



## On Getting Past Square 1 of Our Problems

By Daniel Benor, MD, ABIHM, IJHC Editor-in-Chief

### Abstract

Many times we want to feel better but can't figure out how to make things better. Changing our situation often requires that we change our perceptions of our situation and sort out new ways to move forward. In many cases, the first step of accepting that things can actually get better and starting to look for new ways forward is the hardest one. Our habits of perceptions and our strong tendencies to view our situation as inevitable and unchangeable, block us from even considering making changes. Here are ways to identify your blocks and to begin moving forward.

### Introduction

People often have difficulties figuring out what, exactly, their problems are and how to deal with them in the most constructive ways. We often know we are uncomfortable about certain situations or events in our lives; having difficulties with other people; stuck in patterns of behaviors that are serving us poorly; or in any of many other ways dissatisfied with how things are going for us and wanting to sort them out better.

Our first challenge is to rise above the rut we are stuck in and seek alternatives to what bothers us (Steadman, 1966). While this is easy to say, it is often quite challenging to do, for varieties of reasons.

*I have found it advisable not to give too much heed to what people say when I am trying to accomplish something of consequence. Invariably they proclaim it can't be done.*

- Calvin Coolidge

We are born with a jewel of a personality that has many facets to it. Our nervous system is wired to perceive, process, interpret and store information about the world so that we can navigate our ways through life. A few of us are flexible in these matters, easily taking on board new information and integrating it with the existing mental programs we have developed through our lives. But most of us are slow to perceive, interpret and absorb or reject new information, preferring to preserve, maintain and perpetuate the programs we've inherited and developed for our internal navigation systems that guide us through life. Further along on this spectrum, others are rigidly bound to programs they've developed, and anxious or scared about even considering tampering with rules they've acquired for their internal GPS systems.

As we grow up, we add layers of life experiences to our basic programs. What we are doing has generally worked reasonably well. We've managed to deal reasonably well with daily requirements

and ongoing life tasks and challenges. So the ways we address our issues become routine habits that facilitate our navigating through life. This is the positive aspect of developing such life routines.

The challenging aspect to such habits is that life tends to bring us new issues that may be best addressed with new approaches on our part. However, our habitual ways of addressing problems in our well-practiced ways are far easier to follow than to develop new approaches and strategies. Furthermore, our well-established ways of behaving feel right and best to us because they are familiar and have worked well in the past.

Even more challenging are our attitudes about dealing with life issues. We and those close to us come to feel that our manners of coping are the right and best ways for dealing with what faces us. New approaches we might introduce carry many unknown factors and consequences. They also may feel odd or wrong, relative to the ways we have been addressing our problems till that point. Further layers of stultifying influences come from family and friends, who tend to have the same habitual approaches we do, and who are not on board with our considering new ways to interpret and do things.

## 1. Habits

Habits of perceptions, conceptualizations and behaviors are often the first clues that blocks may be present. Such automated habits of awareness become so much a part of our routines and consciousness that they feel like they're actually the way the world IS.

"I'm stupid, so there's no use my trying to study/ pay attention in school/ do my homework." – leads to lack of motivation and efforts to learn and improve our situations.

"Don't talk to strangers because they might be dangerous." – leads to being cold and unfriendly to strangers, who then respond to us in a mirror manner.

"People with a skin color/ culture/ social class different from ours can't be trusted." – leads to social class prejudices and discriminations.

"My back (or any other part of my body) is hurting." – leads to just addressing the physical sensations and associated problems, ignoring that our body is not just a vehicle for who we are, but also expresses the tensions and disharmonies of our emotions, mind, relationships and spirit.

"Conventional medicine/ a particular type of psychotherapy or other treatment/ our culturally familiar and comfortable approaches to healthcare and other aspects of our lives are the best/ only ways we should be dealing with our life issues." – leads to ignoring and excluding of whole worlds of ways we might do better for ourselves and others.

## 2 Looking outside our boxes

*I can't understand why people are frightened of new ideas.  
I'm frightened of the old ones.*

- John Cage

I've been bemused and saddened to find that relatively few people are open to even listening to ideas and suggestions for dealing with their health problems and adjustment issues through using approaches that address the emotions, thoughts, relationships and/or spiritual issues in their lives. These issues often express themselves as tensions which can lead to muscle spasms and other body

symptoms. Western medicine focuses on the symptoms, rarely considering various stresses and tensions from other levels of people's beingness that create, perpetuate and worsen the symptoms.

