Movement, Memory & Healing: Redefining Rehab with Marion McRae Transcript

(Transcripts are generated by AI and may contain errors)

Introduction to Marion McRae

You said various things and they gave me goosebumps. That brings this different level of compassion. To experience emotions and to invite them to move through our body, we need to feel them.

I didn't learn them from within my profession. Hello and welcome to Root to Rise. My name is Dr. Emily Spickle, your host, and today we have a incredible episode where we will be joined by Marion McRae.

And we are going to take an exploration into your body and possibly some of those musculoskeletal conditions, including low back pain and how their origin may actually be rooted in your emotions and your perception of safety.

Now, Marion McRae, she is a physiotherapist and founder of Movement Solutions, internationally recognized movement educator who was based out of Western Australia.

Marion blends neuroscience, facial dynamics, and postural neurology to create an integrative approach that goes far beyond a traditional rehab approach.

Marion's work challenges us to look at movement and healing through a new perspective. One that addresses not only the body, but also the mind, your emotion, and a topic that I'm very fascinated in is your past trauma.

Marion has explored the role of psychedelics such as MDMA, psilocybin in trauma release and the impact of hypervigilance on learning and importance of preparing safety, structural protocols, and emotional healing.

Welcome, Marion. Thank you so much for being a guest on Roots Arise. Oh, my pleasure, Dr. Emily. Thank you for having me. I've been a big fan of your work for a while.

So this is lovely to finally have a chat. Yes. This is such a fascinating topic to me, I just feel like the world is bringing professionals such as you to my space, into my world, to really open up the conversation of emotion, safety, how our physical body actually holds on to trauma.

So can you just start by setting the tone and sharing some of your thoughts around that and how impactful emotional past trauma is on our Yeah I definitely want to I might start with just pre-trauma or just everyday muscular conditions, musculoskeletal conditions that I see in practice.

Pain, Beliefs, and the Brain

As you know back pain is my specialty I guess because I See the impact of emotions become a big deal with any chronic condition and I've been a clinician now for 30 years and I spent probably the first 10 years.

getting fairly substandard results because I was working with a model that just did not, well, it worked occasionally, but I would quickly see people come back.

And I got very dissatisfied professionally because, I knew a lot, But I wasn't actually really having an impact on people or certainly wasn' t having the impact I wanted to have.

So, you know, I think that's when you have to start looking outside of your profession and you go on a journey of exploring other thoughts, other bodies of science, and yeah, eventually I've really come to understand that We treat our physical bodies, we treat the biology and we do that really well.

But as we both know, We are so much more than our physically body. We have thoughts running through our head, which trigger emotions that we feel. And I find it so funny that we just end up treating the biology knowing that all this is going on.

And yet we tend to segment people and say, go talk to the psychologist if you're having thoughts that don't serve you or if your stuck in an emotional rut, here's a pill.

There's so much more to it. Particularly with chronic pain, we know neurologically that pain is an output. So it's a decision made in the neocortex about the sensory information coming in, about whether we feel safe or about, whether this sensation is a threat.

And if it is determined that it s a thread, it' s pain. The things that helps the brain determine, and you know all this, is, you know, the sensations get run via the thalamus, which is about our beliefs.

And then it gets run by the amygdala, about the limbic system and our emotions. Then there's the role of the hippocampus in our memory. And finally, there's the actual noxious stimulus, which is the, you know, the traditional pathway of pain that we're familiar with.

But there are three prime filters, our beliefs, memories and our emotions that affect how the brain labels that input. and we are treating one of those four traditionally which is to me why we're getting 25% efficacy with back pain when we could be getting you know let's pitch for 75 and 80 if we just throw in some attention to people's beliefs and mindsets and their memories and they're emotions.

Yeah so it's that's fascinating that my The beginning of my journey into looking a little bit deeper into emotion and trauma and beliefs, you take it much, much further than I do, which is completely fascinating.

And I can't wait to delve into your work more, was in chronic patients. That I was seeing that I getting a lot of chronic neuritis, chronic neuralges, and chronic movement disorders.

