Introduction
Karla McLaren, an intuitive healer and abuse survivor, has written in her book *Rebuilding the Garden: Healing the Spiritual Wounds of Childhood Sexual Assault*.

People who are not molested in childhood . . . rarely understand why so many sexual assault survivors stay sick for so long. Looked at from a rational and somewhat shallow viewpoint, it must seem odd that we sexual assault survivors don’t manage very well . . . most of us battle ever onward with depression, panic disorders, addictions, weight and eating problems, sexual dysfunction, reproductive illness, multiple personalities, or schizophrenia.

Though most of us have had a ton of therapy, I think very few survivors of molestation and incest have grasped the spiritual essence of childhood sexual assault: in one confusing, stomach-churning moment, our childhoods ended, and our initiation into a kind of warrior’s life began. This powerful event, so often belittled in our spiritually and sexually ignorant society, placed us directly in the center of the opposites: of good and evil; of love and hatred; of wisdom and stupidity; of mercy and vengeance; of consciousness and unconsciousness; of victim and perpetrator; of light and dark.

It seems to me that childhood sexual abuse, like some of the deeper traumas people have suffered from the Holocaust, slavery, colonialism, and genocides, while in so many ways not on that scale, nevertheless creates a religious and spiritual orientation of being in the world that is based upon that “stomach-churning” event, that particular life and world beginning. Many women who have been abused may spend their entire lives sick or trying to become well because of their early sexual abuse.

This paper will focus on how healing practitioners within the field of complementary alternative medicine work with women who have been sexually abused, the different modalities of healing they use in their work with these women, illness symptoms they have identified in women survivors, and some comments about what I think is unique about this work.

The Healing Practitioners
I interviewed eight healing practitioners in the New England area. Several, though not all, are based in the Boston vicinity. There were six women and two men, ranging in age from forty-one to sixty-one. They can be individually identified as Norma Burton, M.Div., and a shaman; Terri Nash, M.S., CPM, a subtle energy teacher and energy worker; Peter S. Churchill, L.M.T., a cranial sacral therapist and homeopath; the Reverend Maureen Chase, an energy worker in the Healing Light Center tradition of the Reverend Rosalyn L. Bruyere; Alysia Trombla, a healing sound and energy practitioner also trained in the tradition of Reverend Bruyere, a metaphysical counselor, and founding director of Watervine, based in western Massachusetts; Lonny S. Jarrett, an acupuncturist; Marcia Hood, self-described as an alternative physical therapist and body worker whose techniques include “myo-fascial release, cranial sacral, energy work, visceral work, mobilizing the organs of the body, energy working with the various chakras”; and Gail Byrnes, Lic. Ac., M.Ac, and a plant spirit medicine practitioner who uses Acutonics and Harmonic Medicine (developed by and taught at the Kairos Institute of Sound Healing based in New Mexico) in her work.

Since the majority of healing practitioners I interviewed are in some way engaged with working with a woman’s “subtle energy body,” it is helpful here to include a description of the “human energy field” as described by medical intuitive Carolyn Myss:

Your physical body is surrounded by an energy field that extends as far out as your outstretched arms and the full length of your body. It is both an information center and a highly sensitive perceptual system. We are constantly “in communication” with everything around us through this system, which is a kind of conscious electricity that transmits and receives messages to and from other people’s bodies. These messages from and within the energy field are what intuitives perceive. . . . Practitioners of energy medicine believe that the human energy field contains
and reflects each individual’s energy. It surrounds us and carries with us the emotional energy created by our internal and external experiences—both positive and negative. This emotional force influences the physical tissue within our bodies. In this way your biography—that is, the experiences that make up your life—becomes your biology.1

In addition, Terri Nash defines subtle energy as “the coherent expression of energy that underlies, interpenetrates, and precedes our physical form.”

**Illness Symptoms**

The following is a breakdown of the illness symptoms some of these healing practitioners have seen in their work with women survivors. (Please note that all of these are direct quotes, but in an effort to avoid too many quotation marks, I have used them sparingly.)

