

Brainspotting and Dreamwalking Death Transitions™: A Comparison

In this article, I compare two very different modalities: one from mainstream therapy practice called Brainspotting, and one from the metaphysical community called DreamWalking Death Transitions™. As a practitioner of both, I unexpectedly found similarities and common experiences in each, and thought it to be worthwhile to describe the common ground in hopes of facilitating a bridge process between the metaphysical and the mainstream therapy communities. I made a similar attempt in an article entitled “Spirit Bridge” where I described seven empowering assumptions that I found helpful in integrating the spiritual dimension into the consulting room. (See www.dreamwalkingguide.com/writings.)

David Grand, PhD. as the discoverer of Brainspotting (BSP) describes a dual attunement process as follows: 1) attunement between the therapist and the client and 2) an internal neurophysiologic attunement between the client’s brain and a specific spot to which they are looking. He hypothesizes that this dual attunement creates the potential for the person to process or re-process painful memories, sensations, and emotional content, usually originating in some sort of traumatic event. This therapeutic modality is used to assist clients in their own healing process. [1]

DreamWalking Death Transitions™ is a process whereby a trained Dreamwalker Guide connects energetically with a person (the client) immediately after death or, preferably, prior to imminent death. Once this connection is made, the two are able to walk together through the after-life. A series of transitions will generally then occur through this journey. The Dreamwalking Guide process is taught by certified Crimson Circle (www.crimsoncircle.com) teachers utilizing DVDs of Geoffrey Hoppe channeling an entity called Adamus Saint-Germain. According to this information, the Guide follows a particular path, which was originally blazed by the Anasazi, an Indigenous people who lived in what is now Southwestern United States in and around Sante Fe, New Mexico. The path of the Anasazi is a safe road for the Guide and the client to travel through multi-dimensional realms full of unpredictable events and experiences. [2]

In discussing DreamWalking Death Transitions™, for simplicity sake, I will refer to it as Dreamwalking. Geoffrey Hoppe gives acknowledgment and credit to the entity called Adamus Saint-Germain as the person responsible for developing and carrying out the training necessary for someone to practice this modality. For convenience purposes, I will refer to Adamus as the originator of this method in my discussions. In discussing Brainspotting, I will refer to it with the BSP abbreviation approved by Dr. Grand. Since David Grand PhD developed Brainspotting, I will refer to David when talking about it.

Currently in the United States there are two distinct communities of people who are committed to assisting those who are struggling with stress, mental illness, emotional disturbances, and the like.

The first of these I will call mainstream therapists. They involve social workers, psychologists, and various other mental health counselors. Typically they work with

individuals, couples, families and small groups, often in conjunction with other medical professionals such as primary care physicians, psychiatrists, psychiatric nurses and others. Although they come from various disciplines and educational backgrounds, they by and large embrace the medical model, at least in terms of how their work is compensated, as most provide a mental disorder diagnosis sanctioned by the Diagnostic and Statistical Manual of Mental Disorders (DSM) and then bill the medical insurance companies of their clients. They are generally licensed or credentialed by the particular state in which they practice.

The second of these I will call metaphysicians. They include a wide array of alternative healers including Reiki Masters, massage therapists, acupuncturists, psychic readers, energy workers, mediums, astrologists, naturopaths, and many others. They generally are not licensed or credentialed by government bodies, and generally do not bill insurance companies, or if they do, are not routinely compensated.

However, it is also clear that these categories of mainstream and metaphysical cannot be rigidly applied as there is no clear consensus as to what ought to be considered mainstream and what ought not to be so considered. There are many practitioners who seem to fall somewhere between these two categories. Generally these would be practitioners who either started out in the mainstream and diverged due to changes in their methods that were not recognized in their specific fields, or metaphysicians who are seeking legitimacy. For example, some consider massage therapy to be a mainstream practice, and some medical insurance companies will pay for these services, especially if they work under a chiropractor. Others see this modality as more metaphysical in nature, combining it with other energy workers such as Reiki or acupuncture work. Some modalities are considered mainstream in some countries and on the fringe in others, depending on the traditions of the particular country or locale.

In spite of these ambiguities, it is easier to identify a particular modality as being mainstream or metaphysical when we look at those practices that are on one end of the spectrum or the other, rather than those in the middle. Dreamwalking would clearly belong at the metaphysical end, as channeling is an integral part of the training process and it involves traveling through metaphysical realms. BSP could reasonably be considered to be well within the mainstream category as those who practice the modality are generally those who are already practicing mainstream therapy. Also, of special note is David's emphasis of BSP as an open system designed to be integrated with all other methods of practice, which provides further reason to place it firmly in the mainstream category.

