



he complexity of influences on our well-being, from environmental toxins to fast-paced lifestyles and media overload, is mind-boggling. The multitude of traumas that inundate our daily lives is relentless, particularly in urban settings divorced from the soothing rhythms of nature. Given this, when we seek remedies for our suffering, whether mental, emotional, or physical, where do we start? Who do we turn to? How do we find the source of our problems and our healing?

## Finding Our Own Balance

The origin of the word *healing* is the Old English *haelen*, which means to make whole. It is a concept called unraveling, or following the body's directive, that does this healing, leading inevitably to the source of both suffering and its resolution. Unraveling is therefore a guiding principle for enduring recovery and beyond, to ever greater health and well-being.

The principle of unraveling is fundamental to all health. Like many foundation principles, however, it has gotten lost in the shuffle of quick-fix and jazzy new techniques. Nevertheless, it is maintained, fostered, and disseminated by Ed Stiles, an osteopathic physician and educator, and his students. Stiles calls his approach to this attunement "sequencing," a process which unravels and unwinds the layers of hindrances, one at a time.

Stiles believes that when hindrances are removed, the body finds its own balance. The key is to find the appropriate order in which the hindrances are to be unraveled. In this regard he is honoring the intention of the father of osteopathy, A.T. Still.

Through years of exploration, Stiles has developed palpation skills that allow the practitioner to accurately hear the body's messages as they are reported through connective tissue and are delivered simply and quickly into the hands of the thoroughly present practitioner. It's what we call the "dance of love."

Because Stiles, who is now seventy years old, continues to evolve and contribute to healing theory, he is a living model of his own vital concepts. He has evoked the principles and techniques presented here, and while our ideas blend fluidly, the overall concept of the dance of love, and certainly its structural ramifications, should be credited to him.

In my work with trauma and energy medicine, I have emphasized the importance of seeing the earliest precursors to posttraumatic stress disorder (PTSD), depression, and anxiety and treating them appropriately, in sequence. The merger of Stiles' designs with my approach represents a marriage of

bodywork and trauma therapy that is a paradigm for fostering wholeness in healthcare. In understanding this marriage, let's first talk about two elements crucial to its success—the philosophy and underlying principles of unraveling or unwinding and the techniques bodyworkers and other care providers can use in this process, with added attention to the use of language.

"In illness there are many layers of imbalance, concealing the depths where healing exists."

—Deepak Chopra, MD

# **Principles of Unraveling**

The Dance of Love is Host/Client-Centered

Unraveling puts the emphasis on the health of the host/client, not the external disease process. Each person's body holds unique compensatory mechanisms devised when surviving life's most relentless stumbling blocks. These mechanisms are like chapters in a novel, and each chapter reveals another dimension of the story. The practitioner is hired to shed light on root causes and key compensations, in their requested order, so that health

### The Body Designs the Protocol

shines through human tissue.

Because each person is unique, no two individuals will respond to physical, emotional, or spiritual traumas in exactly the same way. If the therapist sees each client in this light, every session is a mysterious journey that unfolds moment by moment.

There are many ways to read the body so that it directs the unraveling process. For Stiles, there are clear palpation steps to titrate treatment. I teach my students to read pulse, skin tone, voice quality, gesture, and structure, and to note the telltale evidence of precursors. All told, these assessments tell the therapist what to do to enable wholeness, in the order ordained by each body's report.

## Honoring the Nervous System

Incomplete or unresolved responses to threat are layered into human tissue as somatic memory.





These memories are attached to one another in an arrangement based on conditioning (or the similarities of the events), rather than chronology. This storage system originates in the brain. Breaking the brain's neurochemical code is the treasure hunt that the host/client and the therapist engage in together.

The benefits of unraveling/unwinding include greater functionality, pain relief, enhanced movement, presence, an experience of internal lightness or space, and, perhaps most importantly, integration. Integration is a natural phenomenon of the nervous system. However, it is only when hindrances are relieved that integration can occur. Unraveling frees the nervous system to do what it is designed to do. When integration happens, neurohormones come into balance, a process known as allostasis.

"Distorting the allostatic process to the point) where it causes harm (allostatic load) is a comparatively recent development in the history of life on this planet."

