

## **Biography: Rev Grace B. Yap-Kirk**



Grace B. Yap-Kirk is a contemplative spiritual director accredited with the Australian Ecumenical Council for Spiritual Direction through completing her three-year Art of Spiritual Direction formation program with WellSpring Centre in 2019. A graduate from University of Divinity, she holds a Master of Spiritual Direction, a Graduate Diploma in (Ignatian) Spirituality and a Graduate Certificate in Divinity. She also has a Master in Business Administration.

Grace accompanies pilgrims on their life journey offering traditional talk modality and creative art languages such as visual art and poetry; dance and movement; sacred sounds and music; singing and drumming; dreamwork and imagination. Her spiritual practices include imaginative kataphatic prayer, silent apophatic meditation and contemplation through art, dance, authentic movement, chanting and recitation.

A practising Catholic, Grace is also an ordained interfaith Reverend Cherag (Minister) with Sufi Ruhaniat International and a registered Buddhist Chaplain with Queensland Sangha Association. She is a member of Spiritual Directors International, Australian Network for Spiritual Direction, Visionaries (an ecumenical Christian artists network) and Dances of Universal Peace.

Grace is an Associate Dance Movement Therapist, member of Dance Movement Therapy Association of Australasia. Her experience includes conducting dance movement therapy groupwork for aged care residents with dementia, bedridden residents, aged respite care and adults with disabilities. An International Institute of Complementary Therapists member,

## *The Holding Space: An Exploration through the Sciences*

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## **The Holding Space: An Exploration through the Sciences**

**Rev Grace B. Yap-Kirk**

### **Abstract**

**T**hrough parallel journeys of spiritual direction formation and dance movement therapy training, this essay is rooted in curiosity about the mystery of *the holding space*, which is common to both spiritual direction and therapy. It examines the meaning of the space and its origins in the mother-child relationship, which leads to the naming of holding, attunement and containment in the practice of spiritual direction. These foundational aspects of spiritual direction are explored through engaging with the sciences of developmental psychology, interpersonal neurobiology, developmental psychopathology and trauma research.

The essay discusses some best practices for the approach of delivery in the holding space. These practices find congruence between spiritual direction and intuitive non-medical strands of therapy models, through ‘midwifery’ of the unconscious emergence in the space, by holding and attuning to the client/pilgrim’s leading. The interactive dynamics that could impede or progress the pilgrim-director relationship in the space are discussed, using trauma science. Challenges that arise in the holding space are found to be the very gift of innerwork material for the purposes of integration and wholeness in reconciliation. This essay uses psychology and neuroscience to develop both a personal and interpersonal viewpoint. Quantum science in spirituality is then used to explore a big picture perspective on the notion of the holding space.

An implication of the essay's overall findings highlights the importance of bodily-felt safety in the work of spiritual direction. This includes understanding the nervous systems and the triune brain functions, as well as the significance of the right-brain's limbic and reptilian domains. Influenced by current trends, the essay broadly discusses suggestions for areas of development for spiritual directors and opportunities for service provision in spiritual direction. The exploration concludes with the belief that the art and science of spiritual direction has shared commonalities with other disciplines. This has implications for ongoing, exciting and multi-disciplinary explorations that can inform spiritual direction in the future.

## **Introduction**

This essay explores the holding space/environment of one-to-one spiritual direction, whenever a spiritual director sits with a pilgrim. Curiosity in the science of this mysterious holding space leads to questioning:

*What is 'holding'? What is 'the holding space'?*

*Where is it, in terms of space and time?*

*Who are the actors or agents?*

*How does it operate? What happens in the space?*

*Why is this space important?*

Research from a range of disciplines, particularly dance movement therapy and developmental psychology inform the fundamentals of the holding space. Relevant areas of interpersonal neurobiology, developmental psychopathology and trauma research are used to help address challenging relational dynamics within the space. Finally, quantum science in spirituality provides a larger perspective. This approach develops personal, interpersonal and collective viewpoints of the holding space.

### **Holding in the spiritual direction context**

Spiritual direction is broadly defined as the gift of companioning pilgrims on their life journey and facilitating growth of relationships with themselves, the divine and others in their lives. Pilgrims listen deeply and reflect on what lies beneath their narratives – thoughts, emotions, bodily sensations, imagery, memories, words, mystical inner impressions and any other perception. These are used to discern movements and invitations of the Spirit to clarify the most life-giving choices for action or restoring a sense of being.<sup>1</sup>

Directors facilitate this through the art of sacred conversation, by listening attentively to pilgrims with a grounded, validating and compassionate presence. There is “no fixing, no saving, no advising, no setting each other straight.”<sup>2</sup> This provides a holding environment of safety, trust and confidentiality for the ‘shy soul’ or ‘true authentic self’ of the pilgrim to emerge and for deep desires, fears, anguish, pain and darkness to arise for befriending.<sup>3</sup>

This work is traditionally held in a private physical space with two equal seats, a display of lighted candles, and religious icons or flowers for ambience. More recently, meetings also occur online. The space in terms of time duration is usually an hour of non-interruption at an unhurried pace. Directors also prepare their own spiritual, mental and emotional space in readiness to hold and support pilgrims. The context of a holding space can thus be viewed multi-dimensionally. Through my practice as a dance movement specialist in therapeutic settings, and through the experience of companioning and being companioned in different faith traditions, this holding space is universal and applies in any ‘holder-held’ context.

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- 1 Bee Lay Kirk (Grace Yap), “The Holding Space,” Unpublished essay, University of Divinity. 5 December 2019, 4.
  - 2 Parker J. Palmer, *The Hidden Wholeness* (San Francisco: Jossey-Bass, 2004), chapter 7, Kindle.
  - 3 Palmer, *The Hidden Wholeness*, chapter 3.
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## **Origin of holding space**

The term ‘holding environment’ originates from the work of Donald Winnicott (1953), a paediatrician and psychoanalyst who first termed this as the environment which a mother creates to allow her child’s development.

