

UNIVERSAL BODY MOVEMENTS IN CELLULAR CONSCIOUSNESS AND WHAT THEY MEAN

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Summary: This paper discusses seven body movements that appear spontaneously when people begin to access their own cellular consciousness. Note: Important factual changes have been incorporated into this text!

A Key to World Peace in Cellular Consciousness

Cellular consciousness is the complete memory that we each carry in our bodies of our earliest experiences, including conception and the separate experiences of being a sperm and an egg. Research in the field of pre- and perinatal psychology is showing how these early times and experiences influence us in ways that we have never before been aware of, much less understood. Research shows that we are constantly (unconsciously) and profoundly affected by these experiences in every aspect of our lives.

It is our feeling and belief that psychotherapy on the level of cellular consciousness is an important key to bringing peace to our precious, fragile planet. This exploration of deepest emotions is revealing the consequences for children (born and unborn) of our actions on levels at which we used to be unaware that consequences existed. The knowledge gained in this work is already having a profound effect on the field of psychotherapy as well as on the "birth industry." It is an effective double-edged tool to heal hurts that have already been inflicted and to help us to not inflict the same hurts on our children. That is our wish and our mission.

Seven Universal Body Movements

In watching people access their own cellular consciousness, we have found that there are seven body movements that appear spontaneously in all people, everywhere around the world, across all cultures, and regardless of education. This happens among people who have not spoken with one another, never been exposed to information about cellular consciousness, and never seen (in person or via video) others expressing their feelings or reliving experiences at that level.

The purpose of this article is to share the information we have found so valuable by briefly describing these seven body movements and the feelings and meanings associated with each one. Our experience is that the more deeply we know ourselves, the more sensitive and compassionate we become with ourselves and others. We hope this information will provide confirmation to many who have been experiencing cellular consciousness in their regressions (possibly without recognizing it as such) and help practitioners encountering such experiences in their clients. We hope readers will take the

information in this paper as descriptive - not prescriptive - and use it to recognize what emerges, naturally, in regressive sessions. It is not a checklist for what "ought" happen.

The "meanings" we list for each movement are the amazingly consistent interpretations of the experiences reported by adults who have undergone regressive psychotherapy to treat their emotional traumas and shocks. The meanings reported by therapy clients are remarkably parallel to the biological realities of conception. These interpretations are reported by people with little or no knowledge of conception biology. It has also happened that a client has reported an experience that was not, at that time, a part of medical knowledge but was later discovered to be biologically true. The fact that thousands of clients are spontaneously expressing the same movements and ascribing to them the same meanings is strong evidence that conception is a powerful imprint.

Each peculiar experience/memory includes a unique set of feelings for each person. However, there is a "typical" set of feelings associated with each experience and, in some cases, we mention some common variations in feeling patterns traceable to each experience. What follows is a summary of the seven universal cellular experiences including the body movements and some of the feelings commonly associated with them.

Egg Leaving Ovary

As people relive the experience of being a ripe egg in the ovary, they routinely report feelings ranging from an acute sense of regret at leaving the "sisterhood" to abject terror at "going into the void" or "facing certain death."

This separation is particularly poignant when we remember that the eggs have coexisted in the ovary of the mother since they developed at four months gestation inside her mother's (the grandmother's) womb. So, not only have the eggs existed completely within the universe of the mother but, for a time until the mother's birth, also within grandmother's universe and all of her feelings, attitudes, chemicals, and so on. You can see how the history of the egg is long-standing and pervasive. To add to this, every person experiences, as an egg in the ovary, the complete history of his or her mother before he or she was conceived, including any previous children born to the mother, or babies conceived and aborted or miscarried, as well as all the previous eggs who left the ovary and died unfertilized.

Therefore, we see people re-experiencing the "danger" of leaving the egg because of the previous miscarriage or abortion suffered by a former "sister." In these cases, the first-born children in these families share an uncertainty and insecurity not assuaged by the fact that they were not miscarried or aborted.

The body movements associated with this level of consciousness is centered on the left hip (usually), with the body fairly straight and rotating along the axis of the hip with the feet propelling the body counterclockwise. Sometimes the body flexes rhythmically (sometimes gently, sometimes vigorously) and propels itself counterclockwise.

The emergence of "egg consciousness" is often first displayed in a posture of the client in which the legs are wide apart, often with the knees bent. Hand and arm positions symbolic of egg consciousness include round, open arms and open hands with palms facing up.

