trauma is triggered during a session. The client can't hear everything that the practitioner is saying. The client can only hear selective words. The client starts to feel numb, experiences blurred vision, shows signs of becoming restless, twitches, and can't sit comfortably.

When a trauma is unresolved, it means that the client suppressed an incident that was traumatic and significant to them. When you start to notice the client is showing these signs, keep working with the issues that triggered these symptoms; you're on the right track.

## I can't feel my emotions

This is a very common hurdle for many clients. People feel safe by suppressing and dissociating from their feelings. The challenging part is that often these people are not consciously aware of this pattern.

On the other hand, there are people who suffered abuse and hardship that choose to suppress it. Suppression is easier than dealing with their trauma.

When a person experiences trauma that was unpleasant and painful, they often dissociate from it. They hold on to an instinct such as becoming frozen, feeling numb, or running away, as it suppresses the actual trauma. An instinct served them or kept them safe during a time of trauma. Therefore, unconsciously they hold on to that feeling, instinct, and trauma.

People often say that they see themselves in a picture at the time of the trauma/injury. That is because the client dissociated from the incident. They shifted their consciousness elsewhere in an attempt to escape their reality and what was happening to them at the time. When a person dissociates, they can suffer from complete amnesia of past traumatic incidents and have what is called a foggy head.

Most people dissociate when they experience trauma and feel vulnerable. This only adds to feeling lost, scared, unprotected, and not belonging. The more a person has dissociated from their reality, the harder it's going to be for them to feel their emotions. People cannot fully understand and know who they really are if they spend the majority of their life trying to avoid and dissociate from how they feel.

Note: It is so important that a person feels supported when dealing with their past and processing their hurdles and speed bumps. To work with someone that they personally know is not always the best way to take the first step.

I have seen many wonderful friendships become co-dependent and quite draining for the other party. The line between friendship and practitioner starts to fade. In the long term, this can cause friction and even end a friendship. If a person asks a friend to help them, they should keep the sessions to a minimum.

They should also ask a trained practitioner to assist them with the majority of issues that they wish to work on. The best way to approach this problem during a session is to ask, "If you could feel an emotion (or pretend feeling something), what would you feel right now?" Emotional dissociation can be studied further by referring to the Birth section in MA Volume 1.

### Starting the session

Always leave a 15-minute to 30-minute gap between clients in case someone needs a few extra minutes. It is irresponsible to book clients back to back. A practitioner should never send a client home that is still in a state of trauma, crying, or anxious. The client might say they're okay so as not to inconvenience the practitioner. This could also be as result of feeling rushed by the practitioner. The practitioner should always use his or her own judgment in this case as well.

Always set an intention for the session. What does the client want to achieve?

Always be realistic about the timeframe you have and how many issues you'll be addressing.

Always explore any benefits and secondary gain that the client might have in terms of the condition/issue that is being addressed. First and foremost, the client needs to understand what a secondary gain is. Many people are not familiar with the secondary gain concept. It empowers them to make that choice themselves and to let go of any unconscious resistance. It ensures a session that is not filled with conflicting goals, both from the practitioner and the client.

Acknowledge any feelings of vulnerability, fear, terror, or shock that the client is feeling, as they often have a fear of working through certain topics. Assure the client that they are always in control and that you are there to support them.

At times, the practitioner might find that the client is not listening to them or that they might be avoiding certain questions. It may be that a trauma is brewing and the client is trying to deflect

away from it, trying to pretend that it isn't there. This is usually unconscious.

The art of a skilled practitioner is to keep the client focused on the core issue or goal for the session and not allow them to deflect. Always remember that the client will let go of as much as they're ready for. Nothing that the practitioner can do or say will push the client to do more than what they feel ready for. The session is about the client and not about the practitioner's expectations and goals for the client.

Another important point to remember is that the practitioner is not a doctor (unless the practitioner is legally qualified as one). Do not diagnose the client! If the practitioner has a concern for their client's health, then express it and suggest they see a doctor.

I always send my clients a Client Questionnaire form prior to the session. This form will always give me feedback in terms of what the client would like to address of their trauma, secondary gains, and what their goals are. It also gives the practitioner a better insight as to how to approach the client and set intentions for the session. It helps the practitioner prepare, in case any kind of research is necessary.

People often waste a great deal of time during sessions by talking about the client's problems and establishing a starting point. This form also gives the practitioner an opportunity to express any necessary boundaries between the client and practitioner (roles and expectations). The Client Questionnaire form can be found at the back of this book.

## Why people don't heal

If you have a fear of change, how are you going make changes in your life?

If you have a fear of stepping outside of your comfort zone—that place where you learned to feel comfortable feeling uncomfortable—how are you going to make progress in your life?

In most cases, people have a fear of being rejected if they ever did change. But I have to ask the question, "Are you happy with yourself?" If the answer is no, "What is the point in staying stuck in the state and way that you are? Is it because you have a fear of losing

the love, acceptance, and support of loved ones in your life? Do you fear judgment?"

On a side note here, people who really truly love you, will love you and support you while you make changes in your life.

Often you may be so eager to please people and loved ones that you completely change your identity and values to fit into society and blend in, rather than stand out. You may allow yourself to adapt to others expectations so much that you completely ignore your own true values, needs, and goals. The further away you move from this, the harder it can become to reset this pattern. You adjusted to this new identity due to a benefit that you were gaining from people, such as being loved and accepted.

Now there are instances where children are being taught how to behave (yes, it's a good thing parents!) however in some cases this is taken to the extreme where a child is told how to behave and if they dare step outside of "the box" that they were squeezed into there would be negative consequences. From an early age, a negative association was formed, and if they want to change or heal, they will have to step outside of the box that kept them safe and risk being judged or rejected.

Often, you may not heal as your physical or emotional state is benefiting you conscious or unconsciously in a positive way. Your emotional or physical state, which is negative, is serving you in some way to achieve an unmet need you may have had during your life or childhood. It might also be a condition that keeps you safe in a way where you don't have to step outside the box and step into your power. You may even have associated stepping into your power with too much responsibility or expectations.

You might be so burned out from always having to take responsibility for everyone and everything that it's easier to stay in a disempowered state.

On a side note, this specific example relates back to boundary failures.

You may have such a strong attachment to your negative or physical state and, in most cases, this is unconscious. As a result, any healing work or attempt to make progress is almost always sabotaged.

It begs the question, how ready are you? Do you really want to change? Are you ready to own your new life that could stem from a successful healing? Are you ready to step outside of the box?

