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# Introduction

**Y**ou simply forgot, that's all. You have absolutely no memory of the event whatsoever. It happens to everyone at some stage in their lives. Your parents may tell you about the car accident you were involved in when you were two years old, or the time you fell off your tricycle and hurt your neck when you were three and half but you don't remember. At six, you almost drowned, or you were extremely distraught and upset when the family moved to another city, and you didn't want to leave. The family might even have photos of these events, but you simply don't remember. Perhaps there were later traumatic memories, and you remember parts of the memory but not the whole memory. You meet together with friends and they relate portions of the event that you have no memory of.

Each of those 'lost' memories has been recorded by your mind. The problem is that you can't get access to it. In many cases, those memories hold important clues or keys for physical, mental and emotional problems you are struggling with today.

This book will teach you how to access those memories. It will demonstrate the changes and benefits that working through such hidden memories brings to people.

Lost memories are not limited to those observed by our family but forgotten by us. These memories include traumatic events experienced without other family members' knowledge. It could be trauma in the playground at school, through bullying, and now you find it difficult to recall much of what happened when you were at school. It could even

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be as dramatic as a serious sexual assault that happened when your parents, or those who loved and cared for you, weren't around. They don't know it happened, you don't know it happened, but it happened.

You are coping with the residue of that event in your life right now. It could be that you are having difficulty truly relaxing when making love to your spouse and you don't really know why. After all, as far as you are concerned, you had a safe and relatively uneventful upbringing so you don't know why you have to 'think through' intimacy in the bedroom. You wish it could be more spontaneous, like it is for some of your friends.

The 2012 edition has 50% more content than when first published in 2006. Many of the original chapters have been expanded and more illustrations, both written and pictorial, included. While there are no fundamental changes in the concepts outlined in our first edition, we are constantly refining and streamlining our counseling approach, as well as responding to feedback from people and evaluation forms completed by students. This current revision is the result of five years of fine tuning. Perhaps the best way to describe this edition compared to 2006 is that it paints with finer detail rather than the broader brushstrokes of the first edition. Procedures are more detailed so that a person interested in counseling someone for DID could do so using the book as a manual. Yes, it is that detailed. Yet someone just interested in a broader overview can gloss over the detail and, if desired, glance at the summary at the end of each chapter.

In this 2020 revision we have sharpened the existing illustrations, updated the bio information and made some minor textual changes. The fact that little needed to be changed is testimony to the thoroughness of the 2012 revision. It doesn't mean that little has changed in our counselling approach over the last eight years. A lot has changed but not at the introductory level of how to deal with dissociation which is the focus of this book.

The major changes have been in streamlining our approach to counselling people with more complex dissociative part systems invariably linked to satanic ritual abuse. This is now included in our new book "*Dissociation & Ritual Abuse: The Hidden Factor Healing.*"

If this book fascinates you then we strongly recommend you purchase the new book because it gives you the bigger overview of the crucial importance of the dissociative agenda in the world today.

You have waited a long time to get your hands on a book that will impact your life as much as this will!

### **Author's Background**

Peter and Heather are New Zealanders and are now Australian permanent residents, currently living and working on the Gold Coast in Queensland, Australia.

Peter was a math/science teacher for 17 years, teaching primarily years 8 to 12. The latter years were spent heading the math and science departments of a growing Christian College, writing curriculum and running seminars at Teaching Training Colleges and presenting workshops at Math Conferences. In 1987 he received a national award for his contribution to Mathematics. Peter has an interest in Christian apologetics particularly the creation versus evolution debate.

In 1995, he began full time retraining and over the next five years completed government-accredited courses in Family Ministry, Family Therapy and a two-year diploma in Counseling and Family Therapy. For the practical component of his training, he began counseling in a Family Therapy Counseling Clinic, and then opened up his own practice in a Christian medical center. He was trained extensively in the prevailing secular models such as Cognitive Behavior Therapy, Rogerian Experiential, the Psychodynamic approach and others. Over time, he began incorporating more and more Christian spiritual tools with deeper and longer lasting outcomes. He lectured and counseled overseas in South Korea, USA, New Zealand and Europe on counseling-related courses, as well as teaching for one year on staff of an Australian accredited counseling course.

Gaining an increasing understanding of inner healing counseling in the late '90s, his counseling practice increased in its effectiveness, as Christ was more directly involved in the healing process. In TMR (Traumatic Memory Resolution), Jesus directly and instantaneously brings his truth into the trauma from the past as the client recognizes Jesus' presence in

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that event. The healing is effortless and long lasting. Nevertheless, there were still clients for whom there was no significant long-term release from the dysfunctions that were clearly evident in their lives.

November 2000 was a defining moment in Peter's counseling practice. Attending a seminar on dissociation (hidden memory), with an accompanying practical demonstration, moved the topic from academic head knowledge to a relevant and practical tool. Peter realized it was much more prevalent than counseling courses and the psychiatric profession believed. This was the key that he was looking for, bringing immediate and dramatic freedom to a number of clients, both in his practice in Australia and on teaching and counseling trips abroad. He combined this new understanding of dissociative parts formed during trauma with Ellel Ministries' understanding of healing of accident and trauma. This combination brought complete physical healing to some cases where people had only received partial healing by the Ellel method.<sup>1</sup>

As more complicated cases presented themselves, the current research and understanding of dissociation in both the secular and Christian world didn't provide any of these deeper answers.

In 2002, Heather joined Peter as a co-counselor. Drawing from her own experience, coupled with her very clear spiritual discernment and considerable organizational and ministry expertise within the broader church, the effectiveness of Anazao's counseling increased. Heather's skills and experience, in conjunction with counseling trial and error, and the leading of the Holy Spirit meant that answers to some of these deeper questions were emerging. The counseling practice was soon fully booked nine months in advance, with 80% of the clientele coming from interstate or overseas. That is still the case today.

Over the last twenty years, Peter and Heather have spent over 40 000 hours of clinical counseling predominantly counselling people with varying degrees of DID (Dissociative Identity Disorder). Anazao is now achieving long-term outcomes with DID and SRA (Satanic Ritual Abuse) clients at a speed that was not previously thought possible.

For example, in most cases with most people who are not SRA, the removal of the alter system can, on average be achieved between three

and five days of full time counselling (6.5 hours per day). People who has ritual abuse dissociative systems usually take between one and two weeks depending on the complexity of their part systems. Highly dissociative complex SRA survivors will take longer but these clients are relatively rare. Sometimes return visits are needed since hidden part systems will not necessarily be exposed during the first counselling appointment, even if it is a week or two. This is because the person may not cope if all part systems were removed. Also deeper part systems may want to see how the person handles partial removal before exposing themselves.

Under the current models used by many others, hundreds of hours of counseling would be required. Some who come to Anazao have had extensive counseling using currently accepted models, with little or no real progress. They are amazed and heartened by the results in just a few hours of counseling with Anazao.

Because of his scientific background, carefully recorded observations, and through reliance on the Holy Spirit, Peter and Heather have been able to re-evaluate the theory when it has been inconsistent with the observed counseling outcomes. Often this means working back from new and unexpected outcomes to fine-tune or even discard the old theory if necessary. Hence the need for this book. Peter and Heather are convinced that basic foundational presuppositions that undergird current DID theory need to be seriously challenged. This book carefully develops, with supporting examples, a far simpler approach than the predominant Christian and secular models. Known as “Occam’s razor,” there is a principle in science that states that given a choice between theories, the simplest theory that supports the facts is the one that is likely to be correct.

Aside from the mental and physical healing that takes place in the counseling room, Peter and Heather have conducted healing seminars around Australia. During these seminars, they have taught and demonstrated these healing principles on stage. They run one-day dissociation seminars where they teach and demonstrate the process. In the seminar “God Wants To Heal So Why Doesn’t He?” Peter demonstrates on stage how dramatic healing can take place in a relatively short period of time when we approach healing in a

methodical manner, progressively removing legal rights that block God from healing. In addition, they run a fourmodule training school, called “The Cutting Edge School” with the intention of imparting the key components of their counseling approach to others. These schools have been run around the world from far flung places like Alaska and Trinidad, to mainland USA and Europe as well as all over Australia and New Zealand. The driving motivation of Anazao is to see people see free and develop greater intimacy with the Father, Son and Holy Spirit.

Peter has a Bachelor of Science degree, Diploma of Teaching and Diploma of Counseling and Family Therapy. Heather has a Diploma of Teaching, a Diploma of Counseling and Diploma of Church Leadership.