In early infancy, the child experiences himself/herself through watching their mother’s face, which is effectively an emotional mirror. When the baby cries in hunger, pain or discomfort, or laughs with delight, the mother identifies with him/her and responds by mirroring the baby’s expressions. The baby feels whatever the mother’s face expresses. Winnicott states, “When I look, I am seen, therefore, I exist.”<sup>4</sup> “The infant’s embryonic sense of self is thus ‘held’ within the envelope of the mother’s mirroring responses,” thus allowing the forming of basic self.<sup>5</sup> Such non-verbal visual and physical mother-and-child interaction thus forms the child’s psychic foundation and consolidates his/her “sense of self and agency, the feeling of being an ‘I’ who can influence (create) the outside world.”<sup>6</sup>

In dance movement therapy, ‘holding’ the client simulates a mother holding her infant. The therapist forms a therapeutic alliance by making the client feel so safe that their vulnerability allows their fragments of self to emerge from the unconscious and be made conscious for the sake of integration back to wholeness.<sup>7</sup> Psychotherapy is not about “making apt and clever interpretations but giving back what the patient brings.”<sup>8</sup> By reflecting what is seen and doing

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4 Kenneth Wright, *Mirroring and Attunement: Self-Realization in Psychoanalysis and Art* (London & New York: Routledge, 2009), 34.

5 Diamond and Marrone (2003) cited in Wright, *Mirroring and Attunement*, 34.

6 Winnicott cited in Wright, *Mirroring and Attunement*, 131.

7 Tony Norquay, “Notes On Attunement,” (Lecture Notes, International Dance Therapy Institute of Australia – Module 3, Melbourne, Australia, March, 2019), 1.

8 Winnicott cited in Wright, *Mirroring and Attunement*, 34.

it well enough, the client will find his/her own self.<sup>9</sup> This is done through creating a “symbolic containing place for the client to be and to discover and hold their own experience, while insight is of secondary importance.”<sup>10</sup> The notion of containing is further explored later in this essay. This stance points to a similarity between director-pilgrim and therapist-client relationships.

Reflecting on the fundamentals of mother-child holding and interaction, the fundamental dynamic of spiritual direction lies within this basic, rich intimacy between two people. This means more than merely creating a safe nurturing space where the depths can be easily glossed over. Beholding the mother’s face can be likened to beholding the Lord’s face during Ignatian imaginative contemplation; where His face and presence can non-verbally build a pilgrim up. This dynamic can also be seen in Rumi-styled intimate eye-gazing spiritual practice with a beloved, or the Catholic practice of adoration and contemplative icon-gazing. It is the “richness of *holding, gazing and reflecting*, the feeling of the goalless goal of simple beingness with each other” that matters, rather than the eagerness for insight, efficiency or crisis-helping.<sup>11</sup>

According to Kestenberg and Buelte, “holding is a dyadic flow interchange where the baby ‘holds’ the mother as the mother holds the baby.”<sup>12</sup> This concept applied to spiritual direction, refers to the potential for mutual director-pilgrim holding, to reflect contemplatively on what can be seen in each other. Thus the holding space is not only a physical or

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9 Wright, *Mirroring and Attunement*, 34.

10 Wright, *Mirroring and Attunement*, 35.

11 Kirk (Yap), “The Holding Space,” 7.

12 Kestenberg and Buelte (1977a) cited in Mandy Agnew, “Dance-Movement Therapy in a Wellness Program for mothers experiencing Post-Natal Depression and their children,” *Move into Life*, 2012, <http://moveintolife.com.au/wp-content/uploads/2013/10/Dance-Movement-Therapy-in-a-Wellness-program.pdf>, 7.

visual space, but a “symbolic interactive relational one.”<sup>13</sup>

## **Attunement**

Directors are trained to *follow the pilgrim*, which in effect refers to the process of *attunement*, a term derived from Winnicott’s maternal holding by Daniel Stern (1985).<sup>14</sup> Attunement refers to the mother-child’s “spontaneous preverbal forms of reflection based on affective (emotional) identification” beyond Winnicott’s parameters of physical and visual modalities of mirroring.<sup>15</sup> Multiple sensory modalities are used in the attunement process to “contain every state of hunger, sleep, cold, tiredness, interest, excitement, calm and attention.”<sup>16</sup>

An attuned mother regulates her baby’s states of joy, playfulness and happiness, and soothes distress. Misattunement or the failure to satisfy the child’s needs can “result in a partially developed or false self, with dissociation, split personality, non-integration and disintegration of the self.”<sup>17</sup> How well she regulates determines the child’s developing capacity for *self-regulation*, which is the “ability to control bodily functions, manage powerful emotions, and maintain focus and attention.”<sup>18</sup> Through the repeated process of well-attuned interaction, the child learns to effectively signal, respond and engage with others, thereby constructing his/her *social*

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13 Kirk (Yap), “The Holding Space,” 7.

14 Wright, *Mirroring and Attunement*, 35.

15 Wright, *Mirroring and Attunement*, 36-37.

16 Diana Fischman, “Therapeutic Relationships and Kinesthetic Empathy,” in *The Art and Science of Dance/Movement Therapy: Life is Dance*, ed. Sharon Chaiklin (New York & London: Routledge, 2014), 37.

17 Fischman, “Therapeutic Relationships and Kinesthetic Empathy,” 38.

18 Sarah Peyton, *Your Resonant Self* (New York & London: W.W. Norton & Company, 2017), eBook chapter 2, Kindle.



*engagement system*. Fostering the self-regulating and social engagement abilities of clients is a high priority in therapy work.<sup>19</sup>

The emotional communication bond between baby and caregiver developed through attunement or misattunement is termed *attachment*.<sup>20</sup> Attachment patterns stay imprinted for a lifetime and become a repeating ‘self-fulfilling prophecy’ especially during times of stress.<sup>21</sup> Children are known to reflect the behaviour of people they are in regular contact with and evoke their attachment imprints from unrelated people around them.<sup>22</sup> Similarly, therapists are aware that clients’ imprints will show up in the therapeutic relationship.

