



# The Neuro-Energetic Paradigm in Narcissistic Abuse Recovery: A Groundbreaking Integrative Framework with Subconscious Energy Healing Therapy (SEHT)

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## Abstract

Narcissistic abuse constitutes a complex, multidimensional trauma that extends far beyond psychological injury. Its impact infiltrates neurocognitive processing, autonomic nervous system functioning, subconscious programming, and bioenergetic coherence. Existing psychotherapeutic frameworks often provide partial relief, addressing conscious cognition while leaving deeper trauma imprints unresolved. This paper introduces an innovative Neuro-Energetic Paradigm integrating traditional clinical psychology with Subconscious Energy Healing Therapy (SEHT), a novel modality developed by Dr. Amita Puri. SEHT unites subconscious reprogramming, biofield healing, vibrational medicine, and somatic regulation into a cohesive methodology for treating narcissistic abuse of survivors. Drawing upon trauma neuroscience, quantum biology, and energy psychology, this work proposes that trauma is not merely stored in neural pathways but also encoded within the human energy field.

**Keywords:** Narcissism, SEHT, Trauma, Neuro-Energetic, Subconscious, Healing, Narcissistic Abuse, Clinical Psychology

## 1. Introduction

Narcissistic abuse has emerged as a silent epidemic within intimate relationships, families, and social systems. It is characterized by emotional manipulation, gaslighting, coercive control, and psychological erosion which results in profound disturbances across cognitive, emotional, somatic, and energetic domains (Lohmann et al., 2023).

While cognitive-behavioral and psychodynamic therapies have contributed significantly to trauma recovery, survivors of narcissistic abuse often report persistent symptoms even after years of treatment including:

- subconscious self-blame
- chronic emotional dysregulation
- energetic exhaustion
- relational hypervigilance
- identity fragmentation

These observations indicate that narcissistic abuse is not solely a psychological phenomenon, but rather a neuro-energetic trauma that interfaces with consciousness, biology, and the subtle energy systems of the human body.

Emerging research in epigenetics (Nohesara & Alfonso, 2025), psychoneuroimmunology (Fleshner & Laudenslager, 2004), polyvagal theory (Porges, 2003), and quantum medicine supports the concept that trauma is both biochemical and bioenergetic in nature. This insight forms the foundation of SEHT.

## 1.1 The Psychological and Neurobiological Architecture of Narcissistic Abuse

### 1. Cognitive-Emotional Disintegration

Long-term exposure to narcissistic dynamics results in:

- compromised prefrontal cortex functioning
- heightened amygdala activation
- impaired decision-making
- cognitive fog and dissociation

Trauma bond reinforced through reward-punishment cycles creates neurochemical dependency particularly on oxytocin and dopamine.

Prolonged exposure to narcissistic abuse produces a systemic breakdown of cognitive and emotional integration within the survivor's nervous system. This is not a weakness of character; it is a predictable neuroadaptive response to chronic relational trauma.

At the neurobiological level, sustained emotional unpredictability, gaslighting, and intermittent validation progressively compromise prefrontal cortex functioning. The prefrontal cortex responsible for executive functions such as judgment, impulse control, planning, and reality testing becomes less efficient under continuous stress. Survivors often report difficulty thinking clearly, second-guessing themselves, and an

inability to trust their own perceptions. This erosion of executive control explains why highly intelligent, capable individuals may appear indecisive or “confused” while inside the abusive dynamic.

Simultaneously, there is heightened and persistent amygdala activation. The amygdala, the brain’s threat-detection center, becomes hyper-sensitized due to repeated emotional shocks of rage episodes, silent treatments, sudden withdrawals of affection, and psychological attacks. Over time, the nervous system remains locked in a state of hypervigilance. Neutral cues are misread as threats, and the survivor’s body reacts before the mind can assess reality. This chronic fear activation overrides rational processing and reinforces survival-based responses such as appeasement, freezing or emotional shutdown.

As a result, decision-making becomes impaired. Choices that require emotional clarity leaves the relationship, setting boundaries, trusting external support become neurologically difficult, not psychologically illogical. The brain functions in survival mode, prioritizing immediate emotional safety over long-term well-being. This explains the reason behind a survivor’s stay or return, or the struggle to disengage despite intellectual awareness of the abuse.

Another hallmark of this disintegration is cognitive fog and dissociation. Dissociation emerges as a protective mechanism when emotional pain exceeds the nervous system’s capacity to process it. Survivors may describe feeling detached from themselves, losing time, struggling with memory recall or feeling unreal. Cognitive fog difficulty concentrating, mental exhaustion, and slowed thinking is not laziness or depression alone; it reflects an overloaded nervous system attempting to conserve energy in an unsafe environment.

