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Molar Memories Case Studies

The identification of Molar Memories can clear strong compulsive behaviours. These compulsions have to be motivated by positive emotions that take you towards (and not away from) – such as anger or greed or desire. But these positive emotions are hidden and so the compulsive behaviours appear inexplicable. Typically these positive emotions have first arisen in childhood, but have been hidden from consciousness by an experience of shame or humiliation or fear that had occurred at the same time. There is a pay-off for the compulsion which is hidden and so presents as inexplicable.

In all these six cases I began to be motivated to look for a molar memory when the obvious approaches (using the trance detraumatising Rewind method or other guided imagery or working to reduce arousal, reframing and problem solving) had made no difference.

The first step is to undertake an affect bridge. An affect bridge asks that the positive emotion be relived and so activated and then in a light trance the client focuses on the feeling to see if it can be connected to a specific memory.

If that memory is negative – such as shame or humiliation or shyness or fear, then there could be a hidden positive molar memory. And if this can be identified, exposed and contextualised in some way, then the compulsive behaviour can be weakened, controlled and excised.

Here are Six cases

Quentin – 40 years, single and quite shy came to me for help with his heavy binge drinking. His starting CORE score was 18 (indicating moderate distress) and over the course of seven sessions he definitely made some progress. His CORE scores though still hovered at 12-14 (which is slightly above the cut off of 10 (the indicator for recovery in the CORE system)) and well above 5 which is the level that indicates robust emotional health. We had identified his shyness and that his needs for intimacy and connection to a wider group were not being met and we both saw the binge drinking as a way to relieve the anxiety that came with the shyness. Through these seven sessions Quentin continued to be keen to work with me but in truth I was running out of inspiration.

Then I saw him for the eighth time. He was in a very agitated state – scoring more distressed as he had ever been (23). He told me that week, he had been let down by junior colleagues in a task he had set them and his response was quite disproportionate. So I used the affect bridge – which directed him to previous similar feelings. And he went quickly to his school days as a 10-11 year old. He was very shy and realised then



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that the only way he could feel at all comfortable was to absolutely make sure that he was fully prepared for school. He said that he worked and worked as a young boy in order to feel relieved and protected by the knowledge that by working so hard he would be safe in the group. He said for example that his reading age was way above anyone else. That feeling was the molar memory and his compulsion had nothing to do with the binge drinking. Rather it was his workaholism and obsessive attention to detail, which was driven by the molar memory to feel secure and safe with people.

The consequence of the hidden molar memory was that Quentin had led an unbalanced life where good social and intimate relations were impossible. The recognition that as an adult, he did not need to work this hard was enough. He emailed me around six months later – he was dating for the first time ever, he was calmer and enjoying life and of course getting his needs met properly.

Tom was 45 years old, an Australian with a history of drug abuse and criminality. He had been in the UK for 5 years, was earning very little money and had a tempestuous relationship that was causing them both a lot of grief. He was now clean, having gone on AA type programmes but was still very angry and impulsive and difficult to live with. His initial CORE score was 19. Tom has worked very hard on himself and was rightly proud of being free from drugs and alcohol. He also had a number of fairly clear traumatic memories that were obvious Rewind candidates. The truth was that his early life had been quite awful and unsupported by his parents. I could also identify coping strategies from his childhood that were still powerful for him today.

The key though was his anger and using the affect bridge he went back to an event when he was just 5 years old when he had nearly killed his younger brother in a fit of extreme anger. Of course this had shocked and shamed him. So we stayed with that experience is a light trance and I pushed him for something else that happened then. I made a number of suggestions as to what that might be but none was right. And then he got it – it was a feeling of complete peace and calm. That was the hidden payoff – the molar memory.

I saw Tom four times and we worked on a number of things. But that Molar Memory of peace was the key. By the end, his CORE score had settled at below 10 and when we had finished (he was returning to Australia), he gave me a photo of himself surfing an enormous wave. I keep it now above my desk.