The name, “Anazao” (pronounced, “Anna • zay • oh”) is New Testament Greek meaning, ‘To come to life again.’ The name and logo is a registered trademark. More information can be found on their website [www.anazao.com.au](http://www.anazao.com.au)

### NOTE

- (1) Anazao is an independent organization. While acknowledging wisdom gained from other groups and organizations involved in various forms of Christian counseling and Inner Healing ministry, Anazao does not necessarily endorse all that these ministries teach or believe. Conversely, mentioning these organizations does not in any way imply that these organizations endorse or support all that Anazao says.
- (2) Similarly, Anazao does not necessarily endorse the people, organizations and all the content of articles and books quoted in the end notes.
- (3) All identifying details have been changed in the client examples used in this book. The exception is the testimonies in the first appendix.
- (4) When referring to a general individual, there is interchanging use of *he/his/him* and *she/her*.

There is no implication that the example used applies exclusively to males or females. Similarly, the terms *counselor/therapist* are used interchangeably as are the terms *counselee/client* and the terms *parts/alters*.

- (5) In keeping with the more recent trends in Christian literature, when referring to Jesus, God the Father or the Holy Spirit, the pronouns such as *he, his, him* will be in lower case.
- (6) In many instances throughout the book, 'Jesus' is used in a generic sense to represent Jesus and the Holy Spirit. Readers are usually more comfortable with 'seeing and experiencing' Jesus in reference to supernatural intervention in both recalled and dissociative trauma but no exclusivity is implied. The Holy Spirit could just as easily be substituted for Jesus in most examples and situations used in this book.
- (7) Where the author uses the pronoun, 'I,' it refers to Peter, unless otherwise stated.
- (8) The spelling is American.



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## CHAPTER 1

# “It’s the first time ever that I have seen you smile”

She sat down in the counseling room and said in a clinical matter-of-fact manner, *“This is the last time I am trying any counseling. If this counseling doesn’t help me, I am going to kill myself.”*

Tamsin had flown in from overseas. For the last eight years, she had suffered severe depression so severe that she was hospitalized many times ranging from one week to ten months at a time. She had made at least half a dozen serious attempts to commit suicide, mainly by overdose, but also by going to bridges with the intention of jumping off. She was under psychiatric care twice weekly, on antidepressant and antipsychotic medication. She was married, with five children, and the depression began after the birth of her fifth child. Tamsin had booked two days with me.

At this stage, I had only learnt about DID (Dissociative Identity Disorder), in any experiential sense, from a seminar I attended nine months previously. I was currently treating several clients who were survivors of Satanic Ritual Abuse (SRA), as well as exploring the prevalence of dissociation in other clients who were not SRA.

In a nutshell, dissociation occurs when the intensity of a trauma overwhelms our normal ability to cope, and we can no longer remain consciously aware of what is happening. We ‘disconnect,’ and another part of our mind takes over and functions for us or ‘is present’ during the trauma. When the trauma is over, this other part of our mind recedes and

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we have no memory of the trauma we have just experienced. Chapter 2 examines this in more detail.

I explained to Tamsin that I would be talking to parts of her mind, sometimes called ‘alters’ or just ‘parts.’ These parts protect memories that she is not aware of and these memories may hold clues regarding the source of this depression.

I began addressing the parts. This procedure is outlined in depth in chapter 11.

### **Geraldine**

Almost immediately after I asked any part of Tamsin’s mind that was listening to me to come to the front of her mind, a part named Geraldine came forward. Geraldine was quite a well differentiated part. Well-differentiated means that it is easy to distinguish the presence of the part from the person. Part differentiation is explained in more detail in chapter 10.

**Peter:** How do you function for Tamsin?

**Geraldine:** I am very organized and in control. I keep all the other parts organized and when Tamsin was nursing, I would keep the patients in line and get things done.

**Peter:** You have been working hard, Geraldine.

**Geraldine:** Yes.

**Peter:** Would you like to meet Jesus?

**Geraldine:** Yes

**Peter:** Jesus, would you please introduce yourself to Geraldine?

**Geraldine:** Jesus is picking me up.... He is lifting me up and holding me.... He is telling me I have done a very good job looking after Tamsin.

**Peter:** Since you keep the other parts organized, could you please tell me the names of parts whose function is to push Tamsin toward self-harm and suicide?

**Geraldine:** Lucy, Jason, Jenny, Pauline and Linda.

**Peter:** Thank you, Geraldine. I would like to talk to you later on, but for the moment, do you mind if I talk to these others first?

**Geraldine:** That's OK.

**Peter:** Lucy, could I please talk to you?

**Lucy**

*It was only a matter of a few seconds before Lucy was at the front of Tamsin's mind. There was a subtle change in Tamsin's facial features.*

**Peter:** Thank you, Lucy, for coming forward. How do you function for Tamsin?

**Lucy:** I try to kill Tamsin.

**Peter:** How do you do that?

**Lucy:** By getting her to overdose.

**Peter:** Why do you want Tamsin to die?

**Lucy:** Because I am really hurting and I want all the hurt to go away.

**Peter:** It must be exhausting, carrying all that hurt, and your solution to the problem, is to remove Tamsin from all the pain by killing her.

**Lucy:** Yes.

**Peter:** That would certainly get rid of all the pain Tamsin is in. How else do you function for her?

**Lucy:** I cry for Tamsin a lot. Sometimes I cry and cry and cry.

**Peter:** Lucy, would you like to meet Jesus?

**Lucy:** Yes.

**Peter:** Just watch for Jesus, Lucy.

**Lucy:** I can see him.... He is with me... Jesus said he will be with me all the time... Jesus said he will wipe all the hurt away.

**Peter:** Keeping your focus on Jesus, Lucy, tell me what he says to the following question. Jesus, will Tamsin be safe if Lucy shows Tamsin the memory she has been protecting Tamsin from?

**Lucy:** Jesus said, "Yes."

**Peter:** Lucy, do you hold this memory by yourself or with another part?

**Lucy:** Pauline holds it with me.

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**Peter:** I’m going to ask Jesus another question now, Lucy. Jesus, do you want Lucy to continue doing the job she has been doing for Tamsin?

**Lucy:** Jesus said he doesn’t want me to do that anymore. I have done a good job. Now he wants me to be soft, gentle and caring for Tamsin.

**Peter:** Do you like the sound of your new job?

**Lucy:** Yes.

What has effectively happened in the last few lines of this dialogue is that the function of one part, Lucy, who was pushing Tamsin toward suicide, has been closed down.

### **Pauline**

I then talked to Pauline, who was an eight year old part. Pauline would join with the others to plan the suicide attempts. Lucy and Jason would make the plan and Pauline, Jenny and Linda would agree to go along with it.

Pauline thought that she was ugly and she also makes Tamsin think she is ugly and makes her scared of spiders. At this point Tamsin mentioned that she once had a doll called Pauline. Pauline was not a pretty doll and Tamsin never played with her. When her brothers abused her she would feel angry and throw the doll across the room.

Pauline was introduced to Jesus. Jesus said that he doesn’t make anything ugly and that he is good and only good can come from him. He said that when his light is poured into Pauline, her face shines. Pauline beamed and Tamsin’s face was aglow.

In conjunction with Lucy, the memory with the feelings was released. This is a memory that Tamsin was unaware of.

**Memory:** (*Tamsin is speaking*) I am eight years old. I see the cubby house we used to have. The old chicken coop. There are lots of creepers around it. My brothers and I cleaned it up and made it into a cubby house... My brother has a big spider in a bottle... a big black spider... if I didn’t do what he wanted he would put the spider on me... He wants to have sex with me... It really hurts (*a lot of pain felt by Tamsin in the genital region*)... I am so scared...he is leaving me... its night I’m in

my bed and the jar is next to my bed and it is empty... I didn't know where the spider was...I'm so scared.

**Peter:** Jesus, would you reveal your presence in this memory and bring your truth and your perspective?

**Tamsin:** Jesus says he is my brother. He's my big brother and he does kind things to me. He says that he created spiders and I don't need to be afraid. Jesus says he can protect me from everything...I am still feeling a little bit scared. Jesus, where were you when I was being raped by my brother? I trusted you to protect me! He says he was with me all the time. Well, why didn't you stop my brother from raping me? Jesus says my brother chose to do it. Well, how were you helping me, Jesus?... He is holding me and stroking me and telling me that he loves me... He is putting himself between me and my brother and reducing the shock and impact of everything... (*wide-eyed realization*)... He was a protection that was all around me.

**Peter:** Is that peaceful and calm now?

**Tamsin:** Yes, very peaceful.

**Peter:** Thank you, Jesus.

## **Linda**

Linda was the third alter in the quintet that was pushing Tamsin toward suicide. Talking to Linda, it soon became evident she was an adult part and she was tired. Aside from her function to push Tamsin toward suicide, she would try to get Tamsin to agree with people, to avoid confrontation and to make Tamsin feel inferior.

