



Embodied Compassion: An Interview with Michael Shea, PhD

By Nancy Eichhorn, PhD

We start this article with a meditation created by Michael Shea. As you read each step, we encourage your participation. Engaging in this experience will, in fact, deepen your relationship with yourself and provide an embodied foundation for the conversation that follows.

Compassion Meditation: Coming into a Deeper Relationship with Your Heart

Step 1: A brief body scan

Situate yourself in a comfortable position, a place where you can scan your body; this is an internalized check-in, not a visual perusal of your arms and legs but an intimate feeling as you notice the total surface of your skin starting at your feet and legs, sensing their covering in this moment, perhaps sensing your clothes resting on your skin. Next sense your pelvis. Moving up into the trunk, notice the clothes on your abdomen and rib cage, notice your breath, sense your shoulders, sometimes you feel the rise and fall of your shoulders as your breath moves in and out with your skin sliding against your clothes. Now you are sensing your arms, sensing the skin on your arms all the way down to your fingertips; sense the skin of your neck, your face, around your ears, your scalp. What does the air against your face feel like?

It's always important to do a brief body scan to get a sense of the whole body at the level of the skin. It's okay if you can't feel the whole body; it's okay if you have gaps say between your knees and pelvis; gaps are part of the whole, include the gaps, include the fragments as part of the whole body like islands in the middle of the stream.

Step 2: Tuning into your respiratory diaphragm

Next tune into the movement of the muscle helping your breathing. You're noticing the movement of the respiratory diaphragm, sensing the entire circumference of where it is attached to the costal arch in front around to the floating ribs in your mid to lower back. Noticing this movement in the front of your trunk, the back of your trunk and the sides of your trunk. Without any focus on breathing air remain aware of the movement of the diaphragm. Sense your diaphragm as it moves up and down inside you; it is intimately connected to your heart.

Step 3: Tuning into your heart

Now simply feel the movement and activity of your heart. If you feel comfortable, close your eyes to give yourself a little more focus on the area in the center of your chest, right in back of the sternum, right on top of the diaphragm. There should be a pulsation there. Perhaps a pumping motion. Perhaps the beating of a drum. Perhaps a surging of our life giving waters in the blood of life. Perhaps just a thump, thump, thump. Nonetheless, with no thought, images, or ideas, this simple act of sensing the movement of your heart can have a profound impact on brain states.

If you can't feel your heart, tune into the pulse on your wrist. Perhaps you can try feeling the heart beat when you wake up in the middle of the night to go to the bathroom, often times it is pounding then that's the time to start this practice. Lay in bed and feel your heart moving, beating. And, if you have learned a prayer or poem by heart, repeat it nonverbally to the rhythm of your heartbeat. Gradually over time it will reduce the anxiety and fear that you are used to living with in your life.

According to Michael Shea, PhD, educator, author, Biodynamic Craniosacral Therapist, former advanced Rolfer and a licensed massage therapist, this simple practice will generate an embodied relationship with your heart and cardiovascular system; developing this skill results in increased compassion, accurate empathy, changes in your brain structures, and a decrease of unnecessary fear living in your body while increasing your health, wellbeing and happiness in your body. How does he know this?

The Short Version of a Long History

Shea earned his doctorate in somatic psychology. A component of his doctoral research included manual therapy. He wanted to have more in-depth information regarding the originators of Craniosacral therapy, so he sought a mentor in the osteopathic community—James Jealous, D. O. Shea wanted to interview him and write about his work. Jealous spoke with him periodically for about a year and a half (1995-1996). The principle component of Jealous' sharing was based on human embryology.