## Key points and questions during a session on possible genetic disorders

- When did \_\_\_\_ (condition) start? Were there any environmental factors involved that the client could have made an association with? Was there a toxin or poison trauma? Was there abuse in the person's life?
- What is their ancestral background? Explore any possible genetic patterns. You can explore the client's conception (use it as a metaphor), as this helps the client to access deeper emotions and blocks in a way that allows them to feel more comfortable.
- Explore the egg to see if there is any physical damage (example: any kind of medication that the mother could have taken before conception, e.g., pain tablets, fertility medication, what was her environment like, etc.). How did the egg feel during certain stages and how does the client emotionally relate to that in his/her life and circumstances? Did the client copy / inherit any of these patterns or emotions? Use this exercise as a metaphor as well.
- Explore the sperm to see if there is any physical damage (example: any kind of medication that the father could have taken before conception, e.g., pain tablets, fertility medication, what was his environment was like, etc.). How did the sperm feel during certain stages and how does the client emotionally relate to that in his/her life and circumstances? Did the client copy/inherit any of these patterns or emotions?
- How does the fetus feel in the womb? How did the mother feel during her pregnancy? How did the fetus respond to her emotional state and stress in her environment?
- What was the baby's birth like? Was there any unnatural physical/medical interference?

## Import reminders

Key points discussed in this book are possible trigger points of medical/predisposition conditions. Most emotional and medical

conditions are related to their ancestry and any trauma their ancestors experienced that are triggered in our lifetime. Remember that any trauma you might think is the original cause of a problem might actually be a secondary trauma. Always keep this possibility in mind.

## Working with Medical Ailments

The first question to always ask is when did \_\_\_\_ happen or start to show symptoms of \_\_\_\_?

The next important question is to always ask how the client felt at the time.

I always ask the client about how they had been feeling a few months before the condition started, as this will often give the practitioner and the client an idea of issues that have not been resolved.

If relevant, ask the client where in their body the problem is.

If the problem is emotional, then ask them where in their body they feel this emotion.

# Example 1: Tumor in the optic nerve, refer to Volume 1 for Psychosomatic Patterns and Questions to Ask

- When was the client diagnosed with this condition?
- When did this condition more or less start?
- How did the client feel in their life several months/years ago before this condition started? What has been a pressing issue in their life? This might include stressful circumstances or an abusive or controlling parent.
- Which area is affected? In this case, it's a nerve.
- The emotional components for the nerve are related to control/communication. Refer to Volume 1.
- Where in the body is the nerve? Optic, this is about communication and what a person sees.

 What is the pathology: tumor, feeling out of control, not able to escape or change what they see, feels challenged when they need to communicate.

It is always important to explore any possible secondary gains of this condition, such as people might treat this person differently and even in a way that they have longed for. They feel that others have more compassion for them, and they feel more loved. These types of secondary gains are often unconscious, and it can be challenging to spot and identify.

In this case, the practitioner will start by working on the client's control and communication and feeling out of control issues.

Work on issues related to feeling out of control and not wanting to see the problems in their life.

## Example 2: Multiple sclerosis, Refer to Volume 1 for Psychosomatic Patterns and Questions to Ask

What organ or system: nerve (control / communication).

Where in the body: brain / spinal cord (control / communication / support).

- What is the pathology: Myelin Sheath (attack / vulnerability / boundary).
- Explore why they feel attacked when they try to communicate or why they feel vulnerable. They might have vulnerability around communication and feeling attacked.
- Explore lack of support in their life. They might feel that if they
  are supported it makes them feel vulnerable, controlled, or
  obligated. Always explore further options.
- Always explore emotional components and key points in the client's parents' or ancestors lives as the client may be expressing a family member's trauma and not their own!

The meaning of trauma in this book could be related to physical or emotional trauma that a person experienced that made them feel out of control, vulnerable, under attack, or emotionally unstable / stressed. Trauma in this sense does not necessarily mean severe trauma related to an accident, for example. Please refer to the Glossary at the back of the book for more important clarifications and expressions that are used in the book to avoid any misinterpretations.

## Acknowledgement Exercise (referred to in Volume 1)

This exercise is referred to throughout Volume 1, and it is for the client. When you have some quiet time, repeat this intention below to yourself. I suggest that you meditate for a few minutes to connect with yourself and your body.

"I acknowledge \_ \_ \_ condition as my teacher. It is not part of who I am. I acknowledge everything that I have learned from it. I choose to let go of this experience now. I do not resist, I choose to resolve this now. I have already paid a high enough price for this condition. This condition no longer serves me."

Be quiet for a few minutes with this acknowledgement in mind. Give your body the acknowledgement that it so dearly deserves.

Optional for those who are visual during meditations: imagine a bright white and yellow light coming in through your head and out of your feet while you repeat the acknowledgement and focus the light on the affected area in your body.

Be the best practitioner that you can be. Understand the difference between your goals and the client's goals. Have discernment about what you think is good for a client and what they want. Be a facilitator and not a dictator.

## Working with Children

The best way to work with children is to have a conversation with the child. I like to start by giving the child crayons, paint, and paper. You, as the practitioner, can shake a secret handshake and tell a child that what they express during the session will stay between the two of them. It's important that you express to the child that you are not there to judge them or upset them.

Reassure the child that they will not be yelled at regardless of what they say during the session. I sometimes start by saying that I also had things in my life that upset me when I was a child. It's good when you can help the child to see that you also understand what it

feels like to be upset, angry, or sad. Children do not always realize that other people have felt similar emotions. The child often feels that they are alone and no one will understand how they feel.

If there is no specific issue at hand, you can start by asking the child what makes them sad about their mother and what makes them sad about their father. I always measure the intensity of the emotion that the child is feeling, by opening my arms to 180 degrees. Then I show the child with my hands moving closer together what a small feeling would be versus a big feeling.

When working with the concept of "Where do you feel that" (often emotions), kids will show the practitioner where they feel tension or emotions. If they're having trouble connecting to their emotions, you should keep talking to them. How they feel will be revealed in a conversation.

You can show the child the possibilities of where they might feel the emotion. You can also place their hand on their heart and ask the child if they feel \_\_\_\_ (emotion, block, or tension) there. Keep exploring until the child starts to understand what is being asked. If they are too young to interact in this way, you can practice Metaphysical Anatomy techniques on the mother.

Ask the child to imagine that they are going to place their worries, pain, and stress into a box. Encourage them to hold out their hands and see a ball that holds all their stress and pain. Then put that ball into the box. You can then close the box and place it next to a window and explain that angels or a loved one that passed away (choose a topic that the child believes in) and say, "\_\_\_ will come through the window later today and take away your stress and pain." Then declare it done and gone. I always say to the child that "You cannot have that back; it doesn't belong to you anymore."

