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Interrupted Love: Healing Addiction through the Hearts of Jesus and Mary

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Humans have an innate desire for union with God. Addiction attaches that desire and enslaves that energy to specific behaviors, things or people. Bill Wilson found that encounter with God's love freed him from addiction to drink. His AA principles followed from that awareness and his later experience. However his addictions to smoking and women revealed limits in his approach. Consideration of Chris Prentiss' and Arthur Janov's ideas about facing primal pain at the root of addictions, and the need for companionship and joy (Jim Wilder) to face that pain, leads us to the hearts of Jesus and Mary. Using Henri Nouwen's experience of working through his deep pain, this article presents Mary as model of the church empowered to stay open to Jesus who carried our primal pain in his cry of abandonment on the cross (John's view at Cana and Calvary) with the resultant release of joy and community. It concludes with suggestions for healing addictions.

Questions

1. What insights/ perspectives or questions were evoked or took hold in you as you considered the role of primal pain in addiction and in healing?
2. How has God's love been real in the midst of suffering, for you and/or for those with whom you work?

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In his *Confessions* (1, 1) Saint Augustine wrote the famous lines, "You have made us for yourself, O Lord, and our hearts are restless until they rest in You." As God's creatures, we have an innate longing to be unified with God (Ps. 42:1). This helps explain why the direct experience of God frees one from addictions.

I am convinced that all human beings have an inborn desire for God **Addiction attaches desire, bonds and enslaves the energy of desire to certain specific behaviors, things, or people** ... The same processes that are responsible for addiction to alcohol and narcotics are also responsible for addiction to ideas, work, relationships, power, moods, fantasies, and an endless variety of other things. We are all addicts in every sense of the word. (Gerald May (1988), *Addiction and Grace*. 1-4 passim)

In Bill Wilson's deliverance from alcohol addiction and the development of *Alcoholics Anonymous* (AA), he experienced the liberating power of union with God's love. This article will study the implications of this truth for healing addictions.

I. Bill Wilson and AA.

Anyone who has experienced an addiction—and who of us has not had an addiction(s), or has known someone who is addicted— knows its tenacious hold. The descriptions in *The Big Book* of AA are thoroughly frightening: the ever present dream of being able to control the addiction, the repeated falls and destructive actions, when in the grip of the addiction, would dishearten the most faithful. The story of Bill Wilson has become almost a paradigm example of the destructive power of alcohol addiction and the powerful help of surrendering to “God”, as one conceives of God.

Bill’s home life was stormy.¹ When Bill was eleven, his parents divorced and his father, a hard-drinking man, moved to Canada. Bill didn’t see him for nine years. His mother was also unavailable, having been absent for long periods because of various nervous disorders. After Bill’s father left, his mother moved to Boston to study medicine and left Bill and his younger sister with her parents, the Griffiths. He bonded well with them, but the wound from his parents remained.

A year of depression followed until, in his mid-teens, Bill fell in love with Bertha Bamford. Bill was to encounter yet another trauma: a few weeks before Bill’s seventeenth birthday, Bertha’s parents took her to New York to secretly have a small tumor removed from her. Bertha never returned—she died from internal hemorrhaging. Grief stricken, Bill became deeply depressed and was unable to continue school for three years.

His depression lifted somewhat when Grandfather Griffith became interested in cars and Bill got interested in selling cars. His grandfather, however, never attained the car dealership so Bill turned to selling kerosene burners.

During this time, Bill became friends with Lois Burnham, a woman four and a half years his senior. In 1918, he married Lois before going overseas to serve in WWI. During this time, Bill began drinking “the elixir of life” and, by the time he was shipped out, whenever he drank he got drunk. When discharged in 1919, he tried many jobs, even succeeding in becoming a stock market analyst, but he continued his heavy drinking and his life degenerated and grew out of control. He lost his job and Lois and he became destitute.

In 1934 at the age of 39, after sixteen years of near homelessness and failed efforts to stop drinking, Bill had his famous spiritual experience in Towns hospital, Nov 11, 1934. After many relapses and almost giving up, he finally accepted the hopelessness of his addiction and discovered the powerful healing of God’s love:

Suddenly my room blazed with an indescribable white light. I was seized with an ecstasy beyond description I became acutely conscious of a Presence which seemed like a veritable sea of living spirit ‘This,’ I thought, ‘must be the great reality, The God of the preachers.’ I seemed to be possessed by the absolute, and the curious conviction deepened that no matter how wrong things seemed to be, there could be no question of the ultimate rightness of God’s universe. For the first time I felt that I really belonged. I knew that I was loved and could love in return.²

Bill never drank after that experience. He began to attend the meetings of the Oxford Group, an international spiritual Christian movement. However, when he was alone at his work in Akron, Ohio in the spring of 1935, Bill was severely tempted to drink again. He then thought of the Oxford Group’s principle of helping others and asked an acquaintance if there was another alcoholic with whom he could perhaps share his experience. He was referred to Dr. Bob Smith, a

physician who was also seriously addicted to drink. Helping Dr. Bob helped both of them stay free of alcohol. He then realized he needed to help others get free, if he was to stay free himself, and together they launched AA. By the time Bill left Akron for New York at the end of August, 1935, a core group of 5-6 alcoholics existed with the real hope of remaining sober.