"There was a steep learning curve here," Shea says, acknowledging he's come a long way in his embryologic study of embodiment. "Jim would always ask me on the phone, 'Did you find your embryo?' I would go out seeking more textbooks, reading more to figure this out. One day, I had this sweet experience. I was looking at this beautiful picture of an embryo—it was the aesthetics of it: the pastel colors, the way it was drawn—in conjunction with the circumstances of my own life story and I burst into tears. I had no idea why I was crying looking at this colored picture of an embryo. It was me a long time ago. At that point in my life I was working at a pediatric hospital and seeing a lot of children. I had just gotten married. I was attending spiritual retreats. When I shared my experience with Jim he said, 'Oh you found your embryo, and in finding your embryo you find your flow of love moving through you. You cry because you feel the embryo in yourself and your whole body with primary respiration—that slow movement of love and wholeness that goes through the human body.'" Shea points out that primary respiration is a therapeutic rhythm found in the body and associated with its healing from the osteopathic point of view.

"It was a sweet experience in the sense of a flow, a transparency in my body as if I had touched my origin. Something subtle and fluid moving through me, I could feel the movement of love and grace; it was no longer a cognition for me, it's a literal act of embodiment. I meditate with it daily now and feel it flow through me and I am no longer interested in where it comes from or where it is going. As the poets say 'love has no beginning and no end.' Naturally, I wanted to share this with everyone."

"I was studying intensely, writing about cross cultural anthropology when this originally happened, I became involved in depth psychology having my dreams analyzed, looking at how to heal and was researching different cultures. I was looking at their healing rituals when dealing with disease. I found out that all healing rituals help the stricken patient to go back to the embryonic period, when he or she was originally conceived and still connected with God or the spiritual origin involved with a culture's belief around creation. Some cultural rituals even take the client back to the origin of the universe.

"I apprenticed with a medicine man on the Navaho reservation in Arizona for 15 years, and I watched patients during elaborate and lengthy rituals taken back to the moment of their origin and the effect that had on their body and psyche. It wakes up something about your origin, about your undifferentiated wholeness, about your spirituality, about your own divinity. This originality free from disease is the preexisting condition rooted in our biology carried forward in every moment of our lives. When we connect with the love moving within us and through us, we experience our own divinity (*a metaphor for finding one's embryo*) directly without the need for elaborate religious structure to interpret it. It is really so simple

because of the association with what we biodynamic practitioners call primary respiration and dynamic stillness. This is simply a global and local perception of slowness and stillness."

A Bit about the Human Embryo

"The human embryo is a transparent living fluid body, it's almost 100% fluid. This is really our first original body. For the first two weeks after conception that's all it is—fluid and some stem cells. Depending on what source you consult, the human body is 65 to 92% water." Shea notes new research just out by Gerald Pollack (author of *The Fourth Phase of Water: Beyond Solid, Liquid, Vapor*), that states 99% of the molecules in our body are water molecules. Emilie Conrad, founder of Continuum, writes, "We are basically fluid beings that have arrived on land. All living processes owe their lineage to the movement of water. Our implicate preexistent memory beginning with the first cell, lies in the mysterious deep, quietly undulating, circulating, nourishing this aquatic being on its mission to planet earth. God is not elsewhere, but is moving through our cells and in every part of us with its undulating message. The fluid presence in our bodies is our fundamental environment; we are the moving water brought to land" (retrieved from <http://www.continuummovement.com/emilie-letter.php>).

Finding the fluid nature in the body has also been one of Shea's investigations—to find the embodied reality of the embryo is to find the fluid nature of the human adult body first as the whole cardiovascular system densifies from the fluid body. In Biodynamic Craniosacral Therapy, Shea explains that both the therapist and the client begin a healing session by sitting still (*note our opening meditation*) in order to perceive a very slow movement in the human body (primary respiration).

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The idea is to gradually connect with the three-dimensional fluid body, the living fluid continuum of our being, by initially sensing the total surface area of the skin where biological water is constantly moving and evaporating. "Fluid can be sensed under the skin as an ocean within and all over the surface of the skin as if being contained in an egg shaped vessel just as it was in the embryo being surrounded by an amniotic sac and a chorionic sac. There is constant evaporation of the body's water coming off the skin and surrounding the space immediately around the body. So sometimes the space around our body is like a cloud of water vapor."

