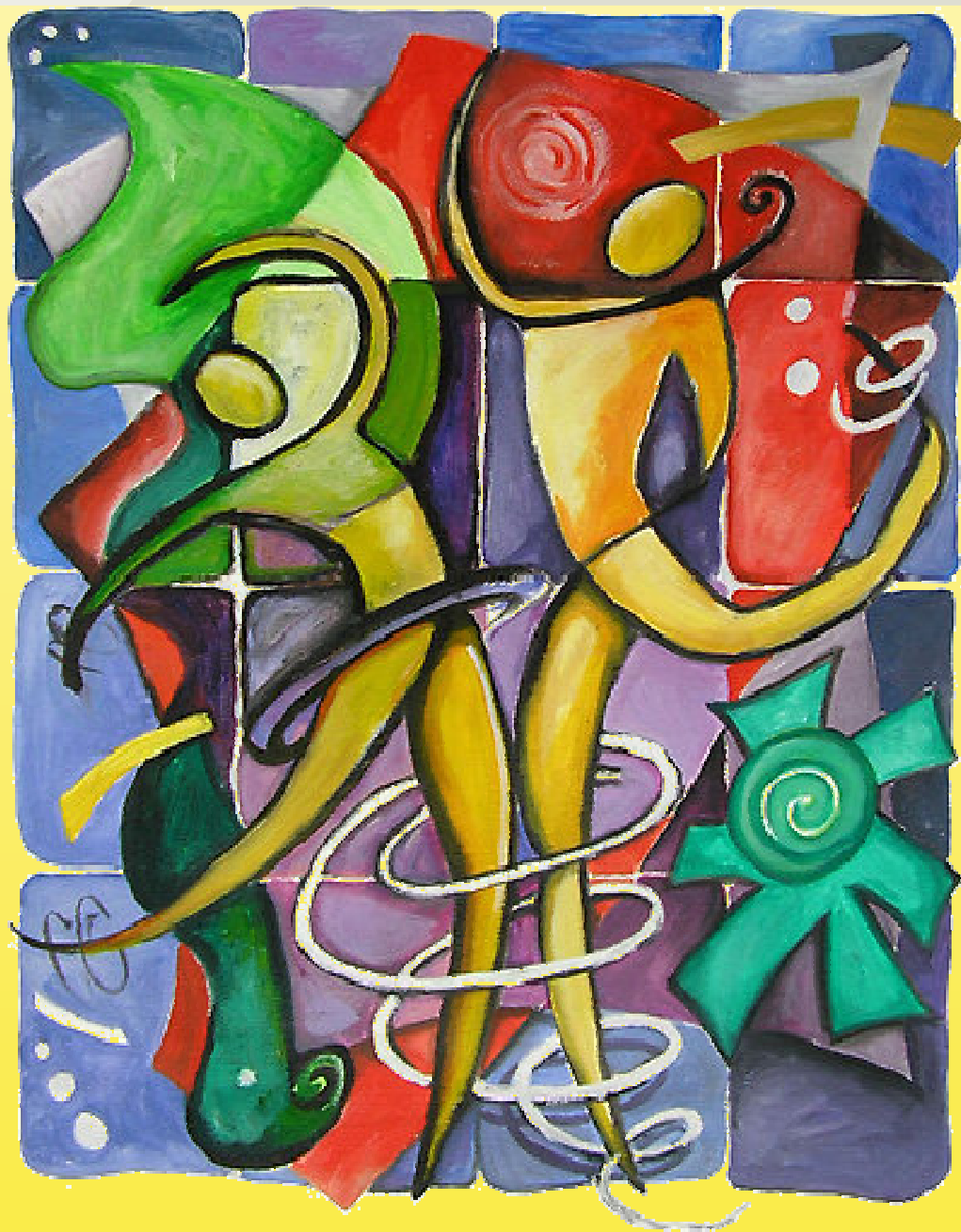


Somatic Psychotherapy *Today*

Volume 1 • Number 1 • July 2011

The USABP Magazine

**Meridian
University
Offering
New
Graduate
Programs in
Somatic**



- Searching for the "Self" in Psychotherapy
- Social Networking and Self
- Somatic Perspectives on Psychotherapy

THE UNITED STATES ASSOCIATION FOR BODY PSYCHOTHERAPY

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About the Staff



Nancy Elizabeth Eichhorn, MA, M.Ed, MA is a writer, an editor (content and copy), a ghost-writer, an investigative journalist, and a credentialed educator. Her business name, Write to Be, mirrors the importance of writing in her life. She has masters degrees in clinical psychology, education and nonfiction writing. Pending approval, she will begin a clinical trial investigating the use of Informed Touch to impact physiological sensations and resultant behavioral responses in humans, for her PhD in somatic psychology.



Diana Houghton Whiting, BED worked for ten years in architectural design prior to answering the call to study somatic psychology. When not writing papers, she can be found camping and hiking with her husband and two dogs (a Labrador and a Pug). She also loves to be on the mat practicing martial arts and teaching women's self defense. She hopes to work with military veterans and progress toward her PhD after graduating from Naropa University in 2013.

Somatic Psychotherapy Today

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Submission Deadlines
August 15, 2011
December 15, 2011
February 15, 2012

Publication
September 2011
January 2012
March 2012

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Letters to the Editor are invited. Please send to: MagazineEditor@usabp.org All letters and other written submissions received whether published or not, become the property of the USABP. Please address all membership, conference, volunteer information, or other inquiries to:

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Robyn Burns, MA has been with the USABP for over 12 years in a variety of capacities juggling the needs of the growing organization and providing support as needed. She operates the USABP office out of her home in Houston, TX. She has three college-aged children and enjoys music, scrapbooking and reading.

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Upcoming USABP and EABP Conferences

The Body in Psychotherapy

The Pioneers of the Past The Wave of the Future



Keynote Speaker
Robert Hilton PhD
Relational Somatic Psychotherapy



Keynote Speaker
Francis La Barre PhD
*On Moving and Being Moved
Nonverbal Behavior in Clinical Practice*

Join us August 2012 in Boulder, Colorado, as we celebrate the integration of our diverse membership while claiming our place in the field of psychotherapy. The conference will include keynote speakers, presenters, break-out sessions, poster board sessions, luncheons, meetings, the annual dance, and more.

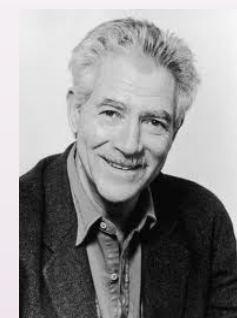
The 13th International EABP Congress of Body Psychotherapy The Body in The World, The World in The Body

September 14 - 17, 2012

Cambridge, UK



Keynote Speaker
Stephen W. Porges M.D.
*The Polyvagal Theory:
Neurophysiological Foundations Of
Emotions, Attachment, Communication,
and Self-Regulation*



Keynote Speaker
Daniel N. Stern M.D.
*The Present Moment in
Psychotherapy and Everyday Life*

Hosted by the EABP UK National Association

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Readers Write

There are times friends, students, clients and colleagues write to express feelings, to discover thoughts, to make meaning of sensations. The writing style is not as important as the personal presence felt in the piece. Throughout the pages of this publication you will read poems, short stories, essays, notes and reflections that readers have offered.

Readers are invited to submit their writing as it applies to the current issue's theme. It does not have to address the theme directly. Let the theme be a guide for what comes in response to the theme. Because of space limitations, we cannot print all the submissions we receive. We will edit all submissions and writers will have the chance to approve or disapprove all editorial changes prior to publication. In consideration of invasion of privacy and libel, please change the names of the people involved in your writing—and inform us that you did. ~N Eichhorn

Please email your submissions to MagazineEditor@usab.org

Upcoming Themes /Deadlines/Pub Date

- *Military Mental Health/Aug 15, 2011/Sept 2011*
- *Wisdom of the Body/Dec 15, 2011/Jan 2012*
- *Under consideration/Feb 15, 2012/March 2012*
- *Anatomy of a Conference/May 15, 2012/June 2012*

From the President

of the USABP Board of Directors

Our Association is pleased to announce many new happenings. This is the first edition of our new magazine publication, entitled: *Somatic Psychotherapy Today: The USABP Magazine*.

Our publication is designed to provide a bridge between body psychotherapy and the general field of health care. The materials shared will shed some light on body psychotherapy and provide a forum for sharing news and advances in clinical practice, research, resources, and policy. Our goal is to share the science and the art of body psychotherapy with a larger public audience to support a frame of understanding in our local and international communities. We hope to provide a venue for our readers to experience different perspectives related to psychotherapy in general.

Somatic Psychology Today will be distributed to the complete membership of the USABP and EABP which includes academics, clinicians, students and affiliates who share a common interest in body psychotherapy as well as psychotherapy in general. To honor the magazine's launch, the first edition is available for free to ensure people have the opportunity to experience the new content and format.

Other Association happenings include plans for a redesigned, refreshed web page and our August 2012 conference in Boulder, Colorado—we have secured an exciting group of presenters and have signed hotel contracts. We have also completed the 2011 elections to the USABP Board of Directors. We are pleased to welcome our new BOD members Marcel Duclos and Serge Prengel, and our returning member Katy Swafford. We offer our sincere appreciation to those joining the board as well as those completing their service—Christine Caldwell, Kathy Scheg, and Laurel Thompson.

Sincerely,

Virginia Dennehy PhD



Virginia Dennehy, PhD is a diplomat in process psychology and a licensed psychologist, practicing body psychotherapy in a private practice setting and teaching somatic psychotherapy in several masters and PhD programs in California.

About the USABP



The USABP is the only national organization of its kind in the USA. We are a practitioner-centered, member-driven association that is committed to the goals of organizing, representing and shaping the emerging profession of Body Psychotherapy. Founded in June 1996 by a steering committee of 20 clinicians and trainers representing most of the major modalities of the field, the USABP was incorporated as a nonprofit in 1997 and the first Board of Directors was organized in 1998.

~adapted from the USABP website

Mission Statement

The United States Association for Body Psychotherapy believes that integration of the body and mind is essential to effective psychotherapy, and to that end, its mission is to develop and advance the art, science, and practice of Body Psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity.

~adapted from the USABP website

Somatic Psychology Defined

Somatic or Body Psychotherapy is a distinct branch of the main body of psychotherapy with a long history and a large body of knowledge based upon a sound theoretical position. At the same time, it involves a different and explicit theory of mind-body functioning that takes into account the complexity of the intersections of and interactions between the body and the mind, with the common underlying assumption being that a functional unity exists between mind and body. The body does not merely mean the "soma," which is separate from the mind, the "psyche." Although many other approaches in psychotherapy touch on this issue, Body Psychotherapy considers this principle to be fundamental.

Body Psychotherapy involves a developmental model, theory of personality, hypotheses about the origins of psychological disturbances and alterations, as well as a rich variety of diagnostic and therapeutic techniques used within the framework of the therapeutic relationship. Many different and sometimes quite separate approaches are found within Body Psychotherapy, as there are in the other main branches of psychotherapy. Body Psychotherapy is also a science, as well as an art, having developed over the last seventy-five years from the results of research in biology, anthropology, proxemics, ethology, neurophysiology, developmental psychology, neonatology, perinatal studies, and many more disciplines.

A wide variety of techniques are used within Body-Psychotherapy, including those involving touch, movement and breathing. There is, therefore, a link with some body oriented therapies, somatic practices, and complementary medical disciplines, but although these may also involve touch and movement, they are very distinct from Body Psychotherapy. Body Psychotherapy recognizes the continuity and the deep connections that all psycho-corporal processes contribute, in equal fashion, to the organization of the whole person. There is no hierarchical relationship between mind and body, between psyche and soma. They are both functioning and interactive aspects of the whole. ☞

From the Editor



Welcome to Volume 1, No. 1, of our newest publication: *Somatic Psychotherapy Today: The USABP Magazine*. My goal is to invite readers to participate in a common quest to be mindfully present in the exploration and discovery of knowing one's Self both alone and in relationship with others.

Two months ago, I realized our Association's newsletter, *Keeping in Touch*, needed to reach out to the entire health care community, to share somatic psychotherapy with everyone. I presented my idea of creating a magazine as a means to accomplish this goal to the USABP Board of Directors. They supported my creativity as it bubbled to the surface. I was honored by their respect and delighted in reaching out, sharing my passion. Others caught my energetic wave intensifying it with their own. We created a new name, a new logo, a new layout design, and content to fill the pages.

Seeking contributors, interviewing, writing, editing, fact checking, designing page layouts, searching for artwork, and revising again and again has been, for me, a labor of love. I feel blessed to have this chance to bring my vision to life and express my creativity. I am grateful to the USABP Board of Directors for believing in my vision.

I believe that somatic psychotherapy, also called body psychotherapy, is often an embodied experience that arises in the moment between people co-creating a dynamic dyadic energetic exchange. The connection can be seamless and it can be incongruent and messy. The contents of our magazine will reflect the unique challenges somatic psychotherapists may encounter in their practice and while interfacing with traditional health care professionals.

It is my hope to foster collaboration among all fields of health care through better understanding of each others' ideologies and methodologies.

I invite you to explore *Somatic Psychotherapy Today* and join in the conversations as we create an alliance between ourselves and all who embrace life from an embodied place of being.