When Jesus was introduced to Linda, he said that nothing he makes is inferior and that she (Linda) has been believing a lie. He said that Tamsin was precious and worthy of respect, and that what Tamsin thinks is just as important as what other people think. I asked Jesus whether Linda needed to function for Tamsin in the way she has been doing. Jesus replied that he wants Tamsin to do what he says and not what other people say and that Linda can help Tamsin with this. If other people don't like it, that's too bad.

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### **Linda’s memory and Jesus’ response**

The memory that Linda held was a memory related to physical abuse, in which Tamsin was very passive. She was scared of being beaten up even more if she was assertive. When Jesus was invited into the memory, he told her it was alright to speak up and to have a voice, to set and maintain clear boundaries. This interaction with Jesus was sufficient to nullify the negative aspects of the memory and bring peace and calm to Tamsin regarding this trauma.

### **Jason and Jenny**

So far, I have talked to three of the five parts that were pushing Tamsin toward suicide. There were two more left; Jenny and Jason. Their reasons for pushing Tamsin toward committing suicide were very logical. With all the abuse Tamsin has endured, this world is not a particularly safe place and so the best option is to get Tamsin to kill herself so that she can be with Jesus, free from pain.

As already outlined with Lucy, I asked Jesus whether each of these remaining two parts needed to function for Tamsin in the way they have been doing. In each case, Jesus said, ‘No’ and gave them all new jobs. Once the function of these parts was shut down, the push toward suicide in Tamsin was greatly reduced.

In a similar manner to the procedure outlined above, the memories that Jason and Jenny were protecting Tamsin from seeing were uncovered. These two memories were predominantly related to sexual abuse by her brothers. Jesus appeared in each memory, bringing his truth and comfort. Tamsin experienced significant release and relief.

### **Twenty-one alters**

Tamsin had a total of twenty one parts. Lucy and Pauline made Tamsin fearful of spiders the spider in the memory. Linda pushed Tamsin toward passivity, based on Tamsin’s passive response in the trauma. Another part, Jody, made Tamsin uncomfortable with people touching her and in particular anyone touching her around the neck. The memory that Jody held was related to repeated abuse by her brothers when they would tie her to the fence or trees, for long periods of time, and frequently the rope was placed around her neck. In a similar manner, each of the remaining



fifteen parts functioned by pushing Tamsin toward a behavior, often dysfunctional, which was frequently related to the trauma they were protecting.

All of the remaining memories held by the alters were visited. Each of the remaining memories involved either physical or sexual abuse. There was a particularly significant memory about repeated oral sexual abuse. Jesus was so incredibly sensitive, caring and protective as he went through each memory, and now those memories of horrible abuse are a place where his comfort predominates.

### **Jesus removes all the parts**

Although the function of each part had been closed down, Jesus did something special with all the parts at the end of the morning session on the second day. Tamsin saw Jesus take each of the twenty-one parts and, in a caring and loving way, he blended one part into the next until there was finally only one part. This one part then dissolved away. Gone.

### **Tamsin's response**

Tamsin's face was aglow.

*"He loves me...he really, really loves me."*

*"It is just so lovely to know that I am important to God. I have never felt important before."*

*"Everyone is special to him.... Even me.... Especially me!!"*

*"He wants to hug me and hug me to make up for all the bad hugs I have received."*

*"He's calling me by my name, Tamsin, and I only have to answer to one name now, not all the other names anymore."*

*"Thank You, Jesus!"*

*"I FEEL HAPPY! FOR THE FIRST TIME I CAN REMEMBER, I FEEL HAPPY!"*

### **Fast resolution**

The total time taken for the counseling was 12 hours, or a day and a half. In that time, we had visited the trauma held by each of the twenty-

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one parts. Jesus had nullified the function of each part, one by one and finally removed the whole part system. In the remaining half day, we dealt with vows she had made, issues linked to her relationship with her husband and sinful reactions she was making in response to the sinful actions of others.

She returned home and, under supervision, was soon off all medication. The improvement was so dramatic, that the case was reported in the Queensland Psychiatric Association meeting as well as the Queensland Christian Psychiatrist’s meeting.

**“Not a single moment, not a single day of depression since”**

Talking to Tamsin recently, more than four years after the counseling, she said,

*“From the moment I walked out of your counseling room, I have never had a single moment, a single day of depression or mental illness. I was totally healed.”*

The week prior to the counseling, she took a depression test from her psychiatrist and scored a tick in every category. A week after the counseling, she scored zero in the same test.

Aside from the powerful, supernatural intervention of Jesus and the words of life he spoke to Tamsin, this case serves to illustrate the vital role dissociation plays in many mental dysfunctions.

Unfortunately, there are many psychiatrists, psychologists and counselors who believe it is very rare, so that when it is present as a significant factor, they don’t recognize it. There are others who do recognize it but they often lack effective tools to bring any or adequate resolution to the problem.

In this case of severe chronic depression, the resolution of dissociative parts was the most significant component of the depression. It is not necessarily the case with other people who are severely depressed. Nevertheless, depression is the world’s number one mental illness and the consideration of dissociative parts as a possible factor is important.

## **Moral responsibility for suicide**

A thought provoking aspect of this case is just how much moral responsibility should be carried by those who commit suicide. Had Tamsin been successful in any of her suicide attempts, there is certainly a strong case for diminished responsibility for her actions. Five well-differentiated parts were pushing her, making an organized and concerted effort to get her to kill herself. God, of course, takes all these factors into account. It illustrates how important it is not to make judgments about the eternal destiny of those who commit suicide.

Perhaps the most gratifying and poignant part of this story was when Tamsin returned home and her youngest child, aged eight, said,

*“It’s the first time ever that I have seen you smile.”*

## **SUMMARY**

- Dissociation is indeed a ‘forgotten’ factor in healing, as this case illustrates.
- The healing that results from the removal of dissociative parts can be quite dramatic.
- Dealing with dissociative parts is relatively easy. There is an easy, natural interaction in the dialogue between therapist and parts. It doesn’t need to be left up to highly trained experts.
- Supernatural intervention in the process is expected and happens in ‘real time.’
- The intervention of Jesus and the Holy Spirit both shortens and completes the process.
- Dissociation as a contributing component to depression needs to be considered.
- Beware of making judgments regarding the eternal fate of those who commit suicide.

## CHAPTER 3

# “I don’t know why I hate yoghurt?”

Lisa doesn’t like dairy products. Well, that’s not entirely true. She likes the taste but she comes out in hives about five minutes later. She has tried a number of cures including allergy tests, naturopathy, homeopathy but none have worked.

She came to Anazao for help with this and other problems. I talked to any dissociative part that might be influencing the situation, and a part named Sam came forward. After introducing the part to Jesus, Lisa was given access to the memory.

Lisa was forced, as a little child, to orally stimulate a male to the point of ejaculation, and to swallow the ejaculate. Sam took over during the abuse and had to endure swallowing the ejaculate. He now functions to protect Lisa by getting her to avoid anything that is in anyway similar to ejaculate. In other words, Sam over-reacts. If Lisa eats any dairy product that Sam thinks looks like or has a texture remotely resembling ejaculate, he will make Lisa come out in hives. Lisa has no idea about the oral abuse or that she has a part functioning in the manner described.

Jesus brought peace and calm to the memory through his caring presence throughout the ordeal. Jesus then talked with Sam, and told him he no longer needed to function for Lisa by making her come out in hives. Taking Lisa to the local dairy immediately after the counseling and watching her eat her first ice cream in decades, and have no hives, was a thrill!

“I don’t know why I hate Yoghurt?”

Oral sexual abuse of young girls is more common than most people would like to believe. This event is enough to dissociate a child for several reasons:

- (1) the penis is large in relation to her mouth, and she may feel as though she is choking.
- (2) swallowing the semen can cause gasping, gagging and a feeling of suffocation.
- (3) the person doing this to her is often known by her, and in a position of trust, and she can’t reconcile this with what he is doing to her.

Each example in this chapter is chosen to illustrate a particular aspect of dissociation. Each person came to Anazao for counseling without any idea that they dissociated or were influenced by dissociative parts. Each will be treated in a general sense without the detailed breakdown used in chapter 1 and chapter 13.

This first example was chosen because it illustrates how parts can make us feel sick, in other words, affect our biochemistry. It was also chosen because the same scenario has happened with several different clients.

While it is commonly dairy products that parts think are the closest resemblance to ejaculate, there are no hard and fast rules. In one instance it was mushroom soup, in another it was egg white and in another it was the light grey border at the beginning of each chapter of a poetry book.