Together, Bill and Dr. Bob developed principles that helped alcoholics stay sober. They hit on the concept of “one day at a time.” But it would take several years and the experiences of many recovering alcoholics before Bill and Dr. Bob could formulate the traditional *Twelve Steps* that became the hallmark of AA’s recovery program. Instead of focusing their efforts on stopping drinking, they found they needed to concentrate instead on trusting in a “higher power.” Bill’s experience was not specifically Christian: Bill never practiced a specific religion—he wanted to help every alcoholic, no matter what faith or lack of faith—but he personally was convinced it was God who ruled the universe. He and Dr. Bob also found that they needed to straighten out their lives to discover and correct the character flaws that had led to personal and relationship failures and to make amends for the hurts they had caused others. They discerned the need to cultivate their contact with a “higher power” and to help others find the same freedom from dependency on addictive drugs or practices.³ In 1940, Bill met Fr. Ed Dowling, a St. Louis Jesuit, who became a lifelong friend and kind of a spiritual sponsor. Fr. Dowling had contacted Bill partly because he had noted the similarity of AA’s principles to the *Spiritual Exercises of St. Ignatius* that were formulated in 1522-1524.

From its small beginnings, AA grew to be a worldwide phenomenon that is attributed with saving countless alcoholics from what was once considered to be incurable destruction. AA branched out to Al-Anon (launched by Bill’s wife Lois), Alateen, Narcotics Anonymous, Overeaters Anonymous, Gambler’s Anonymous, and Debtors Anonymous, among other programs. There are now about 200 variations of the *Twelve Step* program offered in almost every country of the world. Bill Wilson became AA’s poster child—unable to go almost anywhere without an admiring crowd seeking to touch him.

Bill was aware how undeserving he was of such adulation. He always presented himself as a beginner in the *Twelve Steps*, a sense of equality that attracted many of his followers. Freed from drinking, he fought depression and other addictions all his life: he was a compulsive womanizer and was strongly addicted to smoking; two addictions which he never overcame. He finally died in Jan 24, 1971 of emphysema. The *New York Times* obituary, with a front-page picture of Bill, went on for 2000 words describing the accomplishments of AA. At the time, there were 300,000 alcoholics staying sober through AA—the number is now in the millions.

Despite the success of the *Twelve Steps* program, Bill was aware of the need for other methods of intervention. He was always ready to tear up the AA Steps and start over if a better way was found to better help alcoholics (Hartigan, 196). He sought the help of Dr. Harry Tiebout, MD, for his ongoing depression, and later the counsel of the Jungian Dr. Frances Weekes, from 1945 to at least 1949 (Hartigan, 166-7). He also was a strong advocate of Niacin to deal with the physical aspects of depression.

II. Chris Prentiss: His Alcoholism Cure

Was there something missing in the AA’s *Twelve Steps*? A book by Chris Prentiss, *The Alcoholism and Addiction Cure* (Los Angeles, CA: Power Press, 2007) argues that something further is needed. Chris’ son, Pax, was addicted to heroin for 10 years. Pax tried six centers and over 40 drying out experiences, but after each immediately relapsed. The various centers all seemed aimed at reducing Pax’s chances of using heroin—“change his circle of friends, go to

Twelve-Step meetings, don't let him go out of the house unescorted ... In other words, they were advising me to punish him for his bad behavior and to keep him away from heroin contacts." None of that worked. As he later commented, "A government study of more than 1.5 million drug and alcohol users found that more than 25 percent of heroin users had tried five or more treatment centers without success. The national relapse rate for all drugs is nearly 80 % and even higher (86%) for users of alcohol or heroin" (Prentiss, 138).

Finally, Chris decided to create his own integrated treatment plan. He took Pax for acupuncture, blood analysis, and saliva analysis and to psychologists, marriage and family therapists and hypnotherapists. **Chris reasoned that because the universe had not self-destructed after 15 billion years, it must be self-correcting and meaningful.**⁴ Pax's addiction itself must have a meaning. As Pax got stronger and his head cleared, Chris kept reminding him, "What we're looking for is the reason why you're doing drugs and alcohol. No one can do this for you. We can help, but you must find the answer yourself" (Prentiss, 120).

As Pax mulled over the question, "What was wrong that using heroin fixed?", it dawned on him at 3 am one morning that every time he used heroin he saw himself as a powerful, successful person who always knew the right thing to do and his dad was part of his drug induced vision. He realized, "My dad writes books, has directed a feature film, conducts seminars, has created several successful companies, is a master negotiator, has tons of friends and people who ask him for advice, is well traveled, is completely articulate and holds conversations I wish I could participate in but they are over my head." He excitedly called his father to tell him he had found the answer, "In essence, all I've been doing for the last ten years of my life is running away from fears I wanted you to think I was as grand as I thought you were." As Chris's eyes filled with tears, he told him, "I've never thought anything else, Pax."

Chris' critique of the AA *Twelve-Step* program stemmed from his experience with Pax—basically that it was aimed at controlling, not curing the dependency on drugs. AA meetings are open to all, but they require one to identify oneself as an alcoholic. Such a negative self-identity contributes to relapse when under stress. Also, the first step of being "powerless" struck him as wrong since even undertaking the *Twelve Steps* requires personal power, and following through in dealing with inner pain takes great strength. In other words, a positive self-confidence is key to deep healing. Further, the AA view that no one knows what creates alcoholism and other dependencies is no longer true (Prentiss, 135).

