

# PETER CUMMINGS

## Healing Trauma With Adult Attachment Repair Model

### Jason Prall:

Hello, and welcome to Awaken the Healer Within. I'm your host, Jason Prall. And with me today, I have Peter Cummings. Peter is the originator of the adult attachment repair model, AARM, a comprehensive approach to treating complex trauma. As a licensed clinical social worker with more than 40 years as a mental health professional, Peter's professional passion, and his excitement is reflected in his later career contribution to the field in the form of AARM. Peter has been training therapists since 2005 and has devoted the last 25 of his 45 years of practice to a full-time practice experimenting exclusively with various neural modulating approaches. His efforts have culminated into a comprehensive model for emotional healing, and even self-actualization. Through the use of neuro modulating methods derived from the neuroscience of social and personal interaction, he has devised a systemic approach to resolve attachment trauma, the specific form of developmental disappointments that infects all subsequent life experiences. Peter, thanks for joining me.

### Peter Cummings:

Well, thanks for having me, Jason, it's a pleasure to be here. The topic Awaken the Hero Within really speaks to me quite strongly because that's kind of where this model came from, was my own life struggle produced this and people always say, "How did you get into the specialty of attachment?" And the answer is very quick. My mother.

### Jason Prall:

You were born.

### Peter Cummings:

Well, she gave me my profession and my career and my zeal to figure things out and I couldn't really rest until I did. So we'll be talking about a model that's most known by the use of a transitional attachment object, a TAO, which translates into a stick. And it's kind of a deceptively simple looking model. And when you see it, you'll think, "Oh my God, is this another California flavor of the month or what?" But I've been at this now for a very long time and have tapped into a lot of brain science to be able to answer what I think is the healer within. So a forum like this is really a place that I've been looking to speak about this for a long time and I did stay held up for a long time, so I appreciate the invites that come out of the office.

### Jason Prall:

Absolutely. And it's funny that you mentioned how simple this thing is. I got introduced to this and my teacher lovingly calls it stick work, and we've been working on a lot of different therapies and a lot of different modalities and ways of getting to some of these sort of underlying traumas, if we want to call them all that just as a blanket statement. When he whipped out the stick and had me do this, I thought, "Okay, this is really weird." I mean, I fully trusted him at that point, but it was interesting. What I didn't recognize at that point was how deep and how profound it would go. If you would just kind of ... and

we'll demonstrate this actually in a little masterclass later, but just give me a description, just kind of a mechanical description of how this process works and then we'll get into the details later.

**Peter Cummings:**

Okay. Well, I think the best way to describe this is that we found an alternative to talking. In other words, the sum 350 different forms of cognitive behavioral, CBT, cognitive behavioral therapy, are all talking therapy models. In this model, we're talking about the senses and how the senses become scrambled with trauma, and how if somebody is experiencing trauma early in life, the scrambling of their senses impacts their whole nervous system for the duration of their lives. So this model is looking to work in the body primarily and use the senses, the senses that most commonly activate, which are two sensory tracks. One is the kinesthetic, which is vibrational. You ever seen the Aurora Borealis?

**Jason Prall:**

I have, yes, in Iceland. Yeah.

**Peter Cummings:**

Well, that same dynamic is going on between a therapist and the client in a therapy room. We just don't have the callers and all that stuff. But the kinesthetic sensory track is a vibrational sensory track where we are so plugged in at a primitive level to other people's vibrations, this model taps into that using the stick and you won't believe that unless you see it. But it also keeps us grounded in the body. Too many therapies that claim to be body therapies today are body therapies for a few minutes and then they convert right back into talk therapy again. In this model, it doesn't.

**Peter Cummings:**

The physical healing script is what we use from beginning to end. So the subtlety of sensation energy in the body is the equivalent of talk therapy. We're looking to surface whatever the normal activation of sensation is in the body be it pleasant or unpleasant. As that starts to happen, we get a whole different perspective on the person's life narrative or story just by getting their bodies to talk to us in a non-verbal nonintellectual way. Their calculations from the body are different than the calculations from their head. Two very different areas.

