



Somatic Psychotherapy Today

Featured:

- ◊ *Albert Pesso*
- ◊ *Stephen W. Porges*
- ◊ *Michael Soth*
- ◊ *Jean-Jacques Joris*
- ◊ *Mary-Jayne Rust*

A PUBLICATION OF THE UNITED STATES ASSOCIATION FOR BODY PSYCHOTHERAPY

SPRING 2012

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Somatic Psychotherapy Today

Welcome to our Conference Issue

Our stories highlight the upcoming *USABP 7th Annual Conference for Body Psychotherapy*
August 10th-12th, 2012 in Boulder, Colorado,
and the 13th International EABP Congress in Body Psychotherapy
September 14th-17th, 2012 in Cambridge, England.

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The People of USABP

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About Us



Nancy Elizabeth Eichhorn, MA, M.Ed, MA is a writer, editor, ghostwriter, investigative journalist, and 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. With IRB approval, she begins 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.

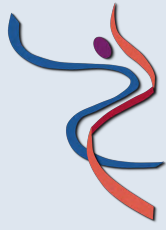


Diana Houghton Whiting, BED worked for ten years in architectural design prior to answering the call to study somatic psychology. When not writing papers, she can be found camping and hiking with her husband and two dogs (a Labrador and a Pug). She also loves to be on the mat practicing martial arts 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.



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.

To learn more about advertising in Somatic Psychotherapy Today please log on to www.usabp.org/magazine or email Nancy Eichhorn at MagazineEditor@usabp.org for details.



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From the Editor

Read our webpage version at www.issuu.com/SomaticPsychotherapyToday
Yes, it really is www.issuu.com/SomaticPsychotherapyToday

I am pleased to present an exciting issue filled with professional and personal wisdom. We highlight past and present knowing, as well as some future ponderings as we focus on the upcoming annual Body Psychotherapy Conferences in Boulder, Colorado, and Cambridge, England. The outpouring of response to contribute through story and interview, the joy of self-expression as stories took shape, the embodiment of our process, here on the page, as we shared our truth to honor our past and acknowledge those who continue to move our profession forward has been sensational. I feel richly blessed to have had this opportunity to talk with these talented pioneers in our field and learn what they've come to know first hand. I marvel each day at the willingness of new and seasoned writers to partake in the collaboration of Self and Other to create a sense of We; the results of our united efforts offer readers an insightful, informative, and inspirational issue.

I hope to see you all in Boulder, Colorado, and Cambridge, England!

Warmly,

Nancy Eichhorn MA., M.Ed., MA



We invite you to write an article or be interviewed for our upcoming issues. All submissions will be edited, and all writers/interviewees have final approval before publication. We appreciate your knowledge and want to share your story. Please contact Nancy Eichhorn at MagazineEditor@usabp.org

Upcoming Theme: Multicultural Impacts on Body Psychotherapy
Deadline: April 15, 2012

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.

Congratulations!

Albert Pessa to receive the 7th USABP Life Time Achievement Award

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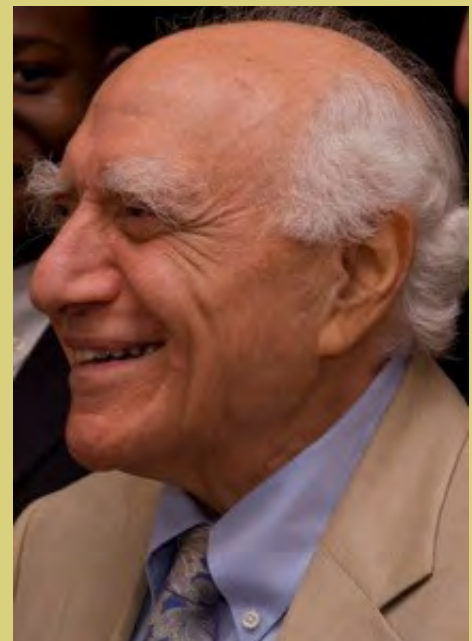
e are pleased to announce that the United States Association for Body Psychotherapy will be awarding Albert Pessa a Lifetime Achievement Award for his significant contributions to the field of body psychotherapy in a ceremony at our 7th Annual Conference in Boulder, Colorado on August 12, 2012.

Al's presence here and abroad, his teachings, writings, and ways of being with students and clients have positively impacted peoples lives for over 30 years. His continued dedication to the field enables all practitioners to evolve in new and exciting ways.

Since the award's inception in 1998, the USABP has given only six Lifetime Achievement Awards; we are honored to include Albert Pessa in this group of exceptional leaders in the field of Body Psychotherapy.