Research and the high success rate of participants in the program Chris and Pax developed after his cure have shown that resolving the painful issue that is being numbed by drink or drugs frees one of the compulsion, even though once recovered people still "must never drink or use addictive drugs again" (Prentiss, 138). Their Center - called *Passages Addiction Cure Center*, in Malibu, CA - investigates the underlying pain with many different therapeutic approaches.

The causes are basically four: 1) chemical imbalance, 2) unresolved events of the past, 3) beliefs contrary to reality, and 4) inability to cope with current conditions.

Their recovery program has three steps:

Step 1: Believe that a cure is possible for you. To be told you are an alcoholic for life is a negative message that will block full healing if one doesn't fight against it. A positive

attitude and belief is key to healing as Norman Cousins (*Anatomy of an Illness, 1979*) found.

Step 2: Discover and heal the underlying causes with a holistic recovery program. They work with several specialists in various areas who believe in healing and work together to find the causes.

Step 3: Adopt a philosophy based on what is true in the Universe—namely that all things are meaningful and directed to healing.

When all four causes are attended to and the three steps taken, their success rate is better than 80%.

III. Arthur Janov: Facing our Primal Pain

When I read Prentiss's book, I thought of a book that I had on my shelf and had never read: Arthur Janov's, *The Primal Scream* (1970). I decided to use that book for my annual retreat and to ask Our Lord to reveal my primal pain. It was a gradual process. I would read Janov's book, especially the case studies, and then reflect on my own journey. One case study, *Elizabeth*, was particularly moving for me (pp. 337ff). She had numbed her feelings and found herself in a series of unsatisfying lesbian relationships. Her first primal experience (when Janov was first discovering this method) is instructive. She wrote:

In group that evening, ... Steve began telling me a bedtime story while rubbing my shoulders. I wanted to relax and enjoy it, but I tensed up. When he caressed my hair and the back of my neck, I got excited but scared, so I squirmed away. As he gently continued to stroke my hair and neck, the tension mounted. Then I focused on Steve's hands, and all of a sudden they became my father's hands. I said, 'My God they're my father's hands ... I'm in a bed with wrinkled sheets.' I was there and I became so small I felt six months old, and my father was the one caressing me ... I was so excited that I thought I was going to have an orgasm ... Then his hands left me, and I lost control - I started to fall inside myself ... I was being sucked inside myself ... I fell and I fell ... I thought I'd fall forever ... There were flashes of red and white lights and rushing and roaring sounds ... I was exploding into a million pieces ... I knew I was going to die ... This was the end of me ... I felt that I was being electrocuted ... Then from the core of my being I found the strength to scream ... As I was screaming, I was vaguely aware that I was convulsing and rolling around on the floor ... I knocked something over ... Then I stopped falling and said that I wanted an orgasm ... Once again I fell inside myself and felt my body being electrocuted and screamed and rolled around the floor ... Then I turned over on my back, and a cool breeze swept over me. I opened my eyes and looked around ... Then I very calmly said, 'I was the pain.' I was alive. I had survived. I had shattered the brittle shell and was now inside myself.

I later realized that this was my Primal Scene. I was barely held at all as a baby or ever for that matter. However, my father says he used to 'fondle and caress' me when I was a baby. Exactly, that was when I turned off. I was never held except when my father 'fondled and caressed' me as though I were a woman. I was touched enough to know 'they' were there but not held enough to know *I* was there. The excruciating pain was *needing* to be held in order to survive. Instead, I was tantalized by my father and brought to the point of excitation and left. As a baby you have to be held a tremendous amount so

that you will know where you begin and the world leaves off. I turned off because if I lay there any longer and felt, I would have exploded into bits. Instead, I split. From that day on I was tense. I had turned off so tightly that I couldn't even feel my tension. I became the symbol of what I was too small to feel - fragmented. (Janov (1970), 337-8)

Elizabeth's repressed pain and its consequences helped me get in touch with my own pain. During a healing prayer I realized I had 'said' in the womb, "I won't be a burden." My mother had her hands full with my two older siblings and I must have picked up her sense of burden. I seem to have cut off my emotions and initiated the tendency to withdraw, a feeling that remained in me until, through healing prayer, I renounced that "vow." Having released my defensive decision, I began to realize how desperate a part of me was to be held, to be received and to be loved. I could feel how I responded to those who did need me - how surprised I was when they actually wanted to be near me, how I tried to please others to get that affection. I could also feel myself turning away instinctively, almost as soon as my neediness appeared and found it difficult to stay open to the need. This helped me experience personally what Janov meant by "primal pain."