In a similar way that a mother attunes to the baby, attunement in the spiritual direction context refers to the director’s holding, while flowing organically with whatever arises in the pilgrim and in the holding space. Directors are trained to attune through deep contemplative listening with groundedness and centredness while their pilgrims narrate their stories. The key, however, is to discern the unconscious elements beneath narratives and felt sensations, rather than the story itself. Why this is so, will now be discussed through dance movement therapy principles.

Dance movement therapy applies Gregory Bateson’s

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19 Pat Ogden, Kekuni Minton and Clare Pain, *Trauma and the Body: A Sensorimotor Approach to Psychotherapy* (New York: W.W. Norton & Company, Inc, 2006), 43.

20 Ogden, Minton and Pain, *Trauma and the Body*, 47.

21 Ruth Buczynski, “The Neurobiology of Attachment – main session#2.” *Treating Trauma Master Series* (mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioural Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 12.

22 Dan Siegel and Alan Sroufe’s paper “The Verdict Is In” cited in Daniel Siegel, “The Neurobiology of Attachment – main session#2.” In *Treating Trauma Master Series* (mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioural Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 12.

*organicity principle* of positing humans as self-organising systems. The work involves discerning and respecting the client's "natural impulses and pace towards growth and change,"<sup>23</sup> which comes from the client's own inherent wisdom and body intelligence. In this way, the therapist facilitates the client's emergent self-direction and meaning-making.<sup>24</sup>

Bodily-felt attunement is described as *kinaesthetic empathy* in dance movement therapy, where the therapist 'connects in energetic flow' with the client and then works from the interconnected flow, which will lead to the client feeling trust and empathy in the relationship.<sup>25</sup>

Through practices, during motion and stillness, dance movement therapists are trained in *focusing*, a principle by Eugene Gendlin, to develop sensitivity to *felt senses*, which are physically felt "bodily awareness of a situation or person or event."<sup>26</sup>

According to Allan Schore, felt senses can be processed in a right-brain imaginal working space which allows an image or metaphor to be formed and set before the eye.<sup>27</sup> Attunement skills also include awareness of "energy flow, breath, thoughts, emotions, symbols, words and direct subjective knowing."<sup>28</sup> The aim of attuning is to hold and support the client to process on their own from within, in

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23 Karen Baikie, "Organicity," [http://www.karenbaikie.com.au/resources/KB\\_Article\\_Organicity\\_Aug\\_2011.pdf](http://www.karenbaikie.com.au/resources/KB_Article_Organicity_Aug_2011.pdf), accessed 15 August 2020.

24 Marcia Leventhal, "Dance Movement Therapy Module 5" (Lecture, International Dance Therapy Institute of Australia, Melbourne, Australia, August, 2019).

25 Fran Levy cited in Norquay, "Notes on Attunement", 1.

26 Eugene T. Gendlin, *Focusing*, 2nd ed. (New York: Bantam Books, 1981), 32-40.

27 Allan N. Schore, "Clinical Implications of a Psychoneurobiological Model of Projective Identification." In *Primitive Mental States Vol 2*, edited by Shelley Alhanati (New York: Karnac, 2002), 38.

28 Kirk (Yap), "The Holding Space," 10.

order to become “increasingly self-directing and self-referencing with internalisation of control.”<sup>29</sup>

According to the interpersonal neurobiology perspective, attunement occurs when brain states of human beings are aligned and synchronised.<sup>30</sup> Brain functions are highly complex in reality and do not attribute neatly to ‘left’, ‘right’ or ‘layers’, but these generalised concepts are widely used for simplicity. When a director listens to a pilgrim speak, the left hemispheric brains communicate with each other and the right-brains communicate unconsciously.

The right-brain is dominant for processing social and emotional information such as voice, tone, gestures and facial expressions, from which listeners register implicitly and “make inferences about intention, personality and social relationship.”<sup>31</sup> The right-brain particularly perceives the affect of somatic signals coming from the body.<sup>32</sup>

An attuned therapist will listen to the *somatic narrative*, which is the body story “told by posture, gesture, facial expressions, movement and eye gaze.”<sup>33</sup> The therapist then uses voice expression, emotional resonance and body language to create alignment, which is the “empathic

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29 Norquay, “Notes on Attunement”, 1.

30 Allan Schore, “The Neurobiology of Attachment – main session#2” *Treating Trauma Master Series* (mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioral Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 4.

31 Pat Ogden and Bonnie Goldstein, “Sensorimotor Psychotherapy from a Distance: Engaging the Body, Creating Presence, and Building Relationship in Videoconferencing.” H. Weinberg & A. Rolnick (eds.) *Theory and Practice of Online Therapy: Internet-Delivered Interventions for Individuals, Families, Groups, and Organizations*. (New York: Routledge, 2019), 22.

32 Devinsky (2000) and (Galin 1974) cited in Allan N. Schore, “Clinical Implications of a Psychoneurobiological Model of Projective Identification,” 27.

33 Ogden and Goldstein, “Sensorimotor Psychotherapy from a Distance,” 47-63.

matching of one's own state to that of another."<sup>34</sup>

Aligned attunement results in *empathic resonance*; an emotionally warm and generous experience of "Yes, you are with me, you understand me."<sup>35</sup> Resonance is when "someone has spoken something essential that you recognize ... as a true sounding of aspects of yourself and your experience."<sup>36</sup> Resonant language uses a "feeling" tone; it emphasises relationship, shared memories and acknowledgement, and has emotional warmth for self and the other.<sup>37</sup> To attune resonantly, is to communicate through the tone, prosody and self-expression that bear mutual warmth, compassion, empathy and resonance.