Prior award recipients are: John Pierrakos, Alexander Lowen, Ilana Rubenfeld, Stanley Keleman, Ron Kurtz, and Peter Levine.

To learn more about the Lifetime Achievement Award and the USABP go to www.usabp.org



Master Class: An Interview with Albert Pessa

By Nancy Eichhorn

Visionaries see what has never been seen. Entrepreneurs bring these visions to life. Teachers impart concepts so others can use them. And Masters? They see what hasn't been seen, do what hasn't been done, and embody the teachings of a lifetime enabling the survival of the Self and the human species.



At age 82, Albert Pessa is one of three living masters of body psychotherapy. His contributions to the field over the past 50 years are innumerable; he has written or contributed to almost a dozen books and written more than 50 articles along with leading seminars worldwide in the Pessa Boyden System Psychomotor (PBSP) mind body approach he co-founded with his wife, Diane Boyden-Pessa. Pessa will be honored as the 7th recipient of the United States Association for Body Psychotherapy's Lifetime Achievement Award during the August 2012 USABP Conference in Boulder, Colorado. He is also presenting a pre-conference workshop on "The Drive to be Happy in an Imperfect World," August 9, 2012.

"We're made genetically to be able to be happy in an imperfect world that is endlessly unfolding, and we are the local agents of that unfolding process," Pessa said during a recent SKYPE call. "Our lives are not predestined, the world is not done, and we are not puppets in it. We are part of an exciting unfolding and participate in it."

As a writer responsible to create Pessa's character with words that do justice to his truth, I feel stymied—nouns and verbs cannot convey the body and the immense actions of this man. Pessa joked saying that "the body guy got into language," but his essence doesn't conform to a unidimensional character placid on a page. Pessa has choreographed his professional footfalls starting as a dancer studying under Martha Graham before moving into his roles of teacher, researcher, therapist, director and co-founder of PBSP.

Early in his career, Pessa believed that truly talented performers knew their instruments intimately—a flutist fingered her flute, a drummer drilled his drums with a synchrony of beat and sound, and

a dancer knew his body's movements—what created and maintained each action and reaction—inside and out. His drive to understand the body's mechanisms led to dancers connecting with their deepest emotions to bring forth on stage. The release proved cathartic in many ways but nothing truly changed, healing wasn't achieved. When he and Diane started cathartic healing groups, unconscious family-of-origin "Holes and Roles" resulted in mismatches between participants. Pessa knew healing was an interactional process but something was missing.

"The participants were touching stuff in the body that never got answered, but we had to learn how to give them what the body needed rather than simply let it out. The old idea that you have to get it out to get new in is absolute nonsense," Pessa said.

Pessa has introduced a multitude of topics to the field of psychotherapy including theory and terminology. His views on trauma and its triggers in the amygdala include the standard three—flight, fight, and freeze—and he offers a fourth—appease—a novel and accurate action that saves lives as surely as running, striking back, or playing dead. His concept of "Holes and Roles" within family networks that translate throughout our lives include what he calls our "stem-selves"—the parts of ourselves that are able to fulfill any role be it father, mother, sister, brother, teacher, friend, minister, miser, murderer, or demonic monster.

Pessa speaks of the mind's eye and the mind's body: the mind's eye sees mental imagery; the mind's body feels the sensations of mentally enacting what was seen (aided by mirror neurons) or what was perceived as needing to be done. Pessa articulates that first we

see in our mind's eye and then we do in our mind's body before there is a single thought. "Seeing and doing" become recorded as sensorial and motoric memories based on past experiences that create our current reality. Accessing memories of how we see and what we do with what we perceive to foster new memories creates lasting change in our lives. Pessó's latest venture into the brain's memories and their impact on our lives involves getting into the brain without cutting it open.

"Real change comes," Pessó said, "when we get into the brain in order to change perceptions and motor reactions from the past. Our sense of self and the resources we have in our body are altered here in the present."

Conceptually, it appears that much of Pessó's current work is grounded in his belief that we have an innate need to live a 'just' existence both for ourselves and for others. And when something goes astray, when an injustice is perceived, people must right it even if only in their mind's body (versus actually physically doing something). He talks about a fundamental push to be alive, to love, and to do justice based on incoming sensory motor information—we see the world and react in order to stay alive and in order to keep the species alive, he said.

