

In Consultation

By Linda Graham

A Warm Bath for the Brain

Understanding oxytocin's role in therapeutic change

Q: The couples I see often are in such a state of emotional arousal that they can't calm down enough to do the work of therapy. What can I do to reduce their agitation and help them become more emotionally open, to me and to each other?

A: I know exactly what you mean. Take a recent session of mine. Lisa started yelling at her husband, Andy: "You never talk to me anymore! I'm sick and tired of you never saying anything! You're a brick wall!" He sat frozen on the couch, staring at his hands.

When clients are emotionally worked up, caught in fight-flight-freeze mode, all their hard-earned skills in empathic listening and responsible (and responsive) speaking go out the window. Nothing therapeutic is going to happen until they feel calm enough and safe enough to reengage with each other.

So I quickly asked them to do what I knew would calm Lisa down and reengage Andy in less than a minute.

"Stop! Breathe. B-r-e-a-t-h-e. Place your hand on your heart. Breathe any calm you can muster right down into your heart center."

They did, because they've done this before with me, and they knew it works. "Let yourself relax into that calm. Now remember any moment you can of safety, trust, love with each other, any moment at all. Get the sense of that memory in your body. Feel the love and the trust in your body. Settle into it. Relax and breathe."

In less than a minute, Lisa felt calm enough and Andy felt safe enough to reengage in the work they knew they need to do to rebuild the trust, connection, and intimacy that'll save their marriage.

What happened inside their brains that allowed them to recalibrate so quickly? How can they make it happen again whenever they feel overwhelmed, to give their relationships a chance to heal?

What happened was that oxytocin flooded through their brains. Oxytocin is a naturally occurring hormone, which stimulates feelings of bonding and trust and reduces fear and anxiety by reversing the stress response. Just one of many neurochemicals that neuroscientists now know are potent catalysts of psycho-physiological change, oxytocin is extremely relevant for us therapists: it is *the* neurochemical basis of the sense of safety and trust that allows clients to become open to therapeutic change.

Produced in the hypothalamus, deep in the midbrain, oxytocin is released naturally into the bloodstream through warmth, touch, and movement. Orgasm and breastfeeding generate oxytocin. It also floods our brains and bodies when we're in close proximity to someone by whom we feel deeply loved and cherished. Even evoking memories of people close and dear to us will spark its release.

Do clients need to know how the release of oxytocin calms and soothes them to benefit from its effects? Maybe not. But I've learned that clients love the sense of mastery and agency that comes from knowing not only how the oxytocin response works, but how they can stimulate it within themselves.

Andy reported in the next session that just two days before, Lisa was in a high state of agitation when she was running late getting their recalcitrant 4-year-old son to preschool. He was afraid that saying anything would make matters worse, so he stood in the doorway where

Lisa could see him with his hand on his heart. Lisa caught herself, stopped, met his gaze, and put her hand on her heart, too. He took one step toward her; she took three steps toward him. They melted into a 20-second, full-body, "tend and befriend" oxytocin-releasing hug, and then calmly got their son to school, on time, without further upset.

Lack of warmth and touch in clients' earliest attachment relationships can derail the full maturation of oxytocin receptors in the brain. A deficiency in this "molecule of motherly love" makes it much harder for them to "feel" the love and trust available to them in other relationships, later in life.

Our "reparenting" of clients—allowing them to experience us as reliably secure attachment figures or helping couples experience each other as secure attachment figures—contributes to rebuilding those receptors in the brain, even after years of depression and loneliness. Many times, I explicitly evoked Andy's previous experience of me, and of Lisa, to stimulate feelings of the safety and bonding that were available to him, saying things like:

"I'm feeling touched as I hear you talk about your fears of speaking up with Lisa. I'm so moved that you would share that with me, with us."

"That was quite a lot of sadness you let yourself feel just now. What's it like to feel so much sadness and share those feelings with me? With us?"

"What do you see in Lisa's eyes as you share your sadness with her? What do you see in her eyes as she feels what you feel?"

Scientists are discovering that helping clients shift their neurochemical responses from the fight-or-flight response of cortisol to the calm-and-connect response of oxytocin primes the brain to alter the ways neural networks process emotions, thoughts, memories, and feelings. According to Sue Carter of the Chicago Psychiatric Institute, a single exposure to oxytocin can make a lifelong change in the brain. Therapy offers enough sustained exposure to oxytocin that clients can rewire large segments of implicit relationship "rules."

In other words, by strengthening our clients' conscious ability to stimulate the release of this hormone, we can begin to rewire the deep encoding of habitual, often unconscious, patterns of response to relational distress. The more we do this with them, the more permanent the changes become.

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