Attunement in spiritual direction using right-brain non-verbal modalities can yield better engagement. In neuroscience, the three-layered triune brain in our skull comprises the neo-cortex, limbic brain and the reptilian brain.<sup>38</sup> The neo-cortex is the domain for conscious rational thinking.<sup>39</sup> The emotional limbic brain is dominant for processing images and music.<sup>40</sup> The reptilian brain is wired for survival and is concerned with safety and danger instincts.<sup>41</sup> Outside the skull-brain, there is a whole brain system which includes the entire body nervous system. This brain system has "neural networks and brain cells around the heart and digestive walls"<sup>42</sup> constituting heart and gut

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34 Siegel, "The Neurobiology of Attachment", cited in Ogden, Minton, and Pain, *Trauma and the Body*, 44.

35 Sarah Peyton, *Your Resonant Self*, Introduction.

36 Wright, *Mirroring and Attunement*, 124-125.

37 Sarah Peyton, *Your Resonant Self*, Introduction.

38 Richard Boyd, "Triune Brain: The Evolutionary Design," Energetics Institute, <https://www.energeticsinstitute.com.au/articles/triune-brain-evolutionary-design/>, accessed 19 May 2020.

39 Boyd, "Triune Brain".

40 Boyd, "Triune Brain".

41 Boyd, "Triune Brain".

42 Daniel Siegel, "Module 1: The Neurobiology of an Emotional Trigger." *How to Work with a Client's Emotional Triggers* (mp4 video Course

brain-centres. Science shows that “the head, the heart and the gut are brains” because they have neurons and nervous systems with complex capabilities to process and store information; change, adapt and learn.<sup>43</sup>

“The information highway between the three brains [head, heart and gut] is through the vagus nerve, and 70-80% of nerve relays go up, not down” in a bottom-up reptilian-lymbic-rational (gut-heart-head) direction.<sup>44</sup> Bessel van der Kolk notes that “this is why [top-down] ‘talk therapies’ have been a relative failure in dealing with creating permanent change in the deep seated unconscious mind.”<sup>45</sup> Listening to the head, heart and gut enables the spiritual director to focus on unconscious reptilian and limbic elements, such as hidden reactions, beliefs and patterns.<sup>46</sup> When right-brain artistic languages like art, music, movement, dance, imagination, sandplay or a combination of these are added in the holding space, directors can invite pilgrims’ listening awareness to switch to right-brain, into the heart and body, thus accessing the limbic or reptilian domain. Hence, attunement skills can be expanded and the experience enriched.

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Lecture with transcript, National Institute for the Clinical Application of Behavioural Medicine, Connecticut, 2020), <https://www.nicabm.com/confirm/emotional-triggers/> 4.

43 “The Three Brains: Why Your Head, Heart and Gut Sometimes Conflict,” Australian Spinal Research Foundation, <https://spinalresearch.com.au/three-brains-head-heart-gut-sometimes-conflict/>, accessed 19 May 2020.

44 “The Three Brains.” Australian Spinal Research Foundation.

45 Van der Kolk (2002) cited in Richard Boyd, “Triune Brain: The Evolutionary Design,” paragraph 4.

46 Richard Boyd, “Triune Brain: The Evolutionary Design,” paragraph 3.

## **Container/contained**

Wilfred Bion's idea of containment has applications in the holding space. A *container* is non-sensuous based, internally created and held, and together with what is contained, can be actively "either integrating or destructive."<sup>47</sup> During the process of holding and attuning, disruptions may arise that need to be contained. For example, a mother (as a container) receives "unwanted and/or overwhelming projections from the infant, processes them and then returns the experience to the infant in a modified, palatable form."<sup>48</sup> Similarly, the therapist takes in clients' feelings or thoughts and re-frames or offers them with clearer understanding and reduced emotional charge.<sup>49</sup>

A pilgrim who cannot bear to feel a particular emotion, may not have an adequate 'container' to hold and experience that emotion.<sup>50</sup> Whatever cannot be contained and held, cannot be fully experienced or processed. To use the container analogy, a rigid container may compress its contents but explosive contents can result in mutual destruction.<sup>51</sup> For example, a pilgrim's rage may frighten a director such that termination of the relationship results. Containment should be flexible to adapt to whatever needs containing, so that pilgrims have a contained experience of themselves.

Rules, regulations and professional ethics constitute the working container of a director's practice. A therapist's "own tolerance for emotions ... determines the kinds, strength,

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47 Joan and Neville Symington, *The Clinical Thinking of Wilfred Bion* (London: Routledge, 1996), 58.

48 Linda Finlay, "Therapeutic Holding and Containing," Relational Integrative Psychotherapy handout (2015), <http://relational-integrative-psychotherapy.uk/wp-content/uploads/2015/02/Chapter-5-Therapeutic-holding-and-containing-handout.pdf>, accessed 9 September 2019.

49 Kirk (Yap), "The Holding Space," 8.

50 Kirk (Yap), "The Holding Space," 8.

51 Symington, *The Clinical Thinking of Wilfred Bion*, 50-58.

and variety of emotions that are expressed or denied by the client.”<sup>52</sup> Both director and pilgrim’s self-regulatory abilities to hold and contain disruptive elements that arise in the physical, relational and time space are dependent on their *windows of tolerance*.<sup>53</sup> This term coined by Daniel Siegel refers to the ability to “stay present, grounded, oriented in space and time, and able to think, feel and communicate”<sup>54</sup> without losing control.

### **Relational dynamics in the space**

Disruptive elements that can challenge both director and pilgrim include unconscious distortions such as Freudian slips, projections, transferences, counter-transferences and projective identifications. Slips such as temporary forgetting or blanks, mishearing, mis-speech or other unintentional errors can also carry hidden unconscious elements.

Projections occur when pilgrims transfer ownership of what they are feeling onto the director. These are common occurrences in a safe attuned spiritual direction or therapeutic relationship and can be positive experiences involving love or attachment, or negative experiences involving fear, aggression, jealousy or other negative emotions.