Norma Burton has noted an overactive or overpassive will; “sensitivity going into the unconscious”; promiscuity; “promiscuous boundaries ... and the great lack of boundaries ... like sharing too much in inappropriate contexts”; “defensiveness”; “the shoulders and neck are carrying the weight of things”; “the fearful shadow is projected out to everybody around them,” so there is an inability to discern danger or safety; “rheumatism”; “cancer”; “hypersensitivity in limbs.”

Terri Nash has noted the following illness symptoms in her work with survivors: dissonance in their energy field; an “implosion in their energy field ... like a black hole, energy is being lost”; hearing that “their soul will resonate with ‘I don’t have a right to be’, ‘I don’t have a right to exist’”—something she said was “a very common thing I hear in ... survivors’ energy fields.”

Maureen Chase sees the following symptoms in women survivors (each of these symptoms are direct quotes): multiple personality disorder; post-traumatic stress disorder; anxiety; chronic depression; chronic muscle tension; kidney and bladder problems; thyroid problems; hypervigilance; substance abuse; sleep disturbances; fear of intimacy; “fear of physical training”; numbing; powerlessness; “fear of God as a father figure”; “suicidal ideology”; “perception of the universe as very limited”; malaise; detachment and isolation; amnesia; chronic fatigue; autoimmune problems; “difficulty with the concept of evil.”

Peter Churchill has seen the following illness symptoms in his work with survivors: chronic depression; self-doubt; guilt; “arming in the fascia where the connective tissue will literally thicken and tighten to protect them”; headaches and migraines; gastrointestinal disorders such as constipation, diarrhea, tightening in the gut; reproductive problems; trouble with ovaries, cysts, PMS problems.

In her work, Gail Byrnes has seen the following symptoms: sleep disturbances; trouble with intimate relationships; menstrual issues; fertility issues; anxiety; depression; history of promiscuity or self-abuse; substance abuse; cancer.

Marcia Hood has seen the following symptoms in her work: rigidity; shallow breathing; “inability to connect from the waist down”; pelvic and leg problems; low back problems; digestive problems; tightness in the shoulders and neck; headaches and migraines; “immune stuff, the adrenals, pituitary”; vision problems; hearing problems; TMJ Dysfunction, clenching, and grinding.

Alysia Trombla has noticed the following symptoms during her work with women survivors: difficulties with sexual organs; “the voice is missing in action”; “eyes that don’t see because they see too much, eyes that meet the world veiled, like they don’t belong”; circulation issues in ankles, legs, hips, spine; dental hygiene because “the vagina and mouth are the same.”

As Norma Burton explained to me, there is no one type of woman survivor. There are women from all cultures and all social and economic classes. Each of these healing practitioners also stressed that it is not only women who are abused and that they treat both men and women. While it may be that the ways in which they work with abuse survivors, whether male or female, is the same, my focus was on women, and it is from that perspective that I present this data.

**A Healing Experience**

The 9th House is a center dedicated to many forms of alternative healing: Pilates, Alexander Technique, Astrology, Palmistry, Connecting with Your Power Animal, Plant Spirit Medicine, and so on. It is a yellow house with a red door trimmed in purple situated just over the Cambridge border in Arlington, Massachusetts. The atmosphere is pervaded by a sense of calm. There is a receptionist, as in any other clinic, and a waiting room with plants, a fountain, and an air purifier. Each chair has a correct spinal alignment back pad for sale. Walking through the small foyer after being buzzed in, I noticed a staircase and a small table with flyers, a newsletter, and a vase of fresh flowers.

I waited for Gail Byrnes in the waiting room. She hadn’t arrived yet. I busied myself with taking multiple copies of the flyers and newsletter. The walls were painted pale yellow. A room with an open door contained a big round ball used in Pilates exercise
techniques. Magazines hung in a rack on the wall. A big black stuffed panther sat on the floor between a couple of chairs. Soothing flute music played through the speakers.

Gail arrived, settled in, and then led me up to her work room. Upstairs the rooms are painted blue, green, purple, peach, a wonderful and yet soothing array of colors. Her room was painted light blue, with two posters of the Pleiades and a galaxy hanging on the wall. Some plants. Many instruments along the far wall. A work table. Two chairs. I sat down and we decided she would give me a plant spirit medicine treatment before the interview so that I would more fully understand her work.