**Jason Prall:**

Well, and I just want to describe my experience with it because it's very interesting. I had sort of my therapist, if you want to call it that, but it was a coach, a healer, whatever, and he was essentially holding one end of the stick. We were both sitting down. I was sitting across from him. I grabbed at the other end of the stick with one of my hands, and he instructed me to kind of just give it a tug, whatever feels kind of comfortable, whatever feels right. So, creating some kind of tension and were able to sort of, I guess, physically, somatically find each other through the stick. As I did that, and I'm holding this stick and I basically sat there with him holding the stick intention for, I kind of lose track of time when I go into the experience, but it must have been 15, 20 minutes, something like that.

**Jason Prall:**

At the beginning, I wasn't noticing much. And then my hand would eventually get tired of like gripping and holding and then I realized, "Wow, I'm actually gripping this thing super tight." and that was just something for me to notice. Then there was times where I felt like I needed to pull it harder, for whatever reason, my body was sort of wanting to pull harder and sometimes it wouldn't pull so hard.

**Jason Prall:**

Anyway, there's this kind of modulation that was happening naturally. I wasn't giving it much thought. He was kind of guiding the process a little bit with words, just to kind of get us into an experience, but it wasn't the talk therapy. It was just noticing what was happening and really guiding me to notice what was in the body, what the emotions may be were coming up, what the sensations were, and as I was going through that, things began to move. They moved energetically in the body. They moved emotionally. Tears would often come, sometimes it would be downright bawling, and oftentimes there was a story attached. In other words, there was an experience that the mind was able to interpret. And then sometimes that wasn't the case at all, it was just the emotion or just the energetics or what have you. And so the somatics, and so as I kind of described that, give me your interpretation. What am I missing here? Maybe what can you add to that?

**Peter Cummings:**

Well, I think what I can do is shed more light on it. Your excitement and telling us about this experience is really what captures my attention and what you're telling me, I think the subtext here is this was an experience. It was not something that had to impress you cognitively or intellectually. It took over as a corrective experience and the power within our own systems to self-organize, to find the right sensation, to bring you the right experience means that your system is in a process of integration. How often do therapists really warn their clients watch out right now, you're integrating, take a hold of that, pay attention to that? Most by and large therapists don't know what integration feels like and what you're describing is the process of feeling the system integrate and actually when we leave the family, we've encoded that family of origin into our psyche.

**Jason Prall:**

What do you mean by that? Explain that further.

**Peter Cummings:**

In other words, we all have a mother, a father, siblings, whatever, cousins. The primary group with the mother usually being the primary attachment figure, gets encoded as ego states within us. We have an internal adults by the time we leave the home, because the role modeling of those who were in charge of us works its way into our system.

**Jason Prall:**

In other words, we sort of template them in a way.

**Peter Cummings:**

We have a template.

**Jason Prall:**

And it sort of becomes us in a sense.

**Peter Cummings:**

Right. In this model, what we're looking at, okay, within that template of being in a family and being seen or unseen, hurt or unheard, felt or unfelt, you're really developing either and expansiveness of energy or

constricted kind of experience. And most of the people that come in with trauma, from attachment or disappointment, come in with the whole system that is in constriction and it plays out. They've got through their traps, through their scapular, through their shoulders. They're bracing all the time. And they will say, "Oh yeah, that's pretty much the way it is all the time." That precludes them from having any kind of healthy rejuvenating kind of experiences. Within this model, we can tell you what's happening within your nervous system, because the motto here is really change the body, change the mind.

**Peter Cummings:**

If we do enough stick work, like you're describing, eventually you're going to amass enough experience in these little windows of experience that are delightful, like you were telling us about, and the medicine is really when your system goes into mutual wellbeing, you're holding the stick and you feel warmth in the body and you're at peace with that other person on the other end of the stick and you can sit there literally for 20 minutes in this state.

**Peter Cummings:**

What's happening is your system is fortifying and it's strengthening and it's filling a deficit of experience. So when you end the session and go home people say, "Oh my God, I feel so good. I feel like I just had a massage. Will this last very long." And I'll say to them, "It'll either take it to the elevator or to the street. I don't know." It's an experience that's going to be encoded in your system no matter what. And if we do this enough, all of these little windows of experience are going to move your system into a much more stable, better place where you can operate at an emotionally optimal level. Okay. Probably starting to sound a little too clinical here.