Transferences occur when pilgrims cast feelings about a third person onto the director. Gerald May differentiates transferences as specifically pertaining to parental or childhood caregiving attachment figures and not just any reactions in prejudice or stereotyping.<sup>55</sup> “Many of the

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52 Allan Shore, cited in Ogden and Goldstein, “Sensorimotor Psychotherapy from a Distance,” 21.

53 Daniel Siegel, cited in Ogden and Goldstein, “Sensorimotor Psychotherapy from a Distance,” 20.

54 Katie Dine Young, “Trauma and the Body,” Fall 2016, [http://www.drkatiedineyoung.net/uploads/4/5/6/6/4566455/trauma\\_and\\_the\\_body\\_handout\\_2016.pdf](http://www.drkatiedineyoung.net/uploads/4/5/6/6/4566455/trauma_and_the_body_handout_2016.pdf).

55 Gerald G. May, *Care of Mind, Care of Spirit* (New York: HarperCollins Publishers Inc, 1992), 126.

most intense emotions arise during the formation, the maintenance, the disruption, and the renewal of attachment relationships.”<sup>56</sup>

John Bowlby’s Attachment Theory applied in spiritual direction explains the background of a pilgrim’s behavioural tendencies towards attachment figures and how to describe it when recognised. The four patterns (or traits) of attachment are simplified as Secure (healthily self-regulated and autonomous), Dismissive (distancing, cynical, overly self-reliant), Anxious (overly dependent on others), and fearful (drawn and pulled back paradox).<sup>57</sup> These are adaptive survival coping strategies that pilgrims grow up with, in response to what attachment figures did or did not do. Such patterns often show up in the director-pilgrim interaction or in the narrative.

These relational dynamics apply to directors as well as pilgrims. When a director transfers onto the pilgrim, it is termed counter-transference. This is generally considered to be destructive and needs arresting. Directors usually discover their counter-transferences when they are ‘held’ by supervisors. Supervision is important to ensure that directors avoid unconsciously impeding the director-pilgrim relationship.

Projective identification occurs when an infant projects unbearable feelings onto the empathic mother’s body, which “becomes an instrument for psychobiological mind-body attunement.”<sup>58</sup> Basch (1976) explains that mother-child communications consist of “signals produced by the involuntary autonomic nervous system in both parties.”<sup>59</sup>

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56 John Bowlby, cited in Ogden and Goldstein, “Sensorimotor Psychotherapy from a Distance,” 20.

57 Courtney E. Ackerman, “What is Attachment Theory? Bowlby’s 4 Stages Explained,” <https://positivepsychology.com/attachment-theory/>, accessed 17 May 2020.

58 Schore, “Clinical Implications of a Psychoneurobiological Model of Projective Identification,” 26.

59 Schore, “Clinical Implications,” 26.



Similarly, the pilgrim can “subtly cause the director to resonate *autonomically* with their unconscious affect-laden fantasies.”<sup>60</sup> In this way, knowledge of what was unbearable and unable to be processed by the pilgrim/client, is received by the attuned empathic director/therapist. The director needs to discern whether the felt signals are their own counter-transference or due to the pilgrim’s projection. Projective identification often resembles parallel processing of the director/therapist’s own past.

New research suggests that the complex dynamics discussed above are largely due to brain imprints from previous positive or negative experiences; in early childhood or the foetal stage.<sup>61</sup> These unconscious distortions that are made conscious in the safe holding space, constitute the material for innerwork. The distortions usually lose their hold once they are made known. Uncovering distortions is important work for pilgrims because their inner filters or lenses are often cast onto others: their director; significant loved ones; the world-at-large; and their image of God.

### **Trauma and safety**

Trauma theories can assist in further examining unconscious distortions. Trauma is relevant when discussing the holding space because while directors do not handle clinical post-traumatic-stress-disorder (PTSD) cases, often pilgrims do exhibit unrecognised small-scale trauma symptoms. Defined simply, trauma is “an experience we have that *overwhelms* our capacity to cope with incoming stimuli.”<sup>62</sup>

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60 Schore, “Clinical Implications,” 26.

61 Cognitive Neuroscience Society, “Prenatal stress changes brain connectivity in-utero: New findings from developmental cognitive neuroscience,” *ScienceDaily*, 26 March 2018, <https://www.sciencedaily.com/releases/2018/03/180326110123.htm>.

62 Daniel Siegel, “The Neurobiology of Trauma – main session#1.” *Treating Trauma Master Series* (mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioral

It bears the sense of “*inescapability* – the inability to change things around, the feeling of *paralysis* ... a feeling of total *helplessness*.”<sup>63</sup>

Most trauma therapy cases in the spiritual direction context are about relationship difficulties. *Complex trauma* endured repeatedly over time includes adverse childhood experiences, chronic abusive relationships or cumulative repeated minor harm. *Acute trauma* is caused by single-incident life-threatening shocks, such as war, accident, assault or illness. *Epigenetics* looks at how trauma can change the way DNA is expressed, and how that change may be passed on as *intergenerational trauma*.<sup>64</sup> *Vicarious trauma* can occur from watching traumatic events on television or from witnessing someone else’s trauma. *Small-scale trauma* includes events such as bereavement, job loss or moving house. Trauma is common and affects people to varying degrees.

In trauma, “the rational brain is basically impotent to talk the emotional brain out of its own reality.”<sup>65</sup> Trauma is experienced and remembered as isolated fragments of experience in sensorial form – sounds, feelings, images, smells, touch, taste – and not as a whole complete story.<sup>66</sup> Any sensorial trigger or the narration of precise details of

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Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 3.

63 Bessel van der Kolk, “The Neurobiology of Trauma – main session#1.” In *Treating Trauma Master Series* (Mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioral Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 3-4.

64 Martha Hendriques, “Can the Legacy of Trauma be Passed Down the Generations?” *BBC Future*, 26 March 2019, <https://www.bbc.com/future/article/20190326-what-is-epigenetics>.