Warmly,
Nancy Eichhorn MA, M.Ed., MA



*We do not believe in ourselves
until someone reveals
that deep inside us
something is valuable,
worth listening to,
worthy of our trust,
sacred to our touch.
Once we believe in ourselves
we can risk curiosity, wonder,
spontaneous delight
or any experience
that reveals the human spirit.
- e.e. cummings*

Seeking Contributors

If you have something to say regarding our upcoming themes, we invite you to write an article or let us know you are interested in being interviewed. All submissions will be edited, and all writers/interviewees will have final approval before publication. We appreciate your knowledge and want to share your story. Please contact Nancy Eichhorn at MagazineEditor@usabp.org

Upcoming Themes /Deadlines/Pub Date
Military Mental Health/Aug 15, 2011/Sept 2011
Wisdom of the Body/Dec 15, 2011/Jan 2012



Join the Conversation



Communication is an essential part of all relationships. Whether you are interacting verbally—eye to eye or webcam to webcam—bodily—touching or not—energetically—resonating with one another’s being—hypothetically—immersed in those internalized dialogues we all find ourselves engaged in—or physiologically—mirror neuron to mirror neuron—a connection exists bridging two or more beings in time and space.

Today, numerous opportunities exist to network with somatically focused psychotherapists through the USABP and the EABP as well as on Facebook, Google, and LinkedIn.



Stimulating conversations with clinicians and leaders in the field are offered monthly, free public access at: www.SomaticPerspectives.com.

You can join ongoing discussions with colleagues at: www.Linkedin.SomaticPerspectives.com

Students are Facebook-ing on the USABP Somatic Student and Alumni page and Google-ing, too contact mandrews@prescott.edu for a Google invite.

To join the USABP go to www.USABP.org/join



Creating Face-to-Face Connections in an Increasingly Virtual World

By Linda Marks, MSM



In 1988, when my Boston-based colleagues and I attempted to co-found the first statewide Body Psychotherapy professional association in the country, we reached out to everyone we professionally knew through phone calls and snail-mail in the state of Massachusetts. We located a vast majority of colleagues practicing body psychotherapy through word of mouth. We connected, developed ideas, and eventually wrote a Code of Ethics through face-to-face meetings that initiated a coalition of touch professionals to work on a state licensing effort.

We never imagined how much the world would change in the twenty plus years to follow. When I decided to gather body psychotherapy colleagues once again about five years ago, my snail-mail lists were outdated. E-mail addresses now ruled, and I only had them for my closest colleagues with whom I had stayed in touch over the years. One colleague suggested I turn to MeetUp.com to find other mind-body psychotherapists. Three years ago, we formed the Boston Area Mind-Body Therapies MeetUp group, and sure enough, colleagues I had never met before arrived.

Just recently, I started another MeetUp group, HealingHeartPower, as a way to gather people who wanted to engage in healing circles both for themselves and to bring heart-centered body psychotherapy work to others. Sure enough, within 24 hours of being announced the group brought in a wide array of people interested in the healing arts including a woman I went to high school with who grew up with parents who were Reichian therapists!



It seems people find whatever they need through the internet these days. And MeetUp.com is special because it is an on-line resource that encourages people to get together and meet face-to-face, “the old-fashioned way.” While some areas of work lend themselves to chats, teleconferences and Skype sessions, work that involves creating a safe sacred circle and that includes touch as part of the healing process truly requires a face-to-face community. With people being so busy, and getting so many of their needs met through Facebook, e-mails, text messages and LinkedIn, it is much harder to just “call a meeting” or “make an announcement” and expect people to show up.

MeetUp.com seems to be a bridge between the virtual world and the real one. It taps into people’s sometimes dormant or untended need to still share space with other people real-time. I have truly learned that if I want to find colleagues or others who share a common interest this is probably the best place to turn in our internet world. ☺

Linda Marks MSM has practiced Emotional-Kinesthetic Psychotherapy for 26 years in the Boston area with individuals, couples, families and groups. She has been on the faculty of UMass Boston, published two books and hundreds of articles, and was the co-founder of the Massachusetts Association of Body Oriented Psychotherapists and Counseling Bodyworkers. She leads Community As Healer workshops as a way to help empower others to use the healing power of their hearts. www.healingheartpower.com

Can Overbreathing Be Harmful to Your Health?



Link In to the Conversation— We Welcome your Response

By Nancy Eichhorn MA, M.Ed., MA

According to Peter Litchfield PhD (2003), focusing on the mechanics of breathing in meditation and biofeedback sessions without identifying the sensations of overbreathing and reinstating the basic brain stem reflex (often impacted by traumatic experiences) may create a carbon dioxide deficit (CO₂) resulting in physical and psychology complaints.

Overbreathing is defined as “bringing about carbon dioxide (CO₂) deficit in the blood (e.g., hypocapnia) through excessive ventilation during rapid, deep, and dysrhythmic breathing” (Litchfield, 2003, p. 2). CO₂ deficits are said to contribute to a multitude of physical symptoms including the following: shortness of breath, chest tightness and pressure, chest pain, sweaty palms, cold hands, heart palpitations, anxiety, fatigue, muscle spasm, weakness, nausea, dizziness, confusion, attention deficit, poor memory, poor concentration, trembling, twitching, poor judgment, abdominal cramps, and more. It is also thought to have effects on our emotions. “Cerebral hypoxia and cerebral hypoglycemia not only have profound effects on cognition and perception, but also on emotionality, apprehension, anxiety, anger, frustration, fear, panic, stress, vulnerability, and feelings of low self esteem” (Litchfield, 2003, p. 6). Furthermore the fatigue associated with overbreathing may be misdiagnosed as depression and medication and or exercise may be prescribed which according to Dr Litchfield is contraindicated.

Many body based psychotherapies include the breath—watching the breath, controlling the breath, being with the breath. Yet overbreathing may contribute to some of our patients’ ailments and complaints. Overbreathing is said to be identified by monitoring CO₂ levels (a *capnometer* is currently one way to detect CO₂ levels). Because breathing is influenced by our emotions as well as our physical state many people habitually and unconsciously hold their breath, sigh, gasp for air, breathe rapidly from their chest, and contract the diaphragm while breathing out (instead of on the inhalation).

Perhaps breath work may in fact require training people how to breathe rhythmically (less sighing, gasping, holding), lower their breath rate and increase the depth of the breath, shift from chest to diaphragm breathing and focus on breathing through the nose not the mouth. While also noting emotionally what is happening in the body, where the affect state is while one is breathing, watching sensations as well as inhalation and exhalation.

Reference: Litchfield, P. M. (2003) A brief overview of the chemistry of respiration and the breathing heart wave. *California Biofeedback*, 19(1).



Feeling confused about breathing correctly? Breathing is a practiced art and noticing the fluidity of air as it flows in and out requires a mindful presence. Dan Siegel PhD offers free audios to guide listeners in breath awareness with his practice known as the Wheel of Awareness.

For information, log onto his website at: http://drdansiegel.com/resources/wheel_of_awareness/



Somatic Psychotherapy Today needs staff writers, copyeditors, photographers, graphic artists and marketing specialists. If you have a penchant for expression, an eye to capture the right scene, a thirst for public outreach and the skill to pitch a professional sale, we need you. Contact us at: MagazineEditor@usabp.org



Network at upcoming Conferences/Classes

The 11th International Congress on Ericksonian Approaches to Hypnosis and Psychotherapy is December 8-11, 2011 in Phoenix, AZ.

For information: www.EricksonCongress.com



The AAMFT 2011 Annual Conference: The Science of Relationships is September 22-25, 2011 in Fort Worth, TX,

For information: www.aamft.org

The AEDP Institute announces an Essential Skills Course, Fall 2011, in NYC.

For information: www.aedpinstitute.com

The Self as an Embodied Process

An interview with Serge Prenzel, LMHC

By Nancy Eichhorn, MA, M.Ed., MA



Eschewing a general theory of the Self for a more operational conceptualization, Serge Prenzel, editor of the USABP's Somatic Perspectives series, explained that when something is defined as a noun, it becomes an object, static in its reality, unable to move or change; whereas, the Self, he said, is not an object. "The self cannot be pinpointed. It is a process as opposed to a thing; it is an operational concept that is useful to describe things," he said.

Serge employed the use of several analogies to capture the essence of the Self as a process. He started with the concept of blood flowing through the human body. Blood, he explained, is constantly created; it is a complex entity that changes moment by moment in the body in response to the body's state as well as to the environment. Like blood, the Self is not just experienced in the confines of the individual body but results while interfacing with the environment—be it physical impacts or emotional/relational interactions.

He then used the decision-making-process—what transpires in the act of thinking and ultimately moving in one direction or another—to clarify the concept of Self.

"Most of us go through our lives assuming we have a Self. It is not a physical issue of free will, and most people don't really give it much thought, they just go along in their lives. But when they have to stop and make a decision, it becomes a defining moment of who they see themselves as," he said, then added that the end result can help people clarify their sense of Self.

"In the beginning there was movement," Serge continued, noting the reference to Stanley Keleman. Movement originates in the body and is then articulated in thoughts. Thinking, when considered from this perspective, he explained, is an extension of movement, a simulation of movement, and making a decision involves interactions between thoughts and movements.

"We all have difficult decisions to make, and at times some can be simply agonizing," he said and offered choices that people must make about careers and relationships as well as the reality

that some people are decision-phobic. "Yet making a decision is part of a moment when you are defining yourself. It becomes a defining moment, an irreversible step to affect your circumstances and who you are in your environment and in your relationships.

"Making a decision is like making a clean break, it is a moment of possibility that defines the Self—who you are and what you do," he continued. "It is a time when you cut off one thing to keep another, there is an inherent sense of loss when making a decision."

Decisions become doorways to self awareness. There is no pre-existing sense of Self in the process of making a decision; rather, the person must articulate or bring to consciousness who he wants to be. And he must be intensely aware of this sense of Who Am I? What Do I want? What is right for me? People enter into new realities; they experience a new sense of Self.

"The Self is an active choice," Serge said. "Decisions mark moments of conscious consideration."

And they mark the appearance of gut feelings—at some point the body comes in whether the person is aware of bodily sensations or not. The decision-making-process often begins with a list of pros and cons, the cognitive act of weighing the consequences of each option presented. But ultimately, and at times unconsciously, the actual choice stems from a gut reaction.

"In my experience, the big motivation comes from the gut," Serge said. "The real processing happens when the whole Self is engaged, not only the intellect but also the gut. In big decisions the shift happens and is felt in a bodily way."


People possess different levels of self awareness. Some dampen their sense of Self to conform to societal projections, familial expectations and Self inflicted identifications. According to Serge, the concept of Self as a process exists both on a continuum and within discontinuous Self states. There is, in a therapeutic sense, a continuum marked by polar-opposite ends with people ei-

ther oscillating somewhere in-between or stuck at an extreme. There are those people who are fully awakened and mindful. They have developed what might be called the Observer Self, the entity that stands back and watches the mind and the body. Then, there are people who are fully alienated, completely oppressed, victims to happenstance and circumstance. For these people, there is no sense of choice, there is only passive existence. They are alienated from the Self and there is no possibility of being a Self. "To the extent you have possibilities and choices, you have a sense of self," Serge said.

Serge shared that in contemporary psychoanalysis there has been talk of "discontinuous Self states," that there is no such thing as a Self, but rather, all people have multiple Self states (not just a diagnosed dysfunction noted as multiple personalities). In healthy individuals there is a harmonious flow between these Self states. And, if people acknowledge the reality of Self states, then, at any given time, they are able to pay attention to what state they are in, what is contributing to the current state, and in effect realize that it is only a Self state and not the entire core essence of their being.

How does this relate to body psychotherapy?

It starts by paying attention to the patient in a bodily way. Serge will ask his clients, "What's it like in your body?" He notices body language as well as internalized conflicts and associations that arise. The body becomes a gateway to move beyond the conversation and go deeper into the physical experience, to shift from the abstract to actually experience what is happening in the moment, letting the awareness of what is happening be processed.

"The role of therapy is that it becomes a place where you learn to not be stuck in one system, where you can use the body as a resource to shift from stuck states and cultivate the Observer Self so that it becomes a tool that allows people to shift from state to state," Serge said. 

Serge Prenzel, LMHC, is in private practice in New York City. He is trained in Focusing, Core Energetics and Somatic Experiencing.



Accessing the Essential Self: Self States and Clinical Applications

An interview with Gregory Johanson, PhD



It's tricky trying to define the Self. There are semantic challenges when selecting a name for the concept known as the Self. And the question itself, "What is the Self," has been at the heart of a 6,000-plus-year debate.

Scientific theories have attempted explanations for the characterological observations indexed in clinical settings to make sense of what therapists have seen and make use of it. But theory falls short when one considers a context for the Self from a philosopher's perspective, a theologian's stance, or a Buddhist's belief. The essence of a person's core being is not a solid fixed autonomous entity.

Many clinicians now appear to agree that the Self is an innate intrinsic natural function, a center or ground from which to relate to an ever changing energy comprised of "aggregates of existence," that develop within an individual through relationships, that include our physical form, our sensations (feelings and emotions), thoughts, mental formations (such as habits, faith, prejudices and predispositions), and consciousness without conceptualization.

"The Self is not some entity, but there are these capacities in consciousness, what we call Self States," said Dr Johanson, Director at Hakomi Educational Resources, during a telephone interview from his Mill City Oregon, office. He attempted to explain what he readily admitted was difficult to define. "The Self is a core function. The person as a whole develops and changes through encounter with relationships. The mystery is how we are the one and the many, individual but only in relationship. It's paradoxical.

"The only thing I can say for sure," he continued, "is that when we are in a Self State we have the capacity for curiosity, calm, compassion, and wisdom. We are able to relate to our various parts which are the result of our object relations history."