There's a complexity in that presentation when a patient has a chronic condition, right? They just, they come with a different weight into the room. So I find that really, really fascinating.

For the listeners to kind of grasp this a little bit more, how does that look when you see a person? How do you start to establish perhaps this concept of safety or the deeper exploration of beliefs which can be a little bit vulnerable and maybe not every patient is ready to do that.

That's a really great question. You know, from a clinician, you wouldn't ask that question if you hadn't had that experience. And I would say, I've had to a lot of internal personal development and additional training in relational skills trauma and in the psychedelic assisted therapy.

I've had to develop my ability to attune and to hear beneath the language. Well, basically in a 45 minute consultation, let's say. You know, the questioning will be different.

It's I'm interested in pain, I do the normal standard assessment, but I am also interested what their beliefs are about this pain? Do you feel it can get better?

Assessing Safety and Patient Beliefs

do you don't feel that can't get? What could be the barriers to you getting better and you know that's when you get a lot of dumping I guess of beliefs that have been acquired largely I hate to say it from health professionals who have almost cemented in this patient you know, just that if it's a disc it is going to take twice as long, if its degeneration it can't possibly heal.

There is a lot of beliefs that are passed on that, actually if we pause and question, we all have examples of patients that have all these things but have no pain.

So we know there is more to the clinical picture. I will listen to language, I'm interested in how they're feeling about the experience of their pain.

You know, how does this make you feel? How is this impacting your relationships? how's this impact in your finances? What's the worst thing about being in this pain?

Can you do the sports you love? what are your hobbies? I guess it's a different evaluation beyond the standard. Can bend? can you straighten? It's even just asking someone about their experience of what's going on, allows them a sense, a form of being seen and being heard and validated.

I was just going to say that. That brings this different level of compassion. that if I was your patient or clients in this experience, I would feel seen and heard and validated, which is really, really powerful.

So if let's say someone is starting to share those beliefs with you, how do you start to navigate that? Like I'm just very fascinated and I know the listeners are going to be so intrigued with this unique approach that you take with your clients and patients.

There's quite a few techniques. One is, you know, have a belief sheet, for instance, that has, 20 beliefs about back pain. And then we go on, well, where did we get that belief from?

Is it true? You know, the work of Byron Katie is great at belief flipping. So that hers tool is one that I use, it's you know when did we form this? Is the opposite also true, can we find examples where for instance our body broke a bone and it healed?

So why is this experience any different? It's about having the brain notice past experiences where it was able to heal and heal rapidly, that's one that comes to mind.

It's actually quite different for everyone, as you can appreciate. Sometimes if their beliefs are rooted in childhood information that's been passed on from mum or dad, we might go there.

We may even do a little bit of a somatic experiencing of, when did we form this belief? And we can ask the body directly and it will normally have a flashback to a memory of when it's picked up and accumulated this subconscious idea.

So my, I guess my I don't have a recipe, because the person's language and experience dictates which path we go through. I think it's about having all the tools.

And then for the to have the biggest impact in the shortest possible time. And sometimes I get that wrong. Sometimes I take it longer than I'd like. sometimes it's rapid.

I'm a work in progress as much as my patients are, but each patient teaches me something about how to get better at that. That's what I love about being a clinician and working with people.

They're a puzzle. Yeah. Unwrap them layer by layer. Yep. I love puzzles. And I loved being a detective. So why do you specialize or focus on back pain specifically?

I guess it came from a personal experience. My first husband had chronic pain and I think I spent 10 years bashing my head against a brick wall to I could hear his language.

I knew he was depressed. It wasn't about his back. it was about all the other shit that was going on for him and You know, he just wouldn't look at it.

And I did what every wife does. I kind of, you know probably tried to force the issue too frequently too often and it created a real divide. Um, and I saw what that did to our relationship and obviously, my family.

Back Pain, Trauma, and Personal Motivation

Yeah. My family essentially split because we were living with someone in a chronic pain cycle and it wasn't fun, it was not healthy and I couldn't see it changing.

