Discovering the INNER MOTHER

A Guide to Healing the Mother Wound and Claiming Your Personal Power

Bethany Webster

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Chapter 1

WHAT IS THE MOTHER WOUND?

Questions for Reflection

1. In the context of the principles of patriarchy, in what ways do you see patriarchy influencing your life at the moment? How have you been coping with this?
2. As an extension of patriarchy's devaluation of women, our culture has a wounded relationship with mothers, seeing them as either all-loving all the time or to be blamed for everything. How did your own mother cope with this? How has this cultural distortion impacted your relationship with your mother? To what degree did you feel you had to carry or absorb your mother's pain as part of the role of being a good daughter?

Chapter 2

HOW DOES THE MOTHER WOUND MANIFEST?

Questions for Reflection

1. How did your mother convey and pass along to you her beliefs, either through her spoken words or covertly through her choices, decisions, and actions?
2. What were your mother's beliefs about the big areas of life, such as money, men, sexuality, career potential, her own body, marriage female friendships, her own mother, family norms, etc.?
3. How are your mother's beliefs showing up in your own life? Are there ways you have unconsciously absorbed her beliefs as my own?
4. What are some simple ways you can act more in alignment with your own authentic beliefs instead? Are there any fears about how your own authentic choices and beliefs would impact your relationship with my mother?

Questions for Moms to Reflect On to Honor Themselves *and* Clear the Way for Their Daughters

1. What did I need from my own mother that I did not get? In what ways may I be unconsciously projecting these needs onto my daughter or other people?

2. Am I getting the mothering and nurturing I need in my daily life? If not, how can I get those needs met (friends, experiences, tools, professional support)?
3. Am I neglecting my daughter's emotional needs? Do her emotional needs make me uncomfortable? If so, which ones? What do they bring up for me?
4. Am I asking my daughter to mother me in any way? If so, what are some ways I can get the support I need from another source so I don't put this burden on my daughter?
5. Do I feel any rage or resentment about being a mom? If so, what are some safe and healthy ways I can process and work through that?
6. Do I feel at all jealous of or threatened by my daughter? If so, why? How does this manifest in my daily interactions with my daughter? How can I find a safe, healthy way to process that?
7. What limitations did I have to accept about myself as a young girl my daughter's age? How did that impact my life? How can I support my daughter in not accepting those same limitations?
8. How can I demonstrate to my daughter that I value myself?
9. What comes up for me when I reflect on my daughter having more opportunities than I did?
10. In what ways might I be passing along that belief in limitations? How might I turn that around?

Chapter 3

POWER DYNAMICS OF THE MOTHER WOUND

Questions for Reflection

1. How do you see power dynamics playing out in your life? In your interpersonal relationships, communities, organizations?
2. In what ways do you see the "patriarchal bind" play out in your life and the lives of women around you? (Patriarchal bind is the sense of needing to be successful but not too successful, pretty but not too pretty, etc.)
3. Looking back at your childhood, how did your family approach difficult emotions? How were they addressed or avoided? How do those coping mechanisms impact you now?
4. In reflecting on the relationship with your mother, what was the power dynamic like between you? Did any of these dynamics resonate with you (mompathy, momipulation, mother tantrums)?

Chapter 4

WHAT KEEPS THE MOTHER WOUND IN PLACE, AND WHY DOES IT ENDURE?

Questions for Reflection

1. Growing up, did you ever feel obligated to uplift, protect, or nurture your mother? If so, under what circumstances, and how often did they occur? How did this impact you as a child, and how does it impact you now as an adult woman?
2. How was loyalty defined in your family, both explicitly and implicitly?
3. As a female child, how often did you feel obligated to hide or sugar-coat your true feelings? What views about yourself do you think you internalized as a result?

Chapter 5

THE MOTHER GAP

Questions for Reflection

1. What is your mother gap (the gap between what you needed and what you received from your mother)?
2. How have you sought to fill the mother gap up to this point? What were the masks you wore or roles you unconsciously played to compensate for the gap?
3. What actions can you take now to fill the mother gap from within yourself?