**Jason Prall:**

No, no, I love it. And maybe kind of one way, I like to think about what you're saying here is almost like a bank account. Many of us come in and we're in debt and yet every dollar we earn through this process is getting us closer to neutral or in the green or in the black.

**Peter Cummings:**

That's the way it works. I mean, one of the first things that happens in this therapy within the first several weeks is people will come in pretty consistently and say, "I find myself crying all the time and I'm sniffing and I'm sad and I just feel more vulnerable." What I've learned over all these years is that is the beginning of the healing process. Mother nature wants us as early as possible to start learning some toleration for vulnerability, because that's what connects us with other people is our ability to be vulnerable. Most of these people with attachment trauma engrave and aggregate amounts of disappointment in their system, they don't know what optimism feels like. They have no sense of it.

**Peter Cummings:**

There's a lot of times in this therapy where it might look like regression, for instance, somebody might really make it to another level of integration, they're doing so much better in so many respects, but yet they feel terrible and they get into self-sabotage. I get them so that they can eat right and they start binging or they'll do stuff to just sabotage where they're at. That's because their systems haven't known wellbeing enough to sit with it and the client has to understand they're not regressing. Their systems are kind of entertaining notion of being expansive versus being contracted and all the players inside are not quite ready for that yet, so they're going to self-sabotage.

**Jason Prall:**

For me that comes up is I can fall back into some old patterns and that's just what I find. But the choice points become a little bit more frequent. I start to recognize it's in my awareness a little bit more when I have these choice points. But I think to your point, the fact that we are integrating, the fact that we are becoming more whole, we kind of can't undo that, right? We're actually ... Right? Yeah.

**Peter Cummings:**

People don't fall backwards, they just don't. If people have encoded enough wellbeing within the course of their therapy over months and months and months, their system then learns how to encode wellbeing all by themselves. They don't need a second person always trying to prime that pump. They can do it from within, and you see people making jumps in their gains, even if they've been out of therapy for a year or two years, and they come back just to kind of report on how life has been, it's striking how much better they are. Really.

**Jason Prall:**

Yeah. I just want to sort of maybe highlight something here that while there can be some action that is taken in order to help further that self-integration, a lot of the times I've experienced, it's effortless. It just kind of spontaneously happens.

**Peter Cummings:**

Yeah. You don't work at it.

**Jason Prall:**

Right. So there's no effort required. And this is the difference that I find in my own system and with others that I've worked with is that oftentimes the one, and I've been this one, so when I say this, it's coming from a direct experience, the one who is thinking that they can do it themselves is exactly the one that needs the co-regulation and some of the repair, because there's this, I want to do it by myself or I can do it. There's this confidence in the self, oftentimes, because that was the pattern that was needed in order to find safety, because the support wasn't consistently there. I find that it's interesting that there's a lot of us that we think we can do it ourselves and that just coming from a pattern place, it's not an integrated place.

**Peter Cummings:**

Well, it brings up another point here is that when I was trying to explore what were the self-healing mechanisms in a person, I had to forget everything I knew. I couldn't rely on diagnoses. I couldn't rely on theory. I had to really just suspend everything and watch how the body was reacting in its subtlety. And one of the first cardinal rules of the human body-mind is, and this is sacred, is it takes two brains to regulate one.

**Peter Cummings:**

There is no way to self-direct yourself into mental health because our whole survival from the most primitive days has been relying on another person and connection. And so when I started to kind of just follow my own nose and watch people, and the day that I handed somebody a stick innocently, just trying to keep them awake in the therapy room, it ignited a whole different kind of thing. It was like, "Oh my God, I've just seen the UFO." It was that dramatic. Oftentimes, I would be hysterical with a client's

eyes closed, kind of laughing myself off at what I was seeing because I couldn't believe it and trying to get myself together before the client caught me laughing because some of these things were so absolutely unbelievable.

**Jason Prall:**

I want to go back a little bit here because I think when we talk about trauma, there's some obvious things that are trauma, but there's some key things that were kind of in your bio that we've been touching on here, which are these kind of disappointments. And so when we talk about the attachment system, maybe you can just kind of give me your perspective on the attachment system and some of the things that lead to the misses when we're young and some of this attachment disorder, if you want to call it that.