Sperm Awaiting Ejaculation

The "hurry, hurry, I have to get there" feelings of the sperm - trapped in the testicles in a state of arousal awaiting release - is commonly the first "cellular" feeling a person accesses when working with cellular consciousness. Sperm memories and experiences are quite a bit easier to reach and express than egg memories/ experiences for reasons that will be explained later.

Being continually manufactured by the man's body, sperm do not carry the long-term history and memory that eggs do. A sperm is, on the average, only days-to-weeks old at ejaculation. Yet what the sperm lacks in long-term history it makes up with an intense imprint of the mood, attitudes, beliefs, health, and feelings of the father at the time of ejaculation.

A man's withholding his orgasm - whether to extend his pleasure or from fear of impregnating his partner - exacerbates the sense of tension and urgency for the sperm. Other sperm feelings people report include regressing to the experience of being a sperm inside one's father's body and re-experiencing one's father's anger toward one's mother (or women in general), a tremendous need for acceptance, one's father's guilt at experiencing sexual feeling, one's father's resentment at having to "force" his wife into performing her "sexual duties," and so on.

At least one person - upon re-experiencing her father through her experience as a sperm in his body - has had such a deep knowledge of his essence that she knew that the man she grew up with as her father was not her biological father. She confronted her mother with this knowledge and her mother confessed that she had, indeed, had an affair and had never told a soul about it. The mother was even unsure which man - her lover or her husband - was the father of her daughter. A deep, unshakable "knowing" about their origins - as demonstrated by this daughter - is common in people who have re-experienced their own cellular consciousness.

The body movements demonstrating sperm memory often begin with wrist-flicking, which is the physical embodiment of the sperm's urgency and helplessness. People often begin this movement very slowly. Then, on their own or with encouragement to let their wrists be loose and to find their own tempo, clients begin a rapid and loose flicking of the whole limp-fingered hand from the wrist. This movement often grows to include the forearm or whole arm. Commonly, the rapid shaking movement spreads to the whole body as the person gives in to gravity and lies down.

Sperm's Journey to and Fertilization of the Egg

The sperm faces a Herculean task of swimming the equivalent of eight to ten miles in his journey to the egg. The pH balance of the vagina, the viscosity of the cervical mucous, the hospitality (or lack of it) in the uterine lining, the correct choice of a fallopian tube and the journey up the tube (against the villi, which are designed to carry the fertilized egg to the womb) are all tremendous obstacles that must be overcome even before encountering the (relatively) huge egg. This phase of the sperm's experience is expressed by the client in a rhythmical, total body "wave" similar to the swimming motions of a tadpole, with the feet together and the head leading the way. The client's hands and arms are usually uninvolved and lay passively alongside the body, or they parallel the body in "waves" of swimming movements.

One telling attribute of the sperm's fertilization experience is the focus of the burrowing on the top of the client's head, between the crown and the forehead. This contrasts with birth re-experience, where the focus is on the client's crown, and implantation, where the focus of the burrowing is more likely to be on the client's forehead/hairline.

Prior to fertilization, the sperm sometimes faces the experience of not being able to force his way in and having to anxiously wait to be accepted, knowing that the consequence of being rejected is death. Many people report a sense of rejection initially for being the "wrong" sex - that is, a sperm that would make the egg into a boy (if the egg preferred being a girl) or a girl (if the egg preferred to be a boy). Many people also describe re-experiencing an anguished "battle" - in which the sperm is not lovingly welcomed by the egg but must woo the egg into accepting him or exert whatever influence he can muster to win her acceptance. In these instances, the egg grudgingly allows the sperm in, but these people are left with a lifelong sense of "not being good enough" because of not having been accepted readily on their own merits.

Re-experiencing this "rejection" and fully expressing the accompanying feelings, however, offers relief from the lifelong sense of inadequacy.

Egg's Receiving the Sperm

By the time the sperm has reached the egg, he has seen the relentless diminishment of his group to an average of 50 survivors. Of these 50, it was long believed that the "victor" was the sperm that succeeded in "penetrating" the egg; the analogy was one of conquest.

Clients re-experiencing their own cellular consciousness and, later, electron microscopy has revealed that, at this point, the egg sometimes exerts a choice as to which sperm will fertilize her. An enzyme coat that surrounds the sperm's head - previously protected by a covering that is gradually worn away in the journey to the egg - dissolves the egg's outer layer.