In later books - *The New Primal Scream* (1990), *The Biology of Love* (2000), and *Primal Healing* (2007) - Janov linked what he was learning about experiencing primal pain with brain development. He worked with three levels of brain systems:

First-Line: The Visceral Mind. The visceral mind, developed by the 33rd day of gestation, is considered to be the caretaker of sensations. Vital functions are largely under its control: breathing, cardiovascular activity, hormone output, digestion and urinary processes, body temperature, etc (Janov, 2007, 60-66). The visceral mind is also involved in taste and hearing. This "salamander brain" registers one's mother's depression or anxiety, smoking, drinking, and drug taking. Mothers and fathers can also communicate unconscious rejection. These experiences are not stored as ideas but as instinctual responses such as bedwetting, nightmares, high blood pressure and emotional pain, among other effects.

Elizabeth's experiences manifested in emotional frigidity and feelings of deadness. Other symptoms may indicate additional trauma sources. For example, an adult with chronic colitis or palpitations points to a first-line trauma from conception to before six months after birth: "high blood pressure or colitis is a warning about stored terror" (Janov, 2007, 64). Sexual compulsivity points to this stage as well, while tears or speech are rooted in the limbic (2nd line) system.

Second-Line: The Emotional Level of the Limbic System. (Janov, 2007, 66-70). The emotions in the limbic system begin to develop before birth and continue to develop until full bloom, between two and three years of age. The limbic system possesses *the amygdala* (the feeling of feelings); *the hippocampus* (guardian of emotional memory and anchors our feeling in time and space); *the thalamus* (a kind of relay station that blocks or sends feelings to the cortex for understanding and connection), and *the hypothalamus*, which governs response either by the sympathetic nervous system (for aggression and assertiveness) or the parasympathetic system (for repair, healing and repose).

The infant in this stage of emotional development (for two to three years after birth) relates to an ever-larger world than the mother's breast and cheek, establishing emotional attachments to friends, parents, siblings, and other relatives. This is the level of feeling states, tears, and sobs. Some people are first-line driven: impulsive, full of rage, driven without ceasing, impatient and inattentive, and unable to focus and concentrate. Such people may not be able to develop emotional empathy. Others may begin with signs of the second line and move to first

line expressions while experiencing an emotional episode such as happened with Elizabeth. For example: “a patient may start a session crying on the second-line at the age of ten when his parents gave away his favorite dog. Soon, though, he will have a radically different infant cry as he moves into a mode with infant memories of having his teddy bear taken away as punishment when he was age two” (Janov, 2000, 112). **These issues cannot be dealt with through ideas, since they issue from the brainstem: the trauma must be relived.**

Third-Line: Intellectual Consciousness. (Janov, 2007, 70-74). Intellectual consciousness begins to play a role at about the age of two and continues development until the age of twenty: “it integrates the lower levels, helps inhibit impulses, deals with the external world, and puts meaning to feelings” (Janov, 2000, 114). Intellectual consciousness does the preplanning and sees the consequences of one’s acts, and projects motives onto others. If obsessions occur on lower levels, the cortex tries to organize them and manufacture meanings that may or may not be in tune with the actual source. For example, the expression, “I have always been driven to keep busy,” may be a cover for unconscious anxiety from lack of love. Conscious awareness means that all three lines are working together, whereas the cortex alone is simply aware, but not fully conscious of the other line levels’ contributions. Trauma stretches across all levels of consciousness and eventually lodges in the neocortex. Effective therapy aims to integrate all the levels.

Primal pain occurs for the most part in the first level, the reptilian brain. When an experience is traumatic or too intense, the body exudes cortisol and actually deletes brain cells, making it very difficult or impossible to fully feel what happened in the earliest level. The trauma would have been so overwhelming that full awareness of it was simply blocked. It registered, however, and was coded and kept in one’s physical organs as a physical “memory” and continued to seek expression in disguised ways—through defense systems and symptoms that would dull the pain: and, in my case, by closing my feelings to interaction with others.

A further insight of Janov was enlightening to me. After much experience, he began to see the importance of “*imprinting*”: the fixing of a structure very early in one’s development (from early womb life to 6 months after birth or so) so that it continues to determine later development. Imprinting was found in animals first as new born chicks would imprint on their mother, or on a researcher and follow them around. Janov adapted the term for humans to mean: “repressed memories which find their way into the biological system and produce distorted functions. These distortions can be both organic and psychological” (1990, 109). “The imprint directs brain development to provide resources where needed—more synapses in specific areas and less in others. Essentially, a new brain is constructed. In reliving early scenes, the patient is ‘back there.’ His brainwaves are such that we cannot tell whether the event is occurring now or is simply a memory” (2000, 160). Later on, the imprint may drive one’s feelings and behaviors, without the individual knowing its source.

For example, one patient “a hard-driving man, failed in his bid to build a spa and gym complex when he went before the city council. Instead of seeing the futility of continuing, he kept at it, appeal after appeal, all to no avail and at great cost to himself He should have stopped and reflected on his situation ... but he could do none of these because of his fixed template established at birth which said, ‘Drive on if you want to live. Keep going no matter what the obstacles, because death lurks’” (Janov, 2000, 160). His present reaction is empowered by the original imprint.