Chapter 6

SIGNS YOU NEED TO MAKE A CHANGE

Questions for Reflection

1. When you were a little girl, what were the specific situations in which your mother responded to you with praise, recognition, rewards, validation, and love?
2. What were the specific situations in which you were met with some degree of rejection, aggressive hostility, cold withdrawal, animosity, jealousy, or bitterness?
3. What is a big challenge that you're having right now in your life that has been a challenge for a long time? How does this relate to dynamics in your early childhood? What painful emotion is coming up for you now that you also felt as a child?

Chapter 7

THE RUPTURE OF THE MOTHER LINE AND THE COST OF BECOMING REAL

Questions for Reflection

1. How was conflict handled in my family?
2. What typically stops me from initiating difficult conversations?
3. What do I need to believe in order to get better at disruptive truth-telling? What beliefs do I need to let go?

Chapter 8

BOUNDARIES

Questions for Reflection

1. Growing up, girls often receive messages that it's not attractive or polite to say "no." As you grew up, how did your mother and other adults around you respond to your "no"?
2. Did you internalize any beliefs that create guilt for setting boundaries? What are some of those beliefs? (For example: Saying no is a form of rejecting or abandoning others. Boundaries mean you don't love the other person. Having limits means putting the relationship in jeopardy.)
3. What new beliefs might support you in setting boundaries more confidently now? (For example: Boundaries are a normal, essential part of human relationships. Boundaries are a form of self-respect. I am a singular and separate being. My boundaries enhance, not detract from, my relationships.)

Chapter 9

THE TABOO OF QUESTIONING MOTHER

Questions for Reflection

1. What myths, stereotypes, or cultural messages have caused you to feel any form of guilt or shame for your true feelings toward or experiences with your mother?
2. What taboos do you experience in your daily life that prevent you from being more authentic? What experiences early in your life reinforced those taboos?
3. What do you think could be possible for you if you ceased obeying these taboos and moved forward with what you truly desire? How would your life be different?

Chapter 10

GIVING UP THE IMPOSSIBLE DREAM

Questions for Reflection

1. In what ways did you see the impossible dream showing up in your childhood and now in your life as an adult woman?
2. What were some unconscious strategies you used in childhood to feel more safe, secure, and approved of?
3. What are some new beliefs that you can adopt to help you replace negative beliefs from your childhood that, if embodied and acted upon, would create some tangible change in your life, moving you beyond the legacy of your family in some way?

Chapter 11

ACCOUNTABILITY

Questions for Reflection

1. Are there any memories or experiences from your childhood that you know would benefit from deeper exploration and healing? What about your childhood have you not yet accounted for within yourself, that if embraced and acknowledged could provide some deep relief and momentum in your current life?
2. What are some parts or aspects of yourself you had to cut yourself off from or downplay in order to be more approved of in your family?
3. What are some nourishing ways you can embrace or bring these buried traits to life in yourself now? What are some action steps you can take to begin welcoming these qualities back into your life?

Chapter 12

GRIEVING

Questions for Reflection

1. What feelings do you tend to avoid or downplay in yourself, which, if embraced and felt, would greatly lighten your emotional load?
2. If you feel inspired, the next time this challenging emotion arises, visualize yourself calmly embracing that emotion with sincerity and affection. Are there any supports you can put in place to support that experience?
3. What were your authenticity needs as a child? What were your attachment needs? In what ways did you have to suppress your authenticity needs to secure your attachment with your mother/caretakers? What are some ways you can give those suppressed authenticity needs some expression and support now?

Chapter 13

DISCOVERING THE INNER MOTHER

Questions for Reflection

1. Do any of the above clues resonate with you? If so, which ones?
2. Find a picture of yourself as a little girl and look at it closely. Notice the details and delight in the innocence and how unique you were. As your adult self, send that little girl some loving energy of kindness and acceptance. “I love you and I’m here for you now.” Put the photo where you can see it every day.
3. What is one activity or thing you could do to nurture your inner child today? What would help you feel most nurtured, loved, supported? Think of it and then actually do it. Notice how you feel afterward.

Exercise: 6 Steps to Dialoguing with Your Inner Child

1. **Connect:** Speak to your inner child inwardly, out loud, or in writing; greet her with words like “Hello! I’m here with you.” Communicate that you are present and available to her. (If you’re just starting out with this, simply doing step 1 throughout the day can be hugely comforting.)