The upside is I learned a lot of skills in that time, because I was very invested in helping him shift that were actually working for my clients. They weren't working with him, but they were working from my client.

So it set me up on this path of understanding when you live with someone and you can see that. they're not happy and consequently they make choices and you know they are experiencing pain and they take the pills and the pill aren't really going to change much apart from adding a lot of organ toxicity and it's just a spiral that's not pleasant to be around and yeah I think it triggered the lived experience of living with someone in that state triggered my interest in it I guess But I saw it in practice a lot also.

So just frustrated me that as clinicians, we don't, well, certainly in my undergraduate training, that we didn't get taught about emotions. We didn' get talked about mindset.

The biology part, great. But yeah, all the biggest parts. are missing and I know no matter how good I am as a clinician, if when I ask that question, do you believe you can get better from here?

And someone looks at me in the face and says, no, why would I proceed with anything until I've unpacked that and had them entertain the idea that perhaps improvement was possible.

It's a big leap to go from no to, or maybe, maybe is great. Let's start at maybe and let's track progress and lets cement it so that your brain can see progress.

These coaching skills, I guess, is what makes someone impactful as a therapist or not. And I didn't learn them from within my profession. I had to learn from outside and that's okay.

But I do think Undergraduate physios not knowing these things keeps people, a lot of people stuck in a pain cycle that they don't need to be in. And hence why my mission is to, you know, educate, education, up-skill, because healing is really simple.

When we bring an acknowledgement that it's possible and that how you feel about it matters, And beyond the physio stuff, the standard strength and conditioning, which is all good, you know, and the movement part is the missing part as well.

I see a lot of focus on strength in conditioning but not on quality movement. And, so there's missing parts which I think is their message. If you're not winning with your therapist, it could be that their lens is just a little bit narrow.

And if you open to some of these other ideas, you can rapidly progress. For the listeners who are thinking, I wonder if that's me. Is my knee pain linked towards some emotion or trauma, et cetera?

Would you say, again, for the listener to start to kind of clarify and understand their body, where when you have a presentation, let's say knee pain, long standing foot pain back pain.

Order the imaging, x-ray, MRI, and it's read as, okay, maybe a little bit of structural changes, but nothing that is matching the level of pain that the patient or individual is presenting with.

Is that kind of just for high level framework for the listeners where they could start to say, okay, maybe this is a little bit more of what Marion is talking about, where it might be these emotion, belief, trauma?

Is out of way that you could starts to clarify that? Yeah, and I love, it's got a lot easier over the years to have these conversations with clients because they're a little bit more now open to the idea that emotions can become suppressed and embodied and typically emotions tend to become, suppressed in vulnerable tissue, which kind of

makes sense to me.

Exploring Emotions Through the Body

A simple process, a simple lead question that I would use is, look, we do have some science now about emotions and how they can become embodied in our physical structure.

Are you interested in exploring your pain from that perspective? And I need a buy-in because I guess… Emotions are very scary for people. I think particularly if there is a trauma background, the setting is super important.

It's not something you fly out with in a 30-minute consultation and then say, see you later, I've got another patient. There needs to be a discussion about, you know, does this person feel safe exploring their emotions in this setting, within this environment?

And if my feeling is there's a lot there, then I'm not gonna do it in a typical standard clinic setting. I have another way I would sort of navigate and deviate into that exploration.

We set it up as a separate experience, but if there is buy-in, And sometimes, even if there's not buy-in, I will invite them to become curious about the idea.

And, you know, in the safety of their own home, when no one's around, and they can have whatever emotional response they want to have, oh, just say, look, why don't you just put your hands on the tissue?

There's something about light touch on injured body part that helps people connect. And, you know, when you're in a safe space, feeling calm, just put your hands on the tissue and become curious about actually directly speaking to it.

Sounds weird, I know. But, talk to the Tissue and say, Nee, what's going on? Is there something I'm missing? is there's something you trying to communicate to me?

and then shut up and just listen. And I tell my clients, sometimes you'll get a real flash of insight that you know is real for you because of the emotional resonance that your feel.