The zona pellucida that surrounds the egg becomes honeycombed as the sperm begin to "burrow." Then, as several sperm reach the innermost layer of the egg's covering, the egg sometimes puts out tiny arms to help "sweep" the sperm inward and, at one point, they coalesce around one specific sperm to bring him in. It is clear that the egg can exert her prerogative in choosing which of the sperm present will fertilize her.

The movement associated with the egg's exercise of this "joining" is embodied in the motion that accompanies the phrase "egging someone on" - a bilateral motion of the arms, reaching out with open hands to sweep the sperm inward toward the midline of the body. The motion often starts very small, then develops into wide, sweeping motions - the arms completely extended, sweeping outward from the sides, around in front of the body, up and then inward to the heart/chest.

Adopted children or children whose mothers died while they were very young often report great satisfaction in the "knowing" they receive of their mothers after an experience of their own cellular consciousness. It is certainly true that our bodies can reveal to us the truth of our parents and of our experiences with more accuracy than family anecdotes, history, and legends.

Conception and Descent Through Fallopian Tube

As the sperm enters the egg, three things happen. First, the sperm's tail usually comes off (reported as everything from "snapping off" to simply "falling away"). Second, the egg's outer layer becomes impenetrable to any other sperm. Third, the sperm disappears into the egg and its head opens, sending its DNA throughout the interior of the egg. Clients have reported this opening as ranging from an "explosion" that "sprays" the DNA through the egg, to "cracking open" so the DNA can "ooze" out. Again we emphasize, every person's experience is individual.

As clients re-experience this point in fertilization, their movements often switch to a lyrical, rhythmic, bilateral ballet of union. The client's body rocks gently from side to side, sometimes going up on one hip or the other, balancing delicately as the fingers continue to express the nuances of this tiny new being's earliest physical development.

The one-celled fertilized egg, or zygote, now containing the DNA from both the egg and sperm, begins the lifelong task of dividing to create new cells. However, the most significant cell division that one ever experiences is the split that transforms one from a unified, one-celled being into two cells, beginning the process towards becoming a complex, multi-celled, specialized creature. This experience is often an emotionally challenging one, with a sense of having to create oneself from scratch.

The period going "down the tubes" is sometimes one of bliss, union, relaxation, comfort, and growth. Sometimes it is a sad, tension-filled, stifling or horrifying experience as the egg passes the energetic or physical remnants of all the eggs and conceptuses that have gone before and died. This experience continues for the six to ten days it takes for the egg to reach the uterus and implant in the uterine wall. Clients have reported that re-experiencing the journey is so comforting and pleasant that they are reluctant to let the experience end, or so awful that they can't wait for it to end.

Identical twins often report that it is at this time, during the descent through the fallopian tube, that they made the decision to split into twins. In separate regressions exploring their individual experiences, twins overwhelmingly agree which one of them existed first and which one is the result of the split. The reason for splitting differs in each set of twins, but a common reason is the need for reinforcements or support for facing the circumstances presented by the family into which they are being born.

Research shows that approximately 10% of single births begin as multiple conceptions. [This statistic has been widely misreported as 70%!] This means that many single-birth children began as a twin (or triplet, etc.) and experienced an early loss which is usually unacknowledged. Loss of a twin usually occurs early, during the journey through the fallopian tube, at conception, or soon after. Many people report that the loss of this early relationship is the root of their eternal search for their "other half" or soul mate.

Implantation

The blastocyst - the multi-celled fertilized egg - faces another crisis of survival when it leaves the fallopian tube and descends into the uterus. At this point, the blastocyst must implant into the

uterine wall or die. In women who fear being pregnant or do not want to be pregnant (for whatever reason), this connection often feels very tenuous to the blastocyst.

Many people who regress to this experience report a sense of having to "hold on for dear life." It is possible for a woman to make her womb a hostile place and to prevent implantation from happening. Commonly, the mother's hostile emotions are transmitted biochemically to the fertilized egg, which experiences the womb as toxic. In women with ambivalent or hostile feelings, implantation often occurs but only after a tremendous struggle on the part of the blastocyst.

People who re-experience difficult implantations tell of trying to attach and, when they fail, descending further into the uterus to try again and "bouncing off the walls" along the way. When such a blastocyst finally succeeds in making the connection further down, its location is such that the subsequent development of the placenta obstructs the cervical opening, causing at birth the life-threatening condition of placenta previa. This life-or-death crisis at birth is thus a replay of the life-or-death crisis experienced at implantation.