Part of the treatment is for her to take a protocol. She asked a series of questions about my childhood, why I was there to see her, whether I took any medications, my sleep patterns. In addition, she paid attention to my body language, the way I looked, my mannerisms, all of which will help her in her treatment. This can take about an hour. I told her I had a terrible childhood, about my sexual and physical abuse, my father kidnapping me from my mother when I was five, my mother’s illnesses. I told her that I usually awoke every day between 4:00 and 5:00 AM, which she said was “grief time.” I told her I don’t usually have restful sleep, that I work in my sleep, that I dream a lot.

After the protocol I sat on the work table. She asked how I would feel if she used sound as part of the treatment. Not really knowing what she meant or how she meant to use it—except that I have had some knowledge from other healing work about sound bowls, tuning forks, how sound can be so effective in healing—I said sure, whatever she thought was best. She first examined my neck and vertebrae, asked if there was any pain. No. Then I lay down. She put a blanket over me and looked directly into my eyes. She asked me if I wanted an eye pillow to cover my eyes. Yes. Smells of lavender. She said she would be taking lots of pulses, lots and lots of pulses. She takes pulses on the left hand, then on the right hand, writes them down. To administer treatment, she lays her right hand on my forehead and her left hand on my womb. Her hands remained still or moved slightly up and down. Then she took my pulses again on both hands. She repeated this procedure about eight or nine times. The treatment is administered through her when she lays her hands on my head and stomach. Changes in pulse tell her whether or not I am receiving the treatment, how I am receiving it, whether I am resisting the treatment, and how much more she needs to administer the plant spirit medicine.

When she first laid her hands on me, and I knew I was receiving the treatment, I wanted to cry. I just had this welling up of emotion and thought I was going to lose control of myself and cry. She asked if I was alright. I told her the feeling of wanting to cry, and she said it was normal when receiving treatment.

Not many images came to me during this treatment. I had a growing sense of calm, of quiet inner strength, and, late into the treatment, of a desire to move, to stretch my legs.

When she had finished the treatment proper, she shook a rattle all over the area around my body. After she stopped rattling, I felt her put a bowl on my stomach. She hit it and the sound of it resonated through me. She put another smaller metal bowl on my heart, two on either side of my head on the table, and two at both sides of my feet. She then proceeded to sound them all, and all that came to me was “the music of the spheres,” thinking that this is what it must sound like. For someone to resonate my body to the sound of bowls was one of the most beautiful experiences I have ever had. After the bowls she used an instrument I forgot to ask her about, which sounded like a wind chime with light, tinkling, lovely music, and she did this primarily around my feet. Finally, she sounded a drum above my body from head to foot. The drum vibrated my skin and went right through me. She also hummed while using the drum. After, I started to cry because it was so beautiful, this type of healing, so gentle, and I felt held by the powers of the drum, literally held by that warm and strong vibration.

**How Healing Practitioners Work with Women Survivors**

Based upon my preliminary correlation of the data, I’ve identified three broad areas that elucidate how these healing practitioners work with survivors. The first area is **psycho-spiritual**, a term I borrowed from two of the healing practitioners (Norma Burton and Terri Nash); the second area is the **creation of safety**; and the third area is **reawakening the body**. These do not represent a linear progression of any particular prescribed model for how such healing takes place, but show us the different ways in which the healing practitioners have identified the kind of work they do with women survivors. These areas are also deeply interconnected.

**The Psycho-Spiritual**

In the first area of the psycho-spiritual, the healing practitioners work with abuse survivors in the following ways:
1. “Hearing the story,” Alysia Trombla noted the importance of women telling their stories of abuse when she said, “Allowing a woman to hear the sound of her own being and to have it acknowledged by another is absolutely the cornerstone to all healing, male or female.”

2. Alysia also noted the importance of “Addressing the participatory event” and the shame that inevitably results from it.

3. Maureen Chase highlighted the importance of “Recognizing the introjected perpetrator” because, while the perpetrator was once outside, it enters one’s consciousness and one’s being and becomes introjected inward instead of projected outward.

4. Through trance and prayer, Norma Burton recognized the importance of working with a woman’s individual “symbol system” through dreams and shamanic journeys, as well as working with her spiritual allies.