2. **Inquire:** Ask your inner child questions such as “What’s happening for you right now? How are you feeling? What do you need right now? Would you like to talk about what’s upsetting you?”
3. **Listen:** Actually make space to listen and observe closely what is coming up. Pay attention to the words, images, and sensations that arise from your inner child.
4. **Empathize:** Validate your inner child’s emotional experience by repeating back to her, in a gentle tone, what you heard her say, and respond with empathy: “I see. Yes, that makes total sense to me, of course you would feel that way. It’s normal and natural that you would feel like that, given what you’ve been through.”
5. **Internal Holding:** Envision yourself holding and soothing her physically, gently and respectfully holding her hand, making eye contact, carrying her, stroking her brow in a nurturing, motherly way, etc.
6. **Positive Reframe:** Create an empowering narrative to help her make sense of what has happened in the past and what is happening now. Gently explain that the past is over and she is safe now. This positive narrative must be honest, encouraging, and heartfelt. Show concrete evidence to validate the new narrative that affirms your inner child’s worth and safety in the present moment.

Chapter 14

LIFE BEYOND THE MOTHER WOUND

Questions for Reflection

1. As female children, many of us were forced to say yes to things we wanted to say no to. We may have had to endure experiences that felt unbearable or challenging without being able to express our suffering. What were some of your experiences like this?
2. Imagine connecting with your inner child. Express empathy for how difficult it was to feel alone, powerless, or without a voice in those moments. Imagine telling her that now you are there as her adult self to protect her right to say no and have her needs and boundaries respected.
3. What are some ways you can support your right to say no in your daily life that would affirm your sovereignty now as an adult woman and would also nourish your inner child's sense of being protected and heard?

APPENDIX

Topics in this book touch on subjects like brain functioning and complex developmental trauma. Due to the fact that I am a coach and not a psychotherapist or trauma specialist, I have asked my therapist, Nicole Ditz, to provide this appendix below with information for those who want to learn more. A list of clinical resources follows this appendix for further exploration.

Nicole Ann Ditz

Integrative depth psychotherapist specializing for over twenty years in the long-term intensive treatment of complex developmental trauma in adults. www.holisticdepththerapy.com

Disclaimer: The emerging field of developmental complex trauma encompasses vastly comprehensive and multidisciplinary fields that contribute to wide-ranging scientific investigations, theoretical knowledge, and innumerable treatment modalities. These include, but are certainly not limited to, the brain sciences, interpersonal neurobiology, developmental psychology, attachment research and practice, cognitive sciences, contemporary relational psychoanalysis, models of characterological development, as well as myriad experiential, somatic, affective/emotional, component-based, and relational schools of treatment. Given this complexity and the limited space allocated in this appendix, I am only able to provide cursory explanations here. You can check out my website and the resources below if you are interested in exploring this complex field further.

My style of therapy includes numerous practices, modalities, and theories. These practices have included but are not limited to CBT,

DBT and learning distress tolerance skills, Gestalt role-plays, psychodynamic object relations work on ways one internalizes the bad mother introject, Jungian practices, dreamwork, the expressive arts/inner process journaling, voice dialogue working with inner parts/critic, solution-focused therapy when problems of living arose, Internal Family Systems, memory reconsolidation, traumatic transference work, traumatic reenactment and repair work, working with internal structural dissociation of inner parts, emotional regulation trauma techniques, transpersonal work, and depth couples work.

- **Complex Developmental Trauma** is often the result of persistent physical and emotional abuse and/or neglect as well as threatening, rejecting, invalidating, invasive, and chronic emotional misattunements that generally began in early childhood and that occurred within the vulnerable child's primary attachment caregiving system. Parents are sometimes quite well-intentioned but, due to their own psychological problems and unprocessed traumas, simply unable to care for and nurture their children in healthy ways. Developmental trauma can lead to varying levels of widespread and multifaceted disruption and disorganization of both the rapidly developing brain's neural and structural architecture as well as the autonomic nervous system, inclusive of the sympathetic and parasympathetic branches. These branches are responsible for fight/flight/freeze/collapse/shut down reactions secondary to major threats like trauma. The traumatized brain is marked by a lack of robust integration between the top executive prefrontal brain region and the more primitive emotional and survival-oriented limbic midbrain and brain stem. Secondarily, trauma can diminish the rich synaptic connectivity between the horizontal right and left brain regions and cause cross-hemispheric disorganization. The right subcortical hemisphere, among its innumerable other functions, is responsible more for storing prelinguistic implicit emotional trauma memories