Therapy: The solution must come from reliving the original experience and developing a new connection with limbic system and cortex. Traditional counseling can actually hinder this

process and bring passing relief but no lasting resolution. As Janov says, “Our pain isn’t built on lack of insights, and adding insights to the mix doesn’t accomplish anything except to offer justifications for behavior to the patient, hence stronger defenses. Insights without prior feeling are pure guesswork. Imagine me trying to tell you what is lodged in your amygdala when even you don’t know, and it’s *your* amygdala” (2000, 339). So “The patient decides when to come and when to leave for the day, and when to leave therapy permanently. He has the insights after feeling. He is the smart one, the one who is making major discoveries. His curiosity has been awakened” (2000, 339). The history of his own imprint is driving the therapeutic process.

Reliving, however, is blocked because of the brain’s cellular response to the pain of the trauma and the habitual pattern of avoiding the pain through the addiction. One further understanding is required: it is not enough to become aware of the need. One has to find the safety and faith required to be willing to face the pain connected with the underlying need. Jim Wilder spoke of the feeling of joy—a joy that needed to be full enough for people to feel safe enough to share their feelings of pain. Joy, in his view, is felt as “someone wants to be with me.”⁵ Janov himself found that the client needed a therapist who was open to facing the primal pain source. At times, such training took several years, for the therapist had to face his/her own primal pain. Pax got strength because his father was proud of him and stayed with him all those years. We need to feel deeply that no matter what the cause of the pain, we will be companioned in it and companioned freely and with love. Then we will be able to see the pain in a new light, as a pointer to a deep, unfulfilled need for love. **Therapy requires a breakthrough of that deep love. The addiction acts as a false bonding that covers over the primal pain of the unfulfilled need.**

IV. Henri Nouwen and The Hearts of Jesus and Mary

In a little book he wrote toward the end of a devastating encounter with his own inner pain, *Jesus and Mary: Finding Our Sacred Center* (1993), Henri Nouwen expressed how Mary had empowered him to open himself to the anguish of Jesus and his own need for intimacy. The crisis happened precisely when he left the stress of teaching at Harvard and had found a place of peace and love in the L’Arche community, *Daybreak*, near Toronto.⁶ That peaceful holding environment let Nouwen reveal his deep need for intimacy and bonding. Nathan Ball, whom he met and became friends with in Trosly, France, was also a member of the community and it was there that Nouwen developed a deep intimate relationship with him. However, his needs were so great that Ball was led to break off the relationship, which then precipitated a deep depression in Nouwen, with suicidal tendencies, that led him to leave *Daybreak* and work for six months with two gifted guides who never left him alone and gave him the psychological and spiritual help that he needed to work through his seemingly unending pain.

A diary he wrote in that healing process was eventually published as *The Inner Voice of Love: A Journey Through Anguish to Freedom* (1996). It was in light of that experience of personal anguish, that he was able to finish his reflections on *The Return of the Prodigal Son* (1992), as well as his little book *Jesus and Mary* (1993). He thus describes his collapse:

Just when all those around me were assuring me they loved me, cared for me, appreciated me, yes, even admired me, I experienced myself as a useless, unloved, and despicable person. Just when people were putting their arms around me, I saw the endless depth of my human misery and felt that there was nothing worth living for. Just when I had found a home, I felt absolutely homeless. Just when I was being praised for my

spiritual insights, I felt devoid of faith. Just when people were thanking me for bringing them closer to God, I felt that God had abandoned me. It was as if the house I had finally found had no floors. The anguish completely paralyzed me. I could no longer sleep. I cried uncontrollably for hours. I could not be reached by consoling words or arguments. I no longer had any interest in other people's problems. I lost all appetite for food and could not appreciate the beauty of music, art, or even nature. All had become darkness. Within me there was one long scream coming from a place I didn't know existed, a place full of demons (Nouwen, 1996, xiv-xv).

Nouwen's broken friendship with Ball had uncovered his deep need for intimate bonding with the Father and the primal pain he experienced from that disconnection. He could finally better understand his attraction to the loving father in the painting of Rembrandt's *Prodigal Son*, and his series of attractions to male friends.

Mary and Jesus on the Cross

In his book *Jesus and Mary* (1993), Nouwen describes how Mary, in staying open to Jesus' anguish, actually opened to all the suffering of the world that Jesus carried, including his own.

During this past Holy Week [1988] I knew that I was being asked to live the death and rising of Jesus in my own flesh, but I also knew that I couldn't do it alone. It would destroy me A friend had given me a rosary of the seven sorrows of Mary ... I didn't even know which the seven sorrows were! But as I learned about them, I realized that this rosary had been given to me so that Mary could show me how to be truly faithful to her Son. "Stabat Mater," Mary stood by me as I asked Jesus to let me die with him and rise with him." (Nouwen, 1993, 9-10)

Mary's and Jesus' anguish are intimately connected. In her holding the broken body of Jesus, we see our call to open our arms to embrace our own suffering, as well as the suffering of those brought to us, to companion them. Nouwen wrote: "You know, but constantly forget, just as I do, that **our vocation is not to take away human suffering but to reveal that through Jesus the suffering has become the way to the glory of God**" (Nouwen, 1993, 21).