According to Dr Johanson, psychotherapy started out 100 years ago by throwing spiritual perspectives of the

Self overboard. Since those early psychoanalytic beginnings, today's clinicians are once again referencing a Larger Self. Modern Living Systems Theory and ancient spiritual traditions are coming together, Dr Johanson said. The best approach to gain clinicians' attention is to create dialogues, to bridge conversations between psychodynamic perspectives, living systems theory, and spiritual and psychospiritual traditions.

"I'm not interested in arguing about terms," Dr Johanson said, and he acknowledged that people use the word "Self" with various different modifiers placed before and after it (Larger Self, Organic Self, Witnessing Self), as well as the use of the word "mindfulness" again with many referents. Rather than worry with defining, labeling, containing the word and its definition, he stressed the need for effective clinical applications.

"If we have a concept of such a Larger Self, then we have to have techniques to access and empower it. We have to have ways to facilitate healing, to help a person benefit from their Larger/Organic Self.

"If therapists can get themselves into an empty spacious place," he added, "they can relate more fully to their client, and perhaps understand that the client has that same place available too. How then can they help them to obtain that space or state of Self?"

One example Dr Johanson shared involved Classic Hakomi. Rather than working from a stance of what's wrong with the client (diagnosis) and how can I (the therapist) fix it, Hakomi mobilizes compassionate awareness (what others reference as the Self) in their clients to heal the past wounds stemming from object relations. By cultivating the capacities of the Self through active presence and compassion and then turning passive or bare awareness inward toward felt, present experience, Hakomi helps clients transform themselves experimentally through organizing in new

By Nancy Eichhorn, MA, M.Ed., MA

beliefs by ways of new experiences, and then integrating these outcomes into ordinary life and consciousness.

Rather than viewing the Self as damaged, the vision holds that all people have an Essential Self that is there, full and fine. Clinically, the work is to find ways to get back in touch with it, activate it, and bring it on line.

There are a plethora of techniques for mobilizing the Self, far too many to do justice to in this small space. Dr Johanson discussed Classic Hakomi,

Working from Essence with the late Ron Kurtz, Hakomi and Expansion into the Present Moment and into Essence with Dyrian Benz, Pat Ogden's Expansive Core of Hakomi Integrative Somatics, Richard Schwartz's Internal Family Systems and the Core Self.

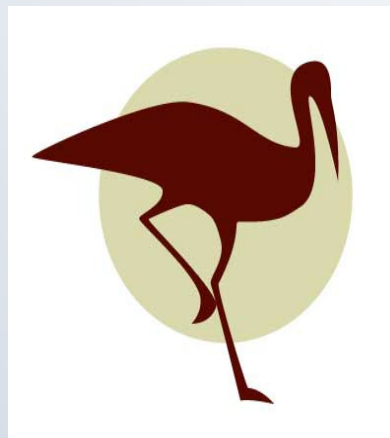
He talked about Helen Palmer, Gerald May, Connirae and Tamara Andreas, and A.H. Almass—Hameed Ali, as

well as Ken Wilber's Graceful Witnessing, and Jon Eisman's Recreation of the Self and Christian offering Meditations.

"What we're talking about today has come out of clinical practice," Dr Johanson said and then explained that the Cognitive Behavioral world is involved in a lot of research on mindfulness and that the term itself has become widespread even if not named accordingly. "The cognitive behavioral world has developed mindfulness based practices for depression, for trauma work. They are realizing that the work they were doing wasn't working the way they thought."

Cognitive Behavioral Theory was built on the premise that if therapists taught patients to change their thoughts (cognitions of self) they would change their behavior and thus they would get better.

Continued on page 12



But, according to Dr Johanson, CBT practitioners have since learned that the process of changing cognitions was not the primary healing factor at all. The distancing that was happening, the mindful/Witnessing Self changing the relationship to the cognition was what made the difference.

With so many approaches available, so many concepts coming on line, so many beliefs becoming part of mainstream conversations, Dr Johanson proposed that perhaps it was time to pursue a larger overriding theme. Rather than questioning “What is the Self?” he offered the following consideration: What does it mean to be a human being? What is built inherently into being human and what develops because of our relational history? ☞

Greg Johanson, PhD has a background in therapy and theology; he is a member of the American Psychological Association and the American Association of Pastoral Counselors as well as a Licensed Professional Counselor and a pastoral psychotherapist with special interest in Integral Psychology. He has published over 150 items in his related fields, and is on the editorial board of six professional journals including the *Hakomi Forum* and the *USA Body Psychotherapy Journal*. He is currently a dissertation advisor with the Santa Barbara Graduate Institute of the Chicago School of Professional Psychology Ph.D. program and George Fox University D.Min. program.



Communication is a Dance with Souls

By Kathleen M Labb MA, M.Div.



Communication is a dance of souls. The music is vibration, energy, words, tones, inflection, intention, empathy, compassion . . . and heavenly guidance. Stillness is its Divine Source. The heart gives it direction. We meet in sacred space and bow to the Divine Nature of each soul. Then, and only then, we begin to communicate.

With the deep and abiding understanding that God is all, there is no preconceived notion of how one “should” begin or what tone “should” be taken. All is Response to the “Thou” in this discourse between “I and Thou,” and the “Thou” is always God. And, so is the “I,” which is sometimes harder to imagine.

With the breath we discern the energetic field of the Other and meet it with respect, loving kindness, empathy and compassion. Respect meets the Other’s energy level, mood, willingness and heart tone with equal measure, matching vibration for vibration with the addition of loving kindness. Loving kindness comes with no judgment or evaluation, simply gentle observation and generous amounts of acceptance and openness to truly hear, on all levels, what is being said.

The act of listening deeply leads to empathy. Empathy is the heart of “I” beating in synchronicity with the heart of “Thou.” Knowing viscerally the heart experience of another is a form of soul communication that needs no words . . . sometimes tears, maybe, or laughter, or the reaching for a clenched hand, but rarely words. In this supreme moment of connection, Compassion arises and pours forth uplifting, heartfelt, hopeful, loving, inspiring, Spirit-filled Responses to what has been shared.

It is essential that we not vilify darkness or so-called “negative” emotions. Everything is of and from God and is purposeful. All are aspects of the Divine Beauty as the black pearl is no less beautiful than a white one. Embracing each human being exactly as in the form God has created is the only requirement of good communication. No one is further along on the path to the Divine. We are all Divine—there is nowhere else we need to go. No contest to be won—there is only ONE.

Most difficult of all is knowing this of our own inner (and outer) beauty. To be at peace with our True Nature is the task at hand. We are the vibrant colored paint of God’s choice on the palette of creation and God has placed our light and dark strokes exactly where we can most enhance the masterpiece we call Our World.

Blessed be all that is. Blessed are all Beings. Blessed is the Holy One. Gracious. ☞

Kathleen M. Labb, MA, M.Div., served as a hospital chaplain for over 17 years and as a psychotherapist since 1985. She has been an adjunct professor at universities and community colleges on the East Coast and is presently teaching The Joy of Whole Brain Living at Yavapai College Community Education Program, in Prescott, Arizona.

Reflections

By Christine Gindi M.Div, MA, SEP



Long before I knew what somatic psychology was, I received a class assignment to interview female peace activists flying in from across the globe for an annual conference. I was assigned to interview a peace activist from Sri Lanka. In preparation, I diligently studied the country's conflict and the biography of this woman's life. Towards the end of my interview with her, for some reason I put down my clipboard of carefully crafted interview questions and simply asked, "How did you survive?" Without blinking, she smiled wide and stated, "poetry."

She retrieved a piece of paper from her purse and energetically recited a poem in English about butterflies. She transformed in front of my eyes; she was no longer the soft spoken activist being interviewed. She was animated. She was alive. She later shared just how life-saving poetry had been for her. To this day, I imagine her chasing butterflies with delightful laughter.

When I look back at the memory of the interview, I'm amazed by the resiliency of human beings. I feel awed by what a simple question can do. I shudder to think about my not asking that question—a force inside her was revealed to me that hadn't emerged before and my perception of her would have been very limited. As she read her poem, her entire physical demeanor shifted—her collapsed spine straightened, her gaze cleared, and the strength in her voice multiplied. I was amazed; I had never witnessed someone transform so dramatically in front of me.

Perhaps that is one of the reasons I am drawn to somatic psychotherapy, I enjoy helping facilitate people's transformations and helping them experience a different felt sense of themselves. Last week, a client (usually a very rushed business woman) started to naturally shift in her chair. I invited her to really take her time and allow her body to guide her sense of comfort. Just by shifting her posture, her attention shifted from what had gone wrong in her week to what had gone incredibly right. She sensed herself differently; not only had her attention shifted but her self perception had shifted as well. It's amazing how slowing down and becoming mindful can change one's identification in the moment. The feeling in the room had changed; we both felt a shared resonance of the change which had occurred. This is but

one small example of how a somatic intervention can create a deep shift. Years ago I would never have imagined myself training to become a somatic psychotherapist. For most of my life, I held a negative stereotype of mainstream psychology as being hyper-intellectual, hierarchical, and lastly, oppressive.

While I certainly don't want to oppress anyone, it is important to me to be aware of how I may somehow stumble into narrow perceptions about my clients' character structures and habitual patterns and not recognize other parts of them. I also want to reflect on and question my own habitual patterns as a therapist. I am curious about my own attachments and blind spots when I have an encounter with another human being. Recognizing my limitations because of my own specific social context is important to acknowledge to the Self that I bring in the room. Gone are the days when therapists posture that they are blank slates who are engaging with a scientific method with the psyche, and I am so grateful.

As a graduate somatic psychology student, it has been particularly important for me to hold the creative tension between the reductionism of our field and the reverence for mystery that certain pioneers have cultivated. In fact, when I read certain authors who claimed to explain biologically why human beings love and experience altruism, I felt their physiological approach to theorizing was too reductionistic for me.

When I learned about Reich, I was impressed by his deep commitment to his work and his macrocosmic worldview which emerged from it. The Self was not limited to a physical body but was connected to an entire cosmos through "orgone energy" (Reich & Higgins, 1960, p. 324). Christine Gindi is a Somatic Experiencing practitioner. She has trained in body therapies, and is currently a graduate student studying somatic psychology at John F. Kennedy University.

In fact, reading about him made me feel like I was learning his specific lexicon. His concepts were so unique that he practically had to invent words to describe his theories. As a future somatic psychotherapist, I am well aware that I stand on the shoulders of giants like Reich.

I believe the connection between body, psyche, and cosmos can help re-

frame how people relate to themselves. Perhaps the Buddhist notion of a self as illusory can help people "relativize" their own self perception. Perhaps Emilie Conrad's belief that, "fluid anywhere is in resonance with fluid everywhere," can help expand how people connect to themselves in a cosmic reverent way (JFK University Workshop, 3/12/11). In my practicum at the counseling center, I have had personal experience with clients who have a low self image about themselves. I feel sad for their rigid attachment to their self perception and try to help them differentiate parts of themselves so they are not so stuck on these proclamations about their unitary self.

What if they had the view that there is no self? Perhaps this would be liberating for them. Perhaps they would see that their fierce attachment to their poor low self image was inaccurate. As a teenager, I wished that the therapists treating some of my friends could see a glimmer of the true selves I saw, the selves I loved and cared for. I wanted them to see how funny, brilliant, and dynamic these beautiful young people were, just as I saw them. They weren't just angry, suffering teenagers; they were so much more than who and what they presented in treatment.

While much of the field of somatic psychology remains focused on proving that somatic modalities are evidence based approaches to therapy, there remains this rebellious side in me that clings to how the irrational powerfully informs people's lives. I want to hold dreams and synchronicities as just as important as MRI's and quantitative scientific studies. I want to learn about how poetry saved my clients' lives and what butterflies they are chasing. It is amusing to me how the trajectory of my life brought me to this profession. I will always feel gratitude that formalized somatic psychology education programs even exist. I am grateful for the lineage, the pioneers, and for how this growing community continues to grapple with defining itself. ☞

Christine Gindi is a Somatic Experiencing practitioner. She has trained in body therapies, and is currently a graduate student studying somatic psychology at John F. Kennedy University.

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The Sense of Self: An Energetic Viewpoint

By Marjorie L. Rand PhD



Knowing the Self and honoring it is the basis of my work in Integrative Body Psychotherapy (IBP). From this perspective, I define the sense of Self as an energetic, non-verbal experience of well-being, identity and continuity that is felt in the body.

The concept of energy is fundamental to IBP because human beings are considered *constellations of energy*. The sense of Self that each thinks of as his essential Self is in truth a consciousness of the internal flow of energy contained in the physical body; however, this energy is not completely self contained. We also have a field of energy outside our body, which affects others, as theirs affects ours.

A healthy person is a mass of free flowing energy that moves us on all levels, through all layers, in all directions at all times; physical, mental, emotional and spiritual, superficial to deep, and from periphery to center, center to periphery, top down, bottom up, front to back and side to side. It is accessible to anyone who needs it for any purpose, if they have cultivated an inner connection to it. The innate sense of well-being stems from the free flow of energy in the body.


If one is disconnected from the flow, there can be no awareness of Self or at best there is an incomplete awareness of the sense of Self. The result may be identification with a false sense of self; identifying with one's defenses can create a false Self that overlies the essential core Self.

From a developmental perspective, infants whose needs are satisfied in loving empathic ways develop a strong sense of Self. If needs are not met, if attunement and attach-

ment are mismatched or missing, the potential Self—the undifferentiated mass of energy within the infant—remains fragmented; it lacks the cohesiveness that gives form to a person's sense of Self or identity.

