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## **Truth: The Golden Thread, Part Two**

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*Editor's Note:* Part One of "Truth: The Golden Thread" appeared in the June 2006 issue of *Massage Today*. Visit [www.massagetoday.com/archives/2006/07.html](http://www.massagetoday.com/archives/2006/07.html).

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My primary goal in every therapeutic session is to be a clear facilitator for the patient's self-discovery. As I wrote in my column in the last issue of *Massage Today*, truthful self-discovery is the Golden Thread that runs through all therapies designed to help patients achieve permanent recovery as well as spiritual growth.

My own therapeutic style involves using physical touch to establish a connection with my patient's nonconscious mind. Other types of therapists might facilitate this connection by other means, but for me it's the act of physically contacting my patient that allows me to establish this connection.

As I blend with a patient through touch, I make every effort to remain open to any perceptions, sensations or insights that might penetrate my conscious awareness. I believe every organ, tissue and cell has its own consciousness, yet their "voices" are usually not within the scope of the patient's conscious awareness. When I remain open as the facilitator, I often receive information from these parts. Their messages might enter my conscious mind as pain in my own body, as visual images, as verbal messages, or sometimes just as a sense of knowing that seems to circumvent usual channels of communication.

For example, our patient with the liver problem from alcohol abuse in part one of this column might cause me to experience discomfort in my own liver. Or, I might see a visual image of a damaged liver, or hear his nonconscious voice telling me his liver is damaged. Then again, I just might inexplicably "know" this patient is a problem drinker due to parent-instilled guilt.

In whatever way I receive the information, my goal is to help the patient through the process of self-discovery. Because what's important here is that he knows what originated the symptoms, why they came about and why these symptoms continue to exist.

However, I don't feel it's in the best interest of the therapeutic process to simply disclose the information as I receive it. If I disclose it prematurely, the patient probably will become defensive, which can impair and even halt the therapeutic process. The possibility also exists that I'm coloring the information with my own biases, prejudices, experiences and projections. On the other hand, if I wait for the process to unfold from the patient, error usually can be avoided. After all, the goal is for the patient to paint his own truthful self-portrait.

So again, I stimulate this process of therapist-patient communication by the act of touching with the sole intent to assist in the healing process. This communication, initially on a nonconscious level, usually emerges into my conscious awareness. Then it's my job to help the patient develop his own awareness of the information received. When the patient is consciously informed, then he can do something about the source problem.

That's why in my own practice, I work hard to reflect a true picture and to be an honest, yet sensitive mirror. Instead of blurting out something like, "I'm getting a message from your liver," I would simply follow the bodily cues that lead me to that area with my hands. Then I might say something like, "Hmm, I feel drawn to this area. I wonder why." If the patient doesn't respond, I might even take it a step further and say, "What do you think this is about?" or "Do you have any thoughts about what might be going on in this part of your body?"

Wherever our dialogue takes us, I never want to lead the conversation or make the patient feel compelled to please me by giving the answers he thinks I want. And he doesn't have to see the truth all at once. But I also don't help perpetuate the illusion, unless it's a rare case in which it seems vital that the patient maintain the illusion. Even then, I only do it for the time necessary for adaptation and growth to occur.

Now, here is another critical point to keep in mind. Even when self-discovery has resulted in genuine self-healing, it may or may not produce a cure or complete elimination of symptoms. True healing goes deeper than symptoms; it involves getting clear about your real identity and your purpose in life.

For this reason, healing sometimes might mean spending the rest of your life in a wheelchair if that is how you can best perform your life task. The important thing is for the patient to recognize this is how it's supposed to be, so he can learn whatever he needs to learn about himself in the process. Similarly, healing might mean recognizing that it's okay to die. It might mean the conflicts and problems posed to the patient have been resolved so he is now free to leave this environment.

Thus, the successful therapeutic process does not necessarily produce comfort, ease, muscular strength, prolonged life, or any of the other things our Western medical tradition holds as evidence of healing. Effective therapy does, however, give the individual patient a clear vision of what it is he or she needs to do, as well as the strength of mind, body and spirit to do it.

Eliminating delusion and self-pity and helping patients prioritize and refocus their lives so they can grow are the ultimate goals of CranioSacral therapy. That's why your most important role in the therapeutic process is your ability to reflect the Golden Thread of truth to your patients. For it truly is the truth that sets us free.



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