There'll be an emotional experience of some description. Some clients will get, oh, I don't know, it's something to do with… It's like a logical thought and there's no emotion attached to it.

I kind of don' t put much… That's almost like the mind bypassing the body doesn't want, it's a logical, It's like, the mine that you go going, blah, to fulfill the answer.

If there's no emotion attached, you probably haven't hit the money and that's okay. It may take repetition and practice and even just an opening to the idea, but essentially to experience and feel emotions and to invite them to move through our body, we need to feel them.

And having courage to sit and feel, I think is one of the hardest, hardest skills I've ever tried to coach. There's a fear of being overwhelmed and drowned in it.

I have experienced that myself. And it really takes courage and but on the other side is freedom, release and you know a lot of the good stuff but getting into that space to be convinced that this is actually going to make a difference in your body I honestly don't know if anyone can guarantee that I know it definitely helps And nobody knows to what level, but I kind of think if you're stuck where you are and you looking for answers, what have you got to lose?

You know, you gonna feel shit maybe for 90 seconds. Once I heard an emotion takes 90 second to move through if really go into it. And that for me was such a safe thing to know because I thought, all right, worst case scenario, I'm going to feel awful and intense for 90 seconds.

Right. And then I'll be on the other side. I think there's a variance in that. But there are lots of things we can equip people with to start to explore.

Yeah, no, absolutely. And it can seem very overwhelming, but as I kind of keep exploring into trauma more and more, and trauma healing and somatics, you have to feel it.

You cannot intellectualize it, I love to intellectualized everything. which is not how you do it. You have to literally feel it and it is so painful when you are feeling and releasing it, but you're absolutely right.

It is suffering when when are past that 90 seconds or that heaviness is and just trusting the process. So I love the message that you're putting out there.

I am very fascinated, personally fascinated in how you got into psychedelics and how do you incorporate that into your practice. Yeah, well, I definitely had developed lots of different tools over the years, you know, breath work, mindset restructuring, belief exploration, emotional experiencing, all of it.

I had definitely a day, a really young client coming in, early 20s, super traumatized, and she had back pain and multiple pains in her body.

Psychedelics, Hypervigilance, and Nervous System Safety

And she was so agitated, so hyper vigilant, So wired that nothing I had. was gonna work. Even just laying on the floor and closing her eyes was out. No eye closing was allowed.

Like in terms, she just couldn't do it. She didn't feel safe in anything. And it just made me realize that, and you know, then I saw another one. You know similar, like I think I had a day of a few really wired patients and my reflection at the end of the day was like, wow.

people are ramping up big time and I have a fear that the nervous system is going to get to a point where it literally can't hit parasympathetic for long enough for any tools to be learned and that really scared me because if I can, if you don't have how do you bring yourself out of sympathetic back into parasympathetic?

And that's essentially, I was equipping people with tools that would help them access parisympathy, turn off sympathetic, so that we could access all the healing benefits of being in that nervous system versus the other.

So that when I thought, wow, it's gonna get to a point where people are just not even gonna be able to consciously learn the skills needed. And so then I…

Is that because of just modern society and how we are shifting? Is why you think it's harder and harder for more people to get into that parasympathetic state for your tools to…

Look, I don't know, but I suspect it's to do with society, financial struggles, generational trauma plays a role. The gadgets, everything's fast and furious.

Many people are no longer able to access stillness, even just being able be still. So it is an escalation of life and its pace, Yeah, and I definitely think it's a bit like Gabor Mate says, a child born in today's society, by the time they're 20, I think their chance of not being medicated is like 20%. It's like the environment we're living in and procreating in, it like putting a seed in soil that's toxic.

Even if you come well adjusted, you're experiencing everything around you is pretty messed up. How do you equip out your kids to get to 20 and be able to cope with all that?

It's a lot. So I guess I felt like we needed something else and nature had something and indigenous cultures have been using these tools for years and the science is there and I was just like wow let's you know this is very different to giving someone an antidepressant which helps them cope with the trauma doesn't release it from the body it just

helps him cope actually helps the body release it so that it can actually be free of it.