Over time, as infants experience their needs continually left wanting, they seal off their feelings forming blocks to their energy flow, and these blocks can manifest as muscular tension. Because the energy is not flowing freely, infants do not experience their sense of Self, their core lies hidden deep within.

There is no good or bad when discussing a sense of Self—the Self is inherently good, only its lack of emergence is the problem. Energy blockages inhibiting the growth of the Self can contribute to ill physical health and emotional imbalances. IBP involves contacting the blockages, relaxing the muscular contractions that produced them thereby releasing the energy to flow freely and allowing the emergence of the stunted Self buried within. There are many tools to help client's release the blocks; awareness, breathing, grounding, containment, boundaries, movement are only a few.

The therapeutic relationship, now called interpersonal neurobiology, is the vehicle to contain and nourish the sense of Self; through containment, nurturance and accurate mirroring, the Self can heal, grow and expand. With the energy flowing unimpeded, people can experience a sense of well being in their body that should have been their natural condition as infants. As boundary-ed, differentiated Selves, they can form healthy, mature relationships. 

Marjorie Rand PhD, a pioneer in somatic psychotherapy, has been in private practice for 34 years. Her specialties include: body-mind somatic psychotherapy; pre and perinatal psychology; supported yoga therapy; and teaching mindfulness meditation. She has authored/coauthored three books and hundreds of articles, and was the co-founder of the Massachusetts Association of Body Oriented Psychotherapists and Counseling Bodyworkers. She leads Community As Healer workshops as a way to help empower others to use the healing power of their hearts. and groups.



Here I am Suspended

By Edward King, M.D.

Here I am, suspended, trying to fabricate in prose a memoir of my life since a stroke left my left side paralyzed and numb. This entails rediscovering just who, or whom, I will use as a role model for the finished product I intend to become when my healing has come full circle. That search can, in the same way, serve me as an insight into role models I have no intention of emulating.

This foundation is the basis for any therapist I've encountered, whose aim is for my focus to center on qualities of character, and/or physical abilities I already own, and not on the skills and personality traits I lack!

Edward King M.D. is an orthopedic surgeon who once specialized in the diagnosis and treatment of hand, arm, and shoulder problems.



His post stroke life involves lecturing on vocational disabilities, ministering at the chapel on Squirrel Island (Maine), crewing on a sailing team, skiing, and writing his book entitled: *The Road to Hana, Maui: My Journey of Recovery*.

Body Insights:

Self Care In The Midst Of Crisis

By Bobbie Brooks BSME, RYT500



As I sit down to write this column, I am reeling from intensity. The past six months have been stressful to say the least, and checking in with my body has been the absolute last thing I've wanted to do during this time period. But, as a body psychotherapist I believe that sensing what is happening bodily and attending to it is crucial to maintain my health.

My personal stress factors stretch between multiple threatening experiences that have touched on emotional loss, physical safety, financial security, educational demands and career decisions. My mother was recently diagnosed with congestive heart failure. As one of her primary caretakers, I have made multiple trips to the hospital emergency room, while also grieving her declining health which is complicated since she is my only living parent. During her most recent hospital stay, the Alabama tornadoes hit leaving damage at several family members' properties and left us all without power for five days. The first few days were very unsettling since gas was scarce, grocery stores were closed, and damage was all around; it felt much like a war zone. And throughout all of this, I am looking for new work during a corporate downturn all the while running three companies and working on my PhD. Contact with the body seems too real and too hard to face when I'm already overwhelmed.

In fact, sensing my body is scary as I feel the tremors of my nervous system right below the surface of my skin. I'd rather escape into someone else's story be it on television, in book, or talking about another friend's tragedy. Even though I am aware of how to self-resource, it is so much easier to go back to the old strategies of dissociation.

We can have full knowledge that our historical patterns don't serve us well, but I believe that working to change them in a time of crisis may not be wise. Our patterns are there

for a reason, and they can help us to function in times of crisis if we create a self-care model that includes pacing as well as embodied awareness. I am thinking of a self-care model that includes: 1) a contraction, 2) an expansion, and 3) a rhythm, all of which collectively create a cycle.

I define the contraction phase as knowing when to turn inward, to narrow the input you are receiving from the external world, and find some avenue of nourishment even if it is something as simple as sleep. However, if there is too much emphasis on the contraction and we stay stuck there, we can lean towards indulgence or over-emphasis on the self. We can't survive without the interaction with others, so at some point, we have to return to what I call the expansion phase—reaching outward to connect with other people, with our environment. Yet, this too has its own season, and if there is too much expansion, the self is left neglected.

The beautiful thing about this description is that the pace or rhythm is really up to us. How long we stay in any one phase of contraction or expansion will depend on our circumstances and our individual selves. To help us monitor and know when it is time to change from one phase to another, it is important to periodically check-in and connect with our wisdom body, listening for the intelligent suggestion that a shift in the cycle is warranted.

The wisdom body functions as a control mechanism for the process. Just like everything else in life, it is a cycle, much like our breath cycle expanding on the inhalation and contracting on the exhalation. I think it is interesting that to reach a place of equanimity most movement philosophies ask us to lengthen the inhalation and the exhalation of the breath, with the emphasis placed on an expanded exhalation. In the model I'm describing this would translate to a longer contraction over expansion so that you always return back to the self to linger and

source yourself.

In writing this, I am realizing that I am actually checking in with my body, identifying where I am in my own process, and giving myself some grace to be exactly where I am as a way to source myself through this phase of my life. Through this writing, I found yet another way to connect with my body that feels safe and non-threatening, and in this moment, results in a long, soft, slow sigh. ✍

Bobbie Brooks is a certified yoga therapist and PhD Clinical Psychology/Somatic Specialty student at Santa Barbara Graduate Institute. She lives split-based between Huntsville, AL and Nosara, Costa Rica.

Water Walking

Judith Ward PhD

The meditation of movement
walk concentric circles

My gait is old
has lost its rhythm

Creaky joints impede the flow
but water holds me

Water walking
moving meditation

My arms don't swing
they plow aside the universe
Sometimes there's music
or music in my mind

Tuned to the moving body
Lost in synchrony

Judith Ward PhD taught in the Occupational Therapy Dept. at the University of New Hampshire for 30 years. Upon retirement, she left academic writing behind and started exploring the challenge of personal exploration through poetry and personal essay.

Somatic Psychology Program comes to Meridian University

By Rae Johnson, PhD, RSW, RSMT



Meridian University is launching four new graduate programs in somatic psychology in the fall of 2011. An emerging specialization within clinical psychology, somatic psychology focuses on how the body serves as an important source of knowledge and insight into psychological concerns and interpersonal issues.

As many readers of *Somatic Psychology Today* will already know, somatic psychotherapists incorporate a skillful attention to breath, gesture, muscle tone, and sensation into the process of psychotherapy. By attending to the nonverbal felt experience of the client, somatic psychotherapists help clients to “get in touch” with important psychological or emotional

material that had previously been inaccessible through words alone. Focusing on embodied experience in the present moment also allows somatic psychotherapists to facilitate the expression and integration of material that addresses all aspects of a problem or issue – including how that issue may have become embedded in the nervous system, muscle tissue, movement patterns, and bodily habits of the client.

There are currently four graduate programs in somatic psychology in the US. The program at Meridian will be the second to offer degrees at the doctoral level. The somatic psychology concentration at Meridian University is infused with the perspectives, approaches, and learning environments unique to this school. In addition to receiving a solid foundation in clinical and somatic psychology, students in the somatic psychology program can expect an enhanced focus on depth psychology and the expressive arts, as well as a significant commitment to diversity work and critical cultural praxis.

Meridian University seeks to educate leaders with the capacities, skills, and

knowledge essential for transforming the professions of psychology, business, education, and the arts. The leadership capacities of courage, compassion, clarity, conscience, and embodied self-awareness, together constitute the wisdom and integrity required for transforming the professions and the wider culture. Transformative learning at Meridian catalyzes the emergence of these capacities that, along with developing creative inquiry skills and acquiring professional knowledge, actualizes Meridian’s commitment to sustaining an education that transforms.

The learning formats at Meridian University makes graduate education in somatic psychology accessible to non-traditional students with family and professional commitments. Students in

Meridian University, with a particular emphasis on embodied approaches to teaching and learning. Embodied pedagogy draws on the scholarly research in education that understands the lived experience of the body as a legitimate but marginalized source of knowledge, and the cultivation of deeper access to embodied knowledge as an opportunity for students to develop a locus for authoritative knowing embedded in their own bodily experience.

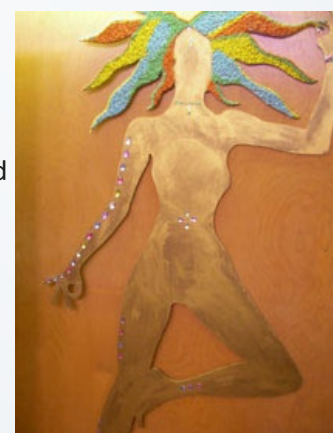
Faculty in the Somatic Psychology Concentration are well-versed in teaching in and through the body, and this commitment is reflected in their own posture, gestures, and quality of presence, as well as in their teaching strategies. Because the body features prominently in the articulation of social difference, helping students become more attentive to the embodied interactions in the classroom also supports them to be more skillful in the navigation of power differentials in relationships with others. Faculty members who teach courses in the somatic psychology concentration include John Amodeo, John Conger, Eleanor Criswell, Rae Johnson, Aftab Omer, and Laury Rappaport.

In terms of post-graduate licensing, the Psy.D. in Clinical Psychology and the Ph.D. in Psychology are designed to meet the educational requirements for both the State of California Psychologist and Marriage and Family Therapy (MFT) licenses. The Master’s in Counseling Psychology Program is designed to meet the educational requirements for the State of California Marriage and Family Therapy license. Students commuting from out-of-state must check with their local Board of Psychology




the *Monthly Learning Format* meet in residence for one weekend per month (Friday through Sunday) during the Fall and Spring quarters (six weekends per year). Additionally, students meet for one-week sessions during the Winter and Summer quarters, respectively. In the *Monthly Learning Format*, all classes are held in residence. In contrast, the *Blended Learning Format* combines online and off-site learning with two weeklong residential sessions each academic year. This combination of learning forums offers students the opportunity to complete Meridian’s degree programs by traveling to the San Francisco Bay Area twice per academic year, one week in the Winter and one week in the Summer. A key feature of the *Blended Learning Format* is the ability for students to undertake professional training in a recognized somatic psychology modality at training centers around the world while simultaneously earning graduate credit.

The approach to learning in the Somatic Psychology Concentration is rooted in the transformative learning paradigm at the heart of all programs at Me-



to determine their state's requirements for licensure.

Graduates of the Somatic Psychology Concentration may embark on careers as qualified mental health professionals working with individuals, families, and groups in a range of clinical settings, including private practice. The knowledge and skills acquired through a degree concentration in somatic psychology positions graduates to excel in settings that incorporate elements of health and wellness, including medical facilities, wellness centers, and addiction treatment facilities. Graduates may also choose to apply their expertise in somatic psychology to innovative areas of specialization outside clinical psychology, such as education, leadership, or the arts. 

Applications are now being accepted for the 2011-2012 academic year. Learn more about the Somatic Psychology Concentration at Meridian University at <http://www.meridianuniversity.edu/index.php/concentration-in-somatic-psychology>

Rae Johnson, PhD, RSW, RSMT is a somatic psychotherapist and educator specializing in higher education in embodiment studies. She is a core faculty member at Meridian University, and has led programs in somatic psychology at the Santa Barbara Graduate Institute and Naropa University.

Webinars

In the News

Headlines to Google

- Virtual Reality Improves Social Attention in Autistic Children
- Novel treatments for neurodevelopmental disorders
- Translating research into practice
- PTSD after traumatic birthing experiences
- Disaster Psychiatry: vicarious trauma among mental health providers and the need for integrated response teams

Epigenetics

New brain imaging techniques have brought greater attention to social geonimcs and molecular biology. There are some 22,000 genes in the human body. These genes are thought to influence our health and our behavior; however; just because we inherited a specific genetic code does not mean all of those genes will be expressed. Studies are looking at environmental factors that may result in a gene's expression as well as experiences that may turn off a specific gene are on the frontline.

Brain Plasticity and Developmental Neuroscience

Research is looking at developmental neuroscience as a means of informing the development of therapeutic interventions that impact both behavior and the structure and chemistry of the human brain.

DSM-5: The Future of Psychiatric Diagnosis.

The new diagnostic manual has been receiving much public reaction. Comments and changes to the next manual can be tracked at www.dsm5.org/Pages/default.aspx

The committee has added updates for Bipolar and Related Disorders as well as posting several newly proposed disorders including: Premenstrual Dysphoric Disorder, Neurodevelopment Disorders and severity measures for Trauma Related Disorders.

~ N Eichhorn

NICABM: The National Institute for the Clinical Application of Behavioral Medicine

Unlocking the Secret to Healing Trauma's Wounds - What Every Practitioner Needs to Know.

The 6-part teleseminar offers to take trauma treatment to the next level. It will air Wednesdays at 5pm EDT, beginning June 1st - July 6th. Transcripts are available for late comers. <http://www.nicabm.com/treating-trauma/>

Presenters include:

- Peter Levine, PhD-Founder and Director, The Somatic Experiencing Trauma Institute
- Matthew Friedman, MD, PhD- Exec. Dir., U.S. Department of Veterans Affairs National Center for PTSD
- Allan N. Schore, PhD -Faculty of UCLA, Expert in Attachment and Affect Regulation
- Pat Ogden, PhD-Founder and Director, The Sensorimotor Psychotherapy Institute
- Mary Jo Barrett, MSW-Founder and Director, Center for Contextual Change
- Stephen W. Porges, PhD-Founder of the Polyvagal Theory, Director of the Brain-Body Center at the University of Illinois at Chicago

The Behavioral Physiology Institute Presents: HRV Flexibility Training

Thursday June 16- Saturday, June 18, 2011 (Ten Hours). Presenters: Robert P. Whitehouse, Ed.D. and Peter M. Litchfield, Ph.D. This 3-part workshop offers participants a practical working knowledge of Heart Rate Variability (HRV) and heart wave (HRV frequency) learning and HRV Flexibility Training.

