



“Empathic Awakening: Behold the Brilliance of the Healer Within”

Presented by: Brent M. Baum, STB, SSL, CADC, LISAC, CCH, CHT

Introduction and Overview

At this time in our evolution we are confronted with the evidence of the full impact of trauma on body, mind, and spirit. We are emerging from the "Age of Narcissism" to the "Age of Empathy." Awakening the genius and wisdom of the "inner healer" is paramount in this time of sensory bombardment and immune system compromise. As we clear the age-old stressors and traumas of the bodymind, we improve our immune system performance and enable the emergence of our natural capacity for greater empathy. Healthy decision-making and the capacity to navigate the challenges of life increases proportionately with the clearing of our obstacles to intimacy, communication, and creative expression. By clearing trauma in the bodymind, we discover our inherent empathic capacity to facilitate the healing of self and others. Both personally and professionally, the emotional wisdom that emerges from clearing the false, restrictive messages of the trauma-based ego permits the emergence of our true potential, the Higher Self, the Holographic Mind. In this workshop we review, employ, and demonstrate the principles and strategies that empower the "healer within" and enable the systematic mapping and reduction of the impact of trauma on the human psyche.

Presentation Outline:

Part One:

Introduction and Overview of the Workshop. Historical Contributions: David Grove, Addictionology, Integrative Medicine.

Principal Focus: Societally and collectively mandated to resolve the impact of trauma both personally and collectively: Moving from the “Age of Narcissism” to the “Age of Empathy.” Healthy movement from natural self-focus of the child to altruism and empathic bonding with others. Development stages of the psyche. Emergence of the capacity for empathy from effective trauma resolution. Seven Stages in the emergence of the effective “emotional reframing” of memory.

Breakthroughs in Understanding Memory Imprinting and Resolution: The "When" of Trauma Imprinting - "T-1", the "How" of Imprinting: Holographic "Icon" and Somatic Storage. Somatic Psychology and Lessons: 1000 neurons per square inch. The Holographic Key: "The part accesses the whole and can be used to transmit the whole." "Holonomic Memory" in the physical body. Karl Pribram.

Part Two:

Search for the Language of safety. The importance of establishing safety in the psyche for memory resolution. Search for Vehicle of Information Transmission: Color as Primary Language. Importance of Establishing "Proof of Safety" in the Subconscious Mind.

Art Therapy. Brainwave Frequencies Unique to each Individual. The Goal: Release of "state dependent" or "state-bound" memory. Color Psychology and Complex Information Transmission.

Part Three:

The role of energy psychology: as DNA is to the cells of the body, the "hologram" is the foundation of memory storage in consciousness. Growing role of Energy Psychology. Emergence of empathy as we resolve the dense, heavy energies of trauma. Energy access in the bodymind: enhanced access to memory. Alpha-Theta Brainwave state that prevents abreaction. Importance of Addressing both "Soma" (body) and the Meridians of the Emotional Body. Discover of C-7 in 1994. Bio-energetic Maternal Nurturing Point; "Hammer Point" in Chinese Acupuncture. Research and Measurements confirming Alpha-Theta between 2000 and 2016. Heart Meridians and "Tapping for Relationship Issues.

Part Four:

Empathic emergence and the wisdom of the bodymind revealed: Mapping Complex Pathologies. The Spontaneous Unwinding and Mapping of Pathologies. Specific Level 1 and Level 2 Emotional Reframing Techniques. Resources for Enhancing Safety. Case Studies. Demonstration. Questions and Answers.

OBJECTIVES:

Objective #1:

Upon completion of this session, the attendee will be able to identify and describe the moment an experience imprints as trauma.

Objective #2:

At the close of the workshop, the participant will be able to describe the five stages of holographic imprinting of identity in the psyche.

Objective #3:

Upon completion of the session, the participant will be able to describe the emerging technology to describe the "unwinding" patterns of memory-based pathology.

