THOSE OF US FORTUNATE ENOUGH to engage in a life fully lived will find it nearly impossible to escape from this world without experiencing moments of significant pain. According to the Buddha, “When touched with a feeling of pain, the ordinary person laments . . . becomes distraught . . . contracts and so . . . feels two pains . . . just as if they were to shoot a man with an arrow and, right afterward, were to shoot him with another so that he would feel the pain of [both] . . .”

The first arrow in this teaching represents necessary pain. The second one represents unnecessary suffering and trauma. It is our fear about pain that creates this second arrow, a fear that creates a fertile landscape for chronic pain, distress, and anguish. As pain sufferers, we become so frightened of pain that we recoil from feeling any bodily sensations. It is as though we believe that by feeling our bodies we will
be destroyed or, at the very least, our conditions will worsen. Hence we remain stuck and so shoot ourselves with the second arrow.

In this volume, we hope to provide you with the skills necessary to begin to help take the fear and hurt out of your pain. This program provides you with the means to prevent chronic pain from developing in the aftermath of common life events such as accidents and surgeries, as well as to release unresolved pain that has been held in the body from past traumatic events.

It is our shared vision that, with the guidance of this program, you will start to free yourselves from unnecessary suffering. Our wish is to support your transformation of pain into an empowering energy that allows you to embrace your life fully, with purpose, and with freedom from pain.

If you are reading this book, we’re imagining that you’ve been struggling with pain or that you care about someone who is. More than likely, you have in mind important questions and concerns that you want to make sure are addressed in this program.

We want to assure you right from the beginning that our purpose is to introduce you to practical, effective strategies distilled from working successfully with many different pain problems over the years. Practice exercises sprinkled throughout our program, beginning with this first chapter, will help you understand the main principles and further evolve related techniques into integrated skills.

Some of the important questions we will answer include:

• What does the latest research teach us about how to resolve pain and suffering?
• How do I prioritize my many needs so that I stop feeling overwhelmed and can begin to reduce my pain right away?
• Will this approach work with my specific type of pain?
• How can I get the support I need from professionals who work with me, as well as from my loved ones?
Why We Hurt and How We Suffer

• How can I make decisions about medical interventions including medication and surgery?

We’ll begin now with a foundational question—what is pain, anyway?

WHAT IS PAIN?

Pain, first and foremost, is a signal to let us know that we have been injured or are ill. Pain can also arise from tension and discomfort caused by how we respond to stress and threat. When we are threatened physically, emotionally, mentally, and spiritually, our nervous systems automatically react to ensure that we are protected from harm or injury.

In its purest form, pain is an essential part of our natural survival system, warning us that something is wrong and motivating us to give our body urgent attention. Pain signals are sent from nerves in the part of the body that has been injured to the brain. No pain is felt until the brain has interpreted the information it has received.

Many parts of the brain, as we shall see, collaborate in turning on pain as a survival response, including areas that govern past memories, emotions, and mood, as well as future intentions. Meaning and importance of the pain are also part of the pain picture. For instance, the same hand injury might mean something very different to a professional pianist than it does to an amateur volleyball player; therefore, both individuals may have drastically different pain experiences. That is why each person’s struggle with pain will be unique, and why we actively encourage you to find the exercises and concepts in this program that work best for you.

We will be studying three types of pain in this program: physical, emotional, and posttraumatic. Physical pain is due to actual injury and tissue damage. Emotionally based pain is formed by strong, unresolved emotions that we have “stored” in the body instead of healthfully expressing them. Finally, posttraumatic pain is generated from much stronger reactions to overwhelming, terrifying, or devastating events.
These three types of pain are categorized according to their root causes, which also often correspond to how they appear or present themselves. For example, following an accident or injury, your primary concern will almost always be the localized physical pain you experience. When you suffer the loss of someone you love, as expected, you will struggle with emotional distress that might include sadness, grief, fear, anger, rage, despair, or some combination of these feelings. And, after being assaulted, threatened with rape, or surviving a fire, flood, or tornado that results in the loss of all your belongings and perhaps even family members, you more than likely will be overwhelmed by posttraumatic reactions that might include insomnia, panic attacks, sensory flashbacks, or systemic or stress-related pain such as migraines, depression, helplessness, and hopelessness.

Although these three classifications have obvious distinctions, one of the keys to treating pain successfully is the recognition that these three basic types overlap each other. Pain then is multi-dimensional. For example, many physical pain conditions include emotional reactions and interactions with past trauma. Most emotional pain conditions will also feature somatic symptoms such as physical pain and links to past traumatic events. And posttraumatic conditions involve a complex combination of all three types of pain responses.

So in addition to presenting ways to help you achieve freedom from these three types of pain, we will also help you understand some of the complexity that may be driving your pain and preventing you from healing. Because most pain complexity is linked to trauma, we continue our opening discussion with important perspectives on trauma.