HRV and respiratory fitness. Course content includes "practical basics" involving the relationship between HRV and health, emotions, cognitive function, interpersonal relationships, stress management, and optimal function.

The presenters will describe the power, the necessity, and the practicality of combining capnometry applications with HRV learning. As well as introduces specific learning strategies for ensuring good respiratory fitness in combination with good HRV physiology, that is, HRV flexibility learning. Participants will learn how to evaluate behaviors that may be mediating HRV and heart wave patterns that compromise HRV flexibility. They will learn behavioral applications that can be implemented both personally and/or with their clients, which may promote HRV flexibility and its associated benefits.

~N Eichhorn

Current Research Reviewed

By Jennifer Frank Tantia, MS, BC-DMT, LCAT



Clinical trials, phenomenological studies, case studies, grounded theory and literature reviews. Research in the fields of medicine and mental

health is finally evolving toward a closer understanding of the body/mind continuum. Neuroscience, particularly plasticity—how the brain impacts physical, physiological and psychological behavior in an exchange between self and environment appear to be on the forefront of researchers' minds. The evolution of science is paving the way for somatic psychotherapists to become the leaders in teaching ways to integrate theoretical knowledge with therapeutic interventions. This column is dedicated to sharing new research that may impact our work as body psychotherapists.

Article this issue:

Bolber, A. R., Hong, S. L., Kent, S., Kluning, M.J., O' Donnell, B. F., and Hetrick, W. P. (2011). Postural Control in Bipolar Disorder: Increased Sway Area and Decreased Dynamical Complexity. *PLoS ONE*, 6(5): e19824 DOI: 10.1371/journal.pone.0019824.

The article, *Bipolar Disorder and Postural Control: Mind-Body Connection Suggests New Directions for Treatment*, grabbed my attention when Jacqueline Carleton PhD shared it on the USABP Research Committee e-mail correspondence list. As a dance/movement therapist and body psychotherapist, I'm always a bit skeptical when researchers attempt to quantify embodied experience, particularly in the lived-body, by suggesting that physical movement immediately equals a particular dysfunction. The actual study entitled, *Postural Control in Bipolar Disorder: Increased Sway Area and Decreased Dynamical Complexity* suggested that those with bipolar disorder, (BD) may have postural and balance deficits specific

to the diagnosis.

The researchers from Indiana University invited sixteen people who have been diagnosed with BD, and sixteen "healthy" individuals to participate in the study. Data were collected by having each participant stand in a single space for two minutes while the distance of swaying from the center of the body was recorded. Four factors: eyes opened, eyes closed, and wide and narrow stance of the feet were tested in multiple combinations. The results stated that folks with bipolar disorder had a much wider variation in sway away from their center than did the control group (please see the article for the data graphs).

As a dance/movement therapist who has worked with folks with bipolar disorder in in-patient psychiatric settings, I see some deficits in the study's methodology. First, although they listed all 16 BD participants' medication (four were unmedicated), it was only in retrospect that the researchers listed medication as a potential culprit for the imbalance. Part of my work with clients in group dance/movement therapy settings involved helping those who had expressed varying degrees of difficulty with balance, spatial awareness and motor control. These complaints would usually present following the start of a "deck" of medication that is known to cause boundary disruption, problems with proxemics, motor activity and body image due to weight gain. There seems to be a piece of the puzzle missing in this study where it indicates that balance is affected by the diagnosis of BD, but not affected by medication. How did they fail to control for medication?

Second, I think there might be something else here that needs to be addressed, which is the participants' relational/interpersonal aspect to their environment. The subtle yet profound difference in one's relation to the world between eyes

open or closed is much more than a vestibular imbalance; it's a relational one. Often diagnosed in adolescence, a person with BD can undergo years of pain and relational difficulties until treated. "Symptoms of bipolar disorder are severe. They are different from the normal ups and downs that everyone goes through from time to time. Bipolar disorder symptoms can result in damaged relationships, poor job or school performance, and even suicide" (www.nimh.nih.gov). As of today, there is no known cause for BD other than genetics. In other words, if a patient is newly diagnosed with BD, imagine the difficulties that he or she has already undergone, especially if someone in the household also suffers from the illness!

In defense of the researchers' thorough analysis of their work, kudos for considering their own critique: "One interpretation of the present results is that they could be indicative of abnormal motor development in BD, given that motor development of the postural system often follows a distal-to-proximal direction (foot-to-hip). Developmental insults can alter the sequence of motor development" (Bolber, et al., 2011). Although they consider the body/mind connection here, it appears to lack "present time" considerations.

This is where Somatic Psychotherapy comes in. As embodied interpersonal specialists, we can help researchers to acknowledge the human in human studies by offering our own assessments of movement and embodiment scales that speak to more than the body as an automaton. The study does not consider the socio-economic backgrounds of these participants, their trauma history, nor their proclivity for hallucinations that are sometimes present in BD. All of which affect balance and the ability to stand still!

Continued on page 19

Available online: <http://www.sciencedaily.com/releases/2011/05/110524111349.htm>utm_source=feedburner&utm_medium=email&utm_campaign=Feed%3A+sciencedaily%2Fmind_brain%2Fpsychiatry+%28ScienceDaily%3A+Mind+%26+Brain+News+---+Psychiatry%29

It is integral for body psychotherapists to be appraised of these studies. Remember the Decade of the Brain? Although we have not yet seen an official Decade of the Body, folks are catching up to the somatic psychological foundation of what we already recognize as “the lived body”. Interest in meditation and other body/mind integrative methods are now sometimes practiced in lieu of cardiovascular workouts! It's only a matter of time before deductivists will also rationalize that whole-person integration is a necessity to consider and not an accessory to a research study. ☞

Jennifer Frank Tantia is a dance/movement therapist and somatic psychotherapist in New York City and serves on the faculty of both Pratt Institute and Adelphi University. She works in private practice and leads Authentic Movement groups while completing her Ph.D. in Clinical/Somatic Psychology at Santa Barbara Graduate Institute. All responses and comments to this article are welcomed. Please contact Jennifer at: JFTantia@gmail.com

Research matters in our field

To support our members conducting research, be it student thesis work, doctoral dissertation studies, or members doing their own investigations, we have added a new “LIVE” link on our website. Please visit the members’ portal on the USABP website, for instructions. Please note that the USABP does not endorse or promote any particular school or method and is merely passing this along to you as a service to our members involved in research.



Simply fill out the form and hit “submit” and your request will show instantly on a web page. USABP will monitor for any offensive posts (not likely) which will be removed. The page will also be monitored to remove ended research. Research requests will be sorted by date.

We will also share information in the magazine so be sure to let us know what you need. You can send requests to Nancy Eichhorn at MagazineEditor@usabp.org.

Graduate Student Needs Assistance with Research Project

The following message is from a student member of USABP. If you would be willing to assist him in his doctoral research please contact him directly using the contact information he provides at the end of his message.

Wade Cockburn is an ABD clinical psychology student in the somatic program at the Santa Barbara Graduate Institute, an affiliate of The Chicago School of Psychology. He has received approval from TCS’s Institutional Review Board to begin interviewing for his dissertation study entitled, *The Relational Somatic Experience Between Mind-Body Therapists and their Parents: A Grounded Theory Study*. Potential participants for this study are mind-body psychotherapists that have training in and utilize Sensory Awareness SM and have interacted with their parents or a parent after their training.

If you are a psychotherapist that utilizes both a mind-body approach and sensory awareness techniques in your practice, he would appreciate your participation either personally or sharing this information with a psychotherapist that fits the qualifications. Any somatic-cognitive approach to therapy is acceptable and includes, but not limited to, Bio-Energetics, Biosynthesis, BodyMind Psychotherapy, Character Analysis, Core-Energetics, Dance Therapy, Focusing, Gay and Katie Hendricks’ Conscious Loving and Living, Gestalt, Hakomi, Radix, Rubenfeld Synergy, Sensormotor, or Therapeutic Touch.

A participant’s time commitment will probably not be more than two hours, certainly no more than three hours, to complete three actions: filling out a one-page demographic questionnaire; a 60 minutes videotaped interview; and a short follow-up meeting to offer clarification of your answers, note any mistakes in the transcription, and possibly answer a few additional questions. The data obtained will only be used for my dissertation, professional conversations, and research publications; confidentiality is guaranteed and participants will not be identifiable in any way. All interviews will be conducted between May 1, 2011 and July 31, 2011.

Thanks for whatever help you might be able to provide and if you have any questions, please e-mail him at whcockburn@gmail.com, call him at 713-208-4400, or send messages via facebook (<http://www.facebook.com/wade.cockburn?sk=info>) or LinkedIn (<http://www.linkedin.com/in/whcockburn>).

The Tenth Anniversary issue of the USABP Journal delves into the latest research and perspectives in the field of body psychotherapy

The Anatomy of Connection

Nancy Eichhorn MA, M.Ed. MA

Have you ever wonder why slow deliberate movements enacted in physical and mental practices such as Tai Chi and meditation stimulate an intimate awareness of self?

How these conscious voluntary motor acts connect an internalized awareness, a felt sense if you will, of longing with the anticipation of connection— the wanting to reach out and in the same moment sense the wanting to be received?



According to Stanley Keleman, founder of Formative Psychology TM, “There is a fundamental innate expectation and urgency for wanting connection that is at the heart of human behavior.”

Keleman explores the role of voluntary motor acts as formulative agents generating the awareness of longing and the anticipation of connection in his upcoming USABP Journal article entitled: *Slow Attending: The Art of Forming Intimacy*. Human beings, he asserts, are self influencing entities that organize their own unique patterns of awareness. In the article, Keleman discusses in-depth the anatomy of connection and its intent from the perception that “voluntary self-management is about forming something other than what is. That this zone of learning and forming is the dynamic of self intimacy and its accompanying feeling of knowing.”

He writes from a premise that slow deliberate voluntary muscular efforts influence the patterns of “making connections and forming personalized patterns of self regulation.” Through the act of voluntary muscular effort people are in a sense touching their own body which reflects a reaching into the body with the anticipation of being received and responded to. “This process organizes attending and creates the qualities of attention, the awareness of aliveness,” he notes.



“Needs, desires, emotions and cognitive acts are motor acts that have specific intention and anticipation for connection because they are part of a system of being received and replied to; how we muscularly attend (to our world) influences how we experience a specific style of being in the world. As adults we can potentially develop voluntary somatic self-forming skills that affect immediate and long-term anatomic, motoric, emotional and cognitive changes; “ these changes, according to Keleman, result in an “enriched self-empowerment of being bodily in the world and of having a rich library of motoric, emotional and cognitive experiences and memories.”

Stanley Keleman

Nine compelling authors join Stanley Keleman in the Anniversary issue

Courtenay Young surveys recent research and the paths of discovery in neuroplasticity, psychoanalysis, affect management, and mirror neurons, among many others, successfully sharing his view that there is no telling where the field of body psychotherapy can and will go.

C. Anya Hricko discusses fostering attunement through mindfulness and suggests that strengthening right brain communication in this way can facilitate improved integration with whole brain experiences in clinical practice.

Jennifer Frank Tantia examines intuition, suggesting that intuition and body-based experience are more closely related than perceived.

Stefan Deutsch explains how he derived the name Continuum Theory of Human Development and the unique role that unconditional love retains in the therapeutic process.

J. Mariah Moser reviews the distinction between healthy shame and toxic shame while Stefan Deutsch explains how he derived the name Continuum Theory of Human Development and the unique role that unconditional love retains in the therapeutic process.

Gregory J. Johanson discusses the practice of mindfulness and how it can provide a more effective means to our organization of experience. As moderated within the clinical milieu, top-down processing elicits compassion, which Johanson aptly demonstrates in two detailed case studies.

Daniel Hoffman examines somatic theories of emotional regulation in light of recent neurobiological research on attachment while Jennifer Frank Tantia examines intuition, suggesting that intuition and body-based experience are more closely related than perceived.

Philip M. Helfaer feels that the somatic-energetic point of view is key to bioenergetic analysis, allowing us to better understand the body and its energy processes. He explains how careful observation of the body increases “the capacity of the therapist to experience, ‘metabolize,’ and allow into awareness his experience of the patient from the level of his own feeling and bodily experience.”

Asaf Rolef Ben-Shahar shares the personal metaphor of his own wedding to weave a story around theory. He states that there is no such thing as a body, only one in relationship. Further examining I-thou relations, and the resonance between the patient and therapist’s unconscious he shows how when two people become one self we can better understand healing through the resonance of a shared space and body.



Voice

By Tracey Miller

I was scared when I woke, tired from the surgery, but hopeful that my voice would not abandon me as it had the last 11 years. I thought about not having to carry around pen and paper trying to communicate my frustrations, my hopes, my fears and even a simple request as a mute. Maybe I would even sing a tune again with my grandchildren who had never even heard me mutter a sound.

I lay there waiting for the barrage of doctors to arrive expecting to hear a sound come from the vocal box they had reconstructed over the last 48 hours. Their hopes were as high as mine.