Sophie was in her early 40s, had been depressed on and off for many years, was on medication and scoring 30 on CORE. This is a severe level of distress. I saw Sophie just twice. She had to travel a fair distance to me and being on benefit I saw her for a low fee. This embarrassed her and I believe was the reason that she did not continue to see me. Her sleep was dreadful and her extreme worrying was linked to low self esteem and feelings of no self worth. And her needs for status, satisfying work and financial security were just not being met. She was though a strong character and not



the typical person with very low self confidence. At the second session her CORE score was unchanged, which surprised me. At the first session I had used tried and tested ways to reduce her arousal, improve her sleep patterns and to reframe and normalise.

In the second session we worked on her feelings of lack of self worth. At this stage I was not thinking of Molar Memories but I used an affect bridge of her strong feelings of low self esteem to see what emerged. As a child she had moved from school to school as her father had been involved in the diplomatic service. She found that she could easily feel again all those feelings of vulnerability and low self confidence as she entered yet another new school. So we stayed with those feelings as I began to wonder if there may be a hidden pay off or positive emotion. And we seemed to find it in the protection Sophie found by emphasising her lack of capacity and intelligence and threat. Sophie did not return after that session even though I encouraged her to do so. But we talked by phone a fortnight later and I could see that her CORE score had fallen significantly – I estimated to around 15. She felt much stronger and confident and after another email enquiry three months later, she was still feeling much better.

Simon was from Hong Kong, in his middle thirties and suffering from extreme bouts of anxiety. His initial CORE score was 25. He had had a lot of difficulties in settling in London a decade or so earlier and this seemed an obvious candidate for rewind. So we did that at the first session and I linked this trance work to building up his confidence. At the next session, he felt that nothing really had changed. We talked about his current life in more detail and what seemed to be the triggers for the anxiety. Simon then made an interesting observation which was a new realisation for him – that it was almost as if he wanted to feel more and more anxious (by escalating extremely negative projections) in order to experience the relief of realising that they were ludicrous.

I suggested that he stays with that extreme positive desire for anxiety and go back to discover when he had first felt it. He went back to a period of extreme stress in his early teens. What he had done then was to build up the tension of a extremely full bowel by not evacuating. It gave him a feeling of being in control even though it was unpleasant and then he could enjoy the exquisite pleasure of the emptying that would follow. The parallel with the process of the anxiety now was clear and in trance I could easily contextualise and so remove the need for Simon to continue to do this. I saw Simon just twice and in subsequent email communication he conveyed that his anxieties were now way down.

Peter was an American businessman in his early 50s who came to me in quiet desperation (and a CORE score of 18). He had lived as long as he could remember with an obsession with female breasts. It had destroyed his marriage, kept him furtive and secretive and had impacted adversely on his relations with his now adult children. The first session was taken up with information gathering and at the end I expressed the opinion that there may a molar memory involved. The second session was devoted to discovering if this was so. Peter built up the sexual feeling and then through an affect



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bridge went back to his early teenage years. The feeling associated with this came quickly – it was the shame, when his mother had discovered magazines under his bed. She was religious (he came from the mid west) and was strong and controlling. And then he touched the feeling of resentment and defiance (not just the sexual arousal). He would keep these magazines and use them in the way teenage boys do. Peter was very excited and felt that this was it. In trance, I contextualised those feelings to being boyish and not necessary for him now. A couple of month's later Peter returned. His CORE score was 8. He said that he had never felt so positive. He was developing new business ideas and his problematic relationship with his son had improved.

Kate was a married and working Mum. Her initial CORE score was just 7 which indicated that her problems, whatever they were, were not seriously debilitating. I noticed that even in that first ten minutes, she kept apologising and making excuses for herself. So we began to explore that. Her mother had always impressed upon her how lucky she was compared to other children and this stayed with her in the quite tough secondary school she attended. She recalled an occasion when she had been humiliated and ashamed at scoring a fantastic mark in an English assignment, where the teacher had initially disbelieved that she had prepared the assignment herself. This opened her to ridicule in the class and feelings that she should apologize. I stayed with this feeling and quite quickly she recalled feeling proud and defiant of her achievement – "she would show them". Well that was it – the hidden pay off for her apologetic behaviour. She had no need to see me again and when I followed up a month later her CORE score was 4. In terms of the Molar memories, I believe that her chronic apologetic behaviour was a positive emotion driven by feelings of pride and that these were hidden by the ridicule of that school experience.

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