and somatic trauma-related sensations, whereas the left hemisphere is more oriented toward conscious logical, analytical, verbal, and cognitive abstract understanding. Since a good portion of relational childhood trauma is stored in preverbal unconscious neural brain networks, a therapy based predominately on cognitive verbal analysis is of limited usefulness in promoting healing. A competent trauma therapist must spend much time connecting with the adult's primitive subcortical emotional right brain through deep attachment-based processes and experiential work.

Complex Developmental Trauma and its deleterious impact on brain and nervous system organization leads to widespread damaging brain alterations in consciousness, arousal, emotional, cognitive, perceptual, and relational/attachment systems, as well as internal working brain models of self, others, and the world. This can lead to ongoing emotional dysregulation; dissociative symptoms; damage in the formation of a robust sense of self with often heavy shame-based identifications; feelings of pervasive isolation/aloneness; occasional overwhelming spontaneous eruptive affects of terror, horror, or despair; as well as varying levels of chronic anxiety, agitation, depression, and/or anger. Interpersonal symptoms may include, for example, distrust of others, social anxiety, and insecure primary attachment styles such as anxious/preoccupied, avoidant/dismissive, and disorganized attachment. A pervasive and distorted negative worldview can form based on the way the child was treated within the traumatic familial environment. Complex subconscious projections may constellate around a nebulous sense of external threat, general unease, and fear of known and unknown others who may harm, invade, or criticize the fragile self. Conversely, another traumatic worldview based on an unconscious childhood history of emotional deprivation may instead unconsciously search for an idealized savior mother or father figure in relationships, institutions, social groups, religious/spiritual organizations, and so on.

Trauma becomes deeply embedded in the child's (and later adult's) neural brain pathways and nervous system. Thus traumatic symptoms are reexperienced repetitively in the adult's present embodied subjectivity via painful sensations, emotions, perceptual distortions, and oscillating states of sympathetic hyperarousal and parasympathetic hypoarousal that lie outside the brain's window of tolerance, a window in which emotions and experiences can be easily integrated. This can leave survivors feeling as though they are on a distressing roller coaster moving between unsafe high sympathetic states of fear/panic/anger and parasympathetic states of numbing/dissociation/collapse. Neural triggering of trauma-related issues occurs even when cued by very subtle associations in the current environment that remind the brain subconsciously of childhood traumatic events, triggering the firing of these old engrained overreactive neural brain pathways. If others, for example, seem inattentive to a trauma survivor with an emotional neglect history, this could trigger disproportionate feelings of rejection, abandonment, or shame in the survivor. Given this constant experiential brain and nervous system replay of the trauma in the present, much more of my time is spent working with the current manifestations and sequelae of developmental trauma rather than excavating memories from the past. Trauma from the past is not really in the past, but rather lives on powerfully and experientially in the present, unless intensive healing is undertaken. Fortunately, our brains have remarkable neuroplasticity and are able to change throughout life. Research within the past decade in brain imaging, molecular biology, neurobiology, and epigenetics has revealed that long-term psychotherapy can effect changes and modifications in synaptic plasticity, neurotransmitter metabolism, and even gene expression.

- **Characterological False Self–Defensive Organizations:** These are a hallmark of complex relational developmental trauma because the

child's brain, sense of self, and personality were formed within the crucible of a traumatizing and threatening family system within which the child had to survive. The false self forms a protective shell over the true self core and gets shaped to accommodate to the caregivers' implicit and explicit demands. These adaptations are attempts to preserve an insecure and fragile attachment bond with the primary caretaker and minimize further abuse and rejection. These characterological adaptations can take myriad forms. In the population of higher-functioning clients with whom I work, the adaptations I see most frequently include pleaser/compliant/over-accommodating types; strong/hero/in-control types; compulsively perfectionistic/successful/productive types; caretaker/mediator/parentified-child types; emotionally detached/cerebrally dominant types; and dreamy/dissociative/spiritual types. These and countless other adaptations are sadly often rewarded and reinforced by society both in childhood and adulthood. Much of my time as a trauma therapist is spent carefully and gently dismantling the constricting excesses of these defensive false personas while at the same time helping clients to grow and develop an exuberant, robust, and free authentic sense of self. (For an interesting descriptive read on trauma, psychological masks, and false/true self issues, I would refer you to my website section "The Invisible Faces of Complex Trauma.")