That's the biggest difference. One is drawing from the buddy what needs to come out. The other is just helping the Buddy coexist with what stays in. And that those two things are very different.

So you guide patients through this and then that means that you've done them as well? Yes, I've had psychedelic experiences for sure. So at the moment in Australia I'm trained.

Legislation is there. But at the moment, the actual practicing of the therapeutic protocol cannot happen without a psychiatrist and a medic and in a collaborative team approach.

So it's growing and hopefully soon it becomes more mainstream and people like me can work alongside other practitioners or even be referred to. But you know, it is baby steps.

I'm a little bit impatient, Emily. Healed up and ready before the mainstream jumps on board. So even breath work, a psychedelic breathwork experience is possible for people.

They don't need the actual psychedelics. There's a lot that comes out in one of those sessions. But again, it needs to be done well. It needs be safely.

People need to equipped to go on that journey. And need be with people they trust in a setting that's safe. Otherwise you'd get the full release and you also can actually add more trauma, which is really what we don't want.

No, absolutely not. For the listeners, I love practical tips. So if they're thinking of how do I start to incorporate an exploration in emotions, beliefs, how it affects my physical body, are there certain practices that you recommend at home?

Are you a big believer in meditation? Just how can people start explore it or integrate different practices into their day? Yeah, well I'm a really big fan of Feldenkrais as a practice.

Movement Practices for Healing

It's not a cult for your listeners, it's a movement practice You know, things like Qigong, Tai Chi, I like Feldenkrais perhaps over those two because it's laying on the ground usually.

And in that laying, we get dorsal vagus nerve, you know that it can cut the calming of that when you lay on something solid. But my experience was I was very scientific, very logical, and very mental.

I'm not the only one. There's a lot of us out there and I had and being an athlete as well, I didn't want to feel any sensations in my body because the more I could push through and dampen those, the More I Could push into pain and achieve.

So my relationship with my own internal space was pretty, pretty bad. And this is what I'm saying about once, if we've been that and we can come full throttle in the other direction, I definitely think it helps us teach people the experience better than having it as a logical thought construct.

So Feldenkrais for me was the introduction to sensing and feeling in my own body. And I love the way it does it because practically it asks a question and then the body goes looking for the answer.

And in that, you come into your body. You literally drop out of your head and you, come in to your, body noticing and building that ability or intraceptive ability is, is a neuroplastic part of, your brain that you can develop and Once you have that connection to sense and feel, you can be guided by it.

If you cannot feel it, You have no guidance. It is a very externally orientated decision making process. So yes, it is trainable and one of the simplest ways would be get on YouTube, Google Feldenkrais 4 neck pain, back pain knee

pain.

Do a 10 minute video. I like it because it's safe. You never push in Felde and Christ into anything that hurts. And I think it's a very safe place for people to, through movement, start to connect with their internal senses.

And the upside is that they're also expanding their motor cortex. So they learn to sort of move in new ways, which will take them out of their default way of bashing into pain, Yep.

I love that. So Feldenkraisen, you can find videos specific to, like you said, different regions of the body where some people may have chronic pain or presentations.

Um, I'm sure you're a fan of doing breath work at home, meditation. Look, with breathwork I will say I am a little concerned by how many untrained practitioners are doing one day workshops without any screening for trauma?

And I've definitely had a few clients had their trauma amplified by breathwork experiences. So I think breath work, even though if you know there's a lot in there, You can touch the surface and retreat.

I think that's another beautiful philosophy of Feldenkrais is that it's okay to build capacity into sensing and feeling. We don't have to rip the bandaid and throw ourselves into a hot mess of emotions.

we can do it steadily, we could do safely and if we know we from threatening sensations in our body and then we have this trust to go and retreat, go in retreat and building that capacity makes the whole journey so much nicer than just rip wood chip, here we are and it's too much too soon and we end up triggering a lot of stuff that the experience just doesn't need to be that way.