65 Bessel van der Kolk, *The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma* (London: Penguin Group, 2014), chapter 3, Kindle.

66 Kirk (Yap), “The Holding Space”, 17.

traumatic events may trigger a full-blown flashback.<sup>67</sup> As a spiritual director, I have witnessed incidences of pilgrims literally choking with anxiety while narrating their story; expressing unwarranted rage in response to a seemingly safe conversation; slipping into withdrawal or dissociation. According to trauma experts, such cathartic re-living of the traumatic experience without re-processing, does not resolve the trauma but leads to re-traumatisation.<sup>68</sup>

Stephen Porges' Polyvagal Theory provides explanation for the science of safety regulation by the body's vagus nerve.<sup>69</sup> The term *neuroception* coined by Porges, describes how the nervous system assesses safety and danger without our conscious awareness.<sup>70</sup>

To explain how this theory can be applied to the holding space, I use examples to illustrate the three different vagal tones. Pilgrims often arrive in what is termed the state of *ventral vagus* pathway.<sup>71</sup> In this state, they feel safe and sociable, talk and listen, connect and co-regulate their moods with the director. They can be meditative, engaged, caring, joyful and open to changes.<sup>72</sup>

As pilgrims' narratives start to touch on deep issues, they may be provoked unconsciously into an older survival circuitry called the *sympathetic mobilisation* pathway, where mobilisation of fight or flight protects one from danger.<sup>73</sup>

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67 Bessel van der Kolk, *The Body Keeps the Score*, chapter 1.

68 Ruth Buczynski, "Main Session#4." *Treating Trauma Master Series*, 23.

69 Deb Dana, *The Polyvagal Theory in Therapy: Engaging the Rhythm of Regulation* (New York, London: W. W. Norton & Company, 2018), introduction, Kindle.

70 Stephen W. Porges, *The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-Regulation* (New York, London: W.W. Norton & Company, 2011), part 1, chapter 1, Kindle.

71 Dana, *The Polyvagal Theory*, section. 1.

72 Dana, *The Polyvagal Theory*, chapter 1.

73 Dana, *The Polyvagal Theory*.

In this state, pilgrims may misread facial cues, fidget or stiffen, and move at or away from the director. Their tone can become challenging (in fight mode), or chaotic (in flight mode); this may include the need to express regret about the session or needing to leave.<sup>74</sup> Reliving the trauma may cause pilgrims to feel danger and mistrust about the world in that very moment.

In extreme case, pilgrims can also react through the oldest primitive survival *dorsal immobilisation* circuitry. In this pathway, collapse or shutdown occurs in the face of extreme life-threats. Dissociation and immobilisation provides protection against psychological and physical pain.<sup>75</sup> Pilgrims' behaviours while reliving their trauma may include freezing, feeling numb or gazing vacantly into space or outside, speechlessness, a flat unresponsive face and collapsed posture, feeling alone, lost, unreachable and in despair.<sup>76</sup>

Good attunement means understanding where one is as one moves up and down the hierarchical vagal continuum: listening to cues of pilgrims' vagal tone and being able to respond accordingly.<sup>77</sup> Thawing from freeze mode, a pilgrim has to move through fight/flight mode, before reclaiming the ventral vagal state for social engagement capability. Those who learn to self-regulate traumatic responses back into balance, can over time widen their window of tolerance and build embodied resilience.

Neuroscience shows that cultivating awareness of inner experiences and befriending them changes traumatised feelings. "Only the *self-awareness system* can change the

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74 Dana, *The Polyvagal Theory*, chapter 1.

75 Dana, *The Polyvagal Theory*.

76 Dana, *The Polyvagal Theory*.

77 Dee Wagner, "Polyvagal Theory in Practice," *Counseling Today*, <https://ct.counseling.org/2016/06/polyvagal-theory-practice/>, accessed 22 May 2020

emotional brain, where most trauma imprints reside.”<sup>78</sup> By asking a pilgrim to ‘describe what they are experiencing right now’ while maintaining social contact with the director, the pilgrim can be kept mindfully grounded in the present moment through the body.<sup>79</sup> This will help prevent their over-reaction because the active cortex keeps the brain in integrating, not dissociating mode.<sup>80</sup>

However, if pilgrims are seized by rage, terror or dissociation beyond their ability to self-regulate, clinical referral for trauma intervention is appropriate, especially where the behaviour disrupts normal functioning or recurs often over a prolonged period of time.

In addition, there can be composite emotional clusters involving grief, shame, unworthiness and more. Neuroscience research has helped many victims to appreciate that the trauma response often seen as pathological behaviour, is actually the result of a functioning, wonderfully-made body system, for protection, survival and adaptation in evolution.<sup>81</sup> Self criticism such as ‘Why didn’t I fight or run away?’ or ‘I could have done something ...’ can give way to acceptance that such behaviours are not character flaws that need fixing, but are due to the innate wisdom of unconscious instincts.

The gift of these dysfunctional interactions that arise in the safe holding space are actually opportunities and invitations to explore; to ‘immerse in the chaos and the

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78 Van der Kolk, *The Body Keeps the Score*, chapter 14.

79 Pat Ogden, “The Neurobiology of Trauma – main session#1.” *Treating Trauma Master Series* (mp4 video Course Lecture with transcript, National Institute for the Clinical Application of Behavioral Medicine, Connecticut, 2019), <https://www.nicabm.com/program/treating-trauma-master/>, 16-17.