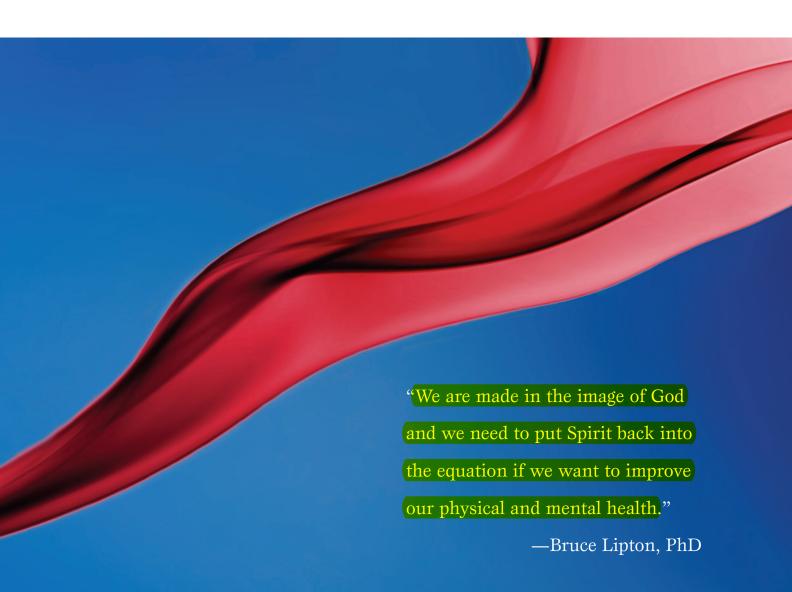
—Bruce McEwen, PhD, The End of Stress As We Know It

Allostasis, Inflammation, and Neuroendocrinology

Stiles points to allostatic load as the culprit for a broad spectrum of structural problems. Identifying how allostasis is functioning (or not functioning) can handily solve the puzzle and simplify the unraveling process.

Allostasis is the natural symmetry of the neuroendocrine system, or our innate capacity to handle stress without losing center or ground.





### What to Say and When to Say It

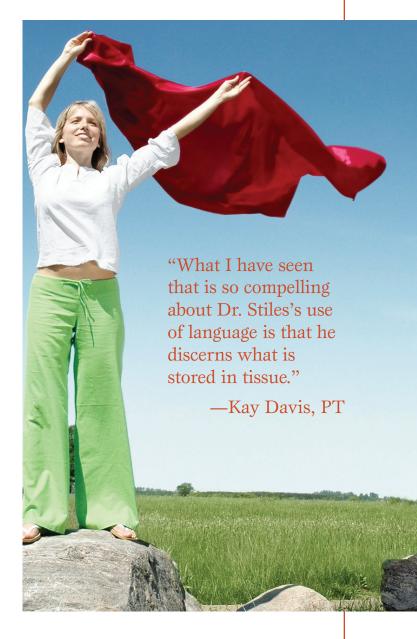
What can care providers (particularly massage therapists, bodyworkers, and manual therapists) say to their clients easily, honestly, concisely, and appropriately?

### They can:

- 1. Share the treatment process.
- 2. Share observations.
- 3. Ask questions about history, patterns, perspectives, or use a question manual therapist Micha Sale poses: "If your tissue could talk, what would it say?"
- **4.** Answer the clients' questions honestly, thoroughly, and in attunement to who they are.
- 5. Identify the area of greatest restriction and name it.
- 6. Provide positive, uplifting commentary.
- Be a resource for accurate guidance about how the body works best.
- **8.** Give pertinent information about the body-mind-spirit connection.
- 9. Make stress-relieving suggestions to interrupt allostatic load.
- Offer empowerment through awareness and self-care.

These are some other ways therapists can inspire the unraveling/unwinding process:

- 1. If a client is chattering, refer them to what they are feeling in their body.
- 2. When tissue is particularly dense or tense, draw the client's awareness to it, inviting deeper exploration.
- 3. As you feel tissue release, encourage full participation in the process of letting go.
- **4.** If you recognize allostatic load, volunteer specific suggestions for stress relief.
- **5.** When conditions are chronic, inquire more deeply into the history of stress patterns.
- **6.** Recommend ongoing treatment so that unraveling is likely to recur.
- 7. Encourage the healing response through full breath, expression, sound, and movement.
- 8. Make referrals whenever appropriate and explain the background of these offerings.
- 9. When areas of the body are repeatedly restricted, do not hesitate to tell relevant stories or use relevant phrases like the ones Stiles employs (such as, for hand issues, "Is there something you can't handle?" or for the knees, "Are you feeling afraid or week-kneed about something?").
- 10. Explain principles like tensegrity, allostatic load, the connection between trauma and the nervous system, the role of precursors, the body-mind connection, and the connection between stress, hormones, and inflammation.