It is important to state that not everyone who has a problem with dairy products has experienced childhood oral sexual abuse. Clearly, there are lots of other medical factors, such as enzyme deficiency, lack of rennin in the gut and inherited lactose intolerance, which will be the source of the problem for some people. Alternatively, a person may have been orally abused and love dairy products!

The part formed may function in some other way, such as making the person repulsed at the mere mention of oral sex. With other women, the part may make it easier for the woman to perform oral sex on men.

The focus doesn’t always have to be in the oral region. Another common symptom associated with childhood oral abuse is penile fixation. We have had a number of female clients who find themselves focusing on

men's crotches more than they would like. They also tend to phallisize objects and structures that are tall and thin. A banana becomes a penis, so does a roadside pole or a monument such as an obelisk. Many of these young women are lovely Christians, as well as virgins, who are not given to porn or lustful behaviors. They are perplexed as to why they think the way they do and they carry a measure of shame and guilt as a consequence. In these cases, the behavior is often more demonic than it is part driven. The demons in this case enter at the time of the abuse.

In another situation, as a result of oral sexual abuse, the client formed an alter that made her passive and compliant when interacting with dominant male authority figures, not maintaining boundaries she would ordinarily have kept. Women who have experienced early childhood oral abuse can also have difficulty swallowing pills. They don't recognize it as a difficulty until the function of the part has been shut down and they notice how easy it now is to swallow. Another possible pointer to oral abuse is difficulty with brushing teeth, particular molars and wisdom teeth at the rear of the mouth. A gagging sensation when the toothbrush reaches these regions of the mouth is not uncommon. In our book *"Dissociation & Ritual Abuse: The Hidden Factor in Healing"* we list 20 adult dysfunctions that frequently have their origin in early childhood oral abuse.

### **Tongue tied**

This second example was chosen to show that the trauma doesn't have to be linked to physical abuse to cause dissociation. In this case, it was embarrassment and being overwhelmed with the associated emotions.

Bruce, a pastor, received counseling from Anazao for a problem related to a fear of ad-libbing during sermons. He had a measure of anxiety when he entertained the idea of departing from his written sermon notes.

Bruce had a dissociative part that was formed when, as a primary school student in the state finals of a speech contest, he had a mental block in front of the audience in the middle of his speech. He was trying to make the speech without reference to the cue prompts he had in his hand. He froze and didn't remember the remainder of the speech or any of the other contestants' speeches that followed. The next thing

“I don’t know why I hate Yoghurt?”

he remembered was the clapping that followed the adjudicator’s final comments. Needless to say he didn’t win.

So what happened? Overwhelmed by the enormity of the occasion, Bruce lost his train of thought, he panicked, he froze, and a dissociative part was formed. Bruce doesn’t remember anything after this point. When Bruce panicked and became overwhelmed, a part came out and took over, stumbled through the rest of the speech, took Bruce back to his seat and retreated when it thought it was safe, which was at the end of the adjudicator’s speech.

The part has functioned since then by creating anxiety whenever this minister deviated from his sermon notes. Basically, the part was speaking into Bruce’s mind saying, “It is unsafe to ad lib” even though Bruce didn’t link the anxiety back to his primary school speech finals.

Closing down the function of this part led to greater freedom in sermon presentation.

### **Cutting edge counseling!**

This third example illustrates a trauma that did not have a direct personal impact on the client. It didn’t happen to her. She dissociated because of what she saw happen to someone else. It also illustrates that it can be the little nuisances that we often cope with and overlook that can have a dissociative cause.

Rita was receiving counseling for another issue but mentioned in passing that she felt a measure of anxiety whenever a kitchen knife was left out. It wasn’t a big deal. If she saw that a knife was left out, she would put it away.

The dissociative part functioning for her in this regard was formed when she was about three years old. She was in the lounge area and she saw a man pick up a knife, with the intention of attacking her father. Although her father was not injured and she herself was not threatened, the trauma had nonetheless sufficient emotional impact to cause Rita to dissociate. The part that took over and watched what happened, came to the conclusion that it is not safe to leave knives out, because this is what can happen. The part would make Rita feel anxious until she put the knife away, and once it was put away, the anxiety would stop. Closing

down the part has meant that exposed kitchen knives are no longer an issue.

It could be argued that Rita was mildly obsessive-compulsive in regard to knives. People, who obsess about a particular issue, often relieve their anxiety by engaging in a compulsive activity. This is called OCD (Obsessive Compulsive Disorder). For example, a person who obsesses about cleanliness and whether he is being contaminated by germs may repeatedly wash his hands in an effort to relieve the anxiety. The fear of germs is the obsession, the constant hand washing is the compulsion designed to relieve the obsession. The function of dissociative parts of the mind, as a factor in OCD, is often overlooked.

### **Wardrobe woes**

Nick was a missionary who came for counseling regarding a chronic problem with masturbation. He had been to other ministries and received counseling, including deliverance on several occasions but with no long-term change. The masturbation was causing him considerable guilt and he was desperate for a solution.

Talking to dissociative parts uncovered a part that encouraged Nick to masturbate whenever he was lonely, neglected or feeling rejected. Visiting the memory held by the part revealed that as a little boy, Nick was often hidden in a wardrobe by his single parent mother while she worked from home as a prostitute. The part was formed to deal with the emotions of loneliness and neglect while in the wardrobe. It was now helping to 'protect' Nick from dealing with similar feelings when they arose, by pushing him toward the false comfort of masturbation.

Closing down the function of this part meant that impulses toward masturbation fell into a manageable range and masturbation is no longer a problem for Nick. Would it have been possible for this man to control his urges with a stronger focus on and surrender to Jesus? Probably. But removing the part's function makes everything so much easier. This example was included because frequently the solution to the problem discussed, from a Christian perspective, is limited to deliverance and self-effort.

It is important to mention that masturbation is, like any addiction, a false comfort. Whether the need is medicated by alcohol, drugs, food



“I don’t know why I hate Yoghurt?”

or a sexual organ, makes very little difference. The point is it shifts our focus from God,

*“the Father of compassion and the God of all comfort”* (2 Cor 1:3)

to another ‘god.’ It is always sin. However, the source of this drive toward the addictive behavior can vary. Generational sin, demonic factors and dissociative parts all need to be considered by the therapist as possible secondary components, together with the primary component, the freewill choices the person makes.

### **Greenpeace!**

We have seen that closing down the function of the part is all that is needed to stop the negative emotions or dysfunctional behavior from affecting the person anymore. This last example was included to show that sometimes what Jesus says to bring peace and calm, can have just as much impact as closing down the function of the part.

Jenny never liked the sand on a beach, any beach. She would avoid the sand if possible and walk on the grass strip next to the sand in preference. In her words, “Beaches would be great if the grass came right down to the water’s edge!” The part that was driving this behavior was formed when, as a young girl, Jenny was raped on a beach. The part was ‘protecting’ her from any similar occurrence by causing anxiety whenever she approached the beach or sandy situations. From the part’s perspective, sand is associated with pain, so the best way to avoid similar pain is to keep her away from sand.

When Jesus appeared in the memory, he did what he has often done by comforting the person in the midst of trauma, caressing Jenny’s forehead and holding her close to himself after the rape. In addition, he simply said, “I created the sand.” That phrase struck a strong cord with Jenny. It was as though this was fresh revelation. Now, when she walks on the sand, there is no anxiety at all, and she says the phrase, “I created the sand,” adds to her peace and calm. Clearly, the part’s function being closed down meant that there was no more anxiety regarding sand and beaches. Jesus’ words provided and still provide an extra level of assurance and comfort.

## **SUMMARY**

- Oral sexual abuse can form parts that control allergic responses or biochemistry interactions.
- Early childhood oral sexual abuse can result in, but is not limited to, intolerance of dairy products, penile fixation, difficulty swallowing or brushing teeth.
- Acute embarrassment, being emotionally overwhelmed, can be enough to cause dissociation.
- Watching trauma happening to someone else is sufficient to cause dissociation.
- When deliverance, self-effort and religious routines fail, consider dissociation as a possible factor.
- Even though parts are important in affecting dysfunctional behavior, what Jesus says can bring an even deeper sense of relief and peace.

## CHAPTER 5

# Basement Blues

Cecilia is bright, positive and has a good outlook on life. She is a worship leader at her church. Single and in her thirties, she loves Jesus, has been a Christian for over twenty years, and exercises discipline in her relationship with God and others. At times her boundaries are not as clear as they could be and her tendency is to rescue others.

A middle child from a large family, she was sometimes lost in all the activity associated with a busy household. One of the reasons she was seeing us was because of issues to do with intimacy with males. Her relationship with her father had never been good and, from her perspective, her brothers often set her up so she became the scapegoat to some extent.