**Peter Cummings:**

Yeah. It's such a profound question and I just don't want anybody to leave this discussion not understanding what I have to say here about developmental disappointment. The first thing is that interaction, the way a child and the mother or the caregiver communicates, has as much power in it as if you zap that person with electricity or if you gave them a drug, that interaction has as much power as those forces of nature. In other words, interaction is equally as powerful as electrical currents or chemicals. That's where I get the word neuromodulation.

**Peter Cummings:**

When somebody has been chronically disappointed, and that's where I came from, I mean, I came from two parents that did not have between the two of them one instinct about nurturing, not one, I tell my clients, I said, "I was lucky. My parents were not ambivalent about not loving me. They just plain did not love me. And they made my life so much easier." For all of these people that have these terrible parents, these narcissistic parents who are in and out, these people are tortured, absolutely tortured. And you have to remember that the narcissist exists in such a major way within our culture and it permeates every aspect of life that when you're crushed, you're crushed, and if there is no repair on top of the crushing or no attempt at repair, then you have a pretty flat out invitation not to exist as a person and you have to deal day in and day out with that view of yourself that you really have not been invited to exist in this world. In fact, you've been disinvented to exist in this world, and somehow you have to climb above that.

**Peter Cummings:**

What happens is the person splits themselves into many pieces inside to find the strength to cope and it's that fragmentation that comes walking through the door when somebody comes in and they got developmental disappointment, what I call existential anguish because sadness and depression don't even come close to describing the suffering that somebody is going through. I have to be able to tell them this story, because attachment disappointment is like dying of a million paper cuts all at once. Nobody's going to know that you've had a million paper cuts, but you know it, and it's hard to keep going. What we have to do is take somebody coming through the door with that kind of experience that's so fragmented, they can't even represent their own story. We have to be able to tell that story for them.

**Jason Prall:**

Well, and am I correct in assuming that we all are on this spectrum? We all have some level of disappointment, some level of miss in our upbringing?

**Peter Cummings:**

Well, it sounds a little flippant, but I hope so. It's what I think makes us ultimately compassionate to have had to struggle a little bit and hold onto our humanity in the process. And some do, some don't, but the work itself doing attachment work, I've been a long time in the field and I've had two children and married 50 years, I can tell you that this work has made me a better person separate and apart from my role of the originator and the therapist.

**Peter Cummings:**

When you're on the other end of the stick, as a therapist here, your own developmental disappointments also come into play. And my family will attest to the fact that I'm a much more mellow guy than I was 10, 15 years ago. And they attributed it to this. Now, I tell people, "I never personally have had stick work. I have not sat on the other side of a stick and let somebody process me" because frankly, I don't think anybody can do it well enough. I'm teaching people. Maybe one day there'll be that person. But yet, I'm still very confident that I've made all kinds of changes.

**Jason Prall:**

Totally. I think what's interesting here is and you painted one picture here of the narcissist parents that seems to be one of the more dramatic examples, but I can think of a few others that are pretty common, which are one parent households where mom or dad has to work all the time and just try to keep things straight, and as an infant or a young being, there's no cognitive recognition that, that's what's happening. You just feel the disappointments that mom and or dad isn't there and isn't perhaps even capable of giving you the nurturance and attention that is attuned to you and all of these different things. I mean, I'm a parent of a young one and I'm fortunate enough to have my wife here and she stays home and I work from home.

**Jason Prall:**

I mean, we do a pretty good job, and yet I can tell that there's misses. I can tell that we're not doing it perfectly. Right? So, I'm attesting to the fact that this is hard as a parent to be so attuned and to try to repair some of these things as often as we can, is still a challenge. I feel like I have a pretty good setup here. I'm pretty lucky in that regard. I'm just imagining all these families out there that are just trying to get by, that are trying to make it work, and it seems like there's a lot of opportunity for attachment issues to develop.

**Peter Cummings:**

Let me take a little pressure off here. The research is really clear and I think an old, old analyst, Donald Winnicott, who was one of the old analysts, came up with a phrase that good enough mothering was enough. And since those days, some of the most robust scientific research in the social sciences spiel, which is a pretty weak field for empirical research has done probably the most empirical research on attachment styles and insecure attachment styles and all that. But what we found out is it only takes 30 to 40% of being on the money to make that kid okay, that's all you got to have 30 to 40%.