Another option is that you can pretend to take the emotions from their head/body and declare it is not theirs anymore. You can use your hand to pretend that you are scooping out the emotions in the area where they said they felt it. This invisible ball represents their stress/pain. Throw the ball out the window.

I like to use the box. As I talk to the child, they will spontaneously start to say, "Oh, I have one more thing to throw in the box and this one too." It gives the child an opportunity to explore how they feel. It also creates a space where the child feels

safe to let go of emotions that they don't want to talk about. It allows them to let go of stress in a way that is not confusing or threatening. I always advise practitioners to have a box ready where the child can place their issues/trauma. Close the box and say that, "\_\_\_ (for example: the angels) will take the issue / trauma from the box and take it away so that it never comes back."

As the child is talking to you as the practitioner, always acknowledge how they feel the moment they mention a negative emotion. The child will start to open up more and cooperate with greater ease.

The practitioner should always make sure to have clay, crayons, or water-based paint for the child to play with. Squeeze balls and elastic bands are also good. Ask the child to paint anything they want before the session. Make sure to have paint ready for yourself, as the practitioner, so that you can sit down with the child at eye level and paint with them. The moment the practitioner is above the child's eye level, the child feels intimidated, and they start to withdraw.

After the session, it's always a good idea to ask the client to make another painting so that the first painting can be compared to the second painting. The second painting should look and feel lighter, more positive, with lighter colors.

I suggest that you work with the child when their parents aren't there. The child might actually have an issue with the parent that is there with them. During the first meeting with the child, establish what the issues are. Intuition should always be used to judge whether it's a good idea for the parent to be present.

If the child is too young to interact, it's important that do not hold back. Ask the parents any questions you have about the child's condition, safety, or health. If the parent really wants the child to get better, they will cooperate. Aggressive feedback and behavior from the child's parent is often suspicious. It is always a good idea for the parents to work through their problems in a separate session.

It is best if the child's parent's work with an independent practitioner, as the child might have a fear that, as their practitioner, you might tell their parents what they said during your session. Build a trusting and non-threatening relationship with the child.

### Evette Rose

## Chapter 12: Session Preparation (Before Seeing the Client)

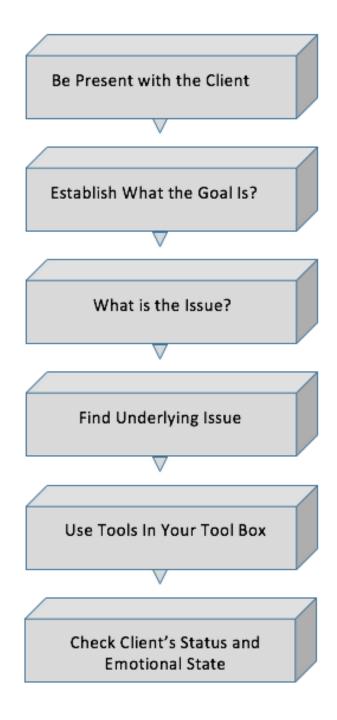
If you can, find out in advance of the condition or issue and do research so that you understand the problem from a medical perspective (if it's a medical issue), which will lead to an emotional block that you can reference to and look up in the Metaphysical Anatomy Volume 1 book. Fill in the Metaphysical Anatomy table so that you know what kind of trauma/issues to look for, or even do research to gain a better understanding of an ailment.

- Have you set a clear working relationship and boundary with your client?
- Has the client received all the necessary information that you need them to know before they come to a session?
- It's always best to agree on the goal of the session before the client arrives or connects with you for the session.

# Overview of What to Expect During a Session of the Online Training Course.

If you are working on yourself, just replace the word client with yourself or you.

(Flow chart on next page)



Often, the symptoms or emotional stress has shifted and something deeper beneath the issue has surfaced. In most cases, the original issue has been resolved and the emotional symptoms and charges have changed.

One or two healing rounds are needed to clear out the white noise and find the actual root cause and problem of the issue. This is normal and part of the process. Most people concentrate so hard on the symptoms of the problem, because the root cause has been forgotten and the emotional ripple effect of the root cause has become greater and more intense than the actual root cause. Most of the time, the focus is placed on the symptoms (secondary gain or self-sabotage) as a way of avoiding getting to the root cause.

## Do Another Healing Round if Necessary

But first, take a break! Say, "Oh, the weather is great today." [Look at their watch.] "Where did you get it?" Talk about something else for a maximum of two minutes and then bring the conversation back to the session.

How does the client feel now? Never ever refer to what the problem was! Only remind the client if they ask. You want to establish how much the client has shifted.

Then ask the client "How do you emotionally feel?" Remind the client that only one-word phrases are needed. Otherwise, they disconnect from the feeling, which will only delay the results of the session. Keep the client focused on the goal.

Continue this order until you find the desired results, a state of calmness and feeling neutral. The client isn't happy or sad; they are in a place of stillness and presence. Remember that by releasing trauma it gives the client access again to positive resources that were once blocked.

Take note, because in the past the client didn't have the resources that they needed at that time of trauma or during a stressful event in order to cope and manage with the trauma correctly. It is also a result of those resources being suppressed by ancestral blocks, womb stress, stress during conception stages, or something that happened in their childhood or adult life.

You want the healing end result to be a state of calmness. Why? Because that is where the magic happens. If the client is laughing and really happy and joyful after the healing, then you aren't done!

Here's why: a happy state can often actually be driven by underlying trauma that's being expressed in a positive way, because the client couldn't express their anger or negative emotions, so they learned to express it in positive ways to keep the peace with others, as they had a fear of confrontation—or whatever the ripple effect might be—if they expressed their true opinion. It's also called nervous laughter!

The state of calmness will give the client clarity for untapped resources that can now start to come forward to help and guide the client to deal with circumstances that used to be stressful in the past.

Now, you might ask, what are those resources, Evette? The right resources will come to the surface, as the client's body and mind will decide what is appropriate at that given time. The body is actually much smarter than you, believe it or not. However, I always love giving positive suggestions during a healing round, as the body will decide if it resonates or not with the suggestions. If it doesn't, the worst thing that can happen is ... nothing. I will explain more of this when I take you through to the steps of doing an actual healing, which is very soon!

Remember to keep your Cheat Sheet handy. Please print it out. This information is included in the online healing course, and I would highly recommend that you print the Starting a Session sheet to guide you through the session and to help you to remember the steps needed when working on yourself or a client.

Quick overview: always listen for self-sabotaging patterns and secondary gains, as these habits are often not done deliberately and they are like silent triggers that make it hard for the client to be aware of. However, in some cases, the client might actually be 100% aware of them, and they just don't know how to move forward from them.