Here is an example of the most typical sort of response I get from most people with pains. They totally attribute their symptoms to physical causations and will only address them through medications or through physical interventions.

'Shelia', who worked as a legal secretary, was a devoted mother to three lovely children and wife to a hard-working and very supportive husband, was suffering from pains in her neck and shoulders that made it difficult for her to do much of anything at home or work. Pain medicines and muscle relaxants relieved some of her suffering, but she couldn't find any medications that didn't produce insufferable drowsiness, fuzzy thinking or other intolerable symptoms.

I met Sheila socially and shared a bit about my ways of helping people explore the stressors behind the symptoms they were suffering. I explained that just talking about these issues very often relieved within minutes symptoms like those she was suffering. She responded with a polite, superficial show of interest, but could obviously not relate her condition to what I was sharing.

That is the almost universal sort of response I get from healthcare practitioners. Not only are they uninterested, incapable and/or unwilling to consider something new and different from their current practices, but they are certain that their particular caregiving modality is the best way to help people deal with their problems.

The second most common response I get is from people who appear to be mildly interested, but actually unwilling or perhaps even incapable of engaging with a new approach.

'Tom' was a nurse in the hospital where I recently spent a few weeks being treated for pneumonia. During a late evening medication round, he groaned and winced when he bent over to hand me my pills, rubbing his back with his other hand, obviously from discomfort of back pain.

Tom was intrigued when I shared with him that I help people deal with pains in ways that brought very quick responses. I offered to give him a simple, quick demonstration and he promised to return after his med rounds. He was astounded when his elbow pain, caused by a careless bang on the headboard of a bed, went from a level 7 (out of 10 as the worst possible pain) down to a 3 just by asking his pain what it wanted him to know about his life. He promised to return to learn more about how to use this method. But he never made the time – on that shift of several others afterwards.

The third, sadly a less common response I get is full, genuine interest and investment in learning and using pain relief methods.

'Betty' was a part-time copy editor for a newspaper who worked from home, as she had two young children she was caring for while her husband, a truck driver, was away from home a lot. She suffered from carpal tunnel syndrome that had grown increasingly painful over two years, and had found no pain medicine that didn't cause drowsiness or other intolerable side effects.

I met Betty socially and her eyes lit up when I mentioned there were methods for self-healing she might explore. We had a phone session the next day, in which I introduced her to TWR/ WHEE\*, which is a method I developed for self-healing. The basic steps are very simple: 1. You alternate tapping on the left and right sides of your body; while 2. You focus your mind on your problem; and 3. You make a strong positive statement about your situation. 4. You install a strong positive statement about your life to replace the negative issues you have released.

Within minutes, Betty was able to clear her pain completely. She also taught her husband and children how to use it, with similarly positive effects.

### **Why do most people remain locked in so many limiting belief systems?**

There are countless answers to this important question. I review just a few of these here.

#### ***Habits of consciousness***

As discussed above, most people are utterly content to live with the rules they've developed through life for interpreting their inner and outer perceptions and awarenesses. They assume that the ways they experience the world and understand their experiences are absolutely the ways that reality exists.

Anything that deviates from their established comprehension of the world is perceived and interpreted as being wrong. There are strong personal, family, and cultural habits here that are experienced as inherently true and beyond questioning. Anything new is considered to be untrue, impossible or propaganda from 'others' who don't understand the way the world is and how it really functions.

I, myself, have experienced this in glaring ways. I suffered abuses in my early childhood from my mother, a sole caregiver. I was in the terrible position of having no one else to rely on for help, while suffering in ways that strongly suggest (in retrospect) my mother had suffered similar abuses. It took 70 years for me to come to a place where I could allow myself to recall and deal with these abuses. While these traumas sensitized me to be able to recognize and resonate with other people's traumas, this was all without my conscious awareness of my personal suffering that had sensitized me so that I could resonate in these ways with the pains and distresses of others.

#### ***Limited abilities to introspect***

It is estimated that 80-85% of the population are not sensitive to their feelings and other, inner wholistic processes and awarenesses that are outside their thinking processes. It is like being color blind to parts or all of the visual spectrum. They live in their heads, following logical rules they've acquired through their lives (Aron, 1996; Zeff, 2004). Anything that does not fit their logical explanations and understandings of the world are simply rejected.