**WHAT IS TRAUMA?**

There are many theories about what trauma is. However, most definitions emphasize that the traumatized person has been exposed to one or more life events involving actual (or perceived) threats to survival or physical wholeness, and where the individual’s reactions included
intense negative emotions like fear, helplessness, loss of control, and/or terror. Traumatic events are basically of two types—a single incident (such as an accident or injury), or multiple, ongoing events like those involved in repeated childhood emotional, physical, or sexual abuse, and/or neglect.

Studies of animal responses to threat have helped us better understand how these kinds of responses are resolved and released. Animals in the wild encounter numerous incidents of threat to their survival each day, yet generally seem to display no residual signs of trauma. From what we know, animals in their wild habitats are only concerned with what is happening right now. They do not worry or dream about the future. They do not regret or pine for the past. They are always “in the moment,” so to speak. After the threat has passed, they give themselves time to “discharge” or release the energy generated by the threat, and allow themselves time to settle. This is what we will be teaching you to do in this program: to become aware of your heightened physiological responses, to learn and practice a variety of techniques to discharge energies related to high-threat arousal, and strategies to give yourself time to settle from this activation and return to equilibrium.

The main difference between wild animals and human ones in terms of trauma is that animals complete fight and flight responses that allow them to fight back against what threatens them or to flee and escape the source of threat. Then they spontaneously shake off any residual stress effects through a series of shaking movements. It is after these involuntary trembling movements reach their natural conclusion that animals are able to become fully mobile and return to life as usual. They are also freed from the aftereffects of traumatic stress.

We human animals, however, often cannot escape or fight back, and have been conditioned not to allow our bodies time to “shake off” the aftermath of threat. We then often shift into the freeze response. Remnants of the fight, flight, or freeze response, when not released from the body, leave us in these heightened and inhibited physiological
states. In order to try to integrate back into society (where we often receive the message to “just get over it”), we try to suppress these urges to fight back or flee. This avoidance can create more physiological constriction and psychological dissociation, the foundation for many pain conditions.

During this program, you will learn more about the somatic reactions that set the stage for the evolution of stress and pain disorders as well as ways to free your body of their effects. The unique contribution of the Somatic Experiencing model to the treatment of pain and trauma is the understanding that trauma exists in the nervous system and the body, not in the content of the traumatizing event.

The Freedom from Pain process emphasizes “bottom-up” approaches, or healing from the body level up to intervene in related thoughts, feelings, and perceptions. To accomplish this, you will learn a series of skills related to first identifying and then regulating your pain sensations. This will allow you to gradually break free of the pain trap that may be blocking your recovery (see page 19), and eventually release the intense energies trapped in the nervous system so that they can be transformed into resilience and flow.

**THE LANGUAGE OF SENSATION**

In order to recruit your body as your ally in securing freedom from pain, the first step is to learn how to communicate with your body so that you can create a healing, collaborative partnership. In other words, you will need to figure out how to shift your body from painful enemy to invaluable resource.

Although it’s obvious that the body is important to the healing process, many people in pain have trained themselves to disconnect from their body experience in a defensive attempt to avoid feeling more pain. Yet leaving body experience out of your healing equation will greatly limit your healing possibilities.

During this program, we will teach you to develop the *language of sensation* so that you can recognize the wisdom of your body in terms of the important information and feedback it provides. The *felt sense* paradigm
of Focusing, developed by philosopher, psychologist, and researcher Eugene Gendlin, provides a map for learning this new language.¹

The felt sense utilizes the language of body-mind communication and serves as a kind of radar or navigation system, letting us know instantly about elements of our internal and external environments and how they are affecting us in the current moment. Understandings from Somatic Experiencing and our Freedom from Pain program will prepare you to listen to and interpret this language as guidance, relayed to you immediately through your felt-sense radar.

You can learn, step-by-step, to decode the power of the unspoken voice of the sensate communications your body transmits. This will enable you to follow your body’s primitive, nonverbal pathways to discover actions that you can take to release the shock of trauma and pain. Tracking these kinds of sensory, nonverbal clues can also lead you to resources of expansion that can relieve your suffering and help reset your nervous system to support balance and new awareness.

**First Steps**

As part of your Freedom from Pain program, we recommend, if you aren’t already, engaging in gentle movement, such as stretching, qi gong, tai chi, or a gentle, restorative yoga class for people with injuries or disabilities.

Receiving gentle massage can also be helpful.² As you explore your body experience with the help of an experienced masseuse, you can begin to realize numerous important pain connections. For example, you may recognize that the pain in your shoulder or neck may actually start down in your hips and back. The pain in your back could also originate from constriction in your ankles and knees. Massage can help you relax and also become aware of how various types of tension in your body create the pain.