- **Black Hole:** In contemporary psychoanalysis and trauma theory, the black hole is described as dissociative gaps, breaches, internal voids, unformulated experiences, and missing structures in the formulation of a solid and cohesive sense of self. These deficits or psychological holes in self-structure are a consequence of a person's childhood development occurring within abusive, intrusive, and neglectful families. Authentic solid self structure coalesces and consolidates when a child develops within a generally calm, supportive, safe, protective, and emotionally attuned caregiving environment.

When the environment is traumatizing, the child is not able to rest in and explore her/his intrapsychic experience of self, but rather has to live, in a sense, inside out, hypervigilant to the threats in the external familial environment and defensively trying to anticipate and protect herself/himself from psychological and even sometimes physical harm. This creates traumatic disruptions in the process of self-formation. The holes in self-structure correlate with brain and nervous system disorganization, dysregulation, and internal structural dissociation. This, in turn, allows primitive eruptions of intense overwhelming affects like terror of annihilation, horror, or intense shame to sometimes break through defense structures and flood the child's and later the adult's conscious self. Some clients describe this subjectively as feeling like they might "disappear, dissolve, be destroyed, go crazy, implode, or shatter." Other clients describe these holes phenomenologically as being "empty, dark, cold spaces of nothingness" where they feel completely alone and fear they will cease to exist.

- **The External Womb:** As a deeply integrative and relationally based developmental trauma therapist, I conceive of the long-term corrective therapeutic relationship as being metaphorically a type of reparative therapeutic nest or external womb. The therapeutic relationship/alliance has been empirically found across all theoretical schools of psychology and interpersonal neurobiology to be the central healing agent regardless of what other practices and therapeutic strategies are employed. Within this specialized therapeutic womb, I provide for my clients an ongoing and steady flow of psychological, emotional, cognitive, and relational supplies that were missing during their critical formative childhood years of brain and self-development. This enriched relational growing environment provides millions of micro moments of empathic attunement, compassionate presence, skillful responsiveness, resonance, validation

and valuing, emotional holding and regulation, reframing of perceptual distortions, processing of traumatic memories, repair of therapeutic ruptures, psychoeducation, teaching innumerable new psychological skills, and a plethora of experiential opportunities to practice new ways of being an individuated and connected authentic self. The therapeutic womb allows for the growth of a new internalized working model of earned secure attachment. Some academic psychological schools refer to this therapeutic attachment relationship as providing a type of "limited reparenting." The burgeoning fields of brain sciences and neurobiology, along with new technology like fMRIs, are providing more and more evidence that this type of long-term corrective therapeutic relationship actually promotes neuroplastic changes in the brain's processing, integration, and structure.

- **Building an Authentic Sense of Self in Therapy:** A person's sense of self is always formed and deformed within primary caregiving relationships, beginning from birth. When those primary attachment relationships are fraught with traumatizing interactions, billions of healthy relational supplies crucial to the development of authentic self-formation are missing, and the process of developing a solid sense of self is profoundly derailed. However, due to lifelong brain plasticity, integrative relational trauma therapists like myself are able to provide, within a new corrective therapeutic relationship, and over many years, enough of the relational supplies that were missing or distorted at crucial formative periods. This is obviously not the same as receiving these supplies and a secure attachment relationship as a baby and child. Yet it is still so amazing to me how many of my clients are able to grow from being chronically emotionally dysregulated, lost, disconnected from themselves, unaware of their true inner needs/wants, trapped within painful characterological defense styles and unhealthy relationships to

becoming significantly more assertive, confident, self-aware, alive, emotionally regulated, secure in their sense of self-worth, and able to form healthy, fulfilling relationships and experience themselves internally as solid and real. This is the hard-won miracle of the slow constellation of true selfhood. It seems to take forever—two steps forward, one step back. Old ways of being, defenses, and wounded patterns are formidable and tenacious. Yet for those with perseverance, fortitude, and courage to stay the course, I have witnessed the growth of an authentic and evolving sense of self in so many people who started off feeling broken, worthless, and hopeless. People are damaged in early traumatizing relationships, but they can also be helped to change, heal, and grow a new sense of self within skillful and emotionally responsive relationships throughout the life span. It is impossible to grow an authentic sense of self alone.