#### ***Economy of efforts and energies***

To sort out, clarify, and assess the relevance of new ideas and experiences can be a major task – not to mention the efforts involved in incorporating these into our worldviews and live patterns. Far easier to brush them aside as irrelevant, untrue, or simply as being outside our belief systems and therefore not worthy of consideration.

#### ***Control issues***

Many people feel that their lives are strictly of their own choices and construction. To accept suggestions from others to change their beliefs and behaviors are experienced as uncomfortably intrusive and inappropriate.

#### ***Social conformity***

People with inflexible views, attitudes and behaviors often come from families and social groups who have similar perceptions about the world and of how to navigate one's way through life. Any innovations or deviations of an individual in such groups are discouraged.

#### ***Reliance on authority figures and social institutions***

Many are raised in families and cultural groups where adherence to the opinions and dictates of authority figures in these groups are strongly reinforced. To introduce something new in one's

opinions and/ or behaviors, if it is in any way outside the norms of the family or social group is strongly discouraged.

### ***Cognitive and emotional attachments to beliefs and practices***

Many have shared that they've learned to avoid discussions of politics and religion when sitting together with people with whom they very quickly get into heated arguments when discussing these topics. They agree on a detente where they accept that they have irreconcilable differences of views and opinions on such topics, and otherwise are able to get along amicably.

### ***Unspoken anxieties***

Doctors, particularly in the US, also work under the liabilities of being sued for medical malpractice. Deviating from established protocols for treatments and introducing new and innovative approaches to caring and curing, particularly when there are, as yet, few or no studies to support their efficacy, leaves them at risk for criticisms from their colleagues.

### ***Benefits from promoting strong, firm beliefs in exclusivity of approaches***

Many cultures encourage people to study and practice particular modalities and approaches for dealing with life issues. Practitioners of medicine, psychotherapy, and various trades acquire their expertise in institutions that equip them with narrow ranges of modalities. Promoting their particular variations on the themes of their work enhances their income and security. So, they tend to tout their ways of dealing with things and to claim these are superior to the approaches of different practitioners.

In these and in other, similar ways people get locked into explanations and practices for dealing with life that conflict with those of others who are similarly locked into their own, differing ways of coping with life. Sadly, it is generally rare for there to be acknowledgments that each and every approach to life is a choice and an option rather than the best way to deal with what comes our way.

Both the patients and the practitioners lose out on broader, more inclusive and varied approaches that provide broader ranges of possibilities for people to understand and adapt to life's challenges.

### **Expanding our focus: Wholistic healing and individualized approaches of complementary/ alternative medicine (CAM) therapies**

These are broader, more inclusive approaches for dealing with life's processes and challenges. They help you identify more complex aspects of your problems related to your physical body, energy body, emotions, mind, relationships with other people, relationships with your environment, and spirit (Benor, 2019). They also invite you to identify many more approaches for addressing your life issues.

When we open to this broader spectrum of options, we enormously expand our horizons. We move beyond the narrow, exclusive focus that blocks us from identifying causes and cures for our life issues.

Many readers search for actionable answers to their problems. They want specific steps they can take to deal with problems and to improve their lives. In line with the focus of this article, this discussion provides more suggestions for how to go about searching out solutions than providing step by step actions.

Revisiting some of the locked-in belief systems above, here are some ways to move forward:

### ***Consider: Expanding habits of consciousness***

You may enjoy visiting foreign lands, seeing ways that people in cultures different from your own

navigate through the challenges of life. Similarly, you might consider exploring worlds of approaches to life's challenges that are different from your habitual ways of dealing with problems. You may discover new inner horizons and destinations, and for new maps and ways of searching them out.

I offer here an example of just one out of countless approaches that explore causalities for people's problems that help with physical problems by addressing issues that go way deeper than the ordinary, physical level of causality.

Judith Swack, PhD, developed Healing from the Body Level Up (HBLU), an approach that delves in much more detail into causalities underlying physical symptoms.