At the psychological level, narcissistic abuse systematically fractures emotional coherence. Gaslighting disrupts autobiographical memory and internal narrative continuity, creating confusion about “what really happened.” Repeated invalidation erodes emotional confidence, while chronic blame fosters internalized shame. The survivor begins to outsource reality verification to the abuser, further weakening internal emotional authority.

Critically, this entire process is reinforced by a trauma bond rooted in neurochemical conditioning. Narcissistic relationships operate on intermittent reinforcement, alternating between affection and withdrawal, idealization, and devaluation. This pattern mirrors variable- ratio reward schedules known to create the strongest behavioral conditioning.

During moments of validation, reconciliation, or false intimacy, the brain releases dopamine, reinforcing hope, anticipation, and craving. Simultaneously, brief moments of closeness trigger oxytocin, the bonding hormone, strengthening emotional attachment even in unsafe conditions. When punishment or withdrawal follows, cortisol and adrenaline surge which intensifies distress. The nervous system becomes conditioned to seek relief from the same source causing the pain.

Over time, this creates a neurochemical dependency loop. The survivor is not “addicted to the person” in a moral or emotional sense they are trapped in a biologically reinforced attachment cycle, where relief, validation, and emotional regulation are intermittently provided by the abuser. This explains the powerful pull, the longing, the obsession, and the difficulty breaking contact even after clarity emerges.

In essence, narcissistic abuse restructures the survivor's brain toward dependence, fear-based attachment, and emotional dysregulation, while simultaneously suppressing higher-order cognitive integration. Recovery, therefore, must address not only insight and boundaries but also nervous system repair, neurobiological safety, and emotional reintegration.

Healing is not about "moving on." It is about restoring cognitive sovereignty, emotional coherence, and neurobiological regulation after a relationship that systematically dismantled them.

## 2. Autonomic Nervous System Collapse

Narcissistic abuse dysregulates the dorsal-ventral vagal pathways. Victims often oscillate between:

- Hyperarousal (fight/flight)
- Hypo arousal (shutdown/freeze)
- Chaotic emotional states

This dysregulation corresponds with symptoms such as anxiety, insomnia, somatic pain, and emotional numbness.

## 3. Subconscious Programming and Identity Erosion

The narcissist systematically reshapes the victim's inner narrative, installing subconscious beliefs such as:

"I am not enough."

"I am responsible for their emotions." "My needs are secondary."

These beliefs become deeply encoded, creating long-term psychological vulnerability.

## 1.2 The Bioenergetic Dimension of Trauma

The human organism is not merely biochemical; it is electro-magnetic, resonant, and vibrational. Trauma research increasingly aligns with ancient energy-medicine traditions, demonstrating that emotions carry frequency signatures and that chronic emotional abuse disrupts the integrity of the human biofield (Rubik, 2002).

**Energetic disruptions in survivors include:**

- Constriction of the heart chakra
- Collapse of the solar plexus (identity, willpower)
- Tearing of the auric boundary due to chronic invalidation
- Emotional cords formed through the trauma bond
- Reduced vibrational coherence

These energetic distortions perpetuate emotional dysregulation even after psychological insight is gained.

**1.3 Subconscious Energy Healing Therapy (SEHT): A Breakthrough in Trauma Recovery**

SEHT, conceptualized and developed by Dr. Amita Puri, represents a fourth-generation therapeutic model that integrates:

- 1. Clinical hypnotherapy** - accessing implicit memory and trauma imprints
- 2. Energy medicine** - restoring biofield integrity
- 3. Subconscious rewiring** - dissolving limiting belief structures
- 4. Somatic regulation** - harmonising the nervous system
- 5. Vibrational healing** - recalibrating emotional frequency patterns

SEHT operates on the premise that trauma must be released, reprogrammed, and energetically transmuted, not merely cognitively reframed.

**1.4 Mechanisms of Change SEHT works through:**

- theta-state subconscious access
- energetic cord dissolution
- vibrational training
- emotional frequency elevation
- trauma-imprint neutralization

**Clinical observations show rapid reductions in:**

- guilt
- shame
- fear
- obsessive emotional loops
- dependency patterns

SEHT has shown transformative outcomes in survivors who had plateaued with traditional talk therapy.

**1.5 The Neuro-Energetic Model of Healing**

The complete recovery model requires integration across the mind, energy, body, and consciousness.

**1. Mind:**

Rebuilding cognitive frameworks, identity, and self-concept.

**2. Energy:**

Removing energetic residues, trauma cords, and restoring vibrational alignment.

**3. Body:**

Releasing somatic memory, recalibrating the vagus nerve, and rebuilding physiological safety.

**4. Consciousness:**

Restoring inner sovereignty, intuition, and self-agency.