There are two significant differences between BSP and Dreamwalking that present major obstacles to any attempt to describe similarities or common ground between the two modalities. The first major obstacle is the fact that BSP is based on scientific understandings of the neurobiology of the brain and its functions in attachment and ongoing relational issues, and in Dreamwalking the client no longer has a brain. The second obstacle is the fact that Adamus emphasizes in his Dreamwalking training that the

Guide is not there to counsel, process, or treat the client. The primary objective of BSP, on the other hand, is the successful processing of distressful memory and experience.

The first mentioned obstacle, the lack of a brain for the client, is problematic on many levels. It is certainly possible that experiences described by a Dreamwalker Guide are pure fantasy or even delusional. Carl Jung coined the phrase synchronicity to describe a non-causal relationship between events that are unlikely to occur by chance alone but which share a connection based on meaning rather than causation. [3] There is a growing body of research which describes non-local phenomena, that is, the influence of one mind to another without any established physical connection between the two, but these data are not well recognized or acknowledged by the scientific community. [4] Even if one were to accept the possibility of non-local influence of two brains separated by a distance, the lack of a brain (in Dreamwalking) makes this even less plausible. The “near-death” literature offers more hope in this regard as there are many antidotal reports of persons who remember events that occur while they are unconscious, including some where the person accurately recalls events that occurred when bandages covered eyes and ears and the person was unconscious. [5] However, these data are far from conclusive from a scientific perspective, and do not come even close to proving the possibility of Dreamwalking.

I do not claim any sort of scientific evidence for Dreamwalking. Instead, I would invite the reader to consider Dreamwalking to be a spiritual pursuit. In many religious and spiritual traditions, there are accounts of humans communicating with the dead or with entities from “the other side.” I would therefore propose that as the reader proceeds with this article, to consider combining an openness to new experiences and an enrichment of spiritual understandings with a healthy skepticism. Then the reader can apply discernment to the process and decide what if anything he or she might glean to be useful from the process. Many practitioners and clients of BSP also find the experience to be an enriching spiritual one, so this presents another similarity between the two modalities.

The second obstacle, that of Adamus’ instruction that a Dreamwalker Guides refrain from counseling or processing the client, poses other problems. On the surface, there are some immediate similarities between the therapist/client relationship and the Guide/client relationship. There is clearly a power differential present as the therapist is in some ways seen as the expert and the client the “sick one.” The client pays the therapist for the service. This parallels the Guide/client relationship since the client’s estate or family generally pays the Guide for the services offered. The Guide is embodied and the client is not. Both the therapist and the Guide are responsible for documenting the experience, not the client. This further sets them up to be some sort of authority over the client. In the case of the Guide, the client, being dead, has no recourse to dispute the account, whereas in the therapist/client relationship the client generally has the ability to access the medical record and offer an alternative account if desired. Nevertheless, this seldom happens and the therapist is generally regarded as an expert on the client’s experience. At any rate this is not the place where the most striking differences arise.

Clearly BSP involves the intentional processing of difficult material. Dreamwalking does not. It is clear that Adamus argues against the Guide doing any sort of counseling or processing with the recently departed. In doing so, I believe he is primarily arguing against more traditional counseling practices, rather than what actually occurs in BSP. David does not describe BSP as a form of counseling. He does, however, speak about “processing,” but it is my contention that his understanding of “processing” is not the same as Adamus’, and therefore Adamus’ objections may not apply in this case.

David noted that BSP is not only a clinical model but also has important philosophical underpinnings. In describing the phenomenology of BSP, he noted “how many subtle assumptions were embedded in most clinical models and how they became a part of the training and belief systems developed by so many therapists.” He strongly advocates for “following the client, uncritically and without expectation, wherever they went in their process.” He bases this position of non-judgmentalism on “the infiniteness of the brain,” and the reality that the “human system is too vast to be understood from the outside.” [6]

David uses the term attunement to describe this connection between the therapist and client. David is clear that the “processing” that goes on is not the therapist’s processing; it is the client’s, and that the therapist cannot possibly know where the client needs to go or how to get there. This is very different from many therapeutic approaches that elevate the therapist as the expert who can interpret the client’s experience or instruct the client to alter beliefs or actions in order to create a pre-determined outcome, such as increased socialization, improved self-esteem, or more socially accepted behavior patterns. The BSP therapist’s attunement with the client does not direct what happens; rather, it creates the safe container for whatever needs to happen to happen, so that the client can heal. David recommends that therapists use the Subjective Units of Distress (SUDS) scale from 0 to 10 whereby the client rates the amount of activation they are experiencing when recalling the issue he or she is working on in the BSP session. The goal is to reduce that distress to 0 as the client focuses on the brainspot point. Through BSP, many clients experience profound transformations as they move through distressful material. The therapist stays attuned and invites the client to allow the processing and transformations to occur. The therapist doesn’t lead the process but stays attuned as the process naturally occurs.