### **Suppressed memories**

We talked about how she felt when men tried to get close, emotionally. She identified a tension that would arise, a distrust and a sense of having to be on guard. I asked Jesus to take her to a memory connected with these feelings. Jesus took her to a memory of abuse by her brothers. They were teasing her and set her up to take the blame, and she got into trouble with her father as a result. I asked Jesus to take her to an earlier memory and it involved one of sexual abuse by one of her brothers. Both these memories were memories she knew about. They weren't dissociative memories. She had chosen to ignore, push down and try to cover up the

memories for so long that she had ‘forgotten’ they had existed. We call this process of trying to forget bad memories, ‘suppression.’

### **The misbelief in the memory**

As we explored these memories, the misbelief or negative thinking she adopted in response to what happened to her was,

*“Men can’t be trusted. They will always let you down.”*

Once this wrong thinking was identified and the emotions in this second memory were heightened, I asked Jesus to bring his truth and perspective into the memory.

### **“Will Jesus abuse me too?”**

Cecilia, in the memory, was sitting on a park bench. Her brother had gone. She could see Jesus in the distance, slowly walking toward her. I checked to make sure it was the true Lord Jesus (see chapter 11). It was. The closer he got to her, the more uncomfortable she became.

*“Stop, Jesus, please don’t come any closer,”* she said.

He stopped. She was surprised and said to me,

*“What’s happening?! I love Jesus, yet I don’t trust him.”*

*“Why don’t you trust him?”* I responded.

*“I’m not sure he won’t abuse me too,”* she slowly replied, with a look of growing understanding.

We discuss this. Logically she knows that Jesus could never hurt her and only wants to bless and help her. Yet as she experiences this memory with all the emotions, she finds that there is a deeper belief that seems to overwhelm her logical understanding of who Jesus is. This deeper belief is,

*“Jesus is just like all other men.”*

After all, he is a male and Cecilia has difficulty trusting males.

Cecilia is in a dilemma. She wants the comfort and consolation that she knows Jesus can bring and yet she doesn’t know whether he is going to set her up. We went back to the memory and I encouraged her to let Jesus move a little bit closer to her. He did and when she felt uncomfortable,

she said, “*Stop*” and he did. Jesus, of course, is the perfect ‘gentleman’ and was happy to come closer to her at a pace she could handle.

### **Breakthrough**

Eventually Jesus got to the bench, sat on the bench, sat close beside Cecilia, put his arm around her shoulders and they sat together enjoying the moment.

*“It feels so safe and secure. He isn’t going to hurt me. He loves me. He really loves me!”*

Jesus said that not all males are untrustworthy. Cecilia needs to be prudent but not fearful in her interactions with males.

At the next session, two weeks later, Cecilia waltzes in and her face is lit up like a Christmas tree.

*“I have had such a wonderful time with Jesus this week. There is a new intimacy with him that I haven’t experienced before. It’s like I can relax with him, like a good friend, for the first time. When I led praise and worship, I felt really close to Jesus and the Holy Spirit for the first time.”*

### **Mixed messages**

For years, Cecilia has led praise and worship and sung many wonderful songs about following Jesus and surrendering all. In her heart she meant it. She genuinely did want to follow Jesus, to surrender all.

Two contradictory beliefs, happening at the same time, were preventing Cecilia from moving into the deeper intimacy she desired.

Her logical mind was saying,

*“Jesus, I love you, I trust you, I surrender all to you.”*

The well-known Christian children’s song,

*“Jesus loves me this I know, for the Bible tells me so...”*

is a good example of a logical truth statement. I know it in my head; I know it because everyone tells me it is so. I believe that Jesus would never hurt me.

Fighting with her logical beliefs was a deeper reality, based on what had happened to her. It said,

*“You can’t trust males. It follows that since Jesus is a male, you can’t trust Jesus.”*

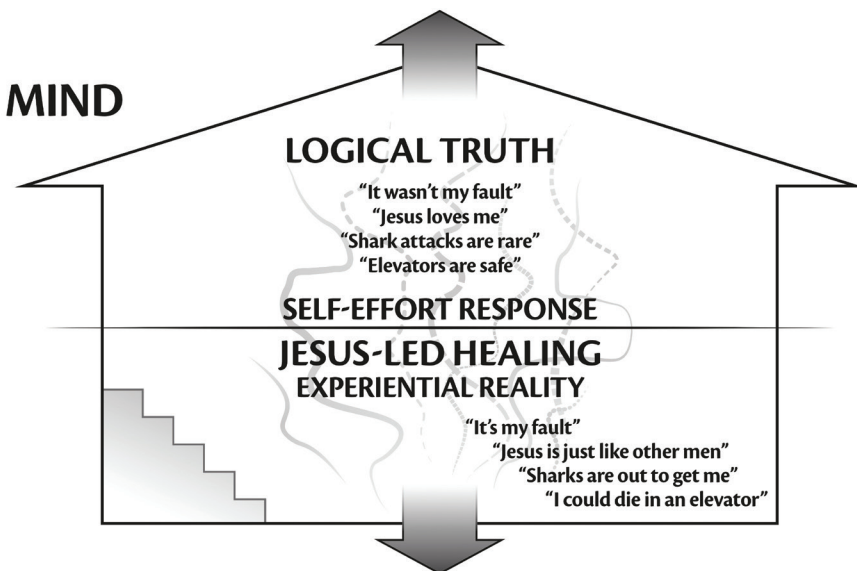
Cecilia couldn’t handle this contradiction so she pushed it down, subconsciously. It was repressed, buried, hidden.

Without realizing it, when she was singing praise songs, she was beckoning Jesus to come closer and at the same time telling him to stop, to only come so far and no further. It is no wonder that the Holy Spirit could only partially meet her request. For Cecilia, there was a niggling sense that something was missing, that she wasn’t really breaking through. There was more self-effort involved in her relationship with Jesus than she was willing to admit to herself.

### **A common problem**

We are all like Cecilia. Each of us has had trauma in our lives that has led to the formation of lies, misbeliefs and internal vows. It may not be an issue with males, but it will be some other issue that jars or contradicts what our logical mind tells us should be the truth. This internal tension means that we have to exercise more self-control in that area than is necessary, than Jesus wants us to.

The diagram<sup>1</sup> below gives a visual illustration of what is happening in our minds.



## **Explanation of the illustration**

The house and the basement represent our mind. The room above the basement represents where we spend most of our time. It is our living area. It is where the light is. It is the area of logical truth. It contains the beliefs that I hold, through knowledge and understanding, that are logical and consistent with the world around me. The basement is in the dark and rarely accessed. It contains my experiential reality that contradicts my logical truth. When something happens in my life that I can't reconcile with my understanding of life as it should be, my logical ordered way of seeing and coping with things, I push it down into the basement.

For example, the client will agree with you that if an adult sexually abuses a child, it is not the child's fault. 100% of the responsibility lies with the adult. There is a huge power differential—both psychologically and physically. Logically, the adult abuse victim will agree with that. But if she returns to a repressed memory of abuse, as she relives the abuse and allows herself to feel all the emotions, she may sincerely believe that it was her fault. She thinks,

*“I am the one to blame. Uncle Bill said it was my fault. He said I was a naughty girl and he had to do this to me because this is what happens to naughty girls. He said I deserve it.”*

Whatever the reason, the self-talk or irrational thinking pattern absorbed at the time of the abuse or soon after was that,

*“It was my fault.”*

The logical truth is that the adult is at fault. The experiential reality is that it is my fault.

## **Sharks and elevators**

Logical truth tells us that shark attacks are rare. Logical truth tells me elevators are safe to ride in. However, if I went for a swim as a young child and had the experience of a shark coming close to me, my experiential belief might be that,

*“Sharks are out to get me.”*

If I got stuck in an elevator and the doors wouldn't open till a technician arrived, my experiential belief might be,

*“I could die in an elevator.”*

## **Experience trumps logic**

I can't handle these opposing ideas so I push the experience down into the basement.

If our logical truth matches our experiential reality, life progresses well for us. If our logical truth is out of sync with our experiential reality, as in the examples above, we have a problem. The problem is exacerbated by the fact that the emotional pull of experiential reality will always outweigh the emotional pull of logical truth. That which I know from experience will always have a stronger influence on my behavior than that which is based on non-experiential understanding. In the diagram, this is represented by the two opposing arrows.

I want to make love to my husband but I feel dirty, ashamed and unworthy. When I do make love, I have to 'think' through sex. I believe with all my heart that Jesus loves me; that lovemaking should be spontaneous and enjoyable but somehow I never seem to experience any real intimacy or sense of connection with my husband.