Ask yourself or the client, "If I healed from the \_\_\_\_\_ issue, what would change in my life that I don't want to change or I'm not ready to change?" It's very important!

## Chapter 13:

## Now you are with your client or working on yourself

Look at your client sheet and let's go over how you'll be using this sheet:

- **No. 1 Set a clear and attainable goal**. Make sure the client agrees with the goal.
- No. 2 Be reasonable with the timeframe that you have. Be realistic. You can't fix someone's life in an hour. Remember it took them their entire life to add stress and negative habits and patterns to it. You aren't a wizard, but a facilitator with tools that can help to greatly improve a person's life. Legally, also remember that you can't ever claim that you can heal someone or heal this and that.
- **No. 3 Measure the stress.** I sometimes like to measure the stress of the issue on a scale of 1 to 10. This, however, isn't always necessary as your final outcome should also always be calmness and feeling neutral which is 0/10. You can also take general measurements (happiness, worthiness, etc.).
- No. 4 Look at the secondary gains of the issues. Identify the secondary gain of the issues that you're working on. There are several approaches including
- What is the benefit to you or the client? Don't ask this directly, the client often needs to be gently introduced to this concept.
- What is the fear of healing it? Meaning what will happen if they did? What in their life will change that they don't want to change?

Pause—If you have more than one secondary gain then that is okay. You'll find they all gently start to dissolve as the healing progresses, so don't panic. Keep in mind, though, that I have discovered that secondary gains could sometimes be related to a completely different issue other than what you might be addressing during the session as a result of the client's own confusion regarding the matter. Just stay focused and listen to what is being said.

No. 5 Identify trauma/emotional blocks/stress currently experienced or past. Sometimes you might have a client who comes to you because they know something is wrong, but they can't establish and pinpoint what the problem is. In this case, I would ask the client

- What has been a long-standing issue for you?
- What do you feel is holding you? Is it a person/circumstances?
- What do you want in life and what do you feel is standing between you and the goal?

Remember that the answer has to be an emotional stress, as they might say "themselves," which is an intellectual answer. You want the mammalian brain and limbic system to be dominant here. Keep asking questions so that you can get an emotionally based answer.

Remember, you don't have to clear every single trauma from their life, just the relevant ones. If there are abuse issues, it is always beneficial to work on these first and always use Breathe in the Light exercises—especially the delta brainwave state in through the nose out through the mouth.

Another crucial reminder is that when you work with someone who has been abused or struggles with anger, outbursts, or PTSD. You may find after the session there could be a delayed response from times when the boundaries were crossed (emotional or physical) and, once a person starts to go through a healing process, they finally reconnect with their sense of personal boundaries. However, in many cases, I have learned from my students and clients' reactions (including myself) that once the dissociative state and shock wear off, a big flood of rage can start to surface.

It is extremely important to be aware of this, especially when you deal with any type of abuse, severe bullying, and people who have been harassed or stalked long-term. If you're unsure of how to work with this, I **strongly** recommend that you leave this for a more experienced practitioner, especially if you aren't familiar with Metaphysical Anatomy Techniques or haven't practiced it enough and haven't attended the live event.

Also, if the client is feeling negative emotions toward someone, then let them know that it's okay and stop making him or herself wrong for feeling valid emotions. They are allowed to and have permission (including permission from themselves) to speak and express how they feel.

- What is the emotion(s)? Ask the client to keep the answers short to one or two words.
- What does the emotion feel like?

If the emotion is pulsating, then it's either womb stress or trauma associated with a great deal of anger connected to it, which may mean that the client felt powerless, vulnerable, or a loss of control, and the anger is compensating for their poor personal boundaries.

## No. 6 Where in the body do you feel these emotions? Inside or outside?

Are they inside or outside of the body? Inside means it's their stress. Outside means it's a soul copy.

## Emotion *Outside* the Body: Soul Copy

This is a soul copy! Ask the client, what does it look and feel like? Does it have a familiar voice? Who does it look like? Remember soul copies are the memories, habits, voices, patterns, and stress that belong to someone else.

Once this has been established, visualize your white light around you. Ask the client to visualize his or her own light or light bubble or anything that has lightness in it. Remember that not all clients will be able to visualize a white light. See the client's own white light surround this bubble.

You'll also see a cord from the bubble going into the body attached to the tissue of the body. Dissolve this attachment point to the body until the soul copy either bursts or dissolves. Be mindful that soul copies can have personalities of their own and often move around, so be patient!

### No. 7 If the client feels the emotions – *Inside!*

### If the Emotion is Inside the Body

Where is the stress inside the body? This could be in several places. Look at the area where the client said the emotional stress was (imagine X-ray vision) and visualize your white light around you. Visualize the client's own white light around them. Ask the client to visualize his or her own light or light bubble or anything that has lightness in it.

Please remember that under no circumstances are you moving into their space. You aren't taking anything out of them, you aren't putting anything into them, and you aren't reprogramming them in any way shape or form!

Visualize the white light surrounding this block and visualize it being dissolved, almost like an aspirin tablet in water. The biggest key factor here for you is to stay focused with this visualization, including the intention that you and the client had, until you feel a popping sensation, or just a sudden release, followed by a state calmness and a neutral feeling. When your focus drifts, the effectiveness of the healing is affected and loses momentum!

## No. 8 Identify method needed to resolve.

Before we continue, remember that you'll always use the white light. It's the source and driver of the session!

- What is the emotion? Where in the body is it stored?
- What will change in your life that you don't want to change right now if this actually healed?
- Remember, the fact that they still have it means that there is a secondary gain holding it in place!

- Always use Breathe in the Light (depending on the brainwave state you need the client to achieve; use this especially if you feel stuck). Don't try to do a healing on the client while they do the Breathe in the Light work! Look at the chart again if you forgot or feel confused about which one will be helpful to the client.
- Identity expansion (taught and explained in the online healing course), as the client is so much more than the false identity they have created as a result of the trauma or stress in their life.

You might hear them say, "I'm useless. I'm not good enough. I'm a bad mother. I'm a failure, and all these are false identities!" Whenever you hear "I am xxx" in the negative form, use the Identity Expansion technique. This technique is designed to confuse the client in good ways, as it challenges their false identity.

If they don't understand the question, keep repeating it until they give you a **positive** answer. Remember to always keep chunking it up and keep it positive! They are about to have a wonderful breakthrough and the realization that they are so much more than their false identity. Remind the client that this process is meant to confuse them and stay with the process until it clicks into place. Be patient.

Note: After this process during the online training course, you would normally use the Identity Expansion and Decision Destroyer exercise, as at some point they made an unconscious decision that they weren't good enough. Take them through the steps, and remember the exercise is meant to confuse them, as this is where they become aware of wonderful resources that have been suppressed. Be patient with your client, they will love the end result.