80 Ogden, “The Neurobiology of Trauma – main session#1.”

81 Andrew Anthony, “Stephen Porges: ‘Survivors are blamed because they don’t fight’” in *The Guardian*, 2 June 2019, <https://www.theguardian.com/society/2019/jun/02/stephen-porges-interview-survivors-are-blamed-polyvagal-theory-fight-flight-psychiatry-ace>.

rigidity, where the suffering is ... for these moments are cracks that literally illuminate the path forward.<sup>82</sup>

## **Wholeness and integration**

In therapeutic science, wholeness refers to the integration of the self, which can be defined as “the experience of integration of multiple facets of being.”<sup>83</sup> When the brain’s various levels and the central nervous system are not integrated, disorders of the self can result. Integration refers to *vertical integration* of the triune brain and *horizontal integration* of the left and right brain.<sup>84</sup>

Vertical integration occurs when the three brain centres (head, heart and gut) with their corresponding thoughts, feelings and body-states, are balanced in alignment without conflict. This often results in peace about a situation or decision and an end to inner turmoil.

Horizontal integration refers to the right-brain’s unconscious fragmented material being rendered conscious and reprocessed in the left-brain for acceptance into long-term memory without emotional charge.

The therapist’s work in the holding space allows integration to occur through: relational interactive regulation; sitting or being with; validating client’s experiences; tolerating emotions; curious non-judgmental exploration of the body, self, and environment; and noticing how clients construct their universe. The therapist encourages clients to arrive at life-giving resources and choices of self-agency. All

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82 Daniel Siegel, “The Neurobiology of Attachment – main session#2.” *Treating Trauma Master Series*, 16.

83 Malvern Lumsden, “The Affective Self and Affect Regulation in Dance Movement Therapy,” in *Advances in Dance/Movement Therapy: Theoretical Perspectives and Empirical Findings*, ed. Koch and Braunerger (Berlin: Logos Verlag Berlin GmbH, 2006), 33.

84 Ruth Buczynski, “The Neurobiology of Trauma – main session#1.” *Treating Trauma Master Series*, 14-15.

these fit the description of what directors are trained to do.

The holding space provides a temporary window of vulnerability, where this work can occur before defence mechanisms go back into place. In spiritual language, the work happens in the moment of grace where the Holy Spirit initiates and completes reconciliation work in and through the pilgrim.<sup>85</sup> God thus reconciles to Godself and heals all things to wholeness. Personal experiences and witnessing of such phenomenon support the naming of the reconciliation component in spiritual direction work. To explore this bigger picture further, concepts of quantum science in spirituality are helpful.

### Quantum perspective

Unlike classical physics which describes only the external world, quantum theory embraces simultaneously both sides of reality – the inner psychical (quantum) landscape as well as the external physical (Newtonian) world.<sup>86</sup> The healthy body is a “flowing, interactive, electro-dynamic energy field,”<sup>87</sup> that is “rooted in the body but extending out from the body, interacting with others’ fields.”<sup>88</sup> It is “part of a

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85 Fr Fernand Cassista, “Spiritual Direction and Reconciliation,” *La Salette Missionaries Reflections*, <https://www.lasalette.org/reflections/faith/350-spiritual-direction-and-reconciliation.html>, accessed 22 May 2020, 1.

86 Jeffrey M. Schwartz, Henry P. Stapp and Mario Beauregard, “Quantum Physics in Neuroscience and Psychology: A neurophysical model of mind-brain interaction.” PubMed Central, National Centre for Biotechnology Information, 29 June 2005, [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1569494/#\\_\\_sec1title](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1569494/#__sec1title), Pub format, 21.

87 Valerie Hunt cited in Marcia Leventhal, “Transforming and Healing through Dance Therapy: The Challenge and Imperative of Holding the Vision,” *Moving On Dance Movement Therapy Association of Australasia Journal* 11, no.1 (2013): 49.

88 Judy Cannato, *Field of Compassion: How the New Cosmology Is Transforming Spiritual Life* (Notre Dame, Indiana: Sorin Books, 2010), introduction, Kindle.

gigantic system of here and other places, now and other times, you and other people – in fact, the whole universe,” as felt from inside.<sup>89</sup>

The universe is structured in *holons*, which are wholes in themselves, yet part of other wholes, containers within containers like nesting Russian dolls. Michael Dowd suggests considering God as the largest nesting doll of holons, the ultimate creative reality that is the Source; infusing everything and yet co-emergent.<sup>90</sup> Each holon, belonging to a form, person or system of the world, has its own unique and distinctive *morphogenic energy field* or *morphic field*, where information, intelligence, memories and habits are stored.<sup>91</sup>

The holding space can be imagined as a complex interconnected communion of quantum energy fields. These include the fields of: the director; the pilgrim; the collective consciousness; the divine transcendence; and immanence.<sup>92</sup> Of particular relevance to spiritual direction is listening to what Karl Rahner calls the immanent “active self-transcendence - the presence of the Holy Spirit within each creature pressuring it to evolve.”<sup>93</sup>

Each person views reality through their individual, unique subjective lens, which reflects back to themselves their own beliefs, expectations and intentions.<sup>94</sup> This unique *subjectivity* supports the *interpathy* approach in spiritual direction, where the director “temporarily believes what the other believes, sees as the other sees, values what the other

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89 Gendlin, *Focusing*, 77.

90 Michael Dowd, cited in Cannato, *Field of Compassion*, chapter 4.

91 Cannato, *Field of Compassion*, chapter 2.

92 Kirk (Yap), “The Holding Space,” 28.

93 Karl Rahner, cited in Cannato, *Field of Compassion*, chapter 3.

94 Kate Clark, review of *The Quantum Revelation: A Radical Synthesis of Science and Spirituality* by Paul Levy, in *Presence: An International Journal of Spiritual Direction* 24, no.4 (December 2018): 68-69.



values.”<sup>95</sup> This reflection back to oneself perhaps explains why repeating patterns and distortions reinforce the same action, keeping the pilgrim trapped in the same old story of life.