I know shark attacks are rare but whenever I go for a swim, I am overcome with the fear that I might get attacked by a shark and so I never get that swim. I hesitate every time I approach an elevator and quickly work out how many floors up I have to go and whether I would be exhausted if I took the stairs. When I'm in the elevator, my palms are sweaty and my heart is racing.

### **"I know I shouldn't feel this way, but I do."**

As we have said, experiential reality exists in the basement. It is where it is dark, because we are often either unaware of the trauma, or we have repressed it to minimize its impact on our lives. More often than not, we are unaware of the misbelief we have adopted through what we experienced. We live in the left side of our heads most of the time; the logical truth side. This is where the light is. When a person has a jarring between the beliefs in the 'living area of the house' and the beliefs in the 'dark basement,' he internally wrestles with himself. He says or thinks statements like,

*"I know I shouldn't feel this way, but I do."*



Many fears and phobias are the result of jarring thinking between the house and basement.

### **A typical therapy approach**

When a person goes to most counselors for help, the therapist unfortunately spends most of the time dwelling in the well-lit house; dealing with logical truth. These therapists are likely to use CBT (Cognitive Behavior Therapy) where faulty thinking patterns are challenged. They may even identify the irrational belief that is locked up in the experiential memory, such as

*“It’s my fault I was abused.”*

and tell the person that it wasn’t her fault.

They could use progressive desensitization where they take the person to the beach or a building with elevators, talk about his fear of sharks or her fear of elevators. They will get him enter the water up to his ankles, talk about how that feels, then up to his calves, then his knees until eventually, over time, he manages to swim. The counselor could talk about how the client feels as she approaches the elevator, as the doors open, as she is about to step inside, as the doors close etc. If the therapists are Christian, they may add verses from Scripture for the person to memorize. They may tell the person to have more faith, trust Jesus and concentrate on his identity in Christ. They may even give the client a spiritual ‘prescription’ to apply in between visits. If the therapists are more charismatically inclined, they may even do some deliverance, casting out demons of fear etc.

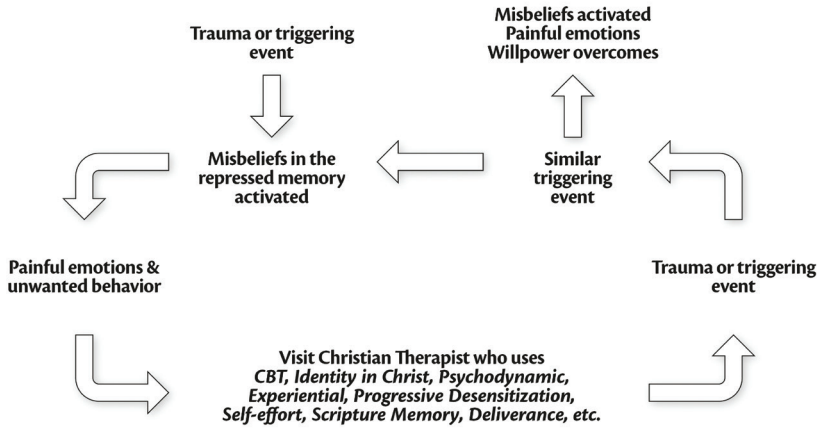
Ultimately, however, the recovery the person experiences is largely a *self-effort response*. Its success is based on his vigilance and ability to dispute the misbeliefs at a logical level and it requires self-effort and willpower not to be overcome with fear.

### **Locked in a cycle**

The diagram below summarizes a traditional Christian counseling approach. Notice the cycle that the client gets locked into when using this approach to the problem. Often, it is only with a lot of self-effort or ‘white knuckling’ that the person can break out of the cycle and experience some freedom. They are likely to give the glory to Jesus for

their recovery, when, in actual fact, it has little to do with Jesus or the Holy Spirit, and a lot to do with their own self-control.

## Traditional Christian Counseling



## Jesus' direct intervention required

The way to bring deep, lasting and complete resolution to the opposing beliefs of logical truth and experiential reality is through the person and work of Jesus Christ. This is done by asking Jesus to take the person to the memory that lies at the source of this negative emotion. Once the memory is identified; eg. my uncle is abusing me, the shark is right next to me, I'm stuck in the elevator, etc. the therapist will try and highlight the emotions felt by the client. These could be fear, confusion, shame, abandonment, powerlessness, feeling tainted or dirty etc. Highlighting the feelings often makes it easier to identify the misbelief in that particular memory.

*"It's my fault this abuse is happening."*

*"How do I know Jesus won't abuse me too? After all, he is male."*

*"Sharks are out to get me."*

*"I will get stuck in the elevator and I will die."*

Once the wrong belief about the event is identified and the associated emotions heightened, Jesus can more easily bring his truth and neutralize or dispel the power of the irrational thinking and its accompanying negative emotions.

In the case of the abuse, Jesus might simply say to the person,

*“It was not your fault.”*

and that will be sufficient to bring peace and calm and undo the negative belief. He may not say anything but instead, by holding and comforting the person in the midst of the abuse, he may convey the same message. The therapist may have been saying the same thing as Jesus, that it is not the client’s fault, repeatedly, with little or no impact. Why? Jesus’ words are ‘truth and life,’ in other words, life changing whereas the therapist’s are only truth; able to have some impact but not *life changing*. Remember, Jesus just doesn’t speak truth, he *is* truth. He doesn’t just speak life, he *is* life.

When Jesus has shown the person where he was in the midst of the trauma and dispelled the negative belief at the experiential level, the result is Jesus-led healing instead of a self-effort based response. When he says to the sexual abuse victim,

*“It is not your fault.”*

she experiences true release for the first time. From now on, she no longer has to think through sex but can enjoy it with a fresh spontaneity she has never previously known. It is effortless.

Jesus says to the man afraid of swimming,

*“You are safe now.”*

Those four words are enough to enable him to swim effortlessly and without any fear, whatsoever, of sharks attacking him. He says to the woman afraid of elevators,

*“I am with you in the elevator.”*

and she gets into elevators now without any panic or thoughts of being trapped.

### **Stench in the basement**

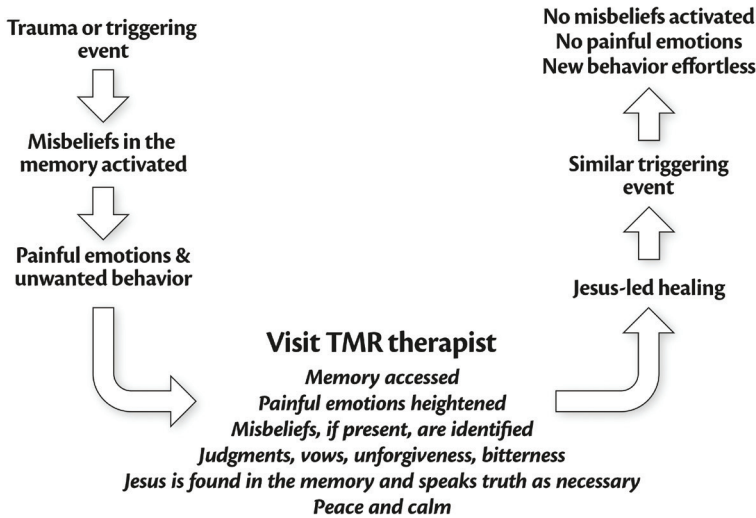
In the diagram of the house you will see squiggly lines coming from the basement. These represent smell. The problem with secular counseling and much Christian counseling is that counselors work in the logical truth area and try to convince the person with logical reasoning, memory verses, identity in Christ, having faith or a variety of other techniques to

overcome the problem. It is like trying to use a can of air freshener to deal with the smell in the room. It masks the smell for a while but the stench is actually rising from the basement. The real solution to fresh air in the house is to remove the ‘rotting irrational thinking’ from the basement by going down into the basement.

### Breaking out of the cycle

The process of recognizing the presence of Jesus in our experiential reality, the basement trauma, is what we call “Traumatic Memory Resolution.” During the process, there may be demonic blockages, vows, resentments and other sinful barriers that need to be removed before Jesus’ presence and healing words and touch can be fully appreciated. Practiced in an ad hoc manner by Christians over the centuries, TMR has received more emphasis through a variety of ministries over recent times.

## A Traumatic Memory Resolution Approach<sup>3</sup>



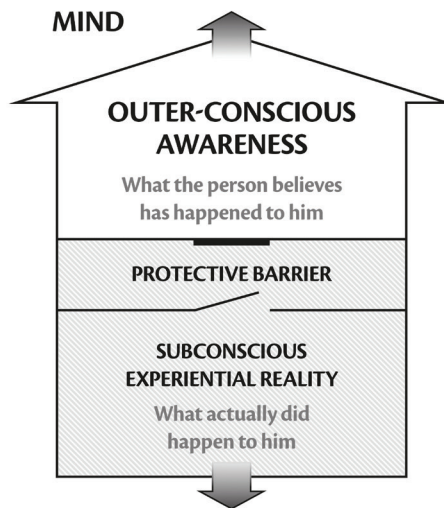
Using a TMR approach, it is easy to see that the biggest difference between this and the traditional Christian counseling diagram is that there is no cycle you are locked into. Once that particular problem has been resolved by Jesus’ direct intervention, it is no longer a problem.