It can be done a whole lot better. Yeah, absolutely. Meditation is great, but again, if you can't shut your eyes and be still, it's… It's a long way in.

I like some of the brainwave, equi-sync brain wave training through sound, lulling the brand into that theta state. So just listening to a music that actually, you just have to sit and listen to music.

You don't have calm your mind. It almost puts the brine into the state, I think that's really good way to kind of bypass what's going on. I love that.

So for the intellectuals out there, any books that you would recommend or mentors in the space, people who have inspired you in your work? You know who I really think are doing great work and a shout out here to Lani and Brian at the Somatic Coaching Academy.

I think they do really good work with pain science and somatic therapy is getting also a lot of popularity lately.

Resources, Books, and Bulletproof Backs

But sensations based coaching is what they do. They basically help people make sense of their emotions, A, start to feel them, and then B, Start to understand them.

Because if we don't have a understanding for what our sensations are trying to communicate to us, what's the point of feeling them? You know, so yeah, they would be that they come to mind when you ask that question.

I like Gabor Mate's work with addiction. knock out stellar work, the compassion he demonstrates for people, helping them understand why they have made the choices they had has all been about psyche survival or nervous system safety.

You know, often I wonder how many of our choices are actually ours. or driven by our nervous system. It takes a lot of consciousness to override the default mechanism.

And without consciousness, we're all primary animals just reacting to stimuli. So I really love his work as well. Yeah. His book, When the Body Says No, is fascinating, a fascinating read, which is kind of exemplified through your work, because we are talking about chronic pain manifesting itself, or emotion and trauma manifusting itself in the physical body through chronic paint and your word.

So I find this so eye opening. I really hope that it offers the listeners another avenue to explore and to know that what they've possibly been told is not the full story, that there is more that they could be doing with their chronic pain, whether it's the lower back, knee, hip, all of that.

So if the listeners are interested in learning more about your specific approach or seeing you as a patient client, where could they learn more? Yeah, so I have developed this method called the bulletproof backs method and essentially it's mindset, emotions, and then quality movement.

So, you know, I'm doing my best to become part of the solution rather than I did spend a few years there just bagging the system. And I support, you know, just try your best to solve, to create something that you think is better than what's out there now, which is where I've landed.

So YouTube, I have a channel, Bulletproof Backs on YouTube where a share mindset tips, emotional tips and movement tips. There's the podcast where I interview back pain sufferers and practitioners who work with back pains sufferer.

But really I like talking to people who've been on the journey themselves and have come out the other side. And when you do that, it's really lovely to see how different the experience is for everyone and how there is no recipe.

What works for someone won't work for someone else. It's got to be almost driven by their internal intelligence. So, you know, I like those chats because I think it gives people hope that, okay, there's a way through.

I've just got a kind of navigator and find it for myself. Who's the people that can guide me on that? Is it a mental thing holding me back? Isn't I need to do some emotional release work?

Or is it that I just need connect with my left foot more, It could be a bit of both. It can be very clearly which one, but unless it's looked at from the whole picture, I just see the outcomes are very poor for back pain.

And it is just simply because we are not taking that holistic approach. So the website is www.bulletproofbacks.com and I have little mini courses on there.

You can apply for coaching on that. I love it. I'm definitely going to explore your work more. And there were several times when you said various things and they gave me goosebumps because I feel that you are very much pushing the industry forward and we need more professionals like you bringing really that holistic emotional belief, trauma, spiritual message to the physical body.

So thank you so much for sharing and for all your Thank you, Dr. Emily, for your work. As I said, it really it feeds so nicely into my model of understanding.

And if we all own a little bit and collaborate and share and link the pieces, then ultimately the collective gets far better health outcomes than traditionally what we've had.

So thank you for the time. Loved it. Of course. Thank you and thank you everyone for tuning in. Definitely check out Marion's work. And this is not the first episode where we spoke about emotions.

So clearly there is a theme that we are trying to get everyone more connected to the emotional and physical body. I hope you enjoyed and remember all episodes are sponsored by Noboso.

You may learn more at nobosso.com. Thank You so much.