When our allostatic capacities are overburdened we experience allostatic load, or <u>asymmetry of the</u> neuroendocrine <u>system</u>. Allostatic load makes the body desperate for function under the strain of compressive forces driven by overactive or underac-

tive stress hormones, like <u>adrena-</u>line and cortisol.

I call allostatic load "shock." I see shock as the contemporary plague. It differs from earlier plagues by shape-shifting into countless manifestations, some of which are intensified by being discounted, like fibromyalgia. The new plague includes chronic back, neck, and shoulder pain, rheumatoid arthritis and other joint problems, the assortment of structural conditions that no one can resolve, and the depression and addictions that frequently accompany prolonged restriction and discomfort.

The story of "Frank" clearly illustrates the consequences of allostatic load. Tall, dark, and handsome, Frank hardly seemed like someone in chronic pain. Somehow he managed to be softspoken and respectful while running a sizable company, traveling frequently, multitasking, and doing nonstop financial planning. In his mid-forties, he worked out, ate well, and had a loving marriage and family life. He believed in God and prayed fervently. Why then was he plagued with tendonitis, bursitis, and arthritic symptoms? A stranger to limitation, Frank tried to minimize his suffering, but was losing the battle.

The mystery was held suspended in his neuroendocrine response to stress. He appeared to handle stress so well that even

Frank was deceived. His exterior actually hid an aspect of his life that his illness challenged him to remember.

Frank had set the stage for his inflammatory condition at least forty years earlier via his learned responses to threat. The way he discovered this and how he reoriented himself provides a template for unraveling. It also depicts an integrated healthcare paradigm.

The multiple therapies Frank employed had given him interludes of relief. He received regular

physical therapy and massage and credited these with his ability to work without being on pain medications. But he did not want to continue functioning under duress. He wanted real freedom. He began treatment with a physical therapist who had studied with Stiles. The therapist determined that Frank's key area of dysfunction within the total musculoskeletal system was in the cranium. When the physical therapist was called away by a family emergency, he sent Frank to a skilled manual therapist who understood cranial therapy.

During these treatments, Frank had recurring images of himself as a young boy at the dinner table seated between his father and his mother, looking from one to the other as if he were at a tennis match. He couldn't understand why this image kept returning.

Normally Frank would have kept an experience like this to himself, but the image haunted him and one day, just as the manual therapist was about to release his thoracic diaphragm, he blurted it all out. His therapist did not seem at all surprised. In fact, he smiled and said, "Each time I come to this place in the session, your body tenses. Maybe this is a conflict you are having. I am relieved to hear you have an internal reference point, because I could not figure out what was happening."

And that was it. The core stress had been exposed. In his quiet, introverted way, Frank thought about this for a long time. He discussed it with his wife who pointed out to him that he always placed himself between his parents, preventing any chance of conflict between them. And it was true that despite its inevitable occurrence, Frank abhorred conflict and did his best to avoid it, sometimes even sacrificing business profits. In all family matters, Frank longed for peaceful, comfortable moments, but he rarely had them because he always felt responsible for creating them.

Frank had served as a buffer between his alcoholic father and controlling mother all his life. He would literally elbow himself between his parents, keeping the peace at all costs. His elbow, in fact, was one of his most painful body parts. Thus, the history of Frank's allostatic loading had consumed his cortisol (the stress hormone he needed to quell his fear and longing for love), leaving him with a deficit in midlife.

He asked his therapist about the possible link between this protective, refereeing behavior and his symptoms. His therapist responded with information about the thoracic diaphragm—the site he had identified as restricted—and how it is an avenue of expression. Repressing expression, he said, could suppress immune potential, making inflammation more likely.