In the first diagram of the house and basement, the memories in the basement may have been temporarily forgotten, minimized, dismissed,

overlooked, avoided or repressed but these memories are still memories that we can recall if we choose to look closely. The more traumatic the memory, the more likely we are to avoid ‘seeing’ or remembering it. We pretend that it either isn’t there or doesn’t affect us. We call this process ‘denial.’

## DISSOCIATIVE MEMORY

Sometimes things can happen to us that overwhelm us emotionally, and when this happens we lose that ability to remain present in the trauma. We can represent this ‘disconnection’ or ‘dissociation’ by the following illustration.



The top part of the house is still the area which contains logical truth. Included in this part of the house are all the events in my life that I remember *happening* to me. It’s my living area, it’s well lit. In the first illustration, I knew there was a basement. I knew there were unpleasant memories that I could go to if I chose. In the illustration above, I have no idea there is a basement at all! In fact, if you told me my house had a basement, I would think you were crazy!

### **“Are you mad? I don’t have a basement!”**

The basement is labeled “Subconscious Experiential Reality.” It is still experiential reality because it is what actually did happen to me. However, it is not available to my conscious memory. It is underneath my conscious knowledge and understanding hence it is part of my

*subconscious*. The house is different in another aspect as well. It has a false floor. There is no basement door or steps that I know about that lead into the basement, like in the first diagram. To get to the basement, you must go through the false floor. More specifically, you need to go through the trap door at the bottom of the false floor to get to the memory. There is also a trap door from the floor of the house into the false floor but I don't know that this door exists either. It is covered with carpet.

### **“Who’s walking on my bridge?”**

In the children’s story of “The Three Billy Goats Gruff,” there lived a troll under the bridge who would stop anyone crossing his bridge. So too, in the false floor dwells an alter that will stop you getting access to his memory. It is the memory that formed him and the one he is protecting the person from. As mentioned in chapter 2, this is not unlike trying to get onto a property that is protected by guard dogs.

To enter the property (memory), the guard dogs (parts) must first be subdued or told to stop protecting. In the diagram, the false floor is labeled, ‘The Protective Barrier.’ It is a small room or antechamber where the parts reside, sandwiched between the top floor and basement.

When the counselor starts talking to an alter for the first time, it is like removing the carpet on the living room floor and showing the owner that there is a trap door. It is in opening the trapdoor that the owner sees the ‘troll’ inside.

### **Trap door control**

Once the alter has been introduced to Jesus, it will now be willing to open up the second trap door. The counselor opened up the first trap door but can’t open up the second trap door. The alter doesn’t usually open the first trap door but it is the only one that can open the second trap door. It is unlikely that the alter will listen to the counselor’s request to open the second trap door. However, alters *do* listen to Jesus’ request to open the second trap door.

Once the second trap door is open, the owner of the house can now peer through both trap doors in the false floor and look directly into the hidden basement. Now the client can experience this hidden memory for the first time. It was necessary to stir up the emotions in the basement

memories of the first house diagram, so that the misbelief could be more clearly identified and Jesus' calming words and presence more keenly felt. So too it is necessary for the person to feel the emotions and pain in this hidden memory so that Jesus' peace and calm can be truly experienced.

### **Similarities**

As the reader has probably recognized, the fundamental process is the same whether the memory is repressed (diagram 1) or dissociative (diagram 2). In both instances, the memory holds the key to greater freedom in the person's life. In both instances, the memory needs to be re-experienced or experienced for the first time. Both require Jesus to enter the basement (memory) to bring final resolution to the emotional impact that the memory is having on the person.

### **Differences**

One difference is the extra effort required to get to the memory when the memory is held in a dissociative state. It is negotiating your way through the false floor, dealing with intermediates or alters, that makes the process longer. It is speaking with the alter after the memory is complete and shutting down its function.

Another difference is that in the non-dissociative memory, anxiety results from the misbelief *held by the person himself* as a result of the trauma in the memory. With dissociative memory, the anxiety more commonly results from the misbelief held *by the alter* as a result of the trauma in the memory.

It follows then that in non-dissociative memory, Jesus needs to nullify the wrong thinking held by the person as a result of the trauma memory to stop the anxiety. In dissociative memory, Jesus needs to nullify the wrong thinking held by the alter to stop the anxiety.

Consequently, it is not necessary for Jesus to identify and speak directly to the misbelief in the dissociative memory because the alter is the major source of misbeliefs fed to the person. The primary focus of Jesus, as he brings his truth to the person with a dissociative memory, is to comfort the person in the memory and reassure her of his presence. During this intervention, Jesus may indirectly address misbeliefs adopted by the alter through what he says to the person. The alter, watching closely

what Jesus is doing in the memory, will be challenged to change its own thinking about the event. Sometimes it is not always so clear cut and as the client works through the dissociative memory the misbeliefs of the alter are transferred to the client and Jesus will address these as he brings his truth to the memory.

The above two paragraphs are generalizations for the purpose of contrasting the two procedures. The reality is that, at times, the circumstances are more complicated. For instance, alters can influence the person's behavior and act in ways not directly related to the trauma that formed them. Alters don't automatically change their behavior just because Jesus nullifies the traumatic aspects of the memory. They still need to be directly 'decommissioned' or removed by Jesus later on to ensure that the anxiety they cause is gone. More about this later.

### **Identifying irrational thinking not always necessary**

Although it is helpful in non-dissociative counseling for the client to identify the misbelief, it is not always necessary for resolution of the memory. Whether or not the client identifies the irrational thought he adopted as a result of the memory, it is Jesus' *actions and words* as he brings his truth into each portion of the memory that nullifies the wrong belief. For instance, if the person has adopted the incorrect thinking,

*"I was abandoned."*

but the counselor failed to pick up on this with the counselee, Jesus' presence in the memory; his comfort, acceptance, touch, affirmation etc, can still nullify the irrational thinking without directly addressing it.

Sometimes traumatic memories don't have an irrational thought as the root of the problem. The person may simply need a hug from Jesus without there being any strong self-talk such as

*"I am alone, unlovable or abandoned."*

All sin and dysfunction has its root in various degrees of broken intimacy. Ultimately, it is intimacy with Jesus that we all crave and that satisfies our deepest needs. Therefore it is not always what Jesus says regarding our irrational self-talk that brings healing but what he *does*, the way he does it, his touch, being cradled in his arms and the way he looks. Jesus gently caressing my hair or peppering my forehead with butterfly kisses



may be all that is needed to bring resolution to the strong ache I feel regarding never deeply connecting with someone who truly loves me. Words, in this case, would be both inappropriate and insufficient.

Karl and Charlotte Lehman, a couple with extensive experience in non-dissociative TMR identify five levels of need that a person can have in a traumatic memory. Jesus will need to address each of these areas in order for complete peace and calm to pervade the memory. Misbeliefs, or irrational thinking, occur at level 4. The first three levels of need are more visceral and urgent and must be met before the fourth and fifth have any relevance.

### **Jesus doesn't 'come into' a memory, he was always there!**

In the past I have used the following phrasing when talking to a client,

*"I am now going to invite Jesus to come into this memory and bring his truth. Just wait for him and watch what he does."*

While Jesus has honored this, the concept behind this phrasing is flawed.

Jesus is omnipresent. Being omnipresent means that there is no place, no time, no event, no situation when he hasn't been present. Put another way, Jesus has been present with every person for every second of their lives. No matter who you are, Christian or non-Christian, from the moment of your conception to the instant of your death, Jesus has been with you. He has never left you. At the instant you became a Christian, Jesus moved from outside of you to inside of you as well. He moved from being external to you to being internal and external both at the same time!

The problem is that most of the time most of us weren't aware of Jesus' continual presence in our lives. We thought we were on our own. It *felt* like we were on our own. Hence we became fearful, confused, and adopted wrong thinking patterns such as, "I am alone, abandoned, rejected, dirty, worthless." What Traumatic Memory Resolution does is allow the person the opportunity to see where Jesus was and what he was doing at the time of the trauma. It is not about inviting Jesus to go back into the past and appear in the memory. This implies that Jesus wasn't there at the time of the original trauma. Jesus doesn't have to go back into the past like Marty McFly had to go back to the past to help his Dad stand up to Biff the bully in the movie "*Back to the Future.*" Jesus was there at the time of your trauma. It is simply a matter of you

recognizing that he was there and seeing what he was doing. God loves everyone so much that in every circumstance, with every person, he is always trying his best, without violating freewill choice, to help us cope, to protect us and comfort us.