For healing to happen, both the client and the practitioner "symbolically return to the undifferentiated wholeness of the original fluid body in the early embryo while staying in present time." Through embodiment practices, we have the capacity to maintain our interconnectedness throughout our lives when we connect with our fluid nature, our blood and our heart, Shea says. "This happens easily with the awareness of primary respiration and dynamic stillness because primary respiration is the movement of wholeness, the undifferentiated whole. It is the tide that moves through the water in our body. Mindfulness keeps us in present time in the noticing without interpretation and awareness allows us to sense the whole of our fluid nature out to the horizon and back."

Embodied Compassion: The Biodynamic Organization of the Whole Embryo Over Time

Early developmental biologists looking through microscopes at human embryos saw whole organisms, Shea says—they saw the conservation of biological wholeness carried forward over many stages of complex development. This wholeness is an important piece.

"For the first two weeks of life, embryos are fluid, they do not have different parts yet, just a few different types of stem cells as mentioned. Blood is the first organ to develop, so the second differentiated whole system is actually the cardiovascular system, the first being a whole intelligent fluid body." This second whole system has captured Shea's focus the past seven years—he's been investigating the heart throughout its development from conception to adulthood.

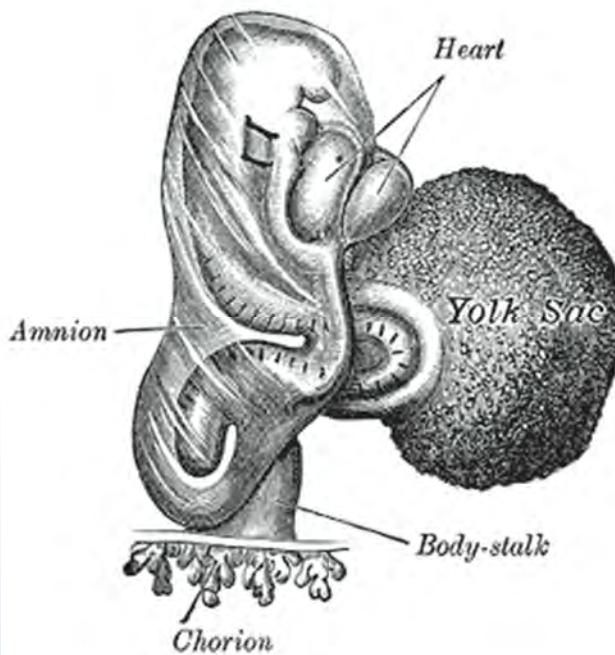
"Concurrent with this exploration, I took a formal vow to be a student

of the Dalai Lama. I first saw him while attending Naropa University for my Master's degree. I'd been a Buddhist for a long time and had taken several preliminary vows, but this was a tight connection, a vow to be with him as my formal teacher. One of his domains of interest is starting up centers for the study of human heart. The first was opened in Vancouver four or five years ago.

(The Center for Peace and Education opened in Vancouver in 2009 and is aligned with this ethos and the Dalai Lama's belief that each person must 'cultivate the heart, and work for peace within yourself and in the world').

"I took this as a message to move my entire career path into the investigation of the heart. Not much is known about the human heart especially prenatally and yet cardiovascular disease in humans starts prenatally. The only one system totally mapped out scientifically from conception is the central nervous system, which is getting the lion's share of the research. We don't know a lot about the biodynamics of growth in all the other systems of the body especially the heart," Shea says.

"I gobbled up every book on heart development I could buy, but there's not that much out there. I was reading research (and still am) in the professional journals on the development of the heart. I'm reading about chicken hearts, rat hearts, bird hearts, and fruit fly hearts. It's amazing how much research you have to slug through that involves animals,



Human embryo at 15 days



The embryo in the second week of development. The outer rim of the embryo in blue has pockets of still fluid called lagoons. This is the area of the pre-placenta. These pockets of still fluid invite the maternal blood vessels from the uterus to connect and begin providing nourishment for the embryo. The body proper will form on the line where the green cells meet the blue cells at the very center of the image.