Principles of Energy Transfer and the Importance of Self-Care:

1. All human beings have a natural capacity for empathic development.
2. Early childhood trauma can cause us to freeze at an early stage where we are still quite narcissistic and self-absorbed.
3. The single greatest factor contributing to our inability to connect, relate, understand and support others is the density and interference created by the imprinting of trauma in the bodymind.
4. We “trance” or move in and out of memories 15-50 times an hour. When the incomplete or “negative” trances are intact, we return to the adverse, unpleasant physiology and brainwaves states of the original trauma when activated or triggered.
5. Trauma and shame insert a density that slows or impairs healthy communication, impeding or stopping the positive flow of energy within the system.
6. Shame is defined as an “alienation of the self from the self” and reflects the dissociative impact of emotional trauma. It is also a “primary affect” and blocks the capacity to internalize positive emotions until addressed/resolved.
7. To support or improve our natural empathic ability to sense the pain of others, and to prevent interference and distraction during the facilitation of the healing of others, we must resolve our own triggers or activation mechanisms.
8. As we resolve the density of trauma in the bodymind, we move beyond the basic survival ethic of our physical needs and ego into our higher capacity for understanding and increased presence: empathy and attentiveness to the needs of others.
9. Our capacity to “listen” and be present to others increases with the silencing of the voices of ego and trauma within the psyche.
10. Once freed of the constraints of trauma, we can abide more consistently in the Higher Self or Holographic Mind which simply sees trauma as an invitation to greater unity and an opportunity for integration with All That Is.

Note: We are well beyond the traditional definition of trauma and consider impactful any event that causes the pausing or freezing of the flow of consciousness and the freezing of the brainwaves, affect and physiology of memory in a “bound state.” Hence, we arrive at the notion of “state-bound” or “state-dependent” memory as our focus.

The Definition of Trauma and the Mechanisms of Trauma Induction:

A Trauma Is: A trance, a spontaneous state of self-hypnosis, an altered state which encodes state-bound problems and symptoms (Cheek, 1981). This process is facilitated by the Limbic-Hypothalamic-Pituitary-Adrenal Axis (cf. Diagram of Rossi & Cheek). When the act of perception approaches physical or emotional overwhelm, consciousness itself is paused at a millisecond prior to the most traumatic moment at an instant we now call “T-1” (a term introduced by David Grove); this process is subconscious, automatic, and pre-moral in its occurrence. Psychological shocks and traumatic events are psycho-neuro-physiological dissociations and often result in “traumatic amnesia” or “delayed recall.” This amnesia may be resolved by “inner resynthesis” in hypnotherapy (Erickson, 1948/1980). The emotional charge and accompanying pain of the original trance state is usually released when the scene is affectively reframed and restored to the flow of consciousness.

Interdisciplinary Understanding of Trauma:

- Trance State
- Altered State of Consciousness
- Spontaneous State of Self-Hypnosis
- Static or “Frozen” Scene
- Hologram
- “Holonomic” Encoding in the Physical Body
- “T-1” Scene
- Psycho-Neuro-Physiological Dissociation
- Subconscious and Automatic process
- “Pre-Moral” Response to State of Overwhelm
- “State-Bound” Memory
- Boundary Violation
- “Shame” Experience (G. Kaufmann)
- Alienation of the self from the self
- Outdated “Illusion/Delusion” as Regards Present
- Limbic-Hypothalamic-Pituitary-Adrenal System Response
- Fight/Flight/Freeze response

The 3 Levels of Trauma Induction:

Level I: Single Scene Trauma; Multiple Memories, Simple Sequences, Sub-memories

Level II: “Layered” Memory Sequences, Subconsciously Associated Patterns, Complex Memory Sequences, “Archetypal Trauma, Cultural Trauma, Belief System Contamination, Subpersonalities, Addictions

Level III: Dissociative Disorders, MPD/DID, “Cult Successes,” Contamination to the Core Belief System, Trauma-Induced Psychosis

The Three Levels of the Trauma Continuum: (As Shame/Trauma is Induced)

Level 1			Level 2				Level 3		
Presents as:									
Single Scene	Multi-Scene	Repeated Trauma	Cultural Trauma	Chronic Eating	Depress., D/O	Incest	Dissociative D/O MPD/DID/Psychosis		
			Domestic Violence,				Drug-Induced Psychosis		
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Simple Scene	Multiple Memories	Sub-Memories	Complex Archetypal	Trauma Imprints	Patterns	Layered Memories	Memory Complexes “Cult Successes”		
“Ego State”			“Sub-Personality”/ “Part(s)”			“Personality(ies)”/ “Parts”			

