

# How does sand therapy work in healing trauma?

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In order to understand how sandplay/sandtray therapy may work in trauma healing, we need to have some basic knowledge of trauma neuroscience (see Working with Trauma in the Sand Part 1 workshop manual) and of how our memory works.

Broadly, we have two types of long-term memory - Implicit and Explicit.

**Explicit memory** is subdivided into Episodic and Semantic.

*Episodic memory* refers to our life story as we know it, and life events within it - these memories typically contain visual imagery and often words spoken at the time, and can be consciously recalled, described and analysed. Most of conventional talk therapy relies on episodic memory

*Semantic memory* refers to our knowledge of facts, which may or may not relate to our life story.

Explicit memory does not start developing until we are about 12-18 months old, and does not fully develop until we are around 4 y.o. Explicit memory is largely stored in the left hemisphere of the brain. Hence any early childhood events, in the womb or in the first couple of years of life, are usually not available for our conscious recall.

**Implicit memory** does not carry the story of what happened to us (i.e. visual images or words), but it incorporates feelings, sensations, smells and tastes. It is largely held in the right hemisphere of the brain. Implicit memory can sometimes be referred to as “procedural” memory as it includes the skills or “procedures” that we have learnt, e.g. walking, riding a bike, that no longer require conscious effort.

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When we are impacted by a life-threatening or otherwise traumatic event, our nervous system may become overwhelmed, the hippocampus is unable to “file away” the sensory data, and the implicit memory is not integrated with explicit memory (if the latter is available).

Typically, trauma is experienced in isolation - even if other people are present during/after the traumatic event, they may not be available to offer appropriate support/care or may even have caused or contributed to the trauma. Such interpersonal trauma has to be healed within a relationship - this may be a therapeutic relationship or another human connection (though in some circumstances connection with nature, with art, with the divine, etc. also plays a significant part in the healing process).

Working with the sand and symbols is an ***embodied experience***, stimulating nerve endings in the fingers (which are some of the most sensitive parts of our body), as well as offering visual and, often, auditory stimulation. This embodied way of working in the sand (also relevant to other creative/expressive therapies) taps into our implicit memories, held in the limbic system of the right hemisphere. When implicit memory “awakens”, it is then available for processing/ modification and if the client is held safely by an attuned and present therapist, this offers a reparative and healing experience.

***Co-regulation*** between the therapist and the client via ventral vagal branch of autonomic nervous system (see the manual for Part 1 workshop on Working with Trauma in the Sand), combined with the embodied nature of sand work, allows for the safe connection to the implicit memory to take place, and if the client is able to stay within their Window of Tolerance, healing will occur.

Within a safe, co-regulated space, as the client connects with their suffering through the contact with sand and symbols, the holding environment and the relationship with the therapist soothe the arousal/agitation of the autonomic nervous system. As this cycle repeats over and over again over a series of

sessions (and even within a single session), the implicit memory data gets re-recorded and re-wired within the nervous system, gradually allowing for the new sense of safety and connection to imbed in the body.

To summarise, working with implicit memories allows us to access a much wider range of data stored in the nervous system, including the events and issues related to the generational and pre-natal/peri-natal trauma covered in this workshop.

### **Personal Development/Sandtray Practice**

When creating your own sandtrays, try to pay attention to your body sensations and feelings in the first instance, before you begin to actively think about/analyse the content of the tray (though the thoughts will pop up anyway). Your body sensations and feelings that do not have a “story” attached to them are likely to be linked to your own implicit memories. If some distress comes up, utilise the support of the therapist (if doing sand work in the context of therapy) or your own emotional regulation/grounding skills, to hold and allow the distress without shutting it down. Notice how this is gradually released. (If contact with sand and symbols is too overwhelming when you are on your own, make sure you work with a therapist.)

### **Personal Development Practice**

Pay attention to the state of your autonomic nervous system during and between your client sessions, as well as in your personal life. [For a reminder of Polyvagal Theory see the manual for Part 1 of Working with Trauma in the Sand workshop.] Do you feel any threat? Which branch of your nervous system appears to predominate in the moment of paying attention?

\*Ventral vagal (parasympathetic) - Social Engagement system

\*Sympathetic - Mobilisation.

\*Dorsal vagal (parasympathetic) - Immobilisation.

For you to hold the client safely, your ventral vagal / social engagement system needs to be consistently “online”.

## Further reading and learning

- Rita Grayson & Teresa Fraser (2022). *The Embodied Brain and Sandtray Therapy: Stories of Healing and Transformation*. Routledge.
- Bonnie Badenoch (2017). *The Heart of Trauma: Healing the Embodied Brain in the Context of Relationships*. Norton.
- Bessel van der Kolk (2015). *The Body Keeps the Score*. Penguin