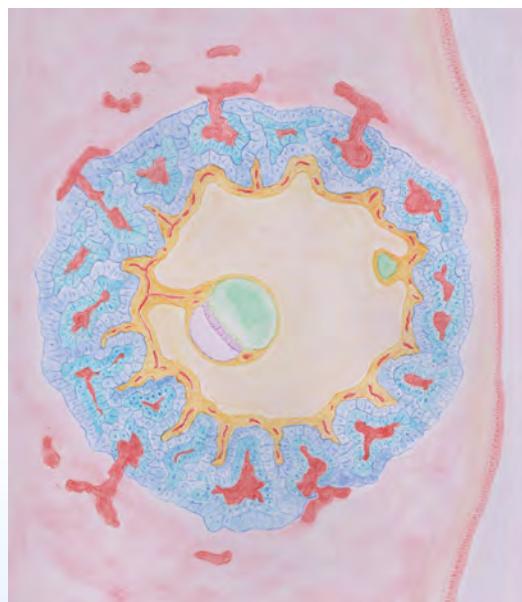
fish and bugs. For example it is generally agreed that our human heart evolved from a fish heart. And then you have to extrapolate or interpret or make up a model of human heart development which is what scientists do from what bits might apply to the human heart. Then the models shift every few years when new research comes out. It keeps me busy."

Shea then began to see correlations between compassion and the human embryo—the heart-to-heart embodied compassion that shifts through formal embodiment practices. "Blood and heart, pulsing and surging through the body, it's happening at an unconscious level but when we consciously sense the movement of our heart it lowers our fear, decreases the activation of the amygdala. This is called interoceptive awareness or cardioception if you just listen to the movement of your heart in conjunction with the movement of the respiratory diaphragm. Interoception has to do with identifying the urges from our organs such as the colon and the bladder. But what is the urge of the heart? I teach practitioners to spend time sensing this movement of the heart in combination with diaphragmatic movement—sensing primary through the heart and arteries and veins, it doesn't take that long to learn. It's more like a surge than an

urge at the beginning. This includes teaching pregnant moms to sense the vascular system of their baby while it is still inside her. There is even an app that can help pregnant moms do that." Shea says.

"Embodied compassion is feeling my way into my body via the wave and surge of the heart-diaphragm movement. I'm investigating micro and macro movement, the fluid body and its tidal movements, I sense the pulsation in the heart and all its different nuances of which there are many radiating out in all directions with all the arteries that can be touched." This practice lead to an interesting discovery. The human heart is unlike any other organ in the body for many reasons.

"Let's look at this morphologically via its movement or lack of



The embryo in the latter part of the second week post fertilization. Maternal blood vessels have begun to connect into the pre-placenta. At the same time the embryo begins to generate blood on the inner rim of the image in yellow. A connecting stalk forms which will ultimately become the umbilical cord see connecting to the body proper. Fluid stillness invites connection and nurturing in the cardiovascular system.

movement. During the second week of development, our blood forms. We've got blood forming first on the outside of our embryo as we are floating around in a big fluid cavity. We have to connect to the wall of that fluid cavity. The place of that connection will also become the future placenta on the other side of the membrane. It is on the outside of this cellular membrane called the chorion (*one of the fluid cavities whose membrane is between the developing fetus and mother*). Now this future placenta or what I call the pre-placenta on the outside of the chorion (extraembryonic mesoblast) develops many many lagoons of still water (trophoblastic lacuna) that surround the embryo. Why? The quiescence of the lagoons attracts the maternal blood vessels (sinusoids) to connect inside the lagoons. Then the

nutritional molecules coming from the mother's blood now in the pre-placenta diffuses through the chorion to the surface of the embryo. The embryo gets its nutrition through this diffusion and starts to expand its surface which starts to pull the inside of the embryo in all sorts of directions. But think about it. Once again the role of quiescence is critical to getting connected to and her nutrition in order to grow. That's another reason that the German word for breast feeding is stillen."