The Five Holographic Stages of Esteem/Shame Induction:

- 1. Externally Induced:** Must first be introduced from outside the self! Shame/trauma always originate outside the psyche.
- 2. Internalized:** Through repetition, the message becomes internalized. Ongoing imprinting results in the maintenance and storage of the trauma content within the system.
- 3. Autonomous:** With ongoing reinforcement, the message begins to operate independently, without outside stimulus. The message no longer requires an external trigger to be active.
- 4. Identification with the Affect:** With continuous exposure, the individual identifies itself with the affect. The trauma perceptions dominate the psyche leading to a normative perception of shame within the individual.
- 5. Spiral:** Given the holonomic nature of memory, the smallest trigger resurrects the whole encoded affect. As the fragment of the hologram provides access to the whole, a resonant ‘trigger’ activates what is already stored in the bodymind.

Historical Development of HMR:

Addictionology: Alcoholism = Disease (1950's) and Family Systems Theory. The realization that there is a disease that diminishes "will-power." The breakdown of the "moral failure" model. The opening for a new paradigm of healing/treatment to emerge.

Co-addiction, Adlerian Psychology (Birth Order Book -1967) (1960's). The pathology was found to extend beyond the addict to the family system. Subconscious role assignments identified.

ACOA's, Expanding Systems Theory (1970's). The pathology was identified in the Adult Children of Alcoholics; expansion of Systems Theory.

"Codependency" & Emotional Repression (1980's). When the individual's needs were not met in the dysfunctional system, they appeared to remain "stuck" – in an arrested state of development: continuing to look outward for their needs to be met. This appeared true of any system with significant emotional repression, not just the alcoholic system.

"Backtracking" and Relapse Prevention (1990's). Treatment centers began to focus on the impact of memory triggers and the stages of "relapse" that begin long before the actual ingestion of the addictive substance.

"Trauma Resolution Strategies" (2000's). Recognition of the profound need to resolve memory triggers, particularly after over-exposure with 9-11-01.

"Consciousness Technologies (2010's): Neurotherapies, Memory and Brain-Mapping Approaches, HMR, EMDR, EFT, TFT – growing public recognition of the effectiveness of these approaches. etc.

The Seven Stages of Development in HMR: (1990-1996)

- ✚ The **"When"** -- Pinpointing the **T-1** Moment of Encoding: Efficient Targeting and Importance of **"Clean Language"** and Client-Centered Approach
- ✚ The **"How"** – **"Holonomic"** Nature of Memory: Fragment Contains the Whole
- ✚ The **"Where"** -- A. **Somatic Psychology** – 1000 Neurons per Square Inch
B. **Energy Psychology** – Meridians also Store Memory
- ✚ The **"Language"** – **Color Psychology**: Uniqueness of your Brainwave Frequencies
- ✚ The **"Access Point"** – Enhanced Safety through **C-7** Energy Application: **Alpha-Theta-Delta**
- ✚ The **"Wisdom"** Emerges – **"Memory-Mapping"** of Complex Pathologies: Patterns

Key Concept of Encoding: “T-1” Concept of David Grove

Importance of identification of the specific moment of encoding

Research of David Grove: his term = “T-1” (Pronounced: “T minus One”)

Studies of PTSD and Veterans (encoding occurs at the millisecond prior to overwhelm).

Not every scene of a traumatic event is encoded equally.

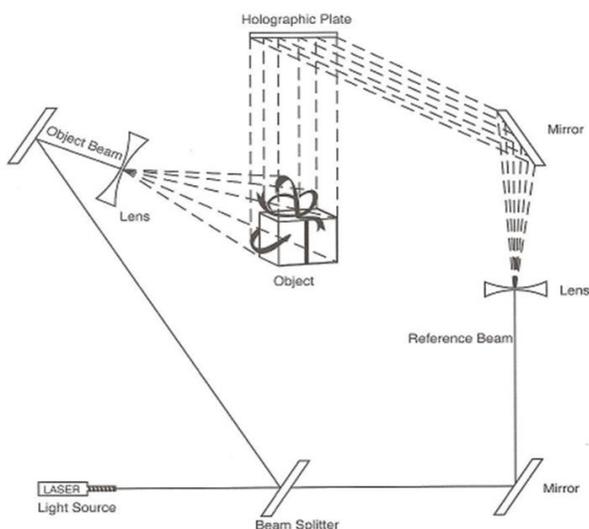
More than one “T-1” scene can be stored in an event sequence. (Ex: “Desert Rape Case”)