Remember to register for the Metaphysical Anatomy Technique Online Healing course. This is a powerful course for self-healing and will take the context of this book and teachings to a higher level.

# Session Between Practitioner (P) and Client (C) Working on a Relationship Problem

- P What would you like to address today?
- C I feel stuck in a relationship.
- P So, what stops you from leaving right now?
- C Rejected and isolated.
- P Thank you for that information. When you feel rejected and isolated, how does that make you feel?
- C Panic and horror.
- P You feel panic and horror. I invite you to be okay with feeling these old emotions that are coming forward.
- C Okay, I feel less resistance to being present with it.
- P Wonderful. You're doing really well (always praise the client when they are on track, as you want to create a sense of accomplishment as you move closer to the goal).
- P Do you feel anything else other than panic and horror?
- C Yes, I feel angry.
- P Okay. What's behind the anger? (Remember, anger isn't an emotion; it's a symptom and response to a deeper emotion.)
- C I feel powerless.
- P Oh, interesting, so the anger served as a boundary every time you felt powerless.
- C Gosh, yes. I never looked at it that way, but yes.
- P So, how does it make you feel to feel powerless, horror, and panic?
- C Overwhelmed by panic.
- P Where in your body do you feel the panic, powerlessness and horror?
- C In my heart, stomach, and shoulders.

- P Are the feelings inside or outside of the body?
- C Everything is inside.
- P Okay, great. Now imagine a beautiful white light around you, like you are a caterpillar in a white cocoon. If you're having trouble with that, imagine the light outside or the lightbulb shining above you. There is no wrong or right way of doing this.
- C Okay, I feel it. But I don't see a white light. It's a different color.
- P That's perfect too.
- C Okay.
- P Now we're going to dissolve the stress in your body with the white light, almost like an aspirin that is dissolving in water.
- P Side note: Practitioner goes into expanded awareness and also determines, during this stage, if the Breathe in the Light exercise is needed. Go into your white light and stay connected with the client with the strong intention that this trauma and stress is going to be resolved. Be present with the client for at least 2 4 minutes. I normally close my eyes during this phase to help me to stay focused on the intention.

## After Healing Round 1

- P When you're ready, you can come back to me. How are you? How do you feel?
- C I feel calmer, more neutral.
- P Great! Well done! Now, it's time for a break! I love your shirt. Where did you get that?
- C On holiday in Europe. This is my favorite shirt.
- P It's a great shirt, I can see why.
- C Thank you!

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- P I have a question for you. How is the intention for the initial goal for the session a problem for you now?
- C What did we work on again?
- P Ha! We addressed a stress associated with leaving a relationship (never refer back to specifics! You want to know what the client can remember on his or her own accord).
- C Mmm ... now I have more a feeling of being judged if I leave.
- P Judged by whom?
- C By my parents.
- P Okay. Do you feel that perhaps the secondary gain of staying in an unhappy relationship was so that your parents wouldn't judge you?
- C Wow! Yes, I realize that now. Yes, that's it.
- P So, what will change in your life if you leave this relationship that you don't want to change? (side note: secondary gains!)
- C I will lose my parents' approval.
- P How does that make you feel?
- C Unloved, not good enough, and judged by them.
- P How does that make you feel?
- C Useless.
- P How would that make you feel?
- C Like I'm failing my purpose.
- P How does that make you feel?
- C Stupid and worthless, my parents always made me feel this way.
- P Okay, you're doing so great! You're exactly where you need to be. Where does that feeling of stupidity and worthlessness live in your body? Where is the home for it?

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- C In my head and my stomach.
- P Do you feel it inside or outside of the body?
- C This time I feel it outside of my body. Can that be right?
- P Yes, absolutely. You're doing great. (Side note: the client might be new to this and feel awkward to share feelings and sensations that are foreign to them. Reassure them that whatever comes up is meant to come up.)
- C Okay.
- P As you are feeling these sensations outside of your body, who does this presence outside of your body look like or feel like? Does it have a voice?
- C The first feeling that came to mind was my mother! The voice said, "My marriage is a failure."
- P Okay. So, there is an aspect of you that is expressing and trying to correct your mother's mistakes in her marriage via your current relationship? Do you feel you stayed in an unhealthy relationship too long because if you did leave then you'd feel like a failure, disappointing your mum and feeling like a failure like your mum did?
- C OMG! Yes! It felt so strong and real, but it was actually my mother's fear and disappointment. I can't believe how much I sabotaged my happiness.
- P You're doing amazingly well. We're having powerful breakthroughs right now!
- C Yes! I am surprised.
- P So, now that we know what the deeper underlying issues are, do you feel ready to shift this?
- C I'm ready.
- P Okay. So, where in your body do you feel these feelings?
- C In my heart.
- P Is it inside or outside?

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- C Inside
- P Okay, thank you. Where do you feel the feelings of failure?
- C Outside of my chest on the left side.
- P Okay. Wonderful! I'm ready when you are (Side note: now you'll go through the tools that you have and decide who to approach to resolve it. So far it's smooth sailing and straight forward. Remember there was a soul copy as well.)
- P Okay, please shift your awareness back to feeling judged, stupid, and worthless and your fear of failing your mother.
- C Okay, yes I'm aware of it again.
- P Now we're going to dissolve the stress in your body with the white light, almost like an aspirin that is dissolving in water.
  - Side note: Practitioner goes into expanded awareness and also determines during this stage if the client needs the Breathe in the Light exercise. Go into your white light and stay connected with the client with the strong intention that this trauma and stress is going to be resolved. Be present with the client for at least 2 4 minutes. I normally close my eyes during this phase to help me to stay focused on the intention. Remember to also resolve the soul copy of the mother.
- P When you're ready, bring your awareness back to me. How do you feel now when you think back to the old problem you had?
- C It's gone! Wow!
- P Thank you for that. Please check your body and emotional state thoroughly and please take your time.
- C No, I think it's gone.
- P You think it's gone or you know it's gone?
- C I know.

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- P How do you know?
- I feel calm and neutral, and I even have compassion for my parents, because they did the best that they could at the time. I also see how incompatible I am with my partner. I was trying to change him, because I didn't want to be alone, and I tried to make the relationship work for all the wrong reasons.
- P That is a powerful insight!
- C Yes, it is, and I'm not even triggered thinking about it.
- P You did amazingly well, and I'm really proud of you for taking this step and sharing this part of your journey with me.
- C Yeah, thank you to you too.
- P Do you feel ready to integrate?
- C Yes, I'm ready.
- P Integrate and realign energy structures.
- P Okay. How do you feel now?
- C Neutral, grounded, and back in my body.