The plate of the neural ectoderm in yellow in the early third week. The primitive streak in pink in the middle of the image. The notochordal canal, like a tiny finger filled with water, at the top of the primitive streak. Underneath is a horseshoe shaped water canal in blue. Cells from the primitive streak move to the top of the horseshoe and the red represents the region where the heart will begin to form in the future cervical – neck area.

At the beginning of the third week, the heart begins to go through its four phases of development. At the end of its development it becomes tied into a knot essentially; this knot gives the appearance of the four chambers it will become: two atria on top and two ventricles on the bottom. Now the chambers are in their correct location but have a long way to go until about a year after birth before they are a closed system and pulmonary circulation is completely functioning. The baby is learning how to have a functioning heart from mom starting before conception and continuing until well after birth. It's amazing when you just consider the biology. Their hearts are so synchronized for so long. It is a big

story at so many levels but it is rooted in our biology. Embodiment for me is truly founded in cardioception.”

“The next exciting discovery is that the curve of the looping tube generates quiescence, a state of low cellular activity on the inner edge of the curve; in Biodynamic Craniosacral Therapy we would call it dynamic stillness. At the very middle of the heart if you could imagine the hub of a wheel, where the inner curvature has its tightest loop is also the location of its greatest amount of quiescence. This stillness is causal—it induces growth of the heart from the inside out. Orientating to stillness is thus an important or even critical dynamic. Furthermore, the center of the blood flow is a void space, stillness in the middle of the actual flow, quiescence.”



A cross-section through the top of the horse shoe shaped fluid canal in between the ectoderm and future brain above in light pink and the endoderm and future face in green below. The heart begins as a cluster of blood islands in the middle of this canal as seen at the center of the image. This is called the plexiform phase of cardiac development. Morphologically this means the heart is transparent at its beginning.

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"As it turns out, our blood flow is building the lining of the blood vessels," Shea continues. "Quiescent cells line the blood vessels and in the adult if they are not quiescent then it is an indication of heart disease. The essence of the biology of the heart, blood and its vessels is quiescence even with all the movement going on. Quiescence induces normal growth. But as an adult I can't just sense stillness in the heart. So I apply this in my clinical practice by consciously perceiving stillness in the space of the office and looking at the quiet of nature or the sky out the window. Mindfulness allows me to quiet my mind and musculoskeletal system first and then I allow my awareness to go out in all directions periodically as a way of regaining an embodied sense of wholeness that is connected to the stillness outside of us.

If you look at a blue sky, it is perfectly still so is the trunk of a tree even when the wind is blowing. It is as if the stillness is the whole ocean, our body is the water and there is a tide that moves through it all called primary respiration. The tide of primary respiration always brings me back to the client and their wholeness. This can become a conscious process and is therapeutic for self and other.

It is called healthy attunement as I allow my attention to be moved in and then out of my body slowly and mindfully.



The tubular phase of heart development in the late fourth week. The heart is upside down in its origins as the ventricles are located at the top of the tube and the atria are located at the bottom of the tube in this image. Morphologically the heart must turn its self downside up to develop. This most certainly has psychological implications later in life.

This normalizes early imprints without over activation because the emphasis becomes the whole rather than the part. The practice I taught at the beginning of this article is an inducer of stillness in and around the body even though you are attending to internal motion of the body. At first it seems paradoxical but once you experience it you see the beauty of such biodynamic perception. This is because we have no reference point for embodied wholeness in this culture even if it hit us on the head. But we can get there gradually through the quality of our attention. Attention to what? Slowness, stillness and fluidity."



The heart from the side in the fourth week of development. The chambers of the heart are unformed but there is a connective tissue bridge in green at the right of the image anchoring the heart to the neural tube posteriorly. Morphologically this reduces motion in the back of the heart and generates a type of dynamic stillness from which the front of the heart can expand like a balloon.



The looping phase of cardiac development in the early fifth week. Now the atria and blue begin to twist and turn in order to take their formal position at the top of the heart.