In our scientific, technical, complex, distant world, human anguish increases and addictions that deaden the pain of that anguish also increase. "Anguish is interrupted love. When the love we most need to receive is being withdrawn [such as his relation to Nathan Ball and the longing it uncovered]." "Jesus suffered this anguish with us and for us unto death. Mary received the dead body of Jesus and her heart, too, was pierced by sorrow" (1993, 23). Mary's holding Jesus' body, was also holding all those who suffer a similar anguish. Her soul was pierced that the thoughts (hearts) of many would be revealed (Lk 2:35). **She calls us "to move beyond do's and don'ts of the morally correct life into an intimacy with God where [we] can live the sadness, pain, and anguish of this world while tasting the gladness, joy and peace of the glorified Lord" (1993, 25).**

Mary and the Child Jesus

Mary's gift of companioning Jesus did not begin with the cross but before his conception. Her freedom from original sin opened her to God's unconditional love and the suffering that entailed. She would later hold the divine child in her womb and, rooted in that God's love, face the suffering of Jesus' birth and mission. Nouwen realized that because his wound began in childhood, his inner child needed to get beyond, "... the craziness and activism that had made me a 'respected priest'" (1993, 10). Through Mary, he was able to deeply realize that he was God's child, as we all are. "See what love God has bestowed on us to be children of God ... and so we are" (1 Jn 3:1). We are all called to realize that we are freely loved as God's children: Jesus told us to "become like little children" (Mt 18:3).

In Mary's resting in the heart of God at her core, and our resting with her, we find peace and can bring peace to the world (1993, 13-19). It was this trust in God's unconditional love that empowered Mary to learn from Jesus' seeming rebuffs, when she desperately searched for him only to find him teaching in the temple and later at the wedding in Cana. She continued to stay open to the mystery of Jesus' rejection by the Jewish leaders and ultimately to stand beneath his cross, and, with Jesus, to forgive his enemies. It was through Jesus' suffering and death that the glory of God's unconditional love was revealed: God, "... did not spare his own Son but handed him over for us all" (Rom 8:32). It is in the paradox of Jesus' cry of abandonment ("My God, my God, why have you forsaken me" (Mk 15:34)?) that we are accompanied in our primal scream of abandonment. Mary and the beloved disciple were joined as he took her "into his own" (Jn 19:29). The intimacy of spiritual communion we all seek is released as Jesus "handed over the Spirit" (Jn 20). Facing one's primal pain in communion is the key to intimacy.

In Summary

The deepest healing in our wounded and sinful world is not in removing suffering but in finding God's love in the midst of it. St. Ignatius, in contemplating Jesus' passion in the third week of the spiritual exercises, directs the retreatant to ask, "... what does Jesus suffer or desire to suffer" (*SpirEx*, par 195) in each mystery—his agony, his scourging and crowning with thorns, his being mocked and rejected, etc? Jesus freely laid down his life (Jn 10:18): he chose to experience deep physical, emotional, psychological and spiritual pain to show us that God is with us. By re-living painful experiences in the company of Mary and Jesus, we can be re-formed in the likeness of Jesus by our suffering. **There is a deep purification in suffering that can break us open to God's unconditional love that has been with us from our conception but was cloaked over by our parents' inadequacy and the sin of the world.** Suffering results from sin, not only as a punishment but also as purification (as we see in the Book of Job) and it allows us to, "Attain God's Love" in all things.⁷

The Heart of Mary – Open to God, Jesus and Us

So what *is* the particular relationship of the Heart of Jesus and the Heart of Mary? We know the heart of Mary. It is best expressed in Mary's response to the angel: "I am the handmaid of the Lord. May it be done to me according to your word" (Lk 1:38), or, in her response to the waiters at Cana, "Do whatever he tells you" (Jn 2:5). Her heart's desire is to be fully surrendered to God and to Jesus, to be always learning, for she kept pondering Jesus' mystery in her heart. Everything Jesus said, "She pondered it in her heart" (Lk 2:19, 51). But also everything Jesus

was and did, since she was connected to Jesus' body, emotions, mind and spirit, and she pondered that total experience in her heart. She is "full of grace" - that is, totally surrendered to the Holy Spirit who reveals Jesus to us. So Mary is always learning. Her very being continues to "make space" for Jesus - and to make space for each of her spiritual children in Jesus.

At the cross, she stood with the disciple Jesus loved and the other women, acting as a loving companion by sharing in her son's and her friends' overwhelming grief. The other disciples ran away in fulfillment of the scripture: "I will strike the shepherd and the sheep will be scattered" (Mk 14:27). The disciples had their own expectations of the purpose of Jesus' ministry and their expectations weren't fulfilled. As a result, they became afraid and, instead of surrendering their expectations and admitting their poverty and powerlessness, they cut off their feelings of love and faithfulness. **Filled with love and the total poverty of spirit, one doesn't runaway or detach emotionally: one finds the strength to stay and "keep pondering"; one grieves while remaining faithful and loving.** In contrast to the disciples, Mary chose to remain steadfast in her sacrificial love, despite being forewarned of her predestined pain by Simeon, "You yourself a sword will pierce, so that the thoughts of many hearts will be revealed" (Lk 2:35). When Jesus' heart was pierced by the lance, Mary's heart was pierced too. Together with Jesus, Mary endured the ultimate mystery—humanity's primal cry—"My God, my God, why have you forsaken me" (Mk 15:34)? And, she willingly endured the pain with him in full faithfulness and love.