"Memories are the way we perceive and react, they impact our present consciousness which is a tapestry woven of threads of infor-

mation, information that is embedded genetically or by history (autobiographical, the stories we hear, and the reactions we have to the stories we hear) which is formed by information which informs us about the world and life itself. How we perceive, how we react is based on memories, and they all make big impacts on our personality," Pessó said.

The Messiah Gene

"We are all born with the Messiah gene which is designed to help us heal what is broken or left incomplete," Pessó continued. "Stories of incompleteness make the brain nuts, so it makes movies that the person doesn't see but is in fact the star of that movie. That's why Superheroes attract so much public attention—people love to see justice prevail. However, the Roots of Justice are in the body—they are not rational or cultural, they are in fact a genetic drive."

According to Pessó, there are three kinds of connection in life: connection to the self via the limbic system; the need to connect to another, to mate and procreate; and the connection to God (of our own belief and definition).

"We all need to have a sense that there is some ultimate meaning and order in the Universe, he said. "My definition of God is all that is," Pessó said. "My definition of me: I am all that I am. If we fill a hole/role, we begin to think we are the only one to do it. We stop being human and become God like."

There is a Messiah in every culture, the one and only; however, Pessó noted there's danger when there is no other. God, he said, is omnipotent, and when a person assumes a God-like place and sees his role as the one, the only, the situation becomes dangerous. As humans we possess the power to create (sexuality) and to destroy (aggression), and these two powers need to be modulated and limited. When we become the one and only those titrations are blown apart.

The result? For some anxiety and panic attacks, for others systemic defenses such as depression, dissociation, retroflection attacks, incompleteness, and never being happy. There is a direct reduction in our ability to receive what we need, Pessó said. Unwittingly, the unconscious movies we made to be the hero and right what we perceived as injustices shut down our receptor sites for what we long for all our lives—to be cared for and loved (that's where resistance comes in during therapeutic interactions).

Absolute Present

Working with patients, Pessó starts in what he calls the absolute present and micro-tracks the process in terms of bodily presence and consciousness (language). Knowing that people receive information about the environment from perceptions in the moment, both the external physical space and the internal environment based on

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genetic information, Pessa notes that the present moment is actually made of our remembered moments. Perception impacts an immediate motor response—if we see something we like, we move toward it; if we see something we don't like, we move away. We can't have an emotion without a body reaction.

And present consciousness contains perception, motor response, affective response, and thoughts linked to everything we are seeing now. Micro-tracking affective responses, Pessa notes facial expression as well as words spoken along with patterned automatic responses in the body.

“Thoughts are words, and mostly patterning,” Pessa said, “We do not ask patients, ‘What do you want to work on?’ To do so sets the aim, and

they only work on what they have prepared or we have prepared. This is not the absolute moment. We speak thoughts in the present mind.”

Pessa's work continues as his explorations nudge him forward, ever expanding his field of knowing and sharing. As a researcher and a teacher, as a dancer and a therapist, as a husband and a colleague, as a being who is and also does, Pessa's presence enriches the lives and work of all he touches.

For more information about Albert Pessa and his current work, plan to attend his pre-conference workshop on August 9, 2012, in Boulder, Colorado. You can also log onto the Pessa Boyden System Psychotherapy website: <http://www.pbsp.com>



Albert Pessa and Diane Boyden-Pessa

Poem

by Albert Pessa
May 17, 2007

*So I looked Existence in the eye
and asked:*

“What do you want of me?”

*“What have you pulsed
into my being?”*

*“What rhyme, rhythm, or reason
have you installed in me?”*

*“What song
shall I sing,
what dance
shall I spring
to life?”*

*Existence didn't blink,
but its constancy
made me think
that its eye
was an I
with an aye.*

*Yes, my heart leaped,
seeing the harvest
that would be reaped
for the multitude of I's
with an aye for all eyes*

*"Yes, Yes!" I cried.
"We come to be,
fit to be tied
with those with an aye
for our I's"*

*What a world this can be
when all I's are a we
that say "Aye " to all I's
with their eyes.*



Pesso Boyden System Psychomotor
A Mind-Body Approach To Emotional Well-Being & Peak Performance

Join the Conversation

Communication is an essential part of all relationships, and the Internet affords opportunities to network with like-minded colleagues and participate in forums that challenge your thinking and ways of doing. Join the conversation and voice your thoughts on the USABP and the EABP websites as well as on Facebook, Google, LinkedIn, ResearchGate and more.

