



I Want Connection, But My Body Won't Let Me: Working with Attachment Wounds Through Sensorimotor Psychotherapy Video Course

Dr. Pat Ogden & Esther Perez

Video Course

CPD hours: 6



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When the Body Carries What Words Cannot Say

She sits with shoulders curved inward, arms crossed tight, eyes averted. Asked about her childhood, she says the words — "it was fine" — but her body tells a different story. The collapse, the self-containment, the habitual turning away: these are not conscious choices. They are the somatic legacy of attachment injuries carried for decades.

Therapists recognise attachment patterns in the ways clients describe relationships, manage closeness, respond to rupture and repair. But attachment doesn't live only in thoughts and narratives. It lives in posture, movement, autonomic patterns, and the body's habitual organisation in relation to others.

The infant who learned that reaching out brought inconsistent responses grows into an adult whose muscles hesitate mid-reach, caught between approach and withdrawal. The child who experienced a caregiver as frightening develops not just disorganised internal working models, but conflicting impulses in the body — to move toward and away at the same time — leaving them frozen in adulthood, unable to complete relational gestures.

Neuroscience research confirms what therapists observe: as Allan Schore describes, early attachment patterns create lasting neural pathways that shape somatic responses. The body doesn't just remember—it organises around these early relational templates, creating what Schore calls "right brain to right brain" regulatory patterns that operate beneath conscious awareness. Stephen Porges's polyvagal theory similarly demonstrates how early relational experiences wire autonomic responses that persist across the lifespan.

Relational wounding and societal oppression leave lasting imprints not only on the psyche but also on the body. While therapists have developed sophisticated ways to work with attachment cognitively and relationally, the somatic dimension is often overlooked — even though it is here that these injuries are carried, and here that healing must also occur.



Two Approaches, One Body: Trauma vs. Attachment Injury

Sensorimotor Psychotherapy (SP) distinguishes between trauma interventions and attachment-focused interventions.

- **Trauma work** emphasises autonomic regulation, completing thwarted survival actions, and restoring nervous system flexibility.
- **Attachment work** requires a different stance: one grounded in connection, meaning-making, and proximity. These injuries are not about escaping threat, but about what happens when survival needs for attachment are unmet. Healing requires body-based interventions that foster repair and relational resilience.

This distinction is not merely theoretical. Louis Cozolino's work on the neuroscience of psychotherapy reveals different neural networks and therapeutic requirements for trauma memory versus attachment encoding. Trauma responses involve amygdala-mediated fear conditioning; attachment injuries involve right-brain implicit relational knowledge that developed before language. The interventions must match the encoding.

This two-part training teaches how to recognise which you are working with — trauma or attachment injury — and how to intervene effectively at the somatic level.

Evening One: The Legacy of Attachment in the Body

Thursday 22 January 2026, 6:00–9:00pm | Led by Esther Perez

This session explores how different attachment styles — secure, avoidant, ambivalent, and disorganised — are expressed through posture, movement, autonomic patterns, and relational gestures.

Through clinical examples and somatic observation, participants will learn to identify how the body organises around attachment experiences, and how these patterns influence present-day behaviours, emotions, and beliefs.

Esther will also introduce the six philosophical and spiritual principles that guide Sensorimotor Psychotherapy, offering a foundation for ethically grounded somatic work.

You will learn:

- **How trauma, attachment, and relational trauma interconnect and diverge—and why confusing them leads to ineffective interventions**
- How to identify somatic signatures of each attachment style: the avoidant client's muscular bracing and shallow breathing, the anxious-ambivalent client's incomplete reaching gestures and hypervigilance to proximity shifts, the disorganised client's simultaneous approach-avoidance that freezes the body mid-movement
- **How to recognise adaptive strategies rooted in early relationships that once protected connection but now restrict relational possibility**—including tracking how clients organise their bodies in relation to you in the therapy room
- The impact of recognition, misrecognition, and systemic oppression on somatic attachment patterns—drawing on SP's understanding that cultural trauma and personal attachment injury intersect in the body
- Practical methods for helping clients notice and name their somatic patterns through questions like: "What happens in your chest when I move closer?" "Where does the impulse to reach out get stopped?"



Evening Two: Healing Relational Injuries Through the Body

Thursday 29 January 2026, 6:00–9:00pm | Led by Dr. Pat Ogden

The second session focuses on therapeutic repair. Pat will demonstrate how to use SP techniques to address relational injuries distinct from trauma, supporting new possibilities for connection.