In classes, I teach students to synchronize with the fluid movement in their body, their heart and diaphragm until they can feel the stillness that surrounds everyone in the room (*again, recall our opening meditation*). This is how you connect with the imprint of the original lagoons of stillness all around us. First you orient to the whole with a brief body scan, sense the shape of the body at the level of the skin. Then we gradually de-densify the muscular skeletal system into its original state of fluid, a very tensile viscous fluid with gradients of thick to thin, especially noticing micro movements to get a 3D sense of the fluid body.

Next I have students move their attention inside and sense the surging of their heart, perhaps noticing wave like motion like seaweed along with the diaphragm moving with the heart. It's more of a fluid wave going three dimensionally through the body from the center of heart/diaphragm. Then, when I sense the stillness clarify in the room, I ask students to move their attention to the room lagoon, to notice the stillness or not. That stillness is clear, bright and vivid or not. This is a whole different way of being embodied and of feeling whole. It is very deliberate at first but gradually becomes spontaneous and natural.

Then I ask students to rest in the stillness in back of their heart rather than the middle and then sense the motion of the heart in its front at the same time. If you wait in the connection of the stillness whether it is in back of your heart or all around in the room and your heart pulsation, it allows nurturing in at so many levels in the adult as well with my little clients. It is a morphological

law of our embryo that the heart and blood move towards stillness. Stillness is a form of nutrition especially nowadays, it is the way the body got its nurturing in the first place as embryos and the way breast feeding is done (hopefully). This encapsulates a huge piece of work in the healing process. It's Craniosacral Therapy lore—for more than 100 years it has been taught to notice the stillness as the most fundamental part of healing. It turns out that stillness is rooted in our biology down to the cellular level. When the students allow the heart movement to connect with stillness as a group, to not change it but just allow the sensation to nurture one another it is a powerful group healing moment. The HeartMath folks call it coherence.

If it's a Biodynamic Craniosacral Therapy class, I then have the students make contact with each other either on the tables through a formal hands on method depending on the focus of that particular class. We always start with our hands palm up with the backs of the hands contacting the body of the client. It is a sacred gesture. So much of the client's body extends into the space immediately around it that I have found that this is an excellent way to turn off defensive physiology in the client as Stephen Porges calls it. Then the dyad maintains the sensibility of the stillness with a heart to heart connection while seated to sense the primary respiration with and through one's heart. This is the tide moving through the ocean and our water (blood) and practitioners report feeling any of the four phases of heart development as an embodied result. Then the therapist's hands synchronize with the embryo in the client, their wholeness



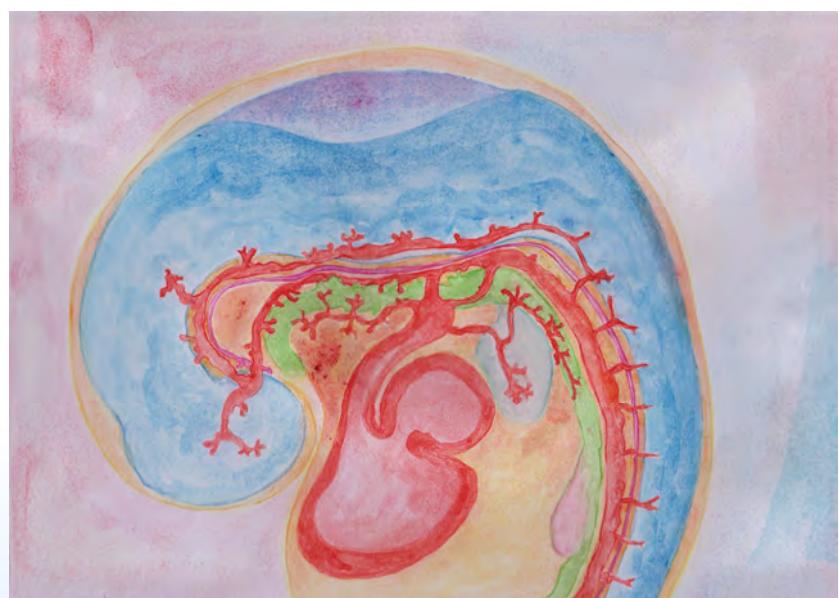
The ballooning phase of cardiac development in the sixth week. The cells on the inner curvature of the tube become dynamically still because they become wedge shaped and have less metabolic activity. Thus there is a hub of stillness at the very center of the heart as seen in this image. This type of biological stillness induces the growth of the tissue dividing the four chambers of the heart especially where the autonomic nervous system will innervate the heart.