My body lay numb with fear as I wondered if maybe I had forgotten how to speak. I reflected back on what God had intended for me to learn without a voice to represent me and give me presence as I walked silently through life fearing even a trip to the grocery store as I worried someone may ask me where the milk was located or the loneliness of walking through a park and feeling invisible.

I had forgotten what “I” sounded like, the tone of my voice. It has lost familiarity even though I knew I had a voice, even if I could not speak.

Would I feel whole again with a voice box that could echo my thoughts into the world? Is the voice a sounding board to express one’s soul?

I tried to reassure myself that my voice had disappeared, but I had not. These years had forced upon me retrospection as my words moved through me and then reverberated into my body. It was frustrating at times, but as my words resonated deep inside me, it made me realize I don’t need a voice box to have a voice.

I started to feel words wanting to erupt and as I pushed air into my throat. I could hear a barely audible grunt, a vibration.

I continued to force air through the new speakers in my throat wondering if even though I had not forgotten the words, maybe they had forgotten me.

I persisted and felt a sense of freedom as air pushed through my throat. I made a sound, unsure of what I intended to say. “It’s me,” was what came out. ☞

Tracey Miller is an inspired writer trying to find her voice. You can find more of her words at www.traceymillerwellness.com



Resources

Jacqueline Carleton PhD
and the USABP Interns



Forms of Vitality: Exploring Dynamic Experience in Psychology, the Arts, Psychotherapy, and Development. *Daniel N. Stern*. 2010. 174 pages. Hardcover. ISBN13:

9780199586066; ISBN10: 0199586063. NY: Oxford University Press.

Book reviewed by Ayesha R. Anwar, Fordham University

Forms of Vitality explores the nature of vitality which Stern defines as the force or power manifested by all living things. The book is divided into three parts. The first two parts provide background information concerning the dynamic forms of vitality, the role of the arousal systems, and the role of time-based arts as an expression of vitality.

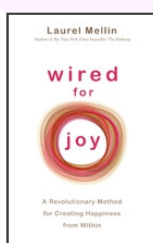
Stern explores many manifestations of vitality through experiences of human emotions, state of mind, perception of force, time, movements, health and illness, and through expression in the arts (music, theater, cinema, and dance). In addition, Stern also attempts to explore the psychological and behavioral aspects of vitality and a possible neuroscientific domain with relevance to forms of vitality through the arousal system.

The last part of the book provides an overview of the development and clinical implications of vitality. The book is geared towards helping psychologists, psychotherapists, and those in the creative arts understand not only the theories of vitality but also how these theories fit with our current knowledge of the workings of the brain.

The Tell-Tale Brain: A Neuroscientist's Quest for What Makes Us Human. *V. S. Ramachandran* 2011. 357 pages. Hardcover. Kindle. Audio. ISBN 978-0-393-07782-7. NY: W.W. Norton & Co.

Book reviewed by Stefani O'Donoghue, Fordham University

Dr. Ramachandran uses a multidisciplinary approach to describe the uniqueness of the human brain. The book covers a variety of topics including brain plasticity, synesthesia, mirror neurons, autism, language, abstract thought, and self-awareness. The book is written for therapists and clients, as well as students or casual readers who have an interest in brain processes and neural disorders. The book takes a special interest in the role of mirror neurons and their role across a spectrum of disorders. Dr. Ramachandran also provides an evolutionary perspective when describing certain behaviors related to neural disorders. He uses disorders to explore locations of brain structures specific to particular functions and provides accounts from his own patients to describe the neural disorders he has encountered. The book encompasses a wide range of topics, with information on associated brain regions, neural disorders, and possible treatments.



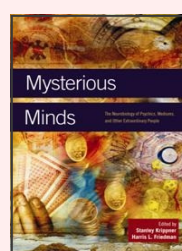
Wired for Joy! A Revolutionary Method for Creating Happiness from Within. *Laurel Mellin* 2010. 223 pp. Paperback. ISBN: 978-1-4019-2586-4. CA: Hay House.

Book reviewed by Jaqlyn Gabay, New York University.

Laurel Mellin introduces the reader to emotional brain training (EBT) and how to use five simple tools to rid oneself of unnecessary and debilitating stress, stress that usually leads us into living in a survival mode, which doesn't leave much time for happiness, nor compassion. Correlations exist between the physical and mental ailments people develop today and their overloaded

stressful lives, stressful environments and stressful thoughts.

Mellin tells readers that this is not the natural way of life, nor is it the way in which they should live. There is actually a much easier, more pleasurable way of living, and it is all possible by working with one's own brain. Mellin explains how we are all capable of literally rewiring our brains to devoid ourselves of stress and to feel natural joy. Our thinking, or conscious brain, is strongly connected to our emotional brain, which is the seat of our pleasure receptors. She explains how to use the thinking brain as a tool for rewiring the emotional brain, and reveals how to create pleasure and peace within oneself without the use of food, drugs, possessions or any outside resources. One example she gives is based on our hunter-gatherer ancestors' survival mechanisms of the body's natural ability to create and feel joy by helping the greater good. Thus, it is innate in humanity to receive instant pleasure by doing things to benefit the greater good.



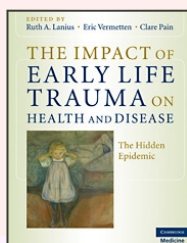
Mysterious Minds: The Neurobiology of Psychics, Mediums, and Other Extraordinary People. Edited by *Stanley Krippner and Harris L. Friedman* 2009. 219

page. Hardcover. ISBN: 9780313358661. CA: ABC-CLIO, LLC.

Book reviewed by Tanice Prince, Hunter College of CUNY.

This collection of essays covers the subject of parapsychology from the viewpoint of neurobiology and physics. It is written as an introduction to parapsychology and offers multiple theories as

well as numerous experiments and their outcomes in relation to their implications in the field for the purpose of shedding light on the ever-present unknowns of this field. The book considers both attempting to understand this field of study, and the dilemmas of proving and studying parapsychological phenomena. It covers a wide range of topics related to the mind, including consciousness, meditation, mediums, and extrasensory perception.



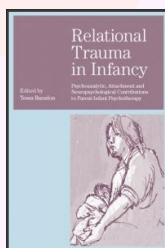
The Impact of Early Life Trauma on Health and Disease: The Hidden Epidemic. Edited by Ruth A. Lanius, Eric Vermeten and Clare Pain 2010. 334 pages. Hardcover. Ebook. ISBN: 978-0-521-88026-8. NY: Cambridge University Press.

Book reviewed by Ayesha R. Anwar, Fordham University.

The text explores the relationship between childhood traumas and diagnostic strategies for patients biopsychosocial experience. Questions such as: how does a person or one's soul become damaged? Why are only some of us suicides, addicts, or obese, or criminals? Why do some of us die early and others live long? What is the nature of the scream on the other side of silence? What does it mean that some memories are unspeakable, forgotten or lost in amnesia – and does it matter? What are the basic causes of these phenomena, and what are the mechanisms by which they occur? Do our current ways of medical understanding limit us as physicians? Are they part of the problem? are approached with the current understanding of how we get to be the people we are not only on a biological basis. The text also explores the outer persona and inner soul.

The book is divided into three sections. The first section looks at the history and development of early life trauma and the impact it has on health and

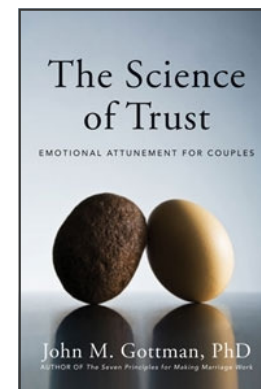
disease on an epidemiological level. The second section provides biological approaches for early life trauma with an emphasis on childhood abuse and its implications on a neuroscientific level. The third section examines clinical perspectives, providing strategies for assessments and treatment of trauma spectrum disorders. The work is geared towards therapists and medical practitioners in hopes to approach a new paradigm of medical, public health, and social service practice that starts with a comprehensive biopsychosocial evaluation of all patients.



Relational Trauma in Infancy: Psychoanalytic, Attachment and Neuropsychological Contributions to Parent-Infant Psychotherapy. Edited by Tessa Baradon 2010. 228 pages. Paperback. Hardcover. Ebook. ISBN: 978-0-415-47374-3. NY: Routledge.


Book reviewed by Jade Kerr, Boston College

Written primarily for clinicians and researchers, this book aims to use diverse disciplines to examine the role trauma plays in infant-parent relationships. It not only explores the mental health of infants but also incorporates different subject areas of relational trauma into a cohesive and informative compilation. Baradon carefully and successfully chooses experts in their field to cover everything from “intergenerational transmission of relational trauma and earliest intervention” to “training and supporting professionals working with traumatized parents and infants.” Because of its clinical nature, Relational Trauma is designed specifically for those looking to pursue a career in psychotherapy or those already established in the field.



The Science of Trust: Emotional Attunement for Couples. John Gottman 2011. 496 pages. Hardcover. ISBN: 978-0-393-70595-9. NY: W.W. Norton & Company.

Book reviewed by Stefani O'Donoghue, Fordham University

The book is aimed at both therapists and clients, and it can be an intriguing read for mathematicians and researchers. Gottman uses mathematics and research to support his model for the Sound Relationship House which is based on research that studied relationships through behavior by describing couples' voices, gestures, movements, speech patterns, and emotional and facial expressions during interactions. The book also focuses on repairing the couples' relationship, which can aid patients in understanding their own relationships. It discusses what trust is, what betrayal is, how they are measured, how to help people build trust, and the power imbalance with building trust. An interesting section of the book addresses the physiology of trust and betrayal. This includes a scientific perspective expressing how an individual's physiological alarm system reacts during emotional moments of the couples' relationship. The book includes reliable data, support from Gottman's own research, examples of couple dialogue, and anecdotes about relationships, which provide an integrative use of perspectives to explain the building blocks and roadblocks to a healthy relationship. 

Social Networking and a Sense of Self

By Lauren Booker

Shakespeare said, “To thine own self be true”. But first, one must know thy Self. Part of my psychotherapeutic relationship with middle-school aged clients includes finding ways to show them that they have the power to influence their own actions and in return produce desirable or undesirable consequences. Albert Bandura called this human agency and stated that there were four core features of human agency: intentionality, forethought, self-reactiveness, and self-reflectiveness. According to his Theory of Social Cognitive Development, humans have the capacity to exercise control over their lives and can use their intelligence to be self-regulative, proactive, self-reflective, and self-organizing. One therapeutic tool often recommended for clients to actively self-reflect, define and explore their sense of Self has been a journal or diary. However, modern technology in the form of social networking, personal web pages, and blogs has allowed individuals reveal themselves to their friends and community in ways unlike before having both positive and negative consequences

As a clinician working with young teens (ages 12 to 15) in an inner city urban Philadelphia predominately Hispanic middle school environment, I have seen many negative consequences when my clients divulge personal information about themselves in the form of social networking, personal web pages, and blogs. Even though social media is designed to express one’s Self, young teens often use these venues to impress friends or classmates with what they think others will like instead of using the medium to define their own individual sense of Self.

There are pros and cons when working with teens and their reliance on social networking. Various personas can arise in online communities. People may begin to express parts of themselves that would otherwise remain hidden in the shadows. Online communities keep individuals connected but at the same time can create distance—without physical contact, without the ability to “see” interactions miscommunications easily arise. Interpersonal relationships suffer which can also create barriers in the therapeutic relationship.

I worked with one client whose sexual behavior was exposed and spread on a website. Her self-esteem was seriously damaged, and she lost friends due to statements made online. Girls bully one another through these sites and attack one another’s character by

spreading rumors and gossip. A male student posted a vivid description of how he cheated on his girlfriend with one of my clients on a social networking site. In response, the other girls in school turned on my client, not the boy. They verbally called her names in school and isolated her from their social groups. My client shut down in therapy and even began to define herself through the online descriptions—taking on the identity given by her “friends” rather than standing in her own sense of Self.

As a clinician, I used positive self talk



to help her define herself. And as someone who also uses social networking sites, I began to reflect on the young female client’s problem. How would I feel if friends of mine began to publicly attack me on the internet? I began to sympathize with the young client and figured out creative ways in which to work with her. I did an art therapy project in which she wrote her name on a piece of paper and began to ascribe adjectives and nicknames that she felt defined her. Her friends’ attacks made her question who she was; my intervention was designed to empower her to tell me and at the same time remind herself who she thought she was.

Social networking sites can also be beneficial in therapy. One client shared her Facebook page with me in order to express things in therapy about herself that she felt she suppressed in public. I recommended to another client cre-

ating an online journal that she keeps secure to allow privacy, and if she wanted, she could let trusted friends read her thoughts as a way to create a foundation of who she is.

Adolescence is a time of questioning and often the sense of Self and ego are quite fragile and can be easily impacted, positively and negatively, when coming in contact with peers and the strong influence of the larger cultural ideals and pop culture. I learned that social networking can be both damaging and uplifting to the young teen spirit in therapy. I have seen it be a cause for their pain and yet a source for their strength. At another Philadelphia area public school a survey was conducted using Survey Monkey in a Women Issues Seminar that found girls were more influenced by media than boys.

Therefore, I use social media as a therapeutic tool to empower them and as another expressive outlet like in art therapy to create a creative interactive picture of who they are, their own sense of Self. This is especially important for teen girls. ☞

Lauren Booker is a graduate of Spelman College and is currently a child clinician in the Northeastern section of the country. Her research interests include body image, eating disorders, pediatric psychology, health psychology, and trauma.



Reference:

Bandura, A. (1985). *Social Foundations of Thought and Action: A Social Cognitive Theory*. NJ: Prentice Hall.