5. Terri Nash illuminated her work as “Listening to their energy field for the vibration of their highest and purest essence,” and “making the largest possible shift in [that] energy field,” and “Asking them to align their will toward healing because without their willingness to heal, their energetic adjustment of where they are stuck becomes another violation.”

The Creation of Safety
In the second area, the creation of safety, all the healing practitioners stressed the deep need for women to feel that they have a place of safety in which to begin to work with their abuse. For the healers, this means in some cases helping women to create a protective shield around their bodies (which is connected to the third area, reawakening the body), helping them to create healthy boundaries with other people and in all their life situations, and offering them a safe space where they can release their armoring, because as Marcia Hood and Peter Churchill explained to me, the fascia, connective tissues, and muscles around certain organs will harden and become like a kind of body armor.

Also important in the creation of safety is in giving women a space (in these cases the actual office or healing space of the healing practitioner, which also appears to mean a kind of safe haven) where there is permission for “anything that the body has or feels ready to reveal is okay,” and in being as non-judgmental, as unconditional as possible (Marcia Hood).

Reawakening the Body
In the area of reawakening the body, the healing practitioners do what they can to bring integrity back to the body. As Alysia Trombla phrased it: “first things first . . . get them [meaning their souls] in their body. Help make the body the temple again.”

Most of these healers perform some kind of laying on of hands in their work, and it is mainly through their hands that they run energy. However, two, perhaps three, of these healers know how to work with energy remotely, so they never have to touch a woman in order to make shifts in her energy field.

As several of these healing practitioners noted, for some women survivors, even allowing a healer to lay on hands is a profound step toward bringing integrity back to the body and reestablishing trust. These practitioners also encourage women to begin to breathe, and to breathe properly. Now, this may seem small, inconsequential. But for women survivors of abuse, learning how to breathe again can be both terrifying and profound.

The Reverend Maureen Chase encourages body movement that empowers, such as martial arts, yoga, qi gong—ways in which a woman begins to inhabit her whole being without fear, terror, shame, or denial, or to not “live from the neck up.” Maureen also encourages singing or chanting which can cleanse the cells and strengthen one’s personal voice. She also noted that in her work she tries hard “to bring a calm to the nerves.”

The Meaning of Spirituality
What is unique about these many different kinds of healing is that these healing practitioners focus on spirituality. What spirituality appears to mean in these various healing modalities (and I cannot fully speak for acupuncture here, because I believe it is a much more complex system), based upon my preliminary data and from asking the healers if they thought their work to be religious or spiritual in nature, is the use of prayer, trance, and their work directly with allies on nonphysical (and in some cases physical) levels of reality, both their own allies and those of survivors. Thus, spirituality can be defined here as working with the nonphysical allies, of which there may be different forms and identities, such as the spirits of plants, animals, spirit guides, angels, and the many manifestations of the Divine. As Terri Nash put it: “My work is spiritual because I acknowledge there is a reality beyond form that can be experienced and can be entered into as co-participation in the process of healing work.”

As McLaren noted in the opening quote, abuse survivors stay sick for a long time before they find themselves on the road to living healthy lives. I also think the reason these sicknesses can last for so long,
be healed, and then something else arises, may be because, as Marcia Hood explained to me:

Healing is multidimensional and it means numerous people, it means numerous techniques from the psychotherapist to the body worker or the spiritual healer . . . we are multileveled. And if we leave out one level, do the mental and spiritual work and leave out the body, it’s not going to work because our body’s going to go into dysfunction. If we do the spiritual and bodywork and leave out the mental we are going to go into depression or some kind of emotional dysfunction (italics mine).

Notes
2. In his introduction to Myss’s book, Dr. C. Norman Shealy states that “There have been, throughout the ages, talented intuitives and mystics who have sensed the power center of the human body. . . . Caroline tunes in to the subtle energy of our systems and reads the language of our electromagnetic being” (xii). A simpler and more familiar way of understanding a medical intuitive is to recognize that they have the perceptual ability to see and know the state and welfare of someone’s energy field, a field invisible to the untrained eye. Myss describes her initial experiences as “getting . . . impressions” from people “like impersonal daydreams that start to flow as soon as I receive a person’s permission, name, and age” (2).

Bibliography and Further Reading