Compassion and Altruistic Education and Research at Stanford University (CCARE.org) that was also co-founded by the Dalai Lama. It's important, he says, to understand the circulation of the blood as it comes from the mother through the uterus and through her heart; the blood goes through her womb and its molecules are filtered into the embryo creating a pre-placental heart-to-heart connection. "Both surging hearts resonate deeply with each other. This original circulatory system between a mother and her child is still active in every human relationship at an autonomic level and certainly a spiritual emotional level. The moment we think or look at another person our heart responds. Everyone absolutely has the capacity to nourish each other at this level which generates well-being and happiness. Stillness is rooted in our biology and is observed in the embryo in its lagoons, its quiescent cells and the shaping of groups of cells; you can read the literature, but you have to embody compassion and then apply it to everyone with appropriate boundaries."

Dan Siegel talks about
interpersonal central nervous system resonance; Shea says there's also interpersonal cardiovascular system resonances, those moments in relationship when you come into contact and both of your hearts attempt to synchronize. "A new circulatory system is created within seconds of meeting someone especially in physical contact with the hands. You can sense how your heart changes as a result of your relationships. Of course it helps to have resilience and to have a sense of humor since some of those changes are emotionally painful. Remember that it is quite natural to have your heart turned upside down and tied into a knot. So, we have to begin to normalize our tough love experiences and it seems that stillness and primary respiration can help this normalization because it allows the natural embryo to emerge and for the heart to expand literally. I also teach forgiveness processes because of some of the imprints that students encounter in their vascular systems.

if possible. Attention moves with the tide of primary respiration from the hands to the heart, to the stillness, to the world of nature outside the office and so forth. In each location especially if it is an artery we are contacting, we wait a little bit and see if the fluid body of the client wants to communicate before being moved by the tide or the serenity of the stillness."

Shea explains that he is just
teaching and following the developmental sequences that the human embryo goes through in forming the body with the foundation being the perception of stillness and primary respiration. It becomes a protocol for compassion, a term he learned from The Center for



A lateral view of the embryo in the late sixth week. The neural tube is shown in blue. The green between the neural tube and the heart will become the future face. Is this position of the face that induces growth of the heart in front of it and the brain and back of the neural tube folds over the heart because it grows rapidly whereas the heart grows slowly.

This includes recognizing fear which is important because of the connection the heart has with the amygdala (fear center in the brain). The fear is then joined with the whole where it dissipates in the context of primary respiration and stillness."

"The Biodynamic

Craniosacral Therapy model that has some of its roots in the 1800s. It was originally taught to find the health in the client with the therapist's hands. Anyone can find the disease said an early pioneer. Using this hands-on approach, touching the body as a whole system not as fragmented, you can find the health that moves through the body—the strength, potency, primary respiration, stillness—rather than continually bumping into negative inertia states or stress imprints the body might be carrying. Imprints like that are islands in the stream of health and wholeness. If the boat gets stuck on a sandbar, we get out of the boat and push it back into the deeper water of health and wholeness. The starting point in the therapeutic process is wholeness. It is not the end point of treatment." Today, Shea's investigations are to find and enhance health—that preexisting original state of health, present at conception and preconception. "When a prenatal imprint comes up, it is normalized with primary respiration and attunement to biological stillness. We were conceived with embodied biological compassion and love. Wholeness includes the imprint and the love. Even one of my clients who was conceived from a rape could sense his preexisting health and wholeness eventually," Shea says and as a therapist his work is learning



The whole embryo in the seventh week of development. The heart forms the middle of this month alone. The arm and leg buds can be seen as well as the liver in dark brown.

how to water the seeds of compassion, the deeper preexisting condition of health.