- **Inner Mother, Inner Child, and Internal Bonding:** Inner child parts are considered subpersonalities in a healthy, nontraumatized adult. They carry the developmental imprint in our brain of our formative childhood experiences: explicit and implicit memories, feelings, beliefs, views of ourselves and the world, as well as early primary attachment experiences. In the case of developmental trauma, these formative experiences were rife with deeply distressing emotions such as fear, shame, distrust, and hurt in primary relationships and a basic lack of safety and emotional security. For trauma survivors, these child parts or regressive brain states are often, at least initially, partially dissociated within the self system in order to allow the adult to function in the world. We might metaphorically conceive of these traumatized child parts as appearing in the adult person during dysregulated sympathetic nervous system activity, such as strong fear and anger, or overactive parasympathetic states, such as shame and despair. We can continue to extend this metaphor to

the idea of traumatized inner child states as being representational of more primitive, subcortical unconscious brain stem and limbic region activity associated with prelinguistic strong emotions, sensations, survival needs, warped internal working models of insecure attachment relations, as well as traumatic fight/flight/freeze/shut down states.

The metaphorical "inner mother" can be imagined to be associated with bilateral prefrontal executive mature brain regions marked by conscious reason, logic, problem solving, and interoceptive self-reflective skills. This inner mother has the capacity to develop self-system leadership, learning to regulate and self-soothe intense states of distress in the child subparts and translate them into conceptual understanding and effective actions. These inner mother executive brain capacities are learned by internalizing, over a long time, the "mothering" functions of the trauma therapist. Trauma survivors often initially have little capacity for felt insight and emotional self-regulation, as primitive traumatized affective states are very powerful and easily overwhelm the higher regions of the brain. Thus, the therapist must directly attend to providing relational supplies and emotionally attuned care of the adult's child parts for quite some time until the adult grows the capacity to take over these skills for herself.

Over much time, as a secure internal attachment bond forms between inner mother and inner child sub-selves, the brain becomes more vertically and horizontally integrated from the top down and across the right and left hemispheres. This gives the healing survivor a sense of greater calm, harmony, competency, safety, security, emotional regulation, and well-being. Inner child subparts do not disappear, as some believe, but rather grow a felt sense of being emotionally secure and compassionately attended to by the loving presence of an inner mother self. They are slowly integrated within

the person's multifaceted sense of self. This internal brain coherence allows the person to navigate the tasks of adult life competently while infused with the vitality, imagination, and aliveness of the healed and held child parts.

If you are interested in reading further, refer to my website sections "Trauma and Treatment of the Inner Child" and "Voices of the Inner Child."

CLINICAL RESOURCES ON COMPLEX DEVELOPMENTAL TRAUMA, PSYCHOTHERAPY, AND THE NEUROSCIENCES

Armstrong, Courtney. *Rethinking Trauma Treatment: Attachment, Memory Reconsolidation, and Resilience*. New York: W. W. Norton & Company, 2019.

Badenoch, Bonnie. *The Heart of Trauma: Healing the Embodied Brain in the Context of Relationships*. New York: W. W. Norton & Company, 2017.

Cozolino, Louis. *The Neuroscience of Psychotherapy: Building and Rebuilding the Human Brain*. New York: W. W. Norton & Company, 2002.

Fisher, Janina. *Healing the Fragmented Selves of Trauma Survivors: Overcoming Internal Self-Alienation*. New York: Routledge, 2017.

Heller, Laurence, and Aline LaPierre. *Healing Developmental Trauma: How Early Trauma Affects Self-Regulation, Self-Image, and the Capacity for Relationships*. Berkeley, CA: North Atlantic Books, 2012.