Somatic Perspectives on Psychotherapy is a joint publication of USABP and EABP. It offers a series of free monthly conversations, mostly with clinicians, occasionally featuring leading thinkers in related fields. Stimulating ideas are discussed as well as clinical examples in a conversational manner that helps you get a sense of what it's like to see things through each guest's eyes. The conversations are recorded as mp3 files which you can listen to on the site or download to your computer/player. Printable transcripts are available on request a few weeks after a conversation is published.

www.SomaticPerspectives.com and [facebook.somaticperspectives.com](https://facebook.com/somaticperspectives.com)

Be sure to hear our conference presenters on *Somatic Perspectives on Psychotherapy*



Frances La Barre (Movement & non-verbal behavior):

- Audio (May 2008): <http://SomaticPerspectives.com/2009/05/labarre/>

- Video (October 2010): <http://SomaticPerspectives.com/2010/10/labarre-video/>

Albert Pessa (Pessa Boyden System Psychomotor): March 2012

Jean-Jacques Joris (Equine-assisted psychotherapy): April 2012

Robert Hilton (Relational Somatic Psychotherapy): May 2012

Pat Ogden (Sensorimotor Psychotherapy): June 2012

Jack Rosenberg & Beverly Kitaen-Morse (Integrative Body Psychotherapy): July 2012



Body Psychotherapy: Yesterday, Today, and Tomorrow

By Jan Parker

The field of body-psychotherapy has matured greatly since the publication of Wilhelm Reich's seminal works *Character Analysis* and *The Function of the Orgasm* in the 1920s (Goodrich-Dunn & Greene, 2002). We have progressed from an unrelated group of competing modalities to a recognized system of approaches that have much in common and

that are being taught at universities as either a field of study or as a course on an area of specialization. This article will briefly describe that journey, the state of our field today, and the challenges for the future.

Reich is considered the founder of body psychotherapy (Goodrich-Dunn & Greene, 2002). While Freud wrote about the mind/body connection he did not incorporate those concepts into his approach to treatment. Reich was the first to do so. While Reich himself died an outcast in 1957, the work he began was devel-

oped by others after his death but was split into many approaches.

Ellsworth Baker continued Reich's work by founding the Organomists. These were medical doctors who spent many additional years of training, and there are only about 40 of them in the United States today.

In the early years after Reich's death Alexander Lowen and John Pierrakos founded Bioenergetic Analysis. Bioenergetic Analysis developed five, later six, specific character

structures, brought in the concepts of grounding by standing up, and retained the concept that analysis was as central to the work as the physical expression of emotion.

John Pierrakos later split from Lowen and developed Core Energetics which brought in a spiritual component to the work and moved away from the concepts of character structure. The cultural shift that occurred in the later 1960s created a more fertile environment for the growth of body-oriented

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Pioneers of the Past - The Wave of the Future



By Ann Ladd, 2012 USABP Conference Chair

*Out beyond ideas of wrongdoing and right doing, there is a field.
I will meet you there. Rumi*

Three big waves are coming ashore in the mental health field shifting and reforming the sand castle of psychotherapy: attachment theory, the neurophysiology of trauma, and integrative medicine. Body psychotherapists are very comfortable riding these new directions in the process of healing the whole person. This seventh USABP conference will focus on celebrating the convergence and integration of our diverse membership and claiming our place in the field of psychotherapy.

This ambitious goal, started during the 1998 Boulder conference titled, *Creating our Community*, has been accomplished. Today, the USABP is an umbrella organization that provides a forum for discussion of diverse systems working through the body for psychological healing. The development of a code of ethics and a growing body of literature in the USABP Journal, now a joint publication with the EABP titled, *International Body Psychotherapy Journal: The Art and Science of Somatic Praxis*, and the Conference Proceedings furthered our legitimization as a field of therapy with other professionals. Certified trainings solidified the continuance of the vision and wisdom of early body psychotherapy pioneers. The development of academic programs with 'somatic' in the title breached the traditional route of professional accreditation.

The development of attachment theory and brain, and neuroscience coming from

traditional universities supports our clinical observations and approaches. The way is open for us to engage as equal partners in ongoing discussion of what is healing for clients. We no longer need to justify ourselves as outsiders to the mainstream but take our place boldly at the forefront of what is happening in contemporary psychotherapy.

What's the therapy in Body Psychotherapy?

Starting within our own community, the idea isn't to convert one another, it isn't about agreeing or disagreeing, it's about understanding, about standing aside from the familiarity of one's current position and hearing other points of view—the goal is simply to understand. Questions hold the possibility of new understanding and the power of effectiveness.

The morning plenary sessions address three key questions. Dr. Robert Hilton, an early bioenergetics practitioner and trainer, will