In movement classes, you can practice the same principles, by moving slowly, and beginning to become aware of the tense muscles in the center of your body, and then the muscles at the periphery. Also note any images or feelings that you may have as you slowly
allow yourself to release the tension through the gentle movements you are experiencing.

Our caveat is that massage and movement practice should never be painful (or that the pain should dissipate quickly and you should feel less pain afterwards). You must take care never to let your massage or movement practices become so intense that you have to ignore or push through the pain.

The first stepping stones on this journey are often ones of invitation and permission for simple exploration, using little more than innate curiosity and focused attention. This first exercise will help you begin to reconnect with and re-inhabit your body, which you may have abandoned to the ravages of pain and trauma. Although this may sound like a major undertaking, our message is that there are simple practices that can help you befriend your body and its unique resources.

EXERCISE: Re-Inhabiting Your Body

Let’s start with a part of your body that is not painful. It’s important to note that no matter how long you have been in pain, there is always a place in your body that is relatively pain-free. Granted, this part of your body may be small and off the beaten path, so to speak, like the inside of your forearm or the palm of your hand. Wherever it is, find and feel the lack of pain, the pleasure or comfort, or at least the neutrality of sensation.

Now allow yourself to feel an area where your body hurts. Take this at your own pace, and if it’s too intense, find an area that is less painful, and one that you can stay with more comfortably. Gently sense the contours of this area by breathing into it, and then see if you can let go of pain or tension as you exhale. Some of the sensations you may find are tingling, burning, warmth or heat, coldness, sharpness, stabbing, or aching. Whatever sensations you discover, just notice how they change with your awareness and breath.
Next, return to the pain-free area you identified before, sensing into it as you breathe in, and then letting go of what you sense there as you breathe out. Repeat this several times. What are you finding now in this area of the body that you did not find before?

Using your breath, shift back and forth, visiting several of the more painful places in your body, and then the more pleasant or pain-free places. Pause at each, sending your breath to re-inhabit it, and letting go of all effort as you exhale.

Record your responses to this exercise in your pain notebook.

**BILL: BEGINNING THE SENSATE JOURNEY**

Bill discovered the tools of invitation and permission in his first consultation session, which he had scheduled to evaluate the persistent nerve pain just below his right scapula following a serious bicycle accident.

Bill was pacing, his face guarded as he waited to find out how this appointment would be different from the numerous sessions with the acupuncturists, physiatrists, orthopedists, osteopaths, physical therapists, kinesiologists, surgeons, and medical doctors he had already experienced during the seven years following his bicycle accident.

Describing the site of the pain, he commented, “It’s hard for me to believe I still have this. No one can find a reason for this pain.” As with so many pain sufferers, nothing had shown up on any of the X-rays, CAT scans, and MRIs. The only finding had resulted from a nerve conduction test indicating that an auxiliary nerve had been compressed. “But I’ll tell you,” he added, “it’s very real to me. I feel like I died that day I went off my bike. I don’t remember it, but I know it happened, and in that moment, everything in my life changed.”

With some reassurance and encouragement, Bill told the story he had told countless times before. Instead of passively accepting his narration—which is what Bill had experienced in all his previous medical visits—I began to probe for the impact that the story was having on Bill’s body, and, at the same time, initiating the process of resolution.
Bill explained that at the time of his accident, he had been trying out a new racing bike. Hunched over the handlebars, head down, Bill failed to see a telephone repair truck parked in the bike lane (later he found out that there was no orange cone marking its presence), sailed over the handlebars, and crashed headfirst into the left side of the truck’s bumper. Twelve hours later, he woke up in the hospital with no memory of what had happened. After his release, the officers who had been called to the scene told Bill and his family that he had answered all of their questions accurately with the exception of giving them an inaccurate phone number.

When I asked Bill to show me how he believed the impact occurred, Bill got up from his chair and began making movements related to losing control of the bicycle. Knowing that, to be effective, any movements needed to go very slowly to aid in regulation and integration, I suggested that he continue the movements as if in “slow motion.”

After several sequences of movement, Bill commented, “That’s interesting. This is the first time I’ve realized how I must have landed on my right shoulder. I didn’t hit on the top of my shoulder, as I’ve been thinking all this time. It has to be that my body twisted to the left to try to avoid hitting the truck, so that’s why the force of the impact was really right under my scapula where the pain still is.”

Because Bill was helped to connect with his felt sense of what had happened, allowing his body to take the lead, he was able to regain a valuable clue about the site of his pain. Instead of the scapula pain being an indirect, mysterious result of his collision with the truck, he discovered that the area of chronic, lingering pain was likely one of the epicenters of the impact. This connection helped him to make sense of his body’s story.

We also spent time exploring other accidents and injuries seemingly unrelated to the injuries from his bike accident. Bill’s initial response to this inquiry was: “I’ve never really hurt my shoulder before.” However, after a series of probing questions about surgery, accidents, and injuries, Bill realized he had had several related accidents. These included an