### End of the session

#### Evette Rose

### Session between Practitioner and Client to Resolve Fear

- P Hi, and welcome. How can I assist you today?
- C I have a fear of cats, and I would like to resolve it, as I have a new girlfriend who has a cat.
- P Okay. So, when you're close to a cat, how does that make you feel?
- C Trapped and like I can't escape.
- P And how does that make you feel?
- C Powerless. It reminds me of the times when my father would come home and be angry and start yelling and screaming at my mother.
- P How old were you?
- C It has been that way since I can remember.
- P Did you have a cat at home when you grew up?
- C Yes, my mother did.
- P Oh, okay. That's interesting. Was the cat normally around you or somewhere close when your father was so angry?
- C Most of the times, yes. The cat was an indoor cat.
- P So, every time you see a cat it seems to trigger your old childhood trauma that has not been resolved?
- C Wow! Yes, you're right. I can relate to that 100%.
- P Wonderful! So, the cat isn't actually the problem. It's the memories and the stress that the cat activates in you that is related to your unresolved past.
- C Yes!
- P Do you feel ready to address that now?
- C Yes, I'm ready.
- P Okay. So, how did it make you feel when your father got so angry?

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- C Powerless and out of control. I felt trapped, because I couldn't escape the stressful circumstances.
- P Thank you for that information. Do you feel ready to address and heal this?
- C Yes, please. Thank you.
- P Now we're going to dissolve the stress in your body with the white light, almost like an aspirin that is dissolving in water.

\*Side note: Practitioner goes into expanded awareness and also determines during this stage if the client needs the Breathe in the Light exercise. Go into your white light and stay connected with the client with the strong intention that this trauma and stress is going to be resolved. Be present with the client for at least 2 - 4 minutes (I normally close my eyes during this phase to help me to stay focused on the intention), then check in with the client.

P Now, we'll dissociate your negative association with cats.

We acknowledge the difference between a cat and feeling trapped.

We acknowledge the difference between a cat and feeling out of control.

We acknowledge the difference between a cat and feeling powerless.

We acknowledge the difference between a cat and feeling unsafe.

- P How do you feel now?
- C Calm.
- P Great! Can you explain your current state more please?
- C I feel calm, light, and neutral.
- P Wonderful! When thinking back to the old problem that you used to have, how does that feel now?

- C What did we work on again?
- P Ha-ha, we worked on your fear of cats.
- C Oh yes! I feel calm. A cat is just well, a cat.
- P Wonderful! You did amazing during the session!
- C I did?
- P Yes! You had a fear of cats and now you feel neutral about cats, because that is all they are, harmless cats.
- C Yes, you're right!
- P Well done and thank you for allowing me to be part of your healing journey!

### End of the session

## Allowing the Physical Body to Heal

After a healing session, it's really important that you give the body at least seven days to integrate the healing. The neural pathways need to adjust to the new resources that are surfacing. It is **normal** for the client to feel confused and unsure of what just happened during the healing session.

That means that the neural pathways are already readjusting, and the client's emotional body is already accepting the new changes and transformations.

It's crucial that the client doesn't drink alcohol for at least 24 to 48 hours after the healing session. Why? Imagine that the neural pathways are like the GPS of the brain. If you're going to a party, you know more or less where you need to go (new destination equals new resources that were once dormant and are surfacing) when you enter the address into your GPS.

You start to drive to your new destination and then suddenly the GPS dies. Now what? Where do you go and how do you find your destination? You were halfway there!

That is what alcohol does to your neural pathways. It disrupts the transmissions completely. It greatly disrupts your body's ability to recover and restore the new pathways to the amazing and

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powerful resources that were rediscovered! I say rediscovered because you've always had these amazing resources within you. You just needed to rediscover them and release the blocks that were blocking them.

### Evette Rose

## Chapter 14: Apply the Healing Tools

## Tool No. 1 White Light

The white light is the source and driver of the healing process. This is what energetically unites your healing abilities with the client's healing abilities.

The second part here combined with tool no. 1 is FOCUS! You have to learn to stay focused, especially when you visualize the trauma emotion/soul copy dissolve and resolve! If you lose focus, the healing loses direction!

Focus and discipline are key to a successful healing and, yes, it really can be that simple if you can just stay focused. Focused means that you only focus on the white light, the dissolving of the emotion, and no other thoughts or images come to mind. Practice makes perfect. It's normal for the first few times when practicing to feel frustrated or that you can't do this. I tell you it isn't true, you can! If I can, so can you.

## Tool No. 2 Breathe in the Light Work

Breathe in the Light is optional and best used when you feel stuck or unable to shift an emotion after the secondary gain has been resolved. Look at the chart again if you forgot or feel confused about which one will be helpful to the client. Please remember: don't try to do a healing on a client while they're actively doing Breathe in the Light Work!

**Beta brainwave state** – is great for when you're working on physical healings and conflicts in values.

Here you will breathe in through the mouth out through the mouth ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel the body automatically deflating (in some cases you might not feel the 'deflating' sensation, and that's okay). Imagine a white light around you and the client, and then they or you inhale, inhaling the white light throughout the process.

Use the beta state when people hold the following states: stress, worry, paranoia, fear, irritability, moodiness, nervousness, depression, anxiety, or anger. It can also help to improve weakened health and the immune system.

**Alpha brainwave state -** is great for emotional healings, this exercise resets the nervous system. This exercise works great when you're working on the limbic system, reptilian brain, master cell, soul copies, and womb.

Breathe in through the mouth and out through the nose ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel the body automatically deflating (in some cases you might not feel the 'deflating' sensation and that's okay). Imagine a white light around you and the client, and then they or you inhale, inhaling the white light throughout the process.

When a person moves into an alpha brainwave state, they're more relaxed. They will feel more creative and hold a powerful state of memory. This is a very harmonious and peaceful state.

Theta brainwave state - this state is great for when you're working with a client who is struggling with feelings of numbness and a dissociative state. Also, if you're the practitioner, it's great to start your healing sessions by going into this state yourself. You and the client can do this together, as it opens up your intuition and sixth senses.

Breathe in through the nose and out through the nose ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel the body automatically deflating (in some cases you might not feel the 'deflating' sensation and that's okay).

Imagine a white light around you and the client, and then they or you inhale, inhaling the white light throughout the process.

This state helps you to access your intuition better; it creates a floating and dream-like state feeling. A person will also feel more connected to their environment and to other people.

**Delta brainwave state** - this state is great for when you're working with a client who is going through a spiritual crisis. This means trauma related to religious acts. It's also wonderful for working on ancestral karma when you have a client that suffered from abuse, such as sexual or physical abuse, near death experiences, an accident, or has a fear of living their purpose.