Stephanie Mines and Ed Stiles point to Dr. Bob Talley's responses to treatment integrating energy medicine and manual therapy. Physical therapists Raye Koch and Micha Sale observe.



Dr. Mines debriefs a treatment demonstration at Mercy Hospital in Oklahoma City.



Frank was a good problem-solver. He determined he had to get out of his own way and mediate less. That little boy at the dining room table should be outside, playing. He took himself off the hook and realized the difference between the past, when he had to mediate to survive, and the present, when he had a vast array of options and resources. He began to employ these, varying his behavior, smiling more, fearing less, and enjoying the fruits of his wonderful life. He took his mother's manipulative gestures less seriously and gave his father the opportunity to stand up for himself, which he could do now that he was sober.

Frank even chuckled as his parents locked horns, realizing this was no longer a threat to his survival. The truth was that there was actually no conflict, either at home or at work, that could truly threaten his well-being. He was no longer the peace vigilante trying to make everyone happy to compensate for what he had missed out on as a child.

In less than two weeks, Frank's inflammatory tendencies subsided. The more he let himself live rather than supervise, the more normal his cortisol levels. The battle for peace was over. Now Frank could really relax, not just go through the motions. He had unhindered his neuroendocrinology and enabled allostasis. He took off the allostatic yoke of over-responsibility. He still cared for his parents dearly, but he could also put himself first without guilt or fear.

With help from his friends, Frank did most of his own unraveling/unwinding. The manual therapy sessions created the space. The more <u>subtle</u> treatment interventions tend to give neurohormones the

greatest opportunity to regroup. "Reduce the violence of the treatment," says osteopath Harry Clements, "and the patient's chance of recovery is increased."

I heard about Frank's process when he came to me for more subtle energy medicine, after realizing that it lowered his stress levels. This receptivity allowed me to facilitate further unraveling by just asking an occasional question or responding to Frank's comments. Because of Frank's increased awareness of his own internal process, I was invited to point out areas of restriction that I noticed.

Frank was now thoroughly engaged in the secrets his body was revealing. He not only was recovering from chronic pain, he was evolving into the magnificent human being that lived in the spirit of that little boy at the dining room table. He greeted each new discovery about himself with the enthusiasm of a blissful young boy.

"Tensegrity refers to a system that stabilizes itself mechanically because of the way tensional and compressive forces are distributed and balanced within the structure. As soon as pressure is redistributed in the structure, the energy stored in the tensed filaments causes the structure to spring back to its original shape. "

—Donald Ingber, MD, PhD

# **Tensegrity**

n effect of balanced allostasis is the reestablishment of the tensegrity potential within the human body. A tensegrity structure is composed





of parts that are "tensed" to stabilize the entire structure. In the body, bones are compression struts that oppose the tension created by muscles, fascia, tendons, and ligaments. As a result, the potential for stability and protection is exponentially increased. Simultaneously, the potential of the whole becomes greater than the sum of the parts.

The body's tensegrity is threatened by the compensations that life demands. By treating consecutive areas of musculoskeletal restriction in sequence, each individual's tensegrity adaptations are exposed. The practitioner is the eye witness to the revelation of unique survival strategies, despite the fact that most are implicit. As these designs become explicit, the client/host is empowered, as evidenced by Frank.

When tensegrity has been reestablished in the body, individual cells change shape, allowing for new structural, biochemical, cellular, and genetic relationships. The body now has the opportunity for new expression. This is what creates the felt sense of internal space, presence, lightness, and alertness that is characteristic of true healing. This potential is available to everyone through the unraveling process.

When stressors are unlayered in the order requested by the body, the structure always finds new functionality. As this occurs, the client goes beyond better—she realizes optimum capacity. This is allostasis, and it restores us to how we are wondrously and gloriously made.

It is for this reason that I call unraveling "the dance of love." It removes the roadblocks to personal and spiritual truth. It allows us to

## Four Unraveling Techniques

Assessment. Unraveling requires that the practitioner see how allostatic load burdens the tensegrity for each individual. Palpation, pulse listening, observation, hearing what the host/client says, attunement, and reading the body with sensitivity and wisdom are aspects of assessment. (See Resources for more information.)