Across the Pond

European Association of Body Psychotherapy

As the new President and General Secretary of the EABP we – Lidy Evertsen and Jill van der Aa – feel in the midst of a very creative and enthusiastic stream within the organization. Since the last General Assembly in November 2010 there has been a lot of activity. Much work is being done through e-mails and Skype contact rather than face-to-face meetings and new initiatives are in the make.


Our main mission is to support a good balance between a stream of creativity and aliveness within our profession on the one hand, and to safeguard the quality of body psychotherapy and its practitioners/researchers on the other. In order to allow the stream it's important to be as inclusive as possible. In order to ensure quality, we need rules and regulations. In my opinion (Lidy) it is important to connect with our inner values and set the rules and regulations from that viewpoint. Sometimes it is tempting to focus on outside recognition only. Outside recognition is important, but only when it corresponds

with our inner core. Some may find all the work for recognition too much and tend to collapse and withdraw into their/our own world. However, this would make it impossible to bring the energy from our core to the world, which wouldn't give us, as an organization, much ground to stand on.

To further this aim we are redefining our policy in order to work on creating a "Common Brand of Body Psychotherapy." Brainstorming has been initiated in different sections of the EABP, the Board, the FORUM of Body Psychotherapy Training Organizations and Professional Associations and the COUNCIL of National Associations and National Committees. Many of the National Associations (particularly the DGK in Germany and the NVLP in the Netherlands) also have projects to find common ground among the modalities and to develop a common curriculum. This is important for the body of the organization, in order to create more wholeness and completeness, especially of the content of our work. If we can bring together all that we are good at from

the different modalities and sub-modalities, we can create an even stronger theoretical and practical professional body than we already have.

This will also give us a face to the outer world. People too often react with. "Body Psychotherapy? What is it?" The term Body Psychotherapy needs to become a well-known concept. In our drive towards unity.

EABP is currently working on several projects. All in all, these are very exciting and challenging times in which the support the sister organizations can give each other is both essential and fruitful. This heralds a new era of "across the pond" cooperation. 

We welcome contact on any of these matters.

Lidy Evertsen
lidy.evertsen@eabp.org

Jill van der Aa
jill.vanderaa@eabp.org



"Across the pond" communication is developing on several fronts. The EABP Scientific Committee has been revived. At its initial meeting in March, which took place in Amsterdam, several USABP members (including your president Virginia Dennehy) showed interest and were "virtually" present through Skype contact. It looks as if this committee will develop into a joint initiative. Already a lot of unofficial dialogue is taking place on LinkedIn and other sites. The committee is organizing a separate Scientific Symposium to take place on the day after the UK Congress – Tuesday 18th September and welcome both your participation and attendance.

Most important of all, the joint EABP – USABP online Journal will be launched in 2012. It is due to the work of Dr Jacqueline Carleton that this initiative is coming off the ground. Not only has she been editing the USABP Journal for ten years, she has been a member of the EABP for some years and has stimulated contact and cooperation between the two associations. We welcome her as the first editor of the joint Journal. From the EABP Michel Heller and Courtenay Young have been campaigning for a Journal for many years. Michel will also be on the editorial committee.

Internally the EABP Board is working to strengthening connections with the ten National Associations where a lot of activity in the form of symposiums, conferences, training, looking for national recognition, etc. is taking place. In many European countries psychotherapy can only be done by psychologists, psychiatrists or medical doctors. Despite this lack of political recognition for psychotherapists from other backgrounds, body psychotherapy is flourishing and expanding. It is often a question of two steps forward and one back but working together we are stronger and have the possibility of getting further.

We are being well-represented at the EAP - European Association for Psychotherapy by Thomas Riepenhausen, where the main political work is being done to gain recognition for the profession. Several senior EABP members are also working with the EAP, including Courtenay Young whose work with the Professional Competencies www.psychotherapy-competency.eu/ is an ongoing project. In the long run the aim is that the European Certificate of Psychotherapy – the ECP – which many of our members have, will be recognized throughout Europe for all psychotherapists.

Crossovers

Writings and Performances with Psychological Themes

The King's Speech (2010 Academy Award for Best Picture) brought body psychotherapy into mainstream movie theaters—the therapist worked with muscle relaxation and breath control techniques while exploring the emotional and physical wounds from Prince Albert's childhood to treat his stuttering.

While this award winner captured a large audience, there are an amazing number of movies, books, songs, plays, even YouTube videos that address issues in body psychotherapy as well as psychotherapy in general.

I scanned the worldwide web seeking titles that readers, perhaps more focused on peer reviewed journals and professional magazines, may not have experienced yet. The listings are offered for personal exploration, not as professional recommendation. ~ N Eichhorn

MOVIES

The Beaver: Mel Gibson plays a successful businessman experiencing emotional chaos (alcoholic tendencies, a suicide attempt, the possibility of bipolar disorder)..A talking puppet appears to resurrect Gibson's character from mental illness.

A Day Without a Mexican: Looks at how Californians would cope if all the Mexicans were gone.

The Laramie Project: Covers Matthew Shephard's death because he was gay.

If These Walls Could Speak: Three different stories detailing the historical struggles associated with being lesbian during different points in history.

Crash: Looks at diversity issues.

American History X: Deals with transformation and racial identity development.

Monsters Ball: Deals with racism and inter-racial relationships.

I Heart Huckabees: Deals with existential and spiritual issues.

BOOKS

Star Trek on the Brain: Alien Minds, Human Minds

Robert Skeluler and Randolph Blake, 1998.

Two psychology professors created a neurology primer for teenaged readers linking Star Trek to the nervous system. Clear, concise, entertaining writing that offers facts addressing topics such as human emotions, their cultural implications and universal expressions through a Vulcan's perspective. Luckily, it's not just for Star Trek fans.

From Words To Brain: Can Neuroscience Teach You to Be a Better Writer?

Livia Blackburne, 2010

Blackburne looks at the neuroscience of reading—how the brain interprets words—by interweaving scientific expertise and storytelling, cognitive psychology and classic fairy tales, and wolves and MFRI's

The Narrative Escape: Our Brains Naturally Frame Events as Stories

Tom Stafford, 2010

Stafford, an Experimental psychologist at the University of Sheffield writes about

the human instinct to frame life in the guise of stories, how people define their sense of Self through the details they choose to share (and not). He explores the psychological power of stories and the fundamental nature of the mind.

The Ego Tunnel: The Science of the Mind and the Myth of the Self.

Thomas Metzinger, 2010.

A German cognitive scientist and theoretical philosopher, Metzinger argues there is no such thing as a Self and explores the unitary sense of Self as a subjective experience.

New York Openings

Fish Eye Deals with a couple trying to stay together despite conflict

Through A Glass Darkly

An adaptation of Ingmar Bergman's 1961 film about a mentally ill woman losing control during a family vacation

Body-Mind Psychotherapy defined via an MFT intern

<http://www.youtube.com/watch?v=7Q74R7lagFk>

Somatic Counseling Psychology at Naropa U.

<http://www.youtube.com/watch?v=0NrNOEX-6GE&feature=related>

Trauma, Somatic Experiencing and Peter A Levine PhD

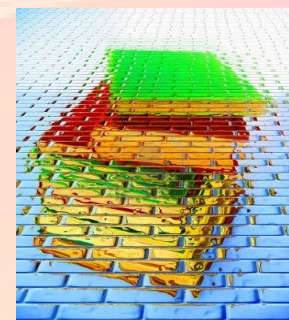
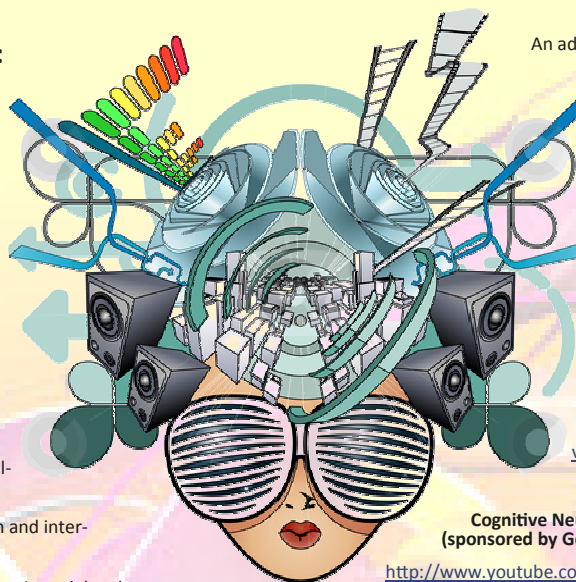
<http://www.youtube.com/watch?v=ByalBx85IC8&feature=related>

Cognitive Neuroscience of Mindfulness Meditation (sponsored by Google Talks)

<http://www.youtube.com/watch?v=sf6Q0G1iHBI&feature=relmfu>

Change Your Mind, Change your Brain: The Inner Conditions (sponsored by Google Talks)

<http://www.youtube.com/watch?v=peA6vv0D5Bg&feature=relmfu>



Reflection



Artist/Band: Tool

I have come curiously close to the end, down
Beneath my self-indulgent pitiful hole,
Defeated, I concede and
Move closer
I may find comfort here
I may find peace within the emptiness
How pitiful

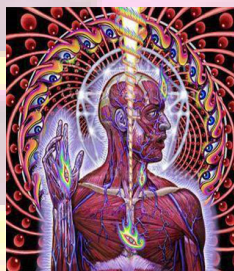
It's calling me...

And in my darkest moment, fetal and weeping
The moon tells me a secret - my confidant
As full and bright as I am
This light is not my own and
A million light reflections pass over me

Its source is bright and endless
She resuscitates the hopeless
Without her, we are lifeless satellites drifting

And as I pull my head out I am without one
doubt
Don't wanna be down here feeding my narcissism.
I must crucify the ego before it's far too late
I pray the light lifts me out
Before I pine away.

So crucify the ego, before it's far too late
To leave behind this place so negative and blind
and cynical,
And you will come to find that we are all one
mind
Capable of all that's imagined and all conceivable.
Just let the light touch you
And let the words spill through
And let them pass right through
Bringing out our hope and reason ...
before we pine away.



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As one reviewer noted: the lyrics denote a person breaking through the false sense of "Self" aka the Ego before it assumes one's true identity resulting in a false Self or Ego-constructed Self whereby life becomes nothing more than self perpetuated illusions/lies.

Suspended

By Norman Phillips

Between and between, neither here nor there,
I am suspended, moving but at the same time suspended
in a weightless space that gives me nothing to push against,
to choose a new direction.
In such a predicament, how can I take responsibility for any actions
taken since I can no longer *take* an action?
Internally, all is the same. I think, I feel, I dream, I want, I fear.
Can the thoughts, desires, and hopes that continue in me be *ascribed* to
me?
Am I to be judged thus, when I exist only in a limbotic state,
unable to do those things for which I can be fairly judged and ascribed to
me as part of my present character?
Though still living, is suspension a form of an eternal state of either living
or dying?
Acceptance of this suspended state unburdens me of life's gravity
as well as its joys; yet, there is no finality that can be hoped for.
Thus, the suspension is again neither here nor there.
It is an unknown, inexplicable state that has neither an end nor a beginning.
It is suspended.



Norman is 89 years young. A US Air Force fighter pilot, he flew in WW II and Vietnam. Highly decorated (Silver Star for gallantry in action, Purple Heart, and assorted medals and commendation ribbons, he became a colonel despite challenging the system multiple times. The past five years he has focused on exploring the creation of the Self—how his actions created the Self he was and the Self he continues to explore today—through his writing.



Searching for Self in the Psychotherapy Maze

By Mary J Giuffra, PhD, LMFT, APRN, BCST,



Introduced to private practice as a family therapist, I saw clients as parts of a larger organic family system. A change in one person initiated a change in other parts of the system, even at the most microscopic level. Two clients, I'll call Dick and Jane, came for family therapy. Their personal and relational journeys became part of my own path seeking understanding and skill.

Over time, I encouraged Jane to pull back her intense focus on her husband, Dick, and after a time—if Jane really pulled back in thought as well as action—Dick would start pursuing Jane, albeit critically rather than in the warm and fuzzy manner she desired. Eventually Dick learned how to pursue Jane in a warmer fashion. I explored their extended family and together we identified repeating patterns across the generations. Surprise! Jane's mother pursued her Dad, and Dick's father fled.

However, I sensed that so much was going on at a deeper level for Dick and Jane. Dick's drinking sent me to further training in addictions where I learned about Dick and Jane's inner children. One thing I learned in Family Systems influenced that inner child work—I always wanted an outer parent there to work with inner little Dick and Jane. Some of my addictions colleagues spent all their time handling angry little toddlers with no parent to keep them in tow. As a family person, I wanted an adult to care for those inner kids.

Then I was so encased in thoughts and feelings about Dick and Jane, their extended family and their inner kids that I wanted to go deeper. It was getting too lateral for me. So I looked to the body, went back to early psychodynamic days, married that theory with the body and added spiritual aspects of Dick and Jane through the study of Core Energetics. Dick and Jane began to beat batakas, punch bags, hit tennis rackets on the newly installed wood based mattress/couch I now used for body work, and they vibrated from head to foot. They assumed bow positions, thrust their pelvis forward and screamed, "I hate you." They spent some time integrating and seemed to feel better. Actually Dick felt better; Jane had trouble staying present when it became too intense.

Recognizing that the body was a good place to be, I tried to find ways of getting Jane to stay present. Trauma seemed to be sending her to the ethers. So I studied Somatic Experiencing and helped Jane and Dick to go deeper as they gently got in touch with inner sensations which I titrated very slowly and mindfully. Jane took to SE like a duck to water. She began to cough, sneeze, laugh, cry, and parts of her body automatically vibrated with softly rippling muscles.