Shift in the psychopathology model, in targeting resolution of memory-based pathology

The Holographic or “Holonomic” Nature of Memory:

- ❖ All memory, positive or negative, is stored in ‘holographic’ manner
- ❖ Power of “mirroring” and perception: Perception is a creative act!
“Object Relations Theory” termed the imprinting process ‘mirroring’.
- ❖ The Holographic/Holonomic nature of memory: In the physical body, memory is stored in a holographic manner, but more site-specifically – hence the term: “Holonomic” – which means “following the ‘law’ (*nomos* in Greek) of a hologram, but not equally stored throughout the system
- ❖ Our capacity to pause our holographic projection system during stress or trauma
- ❖ A Hologram is created by splitting light into a *Reference Beam* and an *Object Beam*.
- ❖ Memory in the bodymind is encoded ‘holonomically’ – i.e. in a hologram-like manner.

The Holographic Key:



Since every fragment of a hologram contains the whole, a fragment of a holographic scene can be used to contain and store the entire experience: brainwaves, perception, and physiology. A hologram is created by splitting light into 2 beams: a “reference beam” and an “object beam” (See left.) Where these beams intersect at the “holographic plate,” a three-dimensional image is created. The human nervous system operates in a similar manner. Consciousness itself may possess holographic properties. Cf. *The Holographic Universe*, by Michael Talbot.

Emotional Reframing and the Power of Perception:

Importance of Mastering our States of Consciousness: Present-Time Living

We 'trance' 15-50 times per hour, moving in and out of present-time awareness.

Conscious mind = 5%; Subconscious mind = 95%

Goal: transmit the signal of safety from the 5% to the 95% to prove T-1 resolved.

Somatic (Body) Psychology:

We possess 1000 Neurons per Square Inch

Our Principal Processing Centers: Head, Heart, Stomach/Gut

Heart transmissions are 60 x stronger than those of the brain

Stomach-gut lining have more neurons than the whole spinal cord

Enables Site Specific Storage of the "Icons" of Memory

Provides the Icons for Accessing the Moment of Encoding

The Density of our Current Bodies Enables Repression of Memory

Somatic Psychology Is Insufficient to Explain the Presence of Pain Subsequent to the
Removal of the Body Part or Organ (Phantom)

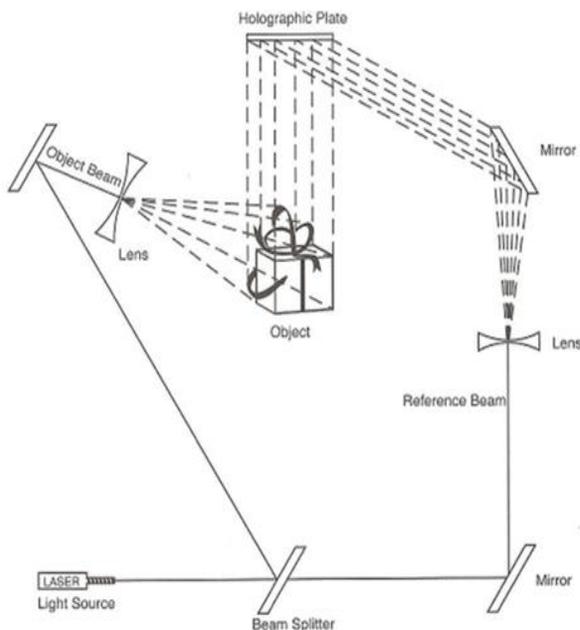
Color and Brainwave Frequency: Reprogramming the Subconscious