Pease Banitt, Susan. *Wisdom, Attachment, and Love in Trauma Therapy: Beyond Evidence-Based Practice*. New York: Routledge, 2019.

Schore, Allan N. *Right Brain Psychotherapy*. New York: W. W. Norton & Company, 2019.

Solomon, Marion, and Daniel J. Siegel, eds. *How People Change: Relationships and Neuroplasticity in Psychotherapy*. New York: W. W. Norton & Company, 2017.

Streep, Peg. *Daughter Detox: Recovering from an Unloving Mother and Reclaiming Your Life*. Ile D'Espoir Press, 2017.

Van der Kolk, Bessel. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. New York: Viking, 2014.

BIBLIOGRAPHY

Bargh, John A. *Before You Know It: The Unconscious Reasons We Do What We Do*. New York: Atria Paperback, 2019.

Bowlby, John. *A Secure Base: Parent-Child Attachment and Healthy Human Development*. New York: Basic Books, 1988.

Brach, Tara. *Radical Acceptance: Embracing Your Life with the Heart of a Buddha*. New York: Bantam, 2003.

Bradshaw, John. *Homecoming: Reclaiming and Championing Your Inner Child*. New York: Bantam, 1990.

Cori, Jasmin Lee. *The Emotionally Absent Mother: A Guide to Self-Healing and Getting the Love You Missed.* New York: Experiment, 2010.

Dworkin, Andrea. *Pornography: Men Possessing Women*. New York: Plume, 1989.

Evans, Patricia. *The Verbally Abusive Relationship: How to Recognize It and How to Respond.* Holbrook, MA: Adams Media, 2010.

Friday, Nancy. *My Mother, My Self: The Daughter's Search for Identity*. New York: HarperCollins, 2010.

Gibson, Lindsay C. *Adult Children of Emotionally Immature Parents: How to Heal from Distant, Rejecting, or Self-Involved Parents*. Oakland, CA: New Harbinger, 2015.

Harris, Massimilla. *Into the Heart of the Feminine: An Archetypal Journey to Renew Strength, Love, and Creativity*. Asheville, NC: Daphne Publications, 2014.

Lerner, Gerda. *The Creation of Patriarchy.* New York: Oxford University Press, 1986.

Martinez, Mario E. *The Mindbody Code: How to Change the Beliefs That Limit Your Health, Longevity, and Success*. Boulder, CO: Sounds True, 2016.

Maté, Gabor. *In the Realm of Hungry Ghosts: Close Encounters with Addiction*. Toronto: Vintage Canada, 2018.

Millett, Kate. *Sexual Politics*. New York: Columbia University Press, 2016.

Moffitt, Phillip. "Healing Your Mother (or Father) Wound." 2011. Retrieved from http://dharmawisdom.org/teachings/articles/healing-your-mother-or-father-wound.

Oliver, Mary. *Dream Work*. Boston: Atlantic Monthly Press, 1986.

Penny, L. "Most Women You Know Are Angry—and That's All Right." *Teen Vogue*, August 2, 2017. Retrieved from https://www.teenvogue.com/story/women-angry-anger-laurie-penny.

Piercy, Marge. *Circles on the Water: Selected Poems of Marge Piercy*. New York: Knopf, 2002.

Reuther, Linda. "Homecoming." *In Her Words: An Anthology of Poetry about the Great Goddess*, edited by Burleigh Mutén, 222. Shambala, 1999.

Rich, Adrienne. *On Lies, Secrets, and Silence: Selected Prose, 1966–1978*. New York: W. W. Norton & Company, 1995.

Shaw, George Bernard. *Annajanska, the Bolshevik Empress*. Whitefish, MT: Kessinger Publishing, 2004.

Sieff, D. F. "Confronting Death Mother: An Interview with Marion Woodman." *Spring Journal* 81 (2009): 177–199.

Tolle, Eckhart. *The Power of Now: A Guide to Spiritual Enlightenment*. Vancouver: Namaste Publishing, 2004.

Winnicott, D. W. "Ego Distortion in Terms of True and False Self." In *The Maturational Processes and the Facilitating Environment: Studies in the Theory of Emotional Development,* 140–57. New York: International Universities Press, Inc., 1965.

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