I did not actively direct the discharge, it happened instinctively as Jane sensed running from her father or fighting back, in sensation as well as imagination. Dick missed the more active Core work, the kicking and pounding, but after a while he got in the swing and was fascinated to see that his body had a life of its own.

Still looking for the self, I studied SE Touch with Kathy Kain. This led me to an even deeper respect for the wisdom of the body and the need to contain Dick and Jane when they started getting activated by intense trauma. Supporting their body's natural process was essential. I also learned that Jane had been in a body cast as a kid so she missed some developmental stages and needed to go through them before she could work the trauma through her body.

The eternal searcher, I wanted more. More depth, more self, more of Dick and Jane so I studied Biodynamic Cranio-sacral therapy and learned that Dick's mother was in labor for 48 hours, and he had a very challenging birth. In fact, he had had a difficult time breathing. Some of the fontanels in his cranium were pushed on top of one another. I learned that his sphenoid bone was locked. In time, the overlap lessened and the sphenoid bone junction (SBJ) moved. I learned about the spaciousness that surrounds us, midline, long tide and the Stillpoint. I was definitely getting deeper. Dick and Jane enjoyed the times when they were on the table. In time, I could get into that wonderful field of resonance when the three of us were just sitting in the office together, didn't even need the table.

So in that field of resonance, I kind of went back to my early family roots coupled with the inner children of the old days and explored Internal Family Systems. Now Dick and Jane's inner children were more differentiated and of different ages, but they worked together, often protecting a little exile who was kept hidden away. I learned that at heart we do love ourselves and even the cutter or the self abuser does that to keep the focus off the frightened, sad, shamed or rejected exile.

But something else was going on with Jane and Dick. Jane seemed to sacrifice her desires, needs and feelings for Dick and their children. She empathized with their pain and did whatever she thought they needed to keep from feeling guilty or shamed about their upset. Dick had an abandonment schema which made him very reactive when Jane did anything away from the family. Going back to school really triggered him, so she thought about dropping out of graduate school. Her old self-sacrifice was colluding with Dick's abandonment schema to inhibit growth for both.

A new twist, they had schemas or belief systems developed in childhood that were like lenses from which all experiences were perceived. Whenever Dick or Jane felt activated from intense emotions, feelings or sensations, their schemas bounced up to tone down the intensity. Defective, deprived, abused, dependent, enmeshed, failure or subjugation schemas arrived to tamper down the intensity.

Continued on page 29

There seemed to be a lot of selves in the room with Dick, Jane and me: inner kids and adolescents—angry kids, vulnerable kids, overwhelmed kids, as well as inner selves who felt like failures, who felt lonely or fearful. In Schema work, we call those kids modes. In the past, some might think Dick and Jane had Dissociative Personality Disorder, but in the presence of a conscious adult, frozen or traumatized aspects of the personality can be healed, and unprocessed survival responses reawakened and expressed through the body. Client or therapist can redo unskilled parenting so that the client consciously feels what might have happened in a supportive childhood, resulting in more functional data to store in the amygdala.

Through all of this I thought, maybe the self is far larger than previously thought. Actually, all this study and exposure to other Dick and Jane’s and a variety of therapeutic theories and methods made me realize that really what we are trying to do with clients is to expand their consciousness so they can appreciate how much larger they are than they had imagined. The more conscious they became, the more they saw that they held pieces of all humanity in their Being. This led to compassion for one another and for all humans. Empathy for self and other expanded.

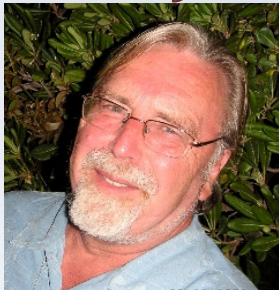
I learned that rather than looking for the self in psychotherapy, Dick and Jane’s task was to realize what Jean Houston so wisely stated, “We are polyphrenic with many selves.” The goal is to increase our consciousness so we can embody and contain the fullness of what it means to be human, consciously accepting and loving the truth of who we are. Self is not the pot of gold at the end of the therapeutic rainbow, it is consciousness we seek. The more conscious we are the richer our lives will be. ☞

Dr Mary J. Giuffra has been a therapist for over 35 years. She is a Board Certified Clinical Specialist in Psychiatric Mental Health, licensed Marriage and Family Therapist, and is certified in Addictions Counseling, Sex Education/ Counseling, Core Energetics Somatic Experiencing; she completed the Franklyn Sills Biodynamic Craniosacral and Somatic Experiencing Touch Trainings and is currently studying Schema Therapy. Her specialty is couples therapy and her passion: enhancing and restoring relationships. Her deep respect for the impact of the body on relationships led her to develop Biological Couples Therapy. A former tenured professor at NYU, and research faculty at SBGI, Mary has published chapters in books, articles in journals and presented internationally. She is a Fellow in the American Academy of Nursing and has served on the boards of major medical centers, hospices and home health agencies. She was an alternate delegate to the UN.

Encouraging the Felt Sense of Self

Young

Courtenay



Nancy Eichhorn MA, M.Ed., MA

What lies before us and what lies behind us are small matters compared to what lies within us. And when we bring what is within us out into the world, miracles happen.

-Ralph Waldo Emerson

During the course of multiple conversations on Somatic Perspectives on Psychotherapy’s LinkedIn Group, I encountered Courtenay Young, an experienced British counsellor and psychotherapist trained in body psychotherapy as well as practiced in humanistic, eclectic, and transpersonal traditions. Then, immersed in research for my dissertation proposal, I stumbled across his website where I discovered a treasure-trove of articles.

With Courtenay’s permission and participation, I have excerpted directly from and rewritten parts of his original article entitled, Encouraging the Felt Sense of Self, to share both his take on a bodily felt sense of Self and his process designed for therapists to share with patients (or partake of themselves) to nurture a connection with the Felt Sense of Self. What follows is a collage of Courtenay’s work and my interpretation.

The bodily felt sense is a significant phenomenon in both psychotherapy and body-oriented psychotherapy. It is essentially the observation and experience of one’s own “sensory and visceral experiences”. Both Carl Rogers and Eugene Gendlin referenced the necessity of creating awareness of the unconscious sensory and visceral experiences as a significant part of psychotherapy. Gendlin expanded the concept of a “felt shift” or “experiential self” in his psychotherapeutic work called *Focusing* where patients were encouraged to focus on and become aware of their inner experiential processes.

As therapists, Courtenay writes that we should consider where our patients are essentially coming from and what constraints they bring with them into the therapy sessions. Besides their immediate problems – illness, relationship issues, addictions, and/or work difficulties—he notes that patients come to therapy because they also want to “feel better” in themselves. Therefore, one of our therapeutic tasks is to help patients get more in touch with their essential Self, which, he posits, occurs most easily through an embodied process. Courtenay cites the significance of Gustl Marlock’s (2006) differentiation about “being” in one’s body and “having” a body as a step toward a felt sense of Self:

“ . . . when ‘being embodied’ becomes objectified into ‘having’ a body, the inner entity that we call the soul fragments into an ego that is nowhere to be found. It merely keeps postulating and reasserting itself and becomes an assortment of psychic and bodily faculties and capabilities” (pp. 396-405).

Continued on page 30

In order to “feel” a whole lot better about themselves, Courtenay suggests that our patients need to both “feel” their Self, and they need to “feel” a better sense of their Self. This is not necessarily a revelation that happens in a single moment; it is a process that builds up and then integrates itself into the whole psyche. Patients need to start feeling their sense of Self properly, which means not criticising or judging and not feeling bad about the Self, but rather simply experiencing the Self.

The exercise Courtenay offers in the original article was designed to help patients regain or develop a Felt Sense of Self. There are three sections with each section divided into three parts. The exercise should take about 15-20 minutes. It is best done while sitting, rather than lying down. Patients are encouraged to practice the process in a quiet space without interruption 3 to 4 times a week until it becomes almost second-nature—until they feel more in touch with their sense of Self. If at any time during one of these parts or sections, patients notice their mind drifting off, or thought patterns creeping in, they are assured that this is very common. As in any meditation practice, patients are instructed to simply acknowledge the thoughts, let them go, and come back to the exercise. The more patients practice this process, the better they will be at doing it. And soon it will become a tool to support their conscious connection to the Self. ✎

The Felt Sense of Self

Section One. Step One involves mindful awareness of the breath itself, then awareness of the breath in the body. Different types of breathing methods are shared such as belly-breathing and bellows-type breathing along with combinations of breathing patterns linked to feeling states such as anxiety or fear when the breath becomes shallow and most of the breathing action happening in the throat. Step Two involves becoming aware of the sensations that the body experiences all the time and being aware of the body as a living, functioning organism. Step Three brings the awareness of breath and body into the context of here and now, the environment one is experiencing and how it impacts one’s sense of Self.

Section Two. Step One guides patients into their embodied feeling states, noting what is happening in the moment as well as what might be under the surface—noting mixed or secondary feelings—feeling states that accompany most relationships such as loving a partner or spouse dearly and yet feeling frustrated by a recent choice they made. Step Two guides patients to look deeper into feelings said to be beyond dispute, feelings that encourage a sense of connection with all of humanity, such as the horror of warfare, the fear of violence, the basic human desire for peace and calm. Connecting may help form or confirm one’s sense of Self identity and lead to experiencing something of one’s sense of spirituality.

Section Three. Step One deals with life’s decisions, choices made along the way that impact one’s sense of Self. What might have happened (or not happened) if they had attend that party, or that (other) college, or taken that job? Step Two deals with parts of the whole “Self” that may not be manifest at this particular point in time and guides patients forward from the here-and-now toward new possibilities and gives them a sense of direction as they explore their unrealized potential. Step Three invites patients to connect with their personal sense of God, or Universe, or Inner Self, or Higher Self, or Guardian Angel, or whatever name they ascribe to this sense of the Other.

Because of space limitations, the exercise has been summarized. Readers are directed to the Articles page of Courtenay Young’s website for the original process: www.courtenay-young.com

Courtenay Young is on the editorial boards of two psychotherapy journals, has written many published articles, and has published two books: *Help Yourself Towards Mental Health* (Karnac Books, 2010), and *First Contacts with People in Crisis and Spiritual Emergencies* (AuthorHouse Books, currently in production). Courtenay can be contacted by e-mail at courtenay@courtenay-young.com.

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The USABP Interns

By Diana Scime-Sayegh

Dr. Jacqueline A. Carleton has crafted a team of interns who are as ambitious as they are thirsty for knowledge. Becoming a member of this team begins with a formal application process. We are required to present a resume and cover letter that states our career goals. We are also required to submit a writing sample, three references, and a listing of all classes completed and contemplated. Outside of the logistical elements, Dr. Carleton insures that whomever she hires has a keen sense for writing, takes initiative, is detail oriented, can work alone or on a team, and is pro-active and thoughtful.

We work in a carefully curated environment that, in its calm and quiet, still buzzes with the want to learn as much as possible and put that knowledge to use. The opportunities Dr Carleton affords interns are vast and great. She supports our educational goals and does all she can to assign research and writing projects that highlight and coincide with our particular courses of study, interests, and ultimate goals within the field. We perform a myriad of tasks such as: writing extended literature reviews and chapters for a book Dr Carleton is working on; co-authoring conference presentations with Dr Carleton and presenting findings solo; and attending to administrative tasks such as organizing her library, keeping the intern's schedules in order, forming peer review committees, and helping with conference publicity.

One of the opportunities that we appreciate is writing the book reviews for the *Somatic Psychotherapy Today: The US-ABP Magazine (SPT)*, formally the *US Association for Body Psychotherapy newsletter, Keeping in Touch*, and for the USABP website. Reading the books and writing the reviews gives us, as student writers in all levels of our educational journey, the chance to have our names and abilities exposed to a community of renowned and respected psychological professionals.

And with the new magazine launch, there will also be times that we will assist the Editor when she delegates tasks that she needs assistance with. This is always welcomed as it is wonderful to get to know and work with as many professionals as possible.

Clearly being a member of Dr Carleton's team requires a certain amount of skill, desire to learn, and self-discipline. Left mostly to our own devices, we take our work in her office seriously and work until completion to the best of our abilities, not just out of respect for her, but out of respect for ourselves. ☞



Diana Scime-Sayegh is currently completing her post-bachelorette work at Hunter College in NYC.



Ryan Hendricks is a senior in the College of Arts and Science at New York University, majoring in Psychology and minoring in chemistry



Dustin Y. Chen is a senior studying psychology at New York University where he works as a research assistant in the Social Psychology Department.



Courtney Shen is a senior at NYU majoring in psychology, minoring in French.



Ayesha Anwar is an advocate and liaison between service providers and clients for Sakhi, a South Asian anti-Domestic Violence organization, and at The Rape and Domestic Violence Intervention program at Beth Israel Medical Center.



Myriam Schottenstein has started Somatic Experiencing training and looks forward to continuing as she pursues an MSW at Fordham's School of Social Service.



Tanice Prince is studying psychology at Hunter College.

Emily Chow is a sophomore at New York University majoring in psychology and double minoring in Child and Adolescent Mental Health Studies (CAMS) and music.



Jessica Kopcho plans to begin graduate studies as a psychiatric mental health nurse practitioner in the fall of 2011.

Dawn Canfora MA is a doctoral student in clinical psychology (somatic psychology) at the Santa Barbara Graduate Institute.

Jackson J. Taylor is a senior in the applied psychology honors program at New York University.



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