Breathe in through the nose and out through the mouth ten times. On the last inhale, at number ten, hold the breath in for as long as possible until you can feel the body automatically deflating (in some cases you might not feel the 'deflating' sensation and that's okay). Imagine a white light around you and the client, and then they or you inhale, inhaling the white light throughout the process.

# Tool No. 3 Identity Expansion (this is available in the MAT Level 1 Online Course)

They are so much more than the false identity they have created for themselves as a result of the trauma or stress in their life. You might hear them say "I'm useless, I'm not good enough, I'm a bad mother, or I'm a failure." All of these are false identities! Whenever you hear "I'm \_\_\_\_\_" in the negative form, then use the Identity Expansion technique. This technique is designed to confuse the client in good ways, as it challenges their false identity. If they don't understand the question, keep repeating it until they give you a positive answer. Remember to always keep chunking it up and keep it positive!

They are about to have a wonderful breakthrough and realization that they are so much more than their false identity.

## Tool No. 4 Decision Destroyer Exercise

I always use this after the Identity Expansion. At some point, the client made an unconscious decision that they weren't good enough or whatever the false identity self-sabotaging decision could be. Take them through the steps, and remember the exercise is meant

to confuse them, as this is where they become aware of their wonderful resources that have been suppressed. Be patient with your client. They will love the end result!

# Final Step – Start the healing and apply the tools where necessary!

Once the healing rounds have been done and you have used the tools in your toolbox, return to the list of symptoms — don't remind the client what the symptoms were. They have to tell you what is, was, or how it has transformed.

Always stay focused on the agreed goal and intention that you have set from the beginning of the session, otherwise you'll keep going off on tangents and sit there till midnight!

## What do you do if you or the client panics?

Breathe in the Light exercise is great when you feel confused or stressed as to how to start the session. **Immediately** go into the **alpha State**, IN through the MOUTH and OUT through the NOSE ten times.

You can even start the session with the Breathe in the Light exercises if you prefer.

Remember to register for the Metaphysical Anatomy Technique Online Healing course. I will continue to update the page with more live demonstrations and extra exercises! We also have a public support forum that anyone can join and interact with myself and MAT Level 2 practitioners.

Go to www.matsupportforum.com

There is also a Metaphysical Anatomy Facebook page dedicated to Metaphysical Anatomy<sup>TM</sup>. The site includes updates with new medical conditions and inspirational quotes. New discoveries and new articles related to important and interesting topics will be shared.

Metaphysical Anatomy Forum has been developed with the intention for subscribers who have completed the Metaphysical Anatomy Technique Level 1 Online course as well as the live events to brainstorm new ideas, approaches, and research that can help and support each other, whether it's for your healing / alternative practice or personal healing journey. You will also receive powerful transformational meditations designed and recorded by Evette Rose.

Metaphysical Anatomy Technique Online Healing Course This course is designed for those interested in learning more about the Metaphysical Anatomy Technique. It is also a prerequisite if you're joining me for the live events, where we'll go even deeper into the structure and healing tools behind Metaphysical Anatomy! On the online Healing Course, I will continue to update the page with more live demonstrations and extra exercises, and you'll be kept in the loop with new updates!

**ALSO**, make sure that you are subscribed to my website, as I share many free healing meditations and online healing courses! Don't miss out!

### Evette Rose

# Client Session Sheet (for practitioner to send to a client before a session takes place)

Client Sheet (for practitioner)

Client name:
Intention for the session:
Reminder before the session officially starts: Explain to the client what hidden benefits / secondary gains are so they understand the concept, especially when you ask them, 'what is the benefit of"
When did the problem start?
Thinking about the problem, what benefits of the problem comes to mind? For example, if you changed this problem what in your life would change that you do not want to change or let go of?
(Acknowledge the benefit and how it served the client and kept them safe.)
Pretend the above situation disappears, how does that make you feel in your heart?
What is your gut instinct?
Practitioner's notes:

## Glossary – Explanation of Terms

You may come across these terms in this book.

**Abuse** – in its broadest definition, is any crossing of a person's boundaries. Abuse generally involves intimidation or manipulation and an intrusion into another person's space. Types of abuse include physical, sexual, emotional, financial, and spiritual abuse. A useful lesson is that a person can feel abused, even though the other person doesn't think they've done anything wrong. Abuse is subjective, and we accept the victim's account at face value during therapy, because it is their feelings that we are healing. Acknowledgment means accepting the truth about something. It is the opposite of suppression or resistance.

**Activate** – when a trauma is activated (or triggered) it means that you have accessed or awakened the memory of the trauma (what happened to you or the client) or the survival instinct (how you survived it). When the trauma is activated, you are in a trauma state. That means that you will make decisions or communicate from a place of trauma.

**Attack** – this is when someone is being verbally or physically attacked. The person feels unsafe, out of control, or disrespected as a result. Feeling or being attacked is not necessarily a physical trauma; it can be emotional (feeling emotionally or mentally attacked). A person's ideas, opinions, truths, beliefs, or values can be attacked.

**Body and Brain model** – is a model of the evolution of the vertebrate forebrain and behavior proposed by the American physician and neuroscientist Paul D. MacLean.

**Boundaries** – define where you end and another person (or outside world) begins. This might define physical (personal) space and also mental/emotional space. For example: someone crosses your physical boundaries when they physically touch you without permission, or when they enter your physical space (such as your

home). Someone crosses your emotional or mental boundaries when they verbally abuse or psychologically torment you.

**Coherence** – means that all of your minds or centers of consciousness become one. For example: if the head (human rational brain), heart (feelings oriented mammal brain), and gut (body mind acting on instincts) all give the same answer, they are coherent. Coherence is (and should be) our natural state. It is trauma (especially at conception and in utero) that blocks us from coherence.

To complete a trauma means to finish the process that began with a traumatic experience, so that the survival instinct reaction has returned to its normal or neutral state (not stuck on or off). At this point, there is no subjective experience of trauma or lasting symptom.

**Control** (being controlled) – to be or feel controlled emotionally, mentally, or physically. A person's freewill is manipulated and controlled by an influential person in an unreasonable way that causes the person stress or fear. An abuser may use dominance, threats, or forms of rejection or manipulation to control an individual.

**Control** (being controlling) – is a lack of empathy or disregard for someone else's freewill. Often this type of behavior stems from a resolved trauma related to a lack of control in one's past. Controllers abuse power, authority, or position within a family, workplace, or relationship.

**Ego** – is a person's sense of self or identity. Ego creates a boundary; it keeps us feeling separate from others. Note that ego is neither good nor bad. It is not the goal of therapy to have no ego (in fact, that could be quite damaging). However, a useful goal would be to balance your ego, so that you can feel special and unique, without having to be separate. This would enable you to feel good about yourself without needing to be competitive or abusive of others.