I can testify personally to the efficacy of Dr. Swack's methods. My trachea was malfunctioning and allowing aspiration of some of the liquids and food I was swallowing, causing several bouts of pneumonia. I was placed on tube feedings for several months through a tube surgically inserted in my stomach. I recently had a surgical replacement of my percutaneous endoscopic gastrostomy (PEG) tube, which is ordinarily a relatively minor procedure. This left me with unexpectedly severe, debilitating abdominal and chest pains. In a phone session with Dr. Swack my pains were decreased within three minutes from an intensity of 9 (with 10 being the worst it could possibly be) to a 2 – by focusing on the tensions in the fascia (connective tissues) around my stomach.

Judith Swack shares here a few further examples from her extensive experience in practicing and teaching these methods.

- I have found that you need to muscle test (check intuitively) each tissue in the area of the surgery and clear trauma from each tissue. For example, if there was an incision you would need to muscle test (do intuitive assessments) and ask separately if there is any trauma to the skin, fat underneath the skin, fascia, muscles, blood vessels, nerves, tendons, ligaments, bones, lymph vessels/nodes, organs, and scar trauma. This is where a knowledge of anatomy is helpful.
- I had a man last week who had had a heart attack. His doctor told him he had damage to the heart muscle (as indicated by his EKG.) He muscle tested negative for trauma to every heart related tissue, so I treated him to sensitize the autonomic nervous system to accurately read the heart tissues. After that we were able to find and clear trauma in the parietal layer of the serous pericardium.
- I also had a man who had been treated with extreme chemotherapy and radiation for throat cancer, and he could no longer swallow because his swallowing muscles were damaged. He was being fed by a tube through his torso. He was only able to sip a little water by mouth. Using an HBLU I protocol for generally clearing physical injury trauma from the chemotherapy and radiation, I google searched and got a diagram of the entire swallowing mechanism and muscle tested every nerve pathway and tissue involved in swallowing. I treated every tissue that carried trauma with JMT tapping. He had been going for physical therapy to relearn how to swallow for 3 months at that point, but after I treated him it said his swallowing reflex was back on line. I suggested he wait to test it till his next appointment with the physical therapist. At that appointment they discovered that he was able to swallow and removed his feeding tube that day! (Swack, Web ref)

***Consider: Moving outside your regular approaches to introspection***

It is estimated that 15-20% of the population are highly sensitive to their feelings and other, inner wholistic processes and awarenesses that are outside their thinking processes (Aron, 1996). HSPs are often deterred by the majority of people, who are non-HSPs, from fully expressing their awarenesses of wholistic aspects of their beings, and from living their lives with more flexible guidelines. So the challenge is to develop your awarenesses of these inner resources you have, to learn to manifest

them more solidly and productively into your life, and to gain confidence in your abilities to create a personal world that is maximally satisfying and productive for you.

Some ways to do this include:

Practice creative problem solving. Allow yourself to imagine new ways you can deal with challenging issues, even if your ideas don't seem logically or practically do-able. Often, when we invite seemingly impossible possibilities to manifest themselves, seemingly foolish and impractical ideas morph by steps or by intuitive leaps into do-able possibilities.

*This is one of my main motivations and delights in my work: helping people open windows of perceptions and conceptualizations to expand their participation in life.*  
- Daniel Benor

I share all of these observations as a participant observer. I invested many years in studying, exploring and developing ways to help others do this. But it has taken a journey of many decades for me to open to engaging personally and applying all of these awarenesses, knowledge and clinical skills to my own habits of avoiding consciousness of my own trauma issues. I doubt I could have done this in the last seven years without the encouragements, help and inspiration from my wife, who is a deeply caring and loving person, and open to these sorts of awarenesses.

### **Consider: Economy of efforts and energies**

*A human being is part of the whole called by us universe ... We experience ourselves, our thoughts and feelings as something separate from the rest. A kind of optical delusion of consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest to us. Our task must be to free ourselves from the prison by widening our circle of compassion to embrace all living creatures and the whole of nature in its beauty.*

- Albert Einstein

Take some time to smell the flowers and to check out what new ideas are out there in the world beyond your ordinary boundaries of existence. Consult with trusted friends and colleagues for their recommendations of their favorite sources for new approaches.

- There are multitudes of helpful journals of complementary/ alternative medicine (CAM).
- Numerous conferences offer you the latest in CAM practices and research.
- The internet is a rich source for such information

The challenge is to identify what is effective and, most importantly, what works for you. Conventional healthcare authorities insist that you cannot rely on information that is not supported by double blind, replicated evidence. While it is reassuring to have that level of confidence, it is impossible to obtain it for every healthcare intervention, in a manner that is reasonable and timely for addressing our problems.