Participants will learn how to track proximity-seeking actions (such as reaching out), expand movement vocabulary, and use therapeutic enactments to support shifts in the internalised meanings of early attachment failures.

You will learn:

- How to differentiate SP techniques for trauma (pendulation, titration, completion of defensive responses) versus attachment injury (proximity-seeking support, relational enactments, co-regulation)
- **Skills to track moment-to-moment bodily expressions:** How does the client's breathing change when discussing their mother? What happens to their posture when they describe asking for help?
- **How belief systems like "I'm unlovable" or "people always leave" are held somatically** in collapsed posture, protective muscular armouring, or habitual movements away from connection
- Somatic methods for working with intense emotional states using the window of tolerance concept—widening capacity without triggering shutdown or flooding
- How to design therapeutic enactments: guiding a client to complete the reach they aborted as a child, practising sustained eye contact while tracking autonomic responses, experimenting with proximity and distance while maintaining dual awareness
- **Strategies for expanding movement vocabulary—teaching new physical possibilities like "staying present while someone moves closer" or "reaching out while maintaining self-support"**

Clinical Application

Consider Marcus, who described his childhood as "fine" but whose body told a different story. In session, he sat rigidly upright, arms crossed, without visible affect. His therapist had worked cognitively with his avoidant attachment for months with limited progress.

When they began tracking his somatic patterns, Marcus noticed how his chest constricted when discussing vulnerability, how his shoulders rose toward his ears when his therapist leaned forward with empathy, how he literally held his breath when emotions threatened to surface. These weren't conscious choices—they were his body's learned response to a childhood where emotional expression brought parental withdrawal.

Using SP attachment interventions, his therapist helped Marcus experiment with small somatic shifts: allowing his shoulders to drop while staying present, taking a full breath while maintaining eye contact, uncrossing his arms for just 30 seconds while discussing difficult feelings. These tiny physical changes—tracked carefully to stay within his window of tolerance—began shifting his capacity for connection in ways that insight alone never could.

Why Attend?

Work where attachment is most deeply encoded — the body — and add Sensorimotor Psychotherapy methods you can integrate immediately.

By the end, you will be able to:



- Recognise somatic signatures of different attachment styles
- Differentiate between trauma responses and attachment injuries
- Integrate SP's six guiding principles into attachment-focused clinical work
- Help clients discover and complete relational gestures that were once unsafe or impossible
- Use body-based enactments to support shifts in internalised meanings of connection and safety

For therapists working with attachment injuries, relational trauma, or clients where talk therapy produces insight but not embodied change, this training provides concrete, body-based tools to deepen relational healing.

Why Pat Ogden and Esther Perez

Attachment work through the body requires more than technique—it requires deep understanding of how early relational experience becomes somatically encoded, and how to work with that encoding without retraumatising. Pat Ogden pioneered this integration four decades ago, developing Sensorimotor Psychotherapy specifically to address what traditional talk therapy couldn't reach. Esther Perez has spent years translating Pat's foundational work into accessible, replicable clinical practice, particularly with the attachment-focused applications that many therapists find most challenging. Together, they offer not just the what and how, but the clinical wisdom that comes from decades of working with clients whose bodies remember what their minds cannot speak.

About the Presenters

Dr. Pat Ogden is founder and CEO of the Sensorimotor Psychotherapy Institute and architect of the Sensorimotor Psychotherapy approach. A pioneer in somatic psychology, she has spent four decades integrating cognitive, emotional, and sensorimotor processing in trauma and attachment work. She is author of *Trauma and the Body: A Sensorimotor Approach to Psychotherapy* and *Sensorimotor Psychotherapy: Interventions for Trauma and Attachment*.

Esther Perez, MA, LMFT is a bilingual Senior Trainer for the Sensorimotor Psychotherapy Institute and teaches internationally. She integrates SP with EMDR, IFS, and MBT in her work with adults, adopted children, and adolescents with attachment-related issues, complex trauma, and dissociation. Esther has private practice in Malaga, Spain, and provides consultation to SP graduates worldwide.

Limited spaces available. Super early bird pricing ends soon.

Because attachment doesn't just shape how we think about relationships—it shapes how our bodies move through them.

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