"This search for health originated by integrating the original thinking and therapeutic methods of the cranial osteopathic community with my studies of prenatal and perinatal psychology and the normal morphological development of the embryo/fetus. I've been associated with these fields for some time. But my own sense of embodied compassion got me interested in the pre-existing conditions of health biologically and how our compassion and love is embodied, how we can sense its potency/amplitude through the perception of primary respiration and stillness as the health itself, sense it changing the whole by 'watering the seeds of compassion' (attributed to Thich

Nhat Hanh).

You can see an embryo or a fetus embody compassion for human beings from the moment of conception by the way it changes its metabolism in response to the mother's state and the environment around her, even sonogram studies show gestures of compassion in the prenate; studies of embryonic and fetal movement are beautiful in this way even though sonograms are controversial."

"I have spent many years

working with small children with severe developmental delays. For example recently a foster mother brought in two small babies for me to treat. One had fetal cocaine syndrome and the other suffered with fetal heroin syndrome. Compassion and love are the most dominant lessons I sense these children are teaching me. I feel they are all healers in disguise. Whenever possible, I always ask the child to begin a session by placing their hand on me so I can acknowledge them as a healer. What I might have to offer is no greater than what they have to offer in fact my offering is less. I have learned a great deal about humility in working with all infants, mothers and partners especially those children who are dying, have fetal alcohol syndrome, shaken baby syndrome or in persistent vegetative states."

"Embodied Compassion is about feeling the movement of your heart in everyday life as well, listening with compassion when you are sitting across from others, listening to their stories, sensing their heart through the movement of your own via the tide of primary respiration. It's about noticing the social nervous system first with the eyes and facial expressions and so forth and then dropping down to sense the heart moving, sensing the diaphragm moving and the tide moving between our two hearts. For me, it's not

limited to the classroom or the therapeutic process. Its value is integrating it into every day life. Say you're standing in line at the grocery store and you're feeling agitated. You can make it a heart-to-heart connection with the tide of primary respiration and notice how compassion replaces frustration and fear, how the agitation that previously generated tension in your body to fade into a calm sense of connection with yourself and empathy for those stuck in that line with you and the poor clerk dealing with it."

"Finally, to recap the opening meditation, allow your attention to hold both the movement of your diaphragm and heart together not as one motion but rather as one harmony connected together. Periodically toggle your attention out to the entire surface of your skin as if observing the dance of the diaphragm and heart together from that wholistic perspective around the edges of your body. Let the movement of the diaphragm/heart become like a wave rather than thinking of it as breathing. Let the waves touch the shore of your skin from the bottom of your feet to the top of your head and out to your hands. Then notice the stillness grow in the room. Connect your heart to the stillness. Find your embryo."

Michael J. Shea, PhD received his master's degree in Buddhist Psychology at Naropa University and a doctorate in Somatic Psychology at The Union Institute. He taught human embryology in the pre and perinatal psychology doctoral programs at the Santa Barbara Graduate Institute. He is a member of the American Massage Therapy Association (AMTA) and has been a licensed massage therapist in Florida since 1976. He is a founding member of the International Affiliation of Biodynamic Trainings (IABT) and was a founding board member of the Biodynamic Craniosacral Therapy Association of North America (BCTA-NA). He is a certified biodynamic instructor of the BCTA-NA. He makes his home in South Florida with his wife, Cathy. Information about his courses can be found on his website:

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The whole embryo the seventh week of development with a complete systemic vascular system. In this image the embryo generates its own blood and yolk sac which bulges to the left of the image. Umbilical circulation has also begun as seen at the center bottom of the image. The whole embryo from crown to rump is maybe six or seven millimeters. The cardiovascular system will continue to disintegrate as the whole embryo grows and re-integrate into new structures.

All color illustrations in this article were created by Friedrich Wolf, a German biologist and instructor of Biodynamic Craniosacral Therapy in Switzerland.