Similarly, in Dreamwalking the client goes through a number of transitions and transmutations. For more details about this process, see my recently published book *Dreamwalking My Mother*. (See www.narrativespace.com) Since the client does not have a physical body, he or she is actually free to create a sense of a physical identity energetically.

I find that Davis’s attunement model to be similar to the “energetic connection” which occurs between a Dreamwalker Guide and a client who has recently died. Ideally prior to physical death, the Guide will meet at least weekly and more often as death approaches, to breathe with the client and establish a connection. The Guide becomes like a light post or beacon for the client. The stronger that connection or attunement is, the more likely that the client will be able to find the Guide after death. Once that connection is re-

established after physical death, the Guide and client begin their Dreamwalk through the other realms. At that point the Guide becomes dually attuned. He or she is attuned with the soul of the client. This attunement is between the Center of the Guide and the Center of the client. I call this Center point, this Source point, as “le pointe vierge.”[7] It is a soul-to-soul connection. At the same time the Guide is attuned with the path of the Anasazi. Through this dual attunement, the client is freed to experience the after-death realms any way he or she chooses. The client does not need to stay on the path, but can take side roads and have creative experiences. At any point, the client can return to the path by simply following their energetic connection to the Guide. In other words, the client looks around, feels the Guide, and easily finds the Guide, who is on the path and does not stray from it.

As the client moves through the other realms, it becomes easier to transform or alter their sense of self. As a Dreamwalker Guide, I often witness elegant alterations in the appearance of the client based on these changes. In some ways, I believe that the path of the Anasazi is simply a convenient way to illustrate the energetic changes that occur as one goes through this process. Adamus is correct in saying that the Guide is not “processing” the client. However, the client is clearly going through a dramatic and often beautiful “change process.” The dual attunement between the Guide and client (le pointe vierge to le pointe vierge) and between the Guide and the Path of the Anasazi makes these changes possible and fluid. I would never maintain that walking with a Guide is the only way a departed soul can make these transformations, only that it is an elegantly wonderful way to do so. Similarly, I would never maintain that BSP is the only way for an embodied individual to heal from old wounds, only that it is an elegantly wonderful way to do so.

In BSP, the dual attunement is slightly different. Like Dreamwalking, the first attunement is between the therapist and client. David calls this the relational attunement, which is elegantly achieved often based on many years of clinical experience and a combination of art and science. He notes that the second attunement is between the client and a visual location, the brainspot, to which the client holds his or her gaze. He calls this attunement a technical attunement. He states:

The therapy relationship is not intended to serve the BSP, the BSP is intended to serve and support the healing relationship. Yet there is neither a skew toward either the attunement power of the technical or the relational. The attention to the synthesis of the two, the dual attunement model, is the *sine qua non* of BSP and hence the source of its unique power. [8]

I would contend that the dual attunement occurring in Dreamwalking is also its key ingredient. If the Guide and client are unable to attune with each other, the Dreamwalk does not occur. The Guide would simply go to the family member with whom he or she has the contract, and let them know that it was not possible to connect with the recently departed. This attunement can of course be disconnected at any time. The client is always free to disconnect and go on his or her way. There are circumstances where the Guide might also elect to disconnect from the client, and if so, again, the Dreamwalk ends. The

second attunement between the Guide and the path of the Anasazi is the connection that establishes the direction of the journey. If the Guide loses that connection, then he or she is of little use to the client. They could both wander around aimlessly. They could still have a relationship, but the client doesn't need the Guide for such a journey. Similarly, without the technical attunement between the client and the Brainspot, the Brainspotting modality is not occurring. There may still be a therapeutic relationship. There could still be processing and healing, but it is not BSP.