Layer by Layer. Repeated strain results in multiple layers of connective tissue adaptations. Each layer portrays a survival mechanism. Many practitioners treat the top layer. Unraveling or sequencing, on the other hand, moves through each layer of resistance. Appropriate tools are employed for each survival mechanism. The therapist needs a diverse toolbox and good referrals to address these layers. Manual

treatment, energy medicine, and/or both simultaneously may be required.

Interruption of Allostatic Load. In order to shift the chronic nature of afflictions, the practitioner must facilitate a genuine and consistent interruption of allostatic load. Relief has to be provided for each layer of compensation, followed by integration. Knowing when to pause is as important as knowing when to intervene. And, in all cases, the client must do her part.

Patience. Having total confidence in the outcome of unwinding is the practitioner's responsibility. This usually comes organically from co-participation in the unraveling/unwinding process. Practitioners increase their own capacity to serve through their personal unraveling and unwinding.



embody all we are meant to be. This is not only a celebration of health; it is also a celebration of spirit.

"It wasn't the treatment techniques that helped me to transform. It was the way Dr. Stiles changed my thinking by giving me new options. His comments, stories, questions, and analogies replaced old tapes. By attuning to where I was, he actually changed the genetic and biochemical expression of my cells and being."

-Micha Sale, PT

# **Using Language**

anguage, when attuned to the client, is a catalyst for unraveling. Some practitioners, however, are afraid to use language. After Stiles closed his private practice to focus on teaching, his patients told him, one after the other, that it was his questions that changed their lives. As his hands decoded the mysteries of their bodies, questions like, "Is it possible that you are in a situation that makes you feel as if you are shouldering burdens?" or "Are you in a relationship that makes you feel like you need to take a load off your chest?" allowed the recipients to continue healing on their own. (See Cues to Evoke the Body-Mind Connection.) By accurately mirroring his patients, Stiles provided opportunities to lessen tension through the expression of personal truth.

This is not psychotherapy, however. Bodyworkers are not violating their contract with their clients when they speak to them. As we saw with Frank's experience, just responding honestly and simply can be therapeutic. By taking the time to explain the neurochemistry of the stress response, Frank's manual therapist empowered him. His physical therapist was part of the unraveling process when he identified the biomechanical restrictions as the area of greatest hindrance. This was not the area where the symptoms presented; but in the unraveling dynamic, it was the layer demanding attention. Thus, while not obvious, this is actually the most dysfunctional area in the total body. This is what Stiles calls the area of greatest restriction, or AGR.

## **Cues to Evoke the Body-Mind Connection**

Dr. Ed Stiles encourages therapists to trust that clients/hosts have within themselves the language and the truth behind their somatic condition. The therapist's role is to evoke this awareness and confidence, not be a substitute for finding it. The questions posed here may not necessarily produce a response; they may simply awaken awareness.

Arms: Would you like to reach out to anyone or anything and does that appear to be difficult? Are you holding your expression too close rather than extending? How can you extend yourself to others?

**Back Problems:** Could there be anything going on in your life that makes you feel like you are carrying a heavy load? Can you share this load so that you do not have to carry it alone?

**Body Language Significance:** Holistic translations of somatic language.

**Bones:** Is there some instability in your life or are you feeling unstable right now? Who or what can steady you, support you, or nourish you?

Fingers: Are you struggling with putting your finger on something? How can you find help to do this?

**Hands:** Is something just too much to handle right now? Was there something in the past that you had to handle when you were not ready? How can you let go of this in the present?

Head: Is anything making your head spin right now?

**Intestinal Problems or Stomach Issues:** Is anything eating at you?

Knees: Do you feel like you are going to buckle under in response to something in your life? Is anything holding you back from moving forward?

Lower Back Problems: Are you in a situation that requires you to carry a heavy mental or emotional burden? Is there a way to lighten that burden?

**Legs and Feet:** Is there an experience you are having that makes you feel like you can't put your foot down? Is there anything or anyone you just cannot stand? Is it difficult to stand on your own two feet?

Muscles: Do you feel you have to guard yourself? Is anything in your life putting you into a spasm?

**Neck:** Is anything happening to you that is a pain in the neck? Are you being stoic or stubborn? What are your other options?

**Nerve Pain:** Is there a relationship, situation, or an event that has you all wound up, wired, or at loose ends?

Osteoporosis: Is anything weighing you down so much that you want to give up?