**Empathy** – is the ability to share another person's feelings. Without empathy, it is not possible to have compassion or to take into account another person's emotions. People with no capacity for empathy are considered to be sociopaths or psychopaths.

**Epigenetics** – is the study of how the environment affects the expression of genes. The environment (e.g., emotional and physical trauma) can switch different genes on and off. The DNA itself does not change. I believe that epigenetics explains why ancestral trauma affects our emotional and physical health.

**Fear** – is a distressing negative sensation caused by the perception that someone or something is a threat. The key element is the external threat, which distinguishes it from anxiety, which does not require an external threat. A fear might be completely rational, whereas a phobia is irrational.

**Gut** or **Gut** mind – refers to listening to your body's instincts. In the Triune Model, it refers to the Center Body Mind.

Hidden benefit – is a broad term, which means an internal or external benefit that we get from holding on to something, whether it's an association, trauma, symptom, or something else. The term hidden suggests that the benefit is unconscious. Becoming consciously aware of the benefit helps to heal it, but does not always do so. Psychologists call the external benefit of a symptom a secondary gain. We use the term "hidden benefit" when we are speaking more broadly about benefits that lie outside the definition of secondary gain.

**Instinct** – is an automatic behavior that does not require cognition or consciousness in order to occur. A learned response is not an instinct.

**Personal responsibility** – means taking responsibility for your actions, accepting the consequences that come from those actions, and understanding that what you do impacts those around you. You have a personal responsibility to take care of yourself, for example,

by keeping healthy, managing your emotions, setting personal boundaries, and treating yourself with respect, etc. The opposite of personal responsibility might be called a blame mentality. People with a blame mentality will always look for someone to be responsible for everything that goes wrong in their life, rather than looking within. They don't see how they might have caused the problem or how they can change things.

Responsibility – means being accountable for something or acknowledging that you are the cause or source of something. For example, if you take responsibility for your own life, it means that you acknowledge all the choices you have made that got you to where you are today. The opposite would be to blame. If you tend to blame others for where you are in life, you aren't taking responsibility. People often take too little or too much responsibility, depending on their nature. Too much responsibility is where you feel accountable for everyone around you, such as the health and success of your friends and family. If you take too little responsibility, you might be expecting others to support you rather than being accountable for your own success.

**Secondary Gain** – is an external benefit (usually unconscious) that a client gets from their symptoms. Examples include avoiding responsibility or gaining financial advantage. We can gain an external benefit from many things, so not all benefits are secondary gains. For this reason, we also use the broader term hidden benefits.

**Self-sabotage** – occurs when you hinder your own progress or success, usually unconsciously. Self-sabotage is usually caused by fear. This is most often a fear of success. For example, a person with a fear of being hurt in a relationship may be going on many dates but constantly sabotaging them, perhaps by being late, being rude, constantly finding fault with the partner, etc. This behavior enables the client to avoid ever being in a committed relationship, which could result in being hurt. The method for clearing self-sabotage using Irritable Bowel Syndrome is to identify either (a) the underlying fear, which the sabotage is avoiding (success at something); or (b) the secondary gain of the self-sabotage—how the

sabotage is keeping the client safe. In most cases, these two approaches will yield the same underlying cause. In some cases, it may be necessary to take both approaches.

Survival instincts – are hard-wired instincts that keep us alive. The best known is the fight-or-flight response. Other instincts include the freeze response and hiding. A useful test as to whether a feeling or instinct is a survival instinct is to ask, "How many steps is this removed from my survival?" For example, fighting, fleeing, or freezing can each lead immediately to your survival. By contrast, people offer aloneness as an instinct, and while it may be safer to be alone, it doesn't lead immediately to survival. It's too many steps removed, so it's not a survival instinct.

**Sympathy** – is a mixture of empathy (the ability to feel what others are feeling) together with a desire to see change or to help the other person. You may have empathy for all people but are more likely to sympathize with close friends and family. It is sometimes said that empathy helps you to recognize people's problems but sympathy draws you into their problems. This is a reason why therapists must have strong professional boundaries.

**Symptom** – is a physical or emotional feature noticed by a client that indicates an abnormality. A physical symptom may be an ache or pain, whereas an emotional symptom may be a strong emotion like grief or anger.

**State** – is the present condition or consciousness of a person at a given point in time. You could describe someone's mental state, physical state or emotional state at any moment. Their state includes the content and coherence of their minds.

**Therapy** or **Therapist** – when used in this course, relates to any talking therapy or the person who applies them. Note that different states have different rules about the word therapy or therapist. You must not advertise a therapy or describe yourself as a therapist unless you hold the licenses required in your state.

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**Trauma** – is an injury or harm that occurs when a person experiences a threat to his or her own, or someone else's, safety. Examples might include physical assault, an accident, injury, or other event that involved a threat to survival, or feeling unsafe. [This is from the technical definition from DSM-IV, pp. 424-28.] Simply witnessing harm to someone else (even remotely by photo or video) can also constitute trauma. An example might be the trauma of watching the events of September 11 2001; this caused higher stress levels in many people and their children who were in utero at the time.

**Trauma State** – is a state in which a person's trauma is activated. The person is responding from their trauma and survival instincts rather than a place of clarity. Generally, a trauma state is temporary. Even if the trauma is not healed, people naturally create a level of bypass so that they can get on with their lives—at least until the next time the trauma is activated. Thus, most people spend their lives moving from trauma state to bypass state to trauma state.

**Triggered** – see Activated.

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### About the Author



Evette Rose is an author, life coach, co-founder of a personal development company, and founder of Metaphysical Anatomy. Evette was born in South Africa and grew up in Namibia, West Africa. She then moved to Australia, Vanuatu, and Bali.

She is best known for her work in helping people to resolve

trauma from their past and freeing them to live successful and fulfilling lives. Evette's work is drawn from her own personal experience of moving from a difficult past into a well-balanced life and career.

Evette's philosophy is that we, as a human race, are not destined to live our lives in pain due to a past trauma or abuse. Humans often suppress their ability to complete or heal trauma naturally. In today's society, we often suppress our pain in order to keep up with life and avoid being left behind. Fortunately, through gentle therapy, this natural internal healing instinct can be restored.

Writing her books has helped Evette reach out to other people who are in need of love, support, and someone to relate to. She shares her experiences with the world in the hope that it will help people heal and provide encouragement and reassurance when they need it most. Evette now travels the world teaching personal development seminars and continues her research journey. She has been to more than 42 countries and worked with thousands of people!