

Its Time Has Come: Trauma and Rhythms of Recovery

Rhythms of Recovery: Trauma, Nature, and the Body. Leslie E. Korn (2013).
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As a psychologist and dance movement therapist, I am happy to see Leslie Korn's book *Rhythms of Recovery: Trauma, Nature, and the Body*, appropriate for people who have experienced trauma as well as for therapists working with trauma victims. Most books on trauma are one-dimensional; they may deal with emotions and cognitions but leave out consideration of the body. Or they may deal with the body but leave out consideration of the environment around the body or omit a broad cultural context. Korn's book manages to integrate psyche, soma, and spirit as well as nature, physiology, and culture through the theme of rhythm.

Rhythms are organic: They ebb and flow, balancing expansion and contraction. They grow and then shrink. Dance movement therapists are trained to perceive and work with the invisible rhythms of the self, the self in relation to others, and the self in relation to the larger rhythms of the cosmos. Dance movement therapists, as do folk dancers, know that rituals, rites of passage, and group celebrations maintain the rhythms of community health.

Rhythms are essential for maintaining the ecosystem of individuals, of groups, and of nature. Trauma disrupts these rhythms. Disrupted rhythms lead to imbalances: imbalances of neurotransmitters, of endocrine and mood functions, and of personal and communal relationships. In *Rhythms of Recovery*, Korn looks at three interrelated psychophysiological forms of self-regulation: (a) within the individual; (b) between people, as in the somatic empathy exchanged during the therapeutic dyad; and (c) in the natural world.

Korn personally witnessed and worked in settings where she saw a wide range of trauma and disruption. Her extraordinary background includes years in the jungles of rural Mexico, where she learned from native *curanderas* (healers). It has also included research at the Harvard School of Public Health and the Harvard Department of Psychiatry, research and training with the American Indians of the Pacific Northwest, and expertise in various somatic therapies. She argues in the book for an integrative approach to trauma: "It is essential to understand the universal and culture-specific impact of trauma in a world where migration is extensive. . . . It is essential to develop a common language for communicating across disciplines and to know what each discipline has to offer" (p. xviii).

It is difficult to imagine the traditionally trained American psychologist having knowledge of plants, cross-cultural healing traditions, healing touch, mythology, or neuroanatomy. Enormously sensitive issues arise with Korn's approaches to using touch and venturing outside the normal scope of practice. However, it is essential that therapists start to acknowledge the role of the body and of rhythms in trauma and recovery, to learn about additional therapeutic options and referral resources, and to seek additional training. Reading this book will provide a good start.

Korn begins by grounding her work in her own clinical experience. She worked in Mexico starting in 1973, living in the jungle and working with Mexican Indian women. Her healing arts are steeped in the natural world of plants, especially trees, and natural cycles of birth and death, loss and new life; she also writes poetically about the relation of medicine to mythology. For example, she mentions that the caduceus is symbolic of the staff and the tree of life, the kundalini, and the unconscious. When Hermes went to the underworld to bring back Persephone, his journey symbolized the "myth of death and rebirth through pain and suffering [that] is the enduring theme of healing from trauma" (p. 4).

Next, she takes readers through the importance of rhythm in life. She looks at rhythm in terms of its place in the fight-flight response and the brain's electrical signals, and the rhythms of heartbeat, breath, and birth. These are destabilized in times of trauma, as are the rhythms of wakefulness and sleep, and beta and delta brain waves. Chinese medicine is rooted in the belief that illness occurs when the balance between opposites is disturbed and that healing occurs when balance is restored. Diagnoses are made, as in Ayurvedic medicine, on the basis of a person's pulse.

Korn's definition of trauma is worth noting here, as it captures the complex interplay of soma, mind, nature, and spirit that is involved: "Rather than sustaining the natural flow of oscillating life force, trauma causes autonomic fixation and loss of the normal range of body regulation, including extreme, uncontrollable cycles of response characterized by opposing fluctuations of cognition, behavior and kinesthetic perception" (p. 6). Korn notes that the word *medicine* comes from the Sanskrit word *maa*, meaning "mother" or "measure," and *manya*, meaning "to move back and forth or align in the middle."

Korn connects traditional psychology to physiology and mythology, noting that healing has an alchemical subtext. In psychology, this translates into transforming the unconscious into the conscious. Mythically, the pineal gland is the third eye, the word *thalamus* comes from the Greek word for "wedding chamber," and the eye is connected with Hermes (Mercury) and visions used for healing. Ancient ritual trance postures involving the eyes form the basis for the modern application in eye movement desensitization and reprocessing (EMDR). Psychologically, the eyes are the "window to the soul" and form the basis for identity development, as "being witnessed" and "seen" affect the ability to form attachments.

Rhythm in the body is also based on the circadian, or 24-hour, cycle. When this cycle is

disrupted, neurotransmitters are affected. Time and space are the existential substrates of trauma: “Time stops for the victim of trauma” (p. 13). One has the sense of being frozen, or stuck developmentally at the time of the trauma. Flashbacks also indicate a fragmented sense of time. Between the flashbacks, and because of an alteration of temporal perception, people with trauma live in a netherworld, a *bardo* of timelessness. However, out of this fragmentation comes the necessity of making meaning from chaos.

Among other topics, Korn notes that brainwave states can be affected not only by biofeedback and meditation, but also by color. Melatonin is best produced under green light, and so it is logical to wonder about how the brain is affected when it is away from nature and subject to the effects of industrialization and technology. She also looks at group traumas, including the waves of migration of early humans and fights for survival, and explains how the experience of uprooting affects the developing nervous system.

Trauma can also be socially constructed. Korn explores the early roots of what was called “hysteria” and looks at the role of gender in the understanding of trauma. During the Victorian era, “hysterical” women sought out Freud. Their symptoms included an outburst of unconscious material expressed through bodily symptoms. As was later learned, many of these women had suffered actual traumas of sexual harassment or abuse and exhibited understandable symptoms of dissociation, disembodiment, and dysregulation.

Korn then goes on to describe and define posttraumatic stress disorder (PTSD) as “the quintessential mind/body *disorder* that alters physiological, biological, and psychological homeostasis” (p. 27). Building on this, she explores psychosomatic symptoms of PTSD and considers somatic and integrative treatment approaches. She also mentions online sources for self-care exercises such as “auricular acupressure” (p. 42) and online resources for therapists.

In subsequent chapters, Korn offers highly important suggestions for integrative assessment, nutrition, somatic empathy, and botanical medicines. In the final chapter, she ends by restating her plea for medicine and psychology to include “somatic empathy and the myriad of ways in which we tune in to the rhythms of others and help them to retune themselves” (p. 266).

Conclusion

The scope of Korn’s thinking and writing about the rhythms of recovery is remarkable. She has personally trained in many of the modalities she covers and fully respects the need for therapists to have excellent preparation and training in these modalities. I don’t underestimate the difficulties involved in training and practicing integrative approaches to therapy, yet I believe that Korn’s book should be used in all psychotherapy training, followed by actual hands-on training, for the emerging generation of therapists.

My regret is that although her book title and thesis are about the role of rhythm in illness and in health, she could have more fully presented the arts, especially music and

movement, as integrative modalities par excellence to work with essential issues of rhythmic disruption (Serlin, 2007a, 2007b, 2008). I would hope that this aspect of the role of the rhythmic arts could be added into an ongoing emerging field of integrative therapy.

References

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