*Intentionality* in the holding space is the “practice of mindfully setting intentions and behaving in intentional ways” towards constructive, life-giving choices.<sup>96</sup> Directors facilitate pilgrims’ discernment of their holy desires, giftings, positive attributes, resources, and paradoxes. Pilgrims move towards divine invitations and create an intentional life with free will. Intentionality is important because thoughts and energy are always affecting reality.<sup>97</sup> An individual inherits a past collective memory in a process called *morphic resonance* and contributes to the collective memory, which in turn affects others.<sup>98</sup> If indeed “one part affects the whole,”<sup>99</sup> then a pilgrim choosing to act in a new way, can affect a whole physical system of change in the interconnected consciousness of brains and nervous systems, across time and space.<sup>100</sup> Small steps taken in the holding space, therefore, have a larger impact than just the personal and as such can affect family or generational culture. Group intentionality with shared aligned intentions can create morphic resonance of *like influencing like* effect; imprinting into the quantum field what makes it easier for others to learn that particular habit.<sup>101</sup> The growing field of compassion is one such emergence.

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95 David W. Ausburger, *Pastoral Counseling across Cultures* (Philadelphia: Westminster Press, 1986), 31.

96 Cannato, *Field of Compassion*, chapter 6.

97 Cannato, *Field of Compassion*, chapter 8.

98 Rupert Sheldrake, “Morphic Resonance,” Rupert Sheldrake website, <https://www.sheldrake.org/research/morphic-resonance>, , accessed 22 May 2020.

99 Cannato, *Field of Compassion*, chapter 2.

100 Schwartz, Stapp, and Beauregard, “Quantum Physics in Neuroscience and Psychology,” 23.

101 Cannato, *Field of Compassion*, chapter 2.

The universe is a single evolutionary organic and dynamic unfolding of the Big Bang energies in *continuous creativity*. Each person's little life story is part of this active continuum of ongoing history, which is 13.7 billion years of creation still unfolding in us. The holding space becomes a potential creative opening to mend the past and create the future. Much of this depends on how the director and pilgrim 'show up' in the space, and how they navigate the unfolding together. Spiritual direction is thus very much an art.

### **Research implications**

The research referred to in this essay helps deepen and broaden perspectives about spiritual direction. Most important is the fact that subjective safety as felt by the body is key to the practice. The importance of knowing the body, particularly how the brains and nervous system work, is not frequently emphasised in traditional spirituality. Understanding the unconscious right-brain, limbic and reptilian responses is critical because they tend to emerge in a holding space when it is safe.

A trauma-informed understanding is necessary after COVID-19, as pilgrims may bring clinical elements into the holding space. Trauma Informed Care and Practice (TICP) are being increasingly used in organisations that "recognise and acknowledge trauma and its prevalence, alongside awareness and sensitivity to its dynamics."<sup>102</sup> It "support[s] people to feel safe enough in their interactions" with all aspects of mental health service delivery.<sup>103</sup> If

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102 "Trauma-informed care and practice (TICP)," Mental Health Coordinating Council (MHCC), New South Wales, Australia, <https://www.mhcc.org.au/project/trauma-informed-care-and-practice-ticp/>, accessed 21 September 2020.

103 "Trauma-informed Care and Practice," Blue Knot Foundation: National Centre of Excellence for Complex Trauma, Australia, <https://www.blueknot.org.au/Resources/Information/Trauma-Informed-Care-and-Practice>, accessed 6 October 2020.

directors deepen their skill set to include more formal psychoeducation and therapy training, it creates the possibility of offering *spiritual therapy*, which may hopefully some day rank as an allied health therapy, to serve clients who wish spirituality to be included in treatment. There is much congruence between the practices of spiritual direction and non-traditional humanistic models of psychotherapy, where clients are held in a non-interpretative 'midwifery process of holding'.<sup>104</sup> Instead of the classic analytical and interpretative approach of therapy, clients are facilitated in their self-discovery.<sup>105</sup> There are currently psychotherapies which integrate mindfulness, self-awareness and focusing as techniques. Some even incorporate the use of 'higher power' in guided imagery.

Another potential for development is to encourage the *right-brain non-verbal limbic modalities* such as the creative arts to be used in spiritual direction. Pilgrims exhausted by talk can be offered alternative means of expression and reflection. These alternatives facilitate access to deeper unconscious primary sources of self. Directors need not be experts in the modalities, but should be comfortable about how creative languages operate as narratives. These skills may also provide opportunities for non-clinical befriending support to potential pilgrims who struggle to communicate verbally, for example, people with communicating disabilities, stricken by certain illnesses or even the young.

The holy listening of traditional talk-modality spiritual direction can be likened to practising mindfulness or contemplative awareness in interaction. A practitioner of active continuous contemplation can practise the art of contemplative listening with anyone and anywhere. Generally, if this spiritual practice in communication becomes a daily habit, relationships are likely to improve. The choice to

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104 Margaret Guenther, *Holy Listening: The Art of Spiritual Direction*, (UK: Cowley Publications, 1992), chapter 3.

105 Wright, *Mirroring and Attunement*, 139.

communicate with the art of deep listening - being present with; mutually holding; attuning; containing; resonating and discerning - therefore holds potential beyond the spiritual direction holding space.

Another avenue for exploration is the potential to embed spiritual direction as part of the services offered by churches, community centres, aged care facilities and other relevant organisations, particularly where promoting the spiritual health and well being of people is considered core business. If spiritual direction graduates are considered employable by such organisations, it gives hope for the field of spiritual direction to be recognised as a vocation worthy of support and development in better service to the societal needs of the twenty-first century.

## **Conclusion**

This essay began with a basic curiosity about the holding space and has explored the fundamentals, challenges and opportunities in the practice of spiritual direction. This exploration suggests that beneath the art of spiritual direction is science shared by the intuitive strand of the psychotherapeutic world, where practices are based and supported by the wisdom of new frontier therapy science and neuroscience research findings. When science informs spiritual direction, the art of spiritual direction should not slip into methodology, which can constrain the creativity and freedom of the Spirit.

This essay tries to simplify many profound theories. There is exciting new and emerging cross-disciplinary research that incorporates contemplative science. This research has the potential to inform spiritual direction on a radically new level. It is my hope that someday, this holding space exploration can be taken further, through primary research in the field.

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