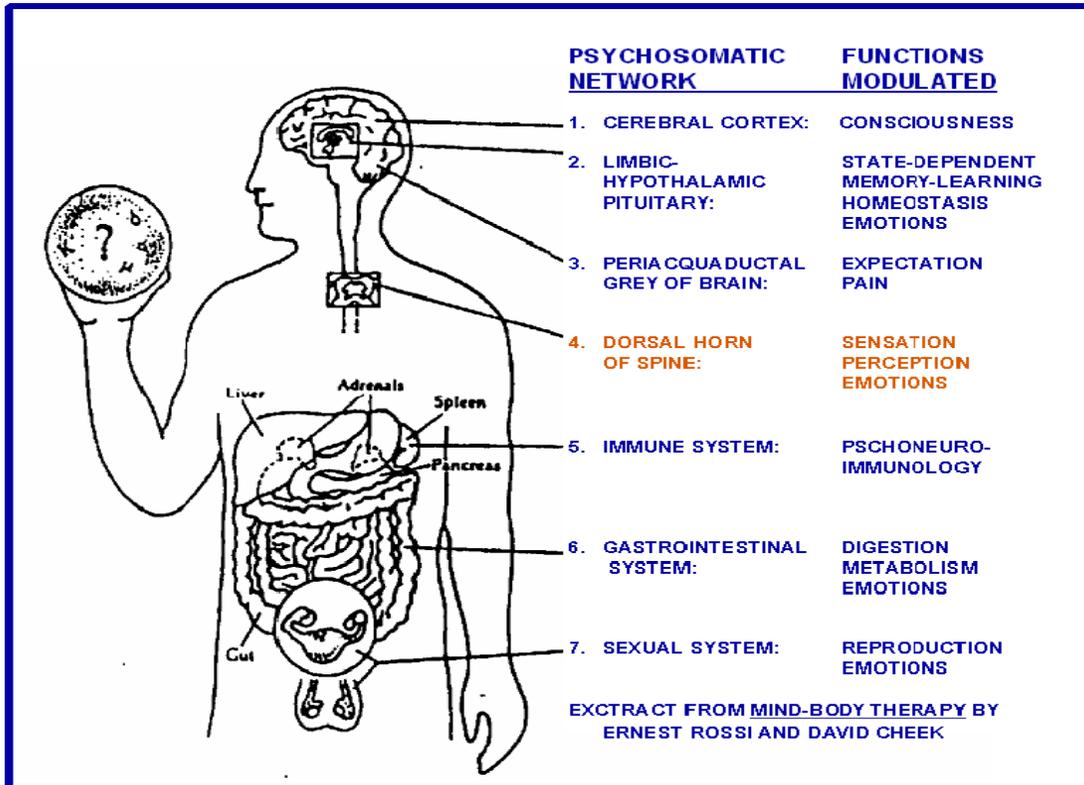
- Emotional reframing and color perception: Color as our first language: brainwave frequency.
- Art therapy: children depict trauma in red & black; they reframe with colors of safety.
- Remote Sensing technology: Every moment of consciousness has a unique spectral signature.
- Trauma is stored automatically and subconsciously during overwhelm.
- By transmitting "proof of safety," the subconscious releases its protective hold.
- Goal of emotional reframing: Complete the affective charge of the scene at T-1.
- Neutralize the emotional frame/charge of the stored scene.
- Mechanism: Color (or other channel) to holographically transmit the message of safety.
- Transmission of the corrective message must also be specific to the site/locus of encoding
- Resolution of the state bound memory by proving safety to the 95% subconscious.
- By-product: resolution of the physiology of the state-bound memory.
- Remaining: any damage to the system incurred from trauma/prolonged exposure.