Typical body motions of clients re-experiencing implantation include the gentle "burrowing" action of the head, focused on the forehead, and "grasping" movements of the hands. The grasping can get very desperate as the blastocyst senses the woman's inhospitality - ranging from reluctance to outright hostility.

Spiritual Longing

Many people experience an acute sense of "longing to return home" or "divine homesickness" (as termed by William Emerson). This is usually expressed by some kind of reaching behind, usually accompanied by the over-arching of the back but sometimes by bending and reaching through the legs, or under the arms. Sometimes the reaching is directed more directly upward, but most often up and behind. It is not uncommon for the person experiencing this spiritual longing to have a sense of having been "exiled" from the world of spirit, or being forced to incarnate, or punished by being sent back into a body. Even when the person is aware of having agreed to come into a body, there is often a deep sense of loss and, to varying degrees, an accompanying sense of bewilderment, fear, confusion, anger, disappointment, betrayal or disgust. The act of coming into a body is often experienced as gross, dark, disgusting, slow, thick, dense or heavy - in contrast to the experience of being purely spirit as light, pure, facile, fine and refined.

Timing

The preceding experiences have been described in the order in which they occur in biology. However, in re-experiencing one's cellular consciousness, these events are usually relived and expressed out of "biological order." The order in which these experiences emerge is unique for every individual and is always the perfect order necessary for that person's emotional and physical healing.

Nevertheless, the body memories of being a sperm tend to be the easiest to reclaim and express. And of these, the "hurry, hurry" feeling of the sperm waiting for ejaculation is usually first to emerge. Perhaps it is because that feeling is so prevalent in our current society that it is usually quite easy for people to identify with and express in cellular consciousness.

The tadpole-like swimming movements of the sperm on its journey often emerge next, whether in the same session or many sessions later.

By contrast, the egg's experience is much more subtle than the frenzy of the sperm; consequently egg experiences usually emerge after the sperm movements have been experienced.

There is no strong pattern as to when people re-experience the beautiful descent through the fallopian tube, the burrowing of implantation or spiritual longing. Sometimes the urgency of the sperm waiting for ejaculation and then swimming to the egg and the blastocyst's attempts at implantation are experienced together as a multilevel feeling of fear, terror, and urgency embodied in the typical expressions of "I have to try" or "I can't make it."

At times, people experience the warm, maternal power of the egg welcoming the sperm in together with the blastocyst's period of bliss descending the tube. Therefore outside of the tendency for sperm feelings to emerge first, followed usually by the egg-welcoming-the-sperm feelings, the other experiences tend to emerge in even more widely varying order after that, depending on the person. This is true with the exception that for most people the last experience to emerge is that of the egg leaving the ovary. This is strange, of course, because it is the earliest experience to occur biologically although, on a transpersonal plane, the soul leaving the spirit realm and incarnating is an even earlier experience.

But the egg leaving the sisterhood of the ovary is the first physical experience of taking a risk. The egg (the person) at this point has no reassurance from physical experience that she will survive and, understandably, this is often the most difficult cellular memory to reach and re-experience.

Staying True to Your Experience

Each person's experience is unique and individual. Many of the feelings expressed in cellular consciousness happen simultaneously or people find that they flip quickly between similar feelings that occurred at different times of development. People will often process a particular feeling, related to a particular biological event, for weeks or months, before the next one emerges. There is no correct pace or right or wrong order in which to relive or express feelings. The only absolute truth in doing cellular consciousness work is for each person to remain completely true to his or her own experience. No one can know the truth of anyone's life better than that person. The guidelines set forth in this article may be useful in making the most of the cellular consciousness experience - both for the therapist and the client. However, nothing in this article supersedes the experiences of the person doing the feeling and inner exploration.

Closing

As we said at the beginning, we believe that cellular consciousness is a powerful tool to bring about peace on the planet. When we are in touch with our own cellular consciousness, we see that there are few true differences between people. We are all in this together and we need each other. We wish you peace and love.

Author Bios

Graham Farrant, M.D., pioneered cellular consciousness work in seven countries. He was the first Australian psychiatrist to earn certificates in adult and child psychiatry from North America. He traveled extensively in North America and Europe, offering workshops and trainings in his ground-breaking work. He was loved and deeply appreciated for his ability and willingness to connect with people on a heart level. He died 28 December 1993 in Melbourne.

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