TMR is simply seeing where Jesus was and what he was doing at the time of the trauma or what Jesus would have done if he had free reign. The realization of his presence and his dynamic interaction with us brings peace and calm. When we, for the first time *listen* to him speaking to us at the time of the trauma, a new perspective can now nullify the misbeliefs. When we hear him say, “I love you, you have nothing to fear, I am here, always with you, I will never leave you, I will never, ever, reject you, you are absolutely pure and clean in my sight” we realize, often for the first time, that we weren’t alone, rejected, dirty, abandoned, or worthless and that realization makes all the difference.

The phrasing I now use is,

*“Jesus, could you please show (the client) where you were and what you were doing in the memory?”*

### **Taking Jesus with you through the trauma**

I used to exclusively encourage the person to face the trauma, whether it was non-dissociative or dissociative, without Jesus’ help or intervention until all the trauma had been experienced by the person. After the trauma was over, I would invite Jesus to bring his presence into the memory. The reasoning was that if the person had to experience the trauma on his own, the fear, pain, loneliness or rejection would be far more heightened so that when the person finds Jesus the contrasting peace and calm will be that much greater.

The reality is that this works well for:

- (a) people with a healthy concept of who Jesus is.
- (b) in traumatic situations that are not too severe.

Jesus’ ability to speak and move through a traumatic memory is closely linked to the client’s own personal walk with Jesus. Even if the person does have a mature concept of Jesus’ character, there can be memories that are too difficult to face alone. In such cases I have noticed that Jesus accompanying the person through each phase of the trauma so that the person experiences it for the first time *together with Jesus* brings the same

level of healing as if the person had gone through it without Jesus. In fact, some trauma is so severe that the person would simply not cope with going through the memory on his own for the first time.

### **Example of seeing what Jesus was actually doing at the time of the trauma**

Kelly recovered a dissociative memory of being beaten by her kindergarten teacher. The teacher took her into a small room by herself and hit her hard on the thighs. She threw Kelly across the floor and she hit the opposite wall. Kelly felt the physical pain of the abuse and this broke the denial that this actually happened. When Jesus was asked to bring his truth into the memory, he showed Kelly that he had put his hand between Kelly and the teacher's hand to protect her from the blows. When she rolled along the floor, Jesus had wrapped himself around her to protect her from being too injured and he also positioned himself between her and the wall to reduce the impact of the event. The truth is that this is exactly what Jesus did for Kelly *at the time of the trauma*. She didn't recognize it at the time. If he hadn't been there, she would have actually sustained more injury than she did. Kelly now has a deeper understanding of Jesus' omnipresence and a security in his protection of her. It doesn't mean she won't be traumatized again but she does know that Jesus will be doing his utmost to protect her. She knows that Jesus is not a passive bystander in any trauma event but he is as dynamically interactive as he can be in the circumstances.

### **Example of seeing what Jesus would have done if he was allowed to**

Anita was 15 and at her first high school dance. The boys sat on one side of the assembly hall and the girls sat on the other side. When it came time to dance, the boys walked across the dance floor and asked a girl for a dance. In those days, girls had to sit and wait and hope they would be asked. Unfortunately for Anita, no one asked her for a dance. Not just for the first dance but for every dance that evening. She sat there all evening. As a result of that night, Anita made a number of vows that she needed to renounce. When Jesus showed himself in the memory, he walked across the floor and asked her for a dance. She accepted and got up and danced. Jesus said, "You are a good dancer!" Jesus starts doing some fancy footwork and soon everyone else is stopping and watching him and her dancing. When the dance is over, he takes her back to her seat

and he gives Anita his telephone number! As a result of Jesus' actions in that memory, Anita has a deep peace and calm and later said that the sting of that memory was completely gone and, with the vows confessed and broken, she has a new confidence that wasn't there before. Unlike the last example, Jesus didn't actually take her onto the dance floor and show off his dancing ability. However, he was showing her what *he would have liked to have done with her* had he had the opportunity and that was enough to nullify the emotional trauma of that evening.

Whether it was what Jesus actually did do or what Jesus would have liked to have done doesn't really matter. In both cases, Kelly and Anita experienced Jesus' love and comfort, his fierce protection and his tender compassion and understanding. In each case, both women have grown in greater intimacy with Jesus.

### **Jesus' direct personal intervention as well as traditional methods**

Does this mean that the only kind of counseling we should be doing is the kind where Jesus intervenes directly as this chapter has described? Not at all. There is a place for the use of secular models and standard Christian interventions as listed in the 'Traditional Christian Counseling' flow diagram.

Indeed, in every counselor's repertoire there is a wide range of knowledge, experience, understanding, therapy models and tools that need to be sensitively used and imparted. When used correctly, these will be just what the client needs in their current situation. Often a client simply needs teaching. There are many parenting and marriage issues where a TMR approach would not meet the direct needs of the clients.

TMR is great for dealing with past trauma but doesn't equip the person to avoid future recurrences. Teaching clients to be more self-differentiated, which includes problem ownership and boundary setting, goes hand in hand with an inner healing approach. A psychodynamic approach that looks at childhood patterns of behavior and generational patterns of learned responses can give the client valuable insight.

Cognitive therapy looks at thought patterns that are rational and irrational and how these influence our emotional responses, which in turn affects our behavior. Equipping the client to be self correcting regarding his irrational thinking patterns is providing him with a fence on top of the

cliff. There are times when Scripture memory is appropriate, when focusing on the person's identity in Christ is timely and necessary to re-establish the correct perspective. Anazio teaches most of its clients the five major components of daily spiritual hygiene. These are frequently overlooked by Christians and are important maintenance tools. These five are examined in depth in our training schools (see Appendix)

### **Step aside**

Nevertheless, there are many times when direct supernatural intervention in the counseling room is required if deep healing and lasting progress is to be made. Times when the counselor is not the focus. Times when Jesus is the focus or 'star' and the counselor is in the background. Times when you, the counselor, have to let go of your control over the counseling session and *trust* that Jesus will turn up when you expect him to. It can be scary when you first begin this type of counseling. In these cases, the counselor is often the last person to know what is going on. Expecting a dynamic, interactive, present-time partnership with Jesus during therapy is a characteristic of successful therapists dealing with non-dissociative and dissociative trauma.

### **That means you!**

All of us require the type of counseling outlined in this chapter. All of us have basement blues!

## **SUMMARY**

- Counseling needs to be a mixture of counselor-led and Jesus-led therapy. Unfortunately, most Christian counseling is counselor-led.
- Logical truth is where I spend most of my time. Logical truth is the left side of my brain.
- Logical truth is what I learn at school. Logical truth is what I want to believe is the truth for my life.
- Experiential reality is what actually happened to me and, in cases of trauma, what I try to forget.
- As a result of what happens in trauma, I adopt misbeliefs about reality.
- Truth or error linked to our experiences will overwhelm logical truth.

## Basement Blues

- Trying to solve a fear or dysfunction by therapy that addresses logical truth will lead to a self-effort response and is dependent on exercising willpower. The smell from the basement is still there.
- Inviting Jesus into the experiential reality of the trauma and allowing him to bring his truth leads to Jesus-led healing.
- When trauma is severe and I dissociate, I am unaware that I have a basement!
- In addition to not being aware of the basement, I am unaware that there is a false floor that is the only access to the basement. Consequently, I live my life in the area of logical truth completely unaware of any structures underneath my house.
- Jesus is the only one who can, with ease, pacify the alter and get access, through the trapdoors, to the memory.
- Once in the memory, Jesus is the only one who can bring complete resolution to the memory.
- Traumatic Memory Resolution (TMR) is the process of allowing the person to see where Jesus was and to hear *what* he was saying to her at the time of the trauma. It is not about Jesus going back in time.
- In non-dissociative basement issues, the misbelief is adopted by the person.
- In dissociative memories, the misbelief is more commonly adopted by the alter. Remember, the person doesn't know the memory exists, so they can't adopt the misbelief themselves!
- Misbeliefs aren't the only factor in a traumatic memory. There are various levels of need that Jesus must address if the memory is to be completely resolved. Non-verbal physical connection with Jesus can be a foundational need.
- Therapists are often too controlling in the way they counsel, not letting Jesus get a look in.
- On the other hand, don't throw the baby out with the bathwater. An inner healing approach outlined in this chapter is important but works hand-in-hand with other therapeutic models.
- Everybody needs 'basement therapy.'