Brainspotting is a therapeutic practice, and Dreamwalking is a spiritual one. Both, however, involve an important one-on-one relationship; both rely on a dual attunement process; and both provide the opportunity for rapid transformations to take place in the client. In BSP this transformation is consciously and intentionally desired as a type of healing. In Dreamwalking intentional healing is not the focus; however, transformation is generally the result of the dual attunement process. As the Guide and client walk together along the path, the client expands and changes. The path itself is the path of transformation. In both modalities the two beings are connected to each other as the first attunement. In BSP, the second attunement is between the client and the brainspot. In Dreamwalking, the second attunement is between the Guide and the path. In BSP the client fixes on the spot, which "opens the door" to the rapid shifting and healing to take place. In Dreamwalking, the Guide fixes on the path, which can be seen as a three dimensional spot. There are four doors that the client can potentially enter; the first when the client is set to die; the second when the client enters the Near Earth Realms; the third opens into the Crystalline Realms; and the fourth to the Bridge of Flowers, which leads back to the client's original angelic family.

In Dreamwalking, the Guide breathes and connects with his or her own Center, to "le pointe vierge." Adamus calls this the "I am that I am" place, the recognition of oneself as a Master. He indicates that only a Master can genuinely be "in service." Otherwise one is a slave. So a Dreamwalker Guide must find that place within, where he or she is a Master (not the Master, but a master). From that place, the Guide can serve the client, and embrace the dual attunement with the client and the path of the Anasazi. Similarly, in BSP, David talks about a "felt sense" that the therapist maintains as he or she holds on to the attunement with the client. Breathing and a meditative stance help tremendously in this process. The therapist must recognize and honor the client's ability to heal, and follow that healing process as it unfolds. Many therapists and clients describe these experiences as spiritual.

In summary, it is my experience that in BSP, a healing practice, the clients and therapists often have spiritual experiences. In Dreamwalking, a spiritual practice, the clients and Guides often have healing experiences. As a practitioner of both modalities, I find myself at home in either. I bring my spirituality to BSP, and I bring my healing qualities to Dreamwalking. BSP works best while on Earth; Dreamwalking works best after death. Skills in one inform the skills in the other.

[1] Information about Brainspotting is taken from an unpublished paper entitled “Brainspotting, a New Brain-Based Psychotherapy Approach” by David Grand and from materials he circulated in his training sessions.

[2] Information about DreamWalking Death Transitions™ is available from a number of different talks by Geoffrey Hoppe while channeling an entity known as Adamus Saint-Germaine. These talks are available to view online at www.crimsoncircle.com. Also please note that DreamWalker Death Transition™ is a trademark of Geoffrey Hoppe, Golden, Colorado. All rights reserved.

[3] See *Synchronicity: An Acausal Connecting Principle*, C. G. Jung (Author), R. F. C. Hull (Translator); 1973 – from Volume 8 of the Collected Works of C. G. Jung.

[4] See for example Byrd, RC. Positive Therapeutic Effects of Intercessory Prayer in a Coronary Care Unit Population; Southern Medical Journal; 1988; 81:826-829 and William S. Harris. A Randomized, Controlled Trial of the Effects of Remote, Intercessory Prayer on Outcomes in Patients Admitted to the Coronary Care Unit; Archives of Internal Medicine; October 1999; 159:2273-2278

[5] For many examples see <http://www.near-death.com>

[6] “Brainspotting, a New Brain-Based Psychotherapy Approach” by David Grand; unpublished.

[7] *Le pointe vierge*: A term coined by tenth century Islamic mystic and martyr known as al-Hallaj and another way to refer to the Center or Source point within us. Thomas Merton (*Conjectures of a guilty bystander*: 1968), a famous Trappist monk in the Roman Catholic tradition refers to it in this way:

The first chirps of the waking day mark the “point vierge” of the dawn under a sky as yet without real light, a moment of awe and inexpressible innocence . . . All wisdom seeks to collect and manifest itself at that blind sweet point . . . Here is an unspeakable secret; paradise is all around us and we do not understand (pp.131-132). . . There is no way of telling people that they are all walking around shining like the sun . . . At the center of our being is a point of nothingness which is untouched by sin and illusion, a point of pure truth, a point or spark which belongs entirely to God . . . this little point. . . is the pure glory of God in us. . . It is like a pure diamond, blazing with the invisible light of heaven. It is in everybody, and if we could see it we would see billions of points of light coming together in the face and blaze of a sun that would make all the darkness and cruelty of life vanish completely . . . (pp. 157-158).

[8] “Brainspotting, a New Brain-Based Psychotherapy Approach” by David Grand; unpublished.