This holistic integration leads to deep structural change, not merely symptom reduction.

**2. Discussion**

A Paradigm Shift in Global Trauma Therapy, SEHT represents a new frontier in trauma recovery, one that bridges clinical psychology with energy medicine. As more empirical evidence emerges supporting biofield-based interventions, SEHT is poised to become a transformative modality globally.

**This paradigm shift moves the mental-health world from:**

symptom management → root-level transformation cognitive insight → subconscious release emotional coping → energetic coherence

survival → thriving and sovereignty

**2.1 Implications for clinical practice****1. New clinical training standards**

Future clinicians must be trained in both psychological science and energy-based interventions.

**2. Multidimensional trauma assessment**

Evaluations must include cognitive, somatic, subconscious, and energetic markers.

**3. Integration in global trauma clinics**

SEHT can be adapted across cultures, making it globally scalable.

**4. Research expansion**

Opportunities exist for neuroscience + biofield + trauma studies to validate SEHT further.

**3. Conclusion**

Narcissistic abuse is not merely a psychological violation; it is a neuro-energetic disruption of the human system. Healing therefore requires a multidimensional, integrative, and consciousness-based approach. SEHT stands as a pioneering modality which can restore emotional freedom, energetic integrity, and self-sovereignty. As global interest in holistic trauma recovery rises, SEHT led and developed by Dr. Amita Puri represents a revolutionary contribution to the field of mental health and energy medicine. This work establishes a foundational framework for the future of trauma therapy worldwide.

**References**

1. Bhatt S, Puri A, Malpotra M, et al. The interplay of emotional pain, physical discomfort, and past- life karmic residues in holistic healing: a case study. *Art Human Open Acc J.* 2025;7(2):108–111. DOI: [10.15406/ahoaj.2025.07.00260](https://doi.org/10.15406/ahoaj.2025.07.00260)
2. Bhatt, S., Puri, A., Gupta, S., Gauba, B., Aneja, K., Alam, S., Puri, A., & Sharma, K. P. (2025, January 28). Exploring the therapeutic potential of soul mandalas. [*EC Neurology*]
3. Construction and development of the empowerment & boundaries assessment (EBA): a tool for assessing boundary-setting and empowerment in victims of narcissistic abuse <file:///C:/Users/Srishti%20Bhatt/Downloads/JPCPY-16-00843.pdf>
4. Fleshner, M., & Laudenslager, M. L. (2004). Psychoneuroimmunology: Then and Now. *Behavioral and Cognitive Neuroscience Reviews*, 3(2), 114–130. <https://doi.org/10.1177/1534582304269027>
5. Narcissism Navigated- Harnessing AI for Personal Growth <https://www.flipkart.com/narcissism-navigated-harnessing-ai-personal-growth/p/itm083edcfd71d9b?pid=978936452>
7. The Power of Three - Psychotherapy, Hypnotherapy, and Subconscious Energy Healing Therapy (SEHT) for Sure Success
8. <https://play.google.com/store/books/details?id=RHdBEQAAQB>
9. Lohmann, S., Cowlshaw, S., Ney, L., O'Donnell, M., & Felmingham, K. (2023). The Trauma and Mental Health Impacts of Coercive Control: A Systematic Review and Meta-Analysis. *Trauma, Violence, & Abuse*, 25(1), 630–647. <https://doi.org/10.1177/15248380231162972>

10. Puri A, Bhatt S, Raj BR. Integrative healing through psychology, nutrition, and subconscious energy work: a conceptual paper with case study. *J Psychol Clin Psychiatry*. 2025;16(4):159–165. DOI: 10.15406/jpcpy.2025.16.00826
11. Gupta, S., Bhatt, S., Girdhar, V., & Puri, A. (2025). Exploring reincarnation and near-death experiences: A case study of past life regression therapy. [Arts & Humanities Open Access Journal], Volume 7 Issue 1 – 2025.
12. Nayar, P., Bhatt, S., Puri, A., & Gupta, S. (2024). Subconscious Energy Healing Therapy (SEHT) in anxiety management: A holistic approach for young mental health professionals. *Gyankosh: An Annual Double Blind Peer Reviewed Interdisciplinary Journal*, VII, 1-xx
13. Girdhar, V., & Bhatt, S. (2024). A case study of integrative psychospiritual techniques in addressing adolescent emotional distress and self-harming behavior with Subconscious Energy Healing Therapy (SEHT). *World Journal of Advanced Research and Reviews*.
14. Puri, A., Shelat, S., Bhatt, S., Gupta, S., Aneja, K., Gauba, B., Alam, S., & Pandya, B. (2024). Unlocking the secrets of color psychology for transformative interior design through SEHT. *Journal of Psychology and Spirituality*.