**Rib Cage:** Do you feel trapped, as if you are in a cage, in any area of your life?

**Shoulders:** Are you shouldering a burden?

**Skin:** Are you experiencing anything that makes your skin crawl?

**Tendons:** Do you feel like you are about to snap? What is straining you? How can you relieve the strain?

**TMJ** or **Jaw Problems**: Do you feel you need to keep quiet or hold back secrets? How can they be released safely?

Throat or Avenue of Expression: Is there something you need to say or something that has been left unsaid that you are afraid to utter?



Language plants seeds of <u>awareness</u> and these seeds sprout in their own time. Learning to trust sufficiently to articulate the simple, beneficial truths that the body reveals is the care provider's responsibility.

The body never lies, though it speaks in its own dialects. It is the keeper of secrets. Symptoms, particularly chronic symptoms, articulate insistent responses to life. As layers of tension are peeled off of tissue, the truth is revealed. But if that truth is not perceived, it will go underground once again into the depths of the body. The master healer can uproot elusive truth, biopsy it, and reveal its contents in the right way at the right time, using just the right words.

In fact, symptoms and illnesses are actually the body's attempt to self-correct or heal itself, but how to convey this? Not all clients are ready to see themselves, however. What language can facilitate this kind of awakening?

## **Shared Understanding**

t is important that both client/host and therapist fully grasp the intimate relationships between patterns of stress, neurochemistry, structural tensegrity, and maximizing human potential. The challenges we face, structural or spiritual, are designed to make us grow. Each of us copes with stress in ways that are inscribed in our structural tensegrity, but we are not doomed to patterns of hindrances. By unraveling layers of stress in the order they request, somatic therapists are servants of human potential.

Education and exploration into this new paradigm of healthcare is a path of continuous inspiration. The following resources will lead you beyond this article into the world of integrative transformation that is the potential of all bodywork.

The next article in this series will explore the concept of client as host and how to truly "get the virus out of the software" by treating precursors or root causes.

Author's Note: in addition to my profuse thanks to Dr. Ed Stiles for developing the sequencing, body language significance (BLS), and area of greatest restriction (AGR) concepts, I also want to acknowledge the unique physical therapy community that embodies his wisdom. The following physical therapists have served as a generous feedback group for this article and for the evolution of a paradigm that integrates manual therapy with energy medicine: Kay Davis, Margo Hayes, Holly Jones, Steve Maly, Amy Reid, Brenda Richardson, Micha Sale, Regina Tanner, Audra Thompson, and Kristi Weldon. They are all in Oklahoma City, Oklahoma.

Stephanie Mines, PhD, is the founder and program director of the TARA Approach for the Resolution of Shock and Trauma. She is the author of We Are All in Shock, Sexual Abuse/Sacred Wound, The Dreaming Child, and numerous other books and articles that support an empowerment-based healing paradigm. For information about Mines and the TARA Approach, go to www.tara-approach.org or call 800-493-6117.

## **Resources**

#### **Training Programs**

Drs. Stiles and Mines teach frequently, in co-facilitated and independent programs. Many of these occur at Mercy Hospital in Oklahoma City. To be on a mailing list for these courses, contact Steve Maly at 405-752-3700 or smaly@ok.mercy.net. To find out about Dr. Mines's teaching schedule and publications, visit www.tara-approach.org or call 303-499-9990. For Dr. Stiles' teaching schedule and publications, go to www.omtsos.com.

### **Books/Articles**

Ingber, Donald. January 1998. The architecture of life. *Scientific American*. Ingber, Donald. Fall 2004. Mechanical basis of cell and tissue regulation. *National Academy of Engineering*. McEwen, Bruce. 2002. *The end of stress as we know it*. Washington D.C.: Joseph Henry Press. Mines, Stephanie. 2003. *We are all in shock*. New Jersey: New Pages.

#### DVD

*Intergenerational Trauma from a Neurological Perspective*, available from *www.tara-approach.org* or by calling 800-493-6117.

#### Links

- Find more information about Donald Ingber's cell tensegrity research: www.childrenshospital.org
- Find information about trauma: www.trauma-pages.com
- Find information about shock and allostatic load: www.naturalhealthweb.com/articles/McEwen.html www.rockefeller.edu www.tara-approach.org