Nervous System Support: The Importance of Grounding and Safety

The Energy Application: Enhanced Access to the Data of Memory:

The “T-1” concept and the holonomic nature of memory enable “emotional reframing.” In 1994, Brent Baum discovered that an application of electromagnetic energy through the hand at or near C-7 on the spine of the client resulted in greatly enhanced access to memory, while grounding the client and preventing abreaction or re-live of traumatic memory. In subsequent bio-feedback measurements, it was found that this induced an Alpha-Theta state which provided calm and established an ‘observer’ stance, while permitting enhanced access for the reframing of the emotional charge of memory. C-7 facilitates the processing of “sensation, perception and emotion” – the three sources of traumatic imprinting. With HMR, enhanced visual and sensory access to memory through the “dorsal horn” of the spine occurs. When the facilitator’s hands are positioned over C-7 and over the specific site of memory encoding (the holographic metaphor), memory access and resolution are greatly improved. Positioning the hands over these two sites helps to produce an alpha-theta brainwave state that facilitates memory access while producing calm and relaxation – thereby preventing abreaction or re-live of T-1. This enables the resolution of memory triggers earlier in the treatment process, providing greater stability and reducing the likelihood of relapse.





HMR Induces an “Alpha-Theta” and even “Alpha-Delta” Brainwave State

In 2016 ten subjects were measured using Quantitative Electro-Encephalograms and found to experience Alpha-Theta (Deep Theta) and Alpha-Delta (Deep Delta) brainwave states which facilitated calm and safety (Alpha) while providing access to memory (Theta & Delta).

	SUPER-CONSCIOUS	UNCONSCIOUS	SUBCONSCIOUS		CONSCIOUS	STATES OF CONSCIOUSNESS
	“Soul Intention”	“Unconscious Intentionality”	“Subconscious Intentionality” (The Long-Distance Carrier of Intentionality for Memory and Trauma)		“Conscious Intention”	INTENTIONALITY
	SOURCE, SOUL, DIVINE MIND					BRAINWAVE STATES
		DELTA	THETA	ALPHA	BETA+	
E → Energy/Light	0.01	1	4	7	14	21
	1Hz=Coherence		(HERTZ BRAINWAVE SCALE)			
	Year 1: Input & Observation	Ages 2-6: Imagination & Real World	Ages 6-12: Bridging into Consciousness	Ages 12+: Rational/ Intellect ...		HUMAN AGES: Developmental Stages

Overview of Level 1 and 2 Interventions:

Level 1 Verbal Interventions: (For a single T-1 event/moment of encoding)

Important: Voice Modulation, Accurate Mirroring, and Recapitulation (bridging mechanism)

Metaphor Definition Stage: Somatic Tracking

“Inside/Outside, Shape, Size, Color, Weight, Temperature, Texture ... Anything else?”

*Age Regression Questioning:

“How young might you be when you first feel a?”

“Can you see where you are when you first feel a ?”

“What happens next?” (Continue this questioning until the peak feeling moment: “T-1” is reached. T-1 is the specific moment of encoding, as identified by David Grove.)

Solution: “If the adult you could go back and change this scene ... what would you like to change/see happen?”

Enacting the Solution: “Take all the time that you need to picture this...”

Reframe and Anchoring: “When you have the picture the way you want it, frame it in the material, color or colors that come to you ... Can you see what color(s) the frame is?”

“Move the colors through your body, especially through your ... where you first felt the (metaphor) pain/sensation.”

Level 2 Verbal Interventions: (For a repetitive pattern of trauma/abuse)

Level 2 Identification: At the Age Regression question above*, the answer that indicates “Level 2” is: “Always, many ages, forever, my whole childhood, etc.” The question that follows:

Level 2 Question: ***“What is the emotion (or pattern of abuse/behavior) common to these ages?”***

The Key Stages of Level 2 Interventions Are:

- Externalize the Affect: “If you could pile this up outside of you ... can you see how big...?”
- Disperse to Causes/Sources/Perpetrators: “If you could line up behind the pile all those...?”
- Observe Reduction in Size of Affect/Content – More Manageable: “How would you like to return that energy or release that (pile/hole/lake of sadness) back to those who...?”
- Create Safety for Related Ego-States/Sub-personalities: “If we could bring to safety all...?”
- Move Replacement, Solution Colors through the Body. “Take all the time you need to ...”

Other Level 2 exercises that were developed and integrated into HMR include: Medicine Wheel, Healing Circle, Re-parenting Exercise, the Conference Room or Round Table (for addressing multiple parts/relationships that occur during reframing), and Integration Exercise.