**Jason Prall:**

That's same percentage that gets you in the hall of fame in baseball, so that works.

**Peter Cummings:**

Right. So we're pretty resilient. I like people to understand what the person that the end of treatment, because people are always like, "I grew up in the '50s, '60s, and car trips are a big deal. And you always used to say, 'Are we almost there yet?'" People like that in therapy, they're always saying, "Are we almost there yet? I can pretty much tell them four things that they need to use to decide whether they're there yet or not.

**Peter Cummings:**

One is the emotional resilience. These are people who now can delay reactions, can step back, can not internalize things so quickly. The resilience grows because those internal parts that we're talking about, that template with all those parts, they're working better together. So there's higher emotional resilience. The second thing that we noticed that just comes online is really, really good pacing. People start to get good with their environment, keeping things organized with their food, with their division of labor and recreation. I mean, they just get very, very balanced and pacing is real good. The third thing that we noticed and people who are high into the integrated process is newfound creativity. People always within the course of the therapy find a creative outlet and just start practicing it. And then the fourth thing is acceptance of body image. So when people say, am I there yet? We always look at those four things.

**Jason Prall:**

Wow. Interesting. Well, and for me, I feel like, I mean, is there a there yet? Is there, there? Because for me, it just seemed like it keeps deepening and deepening and solidifying and stabilizing. Perhaps there is a there, and I'm just not there, but it intuitively seems like this could continue to get more stable, more grounded, more deep.

**Peter Cummings:**

Those are the four things, and those are the things I made up, but those aren't things I read about. These are consistent gains that I've seen throughout the decades that are always there and that's where that came from, was from observation.

**Jason Prall:**

Cool. Yeah. And that makes sense. So maybe talk to me a little about, since we've kind of breezed over it a little bit, what are the attachment styles and how does that come into play in our lives? I mean, how do I know if my attachment system needs a little bit of integration?

**Peter Cummings:**

Well, I guess I've always been a little bit irritated with the over-reliance on pegging whether you're an ambivalent attachment style or a chaotic. I mean, knowing these things, isn't going to help you as a therapist, really get underneath what somebody needs. It's not like, "Aha, I've unlocked the key to what ails this person." It's really just a very general snapshot of how somebody goes through life and ... Oops. And in most developed countries, industrialized countries, the majority of people have some level of ambivalent attachment. And of course, there's the nightmares where people have chaotic or dissociative

attachment. People have dismissive attachment styles, and they've got all kinds of stuff, but it's the disappointment that we're trying to get underneath in the form of the therapy.

**Peter Cummings:**

The disappointment and the story about being disappointed, doesn't really trickle into attachment styles and secure attachment styles at all. I have people that I trained for five to eight months at a time, and they all want to get that stuff, and I pretty much ask them to suspend that discussion until we're really deep into the training, because prediction is out. When you're helping somebody with a healing process, you have to know that we're complex human beings and that we're not going to get the score on somebody until their body is done processing. So when we know, when I know that the sequence that somebody is going through with the stick is over, and they're done processing, then we can talk about where they fall in to the larger world, but it really doesn't matter.

**Jason Prall:**

Yeah. I'm thinking more from a sort of patient perspective, because for me, I wasn't aware of the attachment styles when I began sort of walking into this work. And to some degree, I thought I had an healthy attachment style. I thought I was secure in my attachment. It wasn't until I kind of at least got a sort of sense for the maps to go, "Oh yeah, I kind of do do that." So it was just a helpful tool for me to recognize, "Oh man, there's actually work here" because at the beginning, I didn't realize how much work that there was the opportunity to do, so to speak.

**Peter Cummings:**

Yeah. I mean, we've all got our wounding and we all have equally as much positive going on from caregiving. I've seen plenty of people who are a mess, but they had a very good stretch early on in life, maybe the first five years. There's always that solid part of them that doesn't seem to fit into the mess that you're looking at. When you get to know them well enough through the process, "Oh yeah. You really did get attended to pretty well in the first five years of life." I mean, that was Bowlby, who is the father of attachment. His nanny left him after five years and it's really what launched his career in attachment and he was a surgeon in England, family of surgeons, left that and became a psychiatrist and really got extricated from the psychoanalytic society for even bringing up the whole notion of attachment.