The Heart of Jesus – Open to the Father and Us

Just as Mary's heart was totally submitted to Jesus' heart, Jesus' heart was totally centered in the Father's heart, out of love for humanity: "The Son can only do what he sees the Father doing" (Jn 5:19). Every action and will of Jesus was an expression of his total submission to the Father: "Father, I have glorified you on earth by accomplishing the works you gave me to do" (Jn 17:4). "Philip, who sees me sees the Father" (Jn 14:9).

Jesus' love was a total response to the Father's love of him—revealed prior to his conception and manifested in his birth. He sought God, no matter how it would hurt himself or others. When he was twelve, he responded to Mary and Joseph's anxiety at losing him, "Did you not know I must be in my Father's house" (Lk 2:49)? He rebuked the devil's temptations, "God alone shall you serve" (Lk 4:8; Mt 4:10). He "resolutely determined to journey to Jerusalem" (Lk 9:51), toward reunion with the Father through his passion and death. He responded to Peter's rejection of his suffering, by harshly admonishing him, "Get behind me you Satan, you are thinking not as God does, but as human beings do" (Mk 8:33). He told his followers they would need to go the same way, to take up their crosses and follow him. There was no exception. Each one's cross would differ.

Mary's cross was choosing to allow herself to suffer with Jesus and not withdraw from the pain. Mary Magdalene's cross was not to cling to Jesus, but to leave him and go to his brothers to find Jesus in them. The disciples' cross was to announce Jesus' resurrection even when it cost them their lives.

The Hearts of Mary and Jesus – Open to the Holy Spirit and Us

The disciples could only offer their martyrdom after being empowered with the grace of sacrificial love by the Holy Spirit. Jesus had said, "I have more to tell you but you cannot bear it now. But when he comes, the Spirit of truth, he will guide you to all truth" (Jn 16:12-13). Mary was empowered by the Spirit to companion Jesus in his passion, and with Jesus she stands with

the disciples and the early church in supporting their final witness. Their presence continues to support all believers in facing the deep pain that leads to renewed life.

Healing Addictions through the Grace of Their Compassionate Love

Gerald May, in his classic book, *Addiction and Grace* (1988), explains that we all have a basic longing for God. An addiction is attaching that longing to a finite object and that “enslaves the energy of desire to certain specific behaviors, things, or people. These objects of attachment then become preoccupations and obsessions; they come to rule our lives” (May, 1988, 3). This makes addiction a powerful enemy to humanity’s desire for God. We are made for freedom, freedom to love, and addictions and attachments keep us from that freedom. We are all addicted in one way or another, and spiritual growth is a process of liberating us from those attachments and addictions to come home to God’s unconditional love.

The culmination of Jesus’ call to restore communion with the Father was his final gift of self on the cross. “It is finished,” he said, “and he handed over the Spirit” (Jn 19:30). In response to this loving Father, he surrendered every human attachment: to his mother and father, to his friends, to his very life. Through experiencing sacrificial pain, divine intimacy was restored—the love that is our very ground and the paradise of walking familiarly with God. Now his disciples were “my brothers” (Jn 20:17) and his mother was given as the “mother of the beloved disciple” (Jn 19:26), and mother with the Church of all beloved disciples.⁸ Communion was formed when the Holy Spirit empowered the disciples to desire to share the deep pain of Jesus—the rejection, beating, mockery and humiliation. The Holy Spirit, that had filled Mary with grace, now opened the disciples to discover their deep fear of pain and mockery and humiliation that enslaved them, and to face that pain by sharing it sacrificially with Jesus. **Communion was restored in sharing that “primal pain” with Jesus, and communion continues to be restored as we face the pain that fuels our addictions by touching the love that is our ultimate desire: for addictions act as a deceptive covering over the anguish of interrupted love.** The hearts of Jesus and Mary bring us home, beyond that cover, to the unconditional love of God.

V. Healing Steps

The Cigarette Story of Louis Evely

In his book, *Suffering* (1967, 49-51), the French spiritual writer, Louis Evely, tells a story of a man he directed who wanted to know what to sacrifice for Lent. Evely asked him what he thought would be a good sacrifice. “I’ll give up cigarettes,” he said. “That is boring,” Evely replied and continued, “you will smoke, but you will make a sacrifice of each of your cigarettes. You will smoke them to the glory of God, thanking him for having created things as good as tobacco.” It took some persuading to get the man to agree to this suggestion.

Three weeks later he came back and reported, “It is going very well, I don’t smoke any more.” Surprised, Evely asked what happened. He answered, “First, I have to confess that I had a great deal of trouble smoking for the glory of God, pretend or feel that something was religious which seemed to me so worldly I discovered then that when I used to smoke, until then, it was an absolutely pagan act, a kind of revenge which I took against all that is imposed and obligatory The real pleasure of smoking was to send duty on vacation But after a while, I came to think that God offered me a cigarette, that I pleased him in accepting it, that I smoked it to his glory, and that this pleasure, far from separating me from him, introduced me into his intimacy. Then, at a certain moment, the thought that I could smoke, that God was glad that I

smoked, that he invited me paternally to do so, rejoiced me so much, put me in such a state of gladness and peace that I no longer needed to smoke. I went on thinking of God and was happier that way. Our relations were purer. The cigarette would have distracted me.”