Synthesis: New Directions in Body-Centered, Client-Centered Therapy

Redefining the Psychopathology Model and Treatment Protocol and Design: Treating
'Cause' not Merely Symptoms

Primacy of the Mind over the Body

Lessons of Quantum Physics: Mind Creates the Body

Learning to Respect "Unconscious Intentionality" – Cf. Gary Zukav, *The Seat of the Soul*

Candace Pert: Body = Subconscious Mind

Impact of Memory/Trauma on Health

Resolving Trauma: Boosting the Immune System

HMR Memory-Mapping:

Tracking the Logic of Illness and Immune System Repression

Case Reviews: Migraines (First Case Integrating Verbal & Energy)

Cancer Patient (1st Mapping); Chronic Pain Patient (Car Accident/Nerve Damage)

Focus on "De-Hypnosis" from the Moment of Encoding

An Advanced, Non-Intrusive, Non-Leading form of "Trance" Work

Treating Diverse Populations: Case Studies and Examples

- Migraines, Chronic Pain, PMS
- Sexual Trauma, Physical Abuse & Post-Traumatic Stress Disorder
- Addictions, Eating Disorders
- Children and Adolescents (Adaptations: Frequently Unnecessary to Access T-1)
- Diseases: Autoimmune Disorders, Illnesses, etc.
- Anxiety Disorders and Depression
- Dissociative Disorders: DID/MPD
- Complex Patterns of Illness and Addressing the Etiology and Contributing Factor in the Weakening of the Immune System.

Demonstration. Applications. Research – Mapping Pathology.

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Biographical and Contact Information:

Brent Baum has served as a Catholic priest, an archaeologist in the Near East, and is a Licensed Substance Abuse Counselor for the State of Arizona, a Certified Alcohol and Drug Counselor. He is a Certified Clinical Hypnotherapist and is the former clinical director and developer of the trauma program at Cottonwood Treatment Centers in New Mexico and Arizona. His work with over 20,000 trauma survivors led to the development of “Holographic Memory Resolution®,” a new body-centered, client-centered emotional reframing technique for resolving trauma and memory-based pathology. He is the author of “The Healing Dimensions: Resolving Trauma in Body, Mind and Spirit,” “Living as Light: The Awakening of Mystical Consciousness,” and “Surviving Trauma School Earth.” His pioneering work integrating spirituality, traumatology and addictionology led to his involvement with survivors and rescue personnel from the Oklahoma City Bombing, TWA Flight 800, and 9-11-01 and with trauma therapists in Sendai, Japan, prior to the recent earthquake and tsunami.

Holographic Memory Resolution® is a unique body-centered, client centered approach that facilitates the mapping and resolution of a wide range of memory-based pathologies including many types of migraines, chronic pain, anxiety disorders, illness and trauma. Uniquely merging somatic psychology and energy psychology, HMR enables the articulation and mapping of the etiology of memory-based illness and pathology, while empowering the client and facilitating resolution at the moment of encoding, by-passing the need for abreaction or re-live of the event. Targeting “T-1,” the precise moment of trauma encoding, and utilizing a nervous system support technique that enhances sensory access to memory while grounding the client, HMR has been identified by leading addictionologists as one of the most powerful and effective relapse prevention tools available today. HMR revolutionizes the psychopathology model and medical model by enabling the client’s own bodymind to map the precise etiology and path to resolution of memory-based pathology.

Brent M. Baum, STB (M.Div.), SSL, CADC, LISAC, CCH, CHT

President and Director of Healing Dimensions ACC

Address: 5675 N. Camino Esplendor #6137, Tucson, AZ 85718

E-Mail: abunah@comcast.net Phone: 847-372-8894.

Web Site: www.healingdimensions.com, www.miravalresorts.com

National Coordinator: Beverly Meland 224-558-4342; E-Mail: bevmeland@gmail.com

Research: www.michaelsgift.org

Note: Training in HMR is **now available online**. Advanced training will be recorded in November, 2018, and will be available as well by Jan. 1, 2019. Training in HMR is not restricted to health care professionals. We believe that all: parents, educators, therapists, medical personnel, and all individuals committed to their own healing and self-care, can benefit from this information about reducing the impact of trauma in our lives. Visit our main website: www.healingdimensions.com for the link to our training website. Online training can be used toward Certification in HMR.