**Jason Prall:**

Well, and it's interesting too, because there's the Buddhist traditions that actually talk about detachment and attachment is bad and just be the fundamental attachment that we need, that there is actually a really, really healthy attachment. And it makes sense, right? I mean, biologically speaking as infants, we come into this world highly underdeveloped. We don't have a nervous system that is capable of dealing with the world around us, and so to your earlier point, we are actually biologically required to rely on another nervous system to help us to find safety in our own body.

**Peter Cummings:**

Yeah. There's a lot of heresy here. I mean, when I started doing the work and you're 20 minutes into wellbeing, and you're both sitting on either end of the stick with eyes closed, the clients get their eyes closed, I had to find some way to justify that time together or come out of the trance. I'd say, "Oh, this is the hardest work I've done all day." But, really what I came to was this is meditation. Often when the body focuses on a continuing sensation of wellbeing and the person is content sitting there in that, then

the therapist joins with them in a dual meditation. We know from physics that focusing catalyzes the process, we can't see it, but we know that when there's one person focusing that catalyzes the process. When you've got two people focusing on the same phenomenon, physically, that really catalyzes the process. I've learned to respect that quiet time.

**Jason Prall:**

Yeah. There's a handful of other sort of somatic type of processes out there that are used by therapists. How is this AARM, how is it distinguished from those perhaps other modalities that involve somatic experience?

**Peter Cummings:**

I think that the profound is that I have bought into the power of experience, which means I don't have to leave the body after so much time away from talking and thinking. I think that most body therapy, somatic therapies that I witnessed, that I've been exposed to, do a really good job getting into the body, but there's almost like the nervousness that takes over and says, "We got to get back to the home base here," which is thinking and talking.

**Peter Cummings:**

I beat that. I don't need to do that. We don't need to do that. There is a procedure that people go through much as when we construct a sentence or a paragraph, or a chapter, we have the same process with the body, but no words. I've learned how to guide somebody through that, so that when they're all done, what distinguishes us is they've experienced a corrective action and their brains have brought down from the top, what they already know about heartache. So, when the body processes enough, then the top will start joining with what the body knows and you'll get a consolidated experience.

**Jason Prall:**

Yeah. Actually, what I'm hearing and what I'm feeling from you as you detail this, is that a lot of the other somatic experiences, and I would agree with this, is that there's like a partial buy-in to the reality that the body can go through its own intelligent process. What I've experienced with your method is that there's actually a full buy-in. It is kind of weird to the human therapist that goes, "Okay, we're going to sit here and hold a stick, not say any words, and then you're going to pay me afterwards." That seems so like, "You can't do that." Right? It feels very strange, but it's-

**Peter Cummings:**

I tell you, people safeguard their appointments.

**Jason Prall:**

Right. But, when you fully buy-in to this reality that the body has an innate wisdom and that the two of us, and of course, I would say that the therapist is trained, so it's not like it's just anybody off the street can just start doing this, so there is a training that is required and in fact, an integration that is required to elicit some of that. But that's amazing that you can actually fully buy into that process and allow the natural stream, the natural wisdom to unfold in an emergent way without having to do or say anything.

**Peter Cummings:**

Yeah. And I mean, if I do it and I believe in it, I think that's what got me to this point was even when I was shaky in developing a lot of these concepts and protocols, I never lost faith in what I was seeing. People

would say to me, "The reason I'm hanging in here is that you're so convinced you're doing the right thing when I was still very much in the early learning curve." I just never equivocated because when you see something and you name it and the client resonates with what you name it, there's no bigger truth to be found. The joy of two people doing that is very enhancing. I go home many days feeling more energized than when I came in, in the morning, you know?

**Jason Prall:**

Yeah. Beautiful. Well, we're going to record a demonstration of this. I know people love to see that. So for those that have access to the masterclass, you're going to get to see that. Peter, this has been fantastic. Thank you so much for everything you do, and for everyone that's joining us, thank you so much for tuning in. We'll see you on the next one.

**Peter Cummings:**

Well, thank you for letting me talk about what's passionate to me. I really appreciate it.