I told that story to our prayer group and a woman told me at our ten year reunion that she told it to her husband and he gave up smoking, and he told it to his brother and he gave up smoking. That is a powerful story about grace healing addictions.

The Healing of Habitual Masturbation

Another example was a person, sixty years old, who wanted help with a life-long habit of masturbation. I suggested that every addiction is a hidden longing for God and that if the person would pray about what was desired by the masturbation, specifically the comfort of being loved, and would ask God to fill that deep need, it would help. I was later informed that that simple redirection of attention to God’s loving help released that life-long addiction. My experience is that not all addictions are released so quickly, but it did show that **trying to control addictions does not help, since the person had been trying for many years, but that bringing the deep longing for love to God for fulfillment did help.**

Some Suggested Steps in Healing

To begin the journey of healing addictions and deeply realizing the love of God, the following preliminary questions may be helpful:

- 1) *What is my addiction?* It could be as simple as a habit of anger, or as complex as a sex addiction. We likely have many addictions, so ask God to show you what is best to be addressed now.
- 2) *What pain, shame, fear is my addiction covering over?* We saw that repressed primal pain lurks under addictions, which ultimately covers over the anguish of interrupted love. The addiction can help one locate the source of the pain and the feeling of a deep lack of love.
- 3) *How has Jesus freely shared that pain, shame, fear in his life to empower me?* Invite Jesus into that deep pain, knowing that he has chosen to companion you there.
- 4) *How can Mary’s (and the faith community’s) presence empower me to face and relive that pain in the presence of God’s unconditional love revealed in Jesus?* Rest in Mary’s love and trust in Jesus, and share your struggle with a loving community.
- 5) *How can I be present to others with similar addictive tendencies?* Having experienced the joy of God’s healing, be open to sharing it with others and acting as a companion in their discovery of the source of their pain and the healing power of God’s love.

Reference Notes

1. I am using the biography of Francis Hartigan, (2000). *Bill W: A biography of alcoholics anonymous cofounder Bill Wilson*. N.Y.: St. Martin’s Press, for this biographical sketch, together with the more recent and very informative biography of Susan Cheever (2004). *My name is Bill: Bill Wilson: His life and the creation of alcoholics anonymous*. N.Y.: Simon & Schuster.
2. From: “Pass It On” (N.Y.: AA World Services, (1984), p. 121. Quoted in Matthew, Dennis and Sheila Linn (1993). *Belonging: Bonds of healing and recovery*. N.Y.: Paulist, pp. 10-11.
3. Bill had a template of six steps that had been modified from the six tenets of the Oxford Group: 1. Men are sinners, 2. Men can be changed, 3. Confession is prerequisite to change, 4. The changed soul has direct access to God, 5. The age of miracles has returned, 6. Those who

have been changed must change others. (Cheever, 111) Reflecting in bed in May, 1938, Bill wrote, "I set out to draft more than six steps, how many more I did not know. I relaxed and asked for guidance. With a speed that was astonishing, considering my jangled emotions, I completed the first draft. It took perhaps half an hour. The words kept right on coming. When I reached a stopping point, I numbered the new steps. They added up to twelve." (Cheever, 153)

4. See Chapter 8 of his book: "Your Personal Philosophy", pp. 267-302, for a full explanation of his conviction that the universe is self-correcting and meaningful.

5. See Friesen, J. G., Wilder, E. J., Bierling, A. M., Koepcke, R., and Poole, M. (2000). *Living from the heart Jesus gave you: The life model*. Pasadena, CA: Shepherd's House, Inc, pp. 22-25.

6. I am relying here on the biography by Ford, M. (1999). *Wounded prophet: A portrait of Henri J.M. Nouwen*. N.Y.: Doubleday, esp. Ch 20, "Inner Darkness."

7. See St. Ignatius, *Spiritual Exercises*, (par 230-237 Contemplation to Attain Love) in Ganss, G. E. ed. (1991) *Ignatius of Loyola: Spiritual exercises and selected works*. N.Y., Paulist Press.

8. This interpretation of John 19:27 as including all "beloved disciples" is a common Catholic interpretation, based on early traditional interpretations of Mary as New Eve, and John's use of "woman" for Mary at Cana and under the cross, and the "woman" in Rev 12:1-18 who had given birth to the ruler of nations, and whose children were now pursued by the dragon. Some symbolic interpretation of the text beyond filial care for Mary seems presupposed by its centrality in John's passion narrative. As Ray Brown comments, "a non-theological interpretation would make this episode a misfit amid the highly symbolic episodes that surround it in the crucifixion narrative." See his *The Gospel According to John*. Anchor Bible, N.Y.: Doubleday, 2 Vols. 1966, 1970, vol. 2: 923. Though most Protestant exegetes question this interpretation (some exceptions being the commentaries by E. C. Hoskyns and by M. Thurian), a discussion from Protestant and Catholic viewpoints is in Brown, R.E., Donfried, K.P., Fitzmyer, J. A. & Reumann, J. (1978). *Mary in the New Testament*. Philadelphia: Fortress Press.

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Questions

1. What insights/ perspectives or questions were evoked or took hold in you as you considered the role of primal pain in addiction and in healing?
2. How has God's love been real in the midst of suffering, for you and/or for those with whom you work?

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