### **Consider: Dealing in new ways with reliance on authority figures and social institutions**

In dealing with people who strongly resist change, I most often find that it's far easier to look for ways around their resistances rather than confronting them.

In the arena of therapy, sometimes one can turn oppositionality into an advantage. By nudging someone who is oppositional towards a direction that is opposite to the healthy one you can see that is just waiting for them to explore, you can stimulate them to rebel against your directives, thereby shifting and considering constructive and healthier options. For example:

- "I have a suggestion, but I don't know if you're ready for it." – provoking the oppositional response of "Show me!"
- "You're so locked into your battle with (your parents/ son/ daughter/ boss) that you can't even think of a step towards making your relationship better." – stimulating "Well, I've sometimes thought of ... but I can't see that it's even worth the effort of thinking about it."  
"So maybe we just have to help you by dropping any hopes of making it better, and work on how you can just live with it."
- In situations that require others to change, when your client is highly unlikely to disengage from negative interactions: "You're so angry with how you're being treated by your husband, I think you're stuck in wanting to fight back, even though you've shared how this always gets you more negativity. I don't know if you're even ready to consider different approaches that might bring about changes."

**Consider: Cognitive and emotional attachments to beliefs and practices**

Where the issue is that you get into heated arguments when discussing certain topics, you might offer your sympathies. "You're clearly feeling a deep despair about this. You're so angry that you can't get your (parents/ daughter/ son) to see how their own behaviors are getting them in trouble, I don't know whether you're able to even think of alternatives to just punishing them."

**Consider: Empathy, patience and acceptance**

Realistically, meaningful change or even mutual understanding are often beyond being achievable. In this case, the therapist's acceptance, empathy and patience for the client may be the only balm available for the wounds the client is suffering from abrasive, bitter and hurtful interactions.

The healing powers of empathy, compassion and acceptance are sometimes surprisingly transformative in dealing with a person's distress and with the impossibility of helping them cope with a person or situation that appears impossible to change. When you share your own experiences and those of others you've seen struggling with similar problems, you offer consolation that your clients are not alone their suffering.

*If you and I are participating in the healing process together, it is my woundedness that allows me to connect to you in your woundedness. I know what suffering is. I also know that you may feel separated from other people by your suffering. You may feel lost, frightened, trapped. My woundedness allows me to find you and be with you in a way that is nonjudgmental. You are not the sick one or the weak one. We are here together, both capable of suffering, both capable of healing.*

- Rachel Naomi Remen

**Consider: Expanding your spectrum of causalities for illnesses beyond physical explanations, to include emotions, mental, and relationship issues**

Any and all of these may manifest as physical symptoms and illnesses (Benor,2019; Steadman, 1966).

**Consider: Life lessons that open us to spiritual dimensions of awareness may be important aspects of health and illness**

Yes, we want to deal with the physical, energetic, psychological, and relationship aspects of our life challenges. And for many people this is all they want in their lives. Be aware, however, that we can choose to respond more deeply to what life offers us.

I have been pleased – beyond all my expectations in these explorations – to reaffirm and learn more deeply about the many paths to healings. In particular, and relevant to many areas of my life, I'm far more keenly aware that a response of "No!" is not necessarily the termination of a discussion on a subject. A "No!" can be a doorway into worlds beyond our anticipation and expectations.



## In Conclusion

You have many choices in the paths you choose to navigate through life. Different approaches may work better for one person or with one problem than those they have been using. Accepting that many people are unwilling or incapable of shifting to new ways of looking at their issues and new ways of dealing with them, hold the awareness that you can seek out those who are more flexible for advice in dealing with problems you are addressing.

## Reflections on the format of this editorial

I am usually given to expanding broadly in my editorials, to include wide varieties of my observations and relevant observations of others. This editorial is much briefer and more succinct. I would appreciate your feedback on which length of discussion you prefer.

\*WHEE: Wholistic Hybrid derived from EMDR (Eye Movement Desensitization and Reprocessing) and EFT (Emotional Freedom Techniques)

AKA

TWR: Transformative Wholistic Reintegration - new alternative name for those who might be uncomfortable with "WHEE" because it sounds trivial to them or might be confused with the video game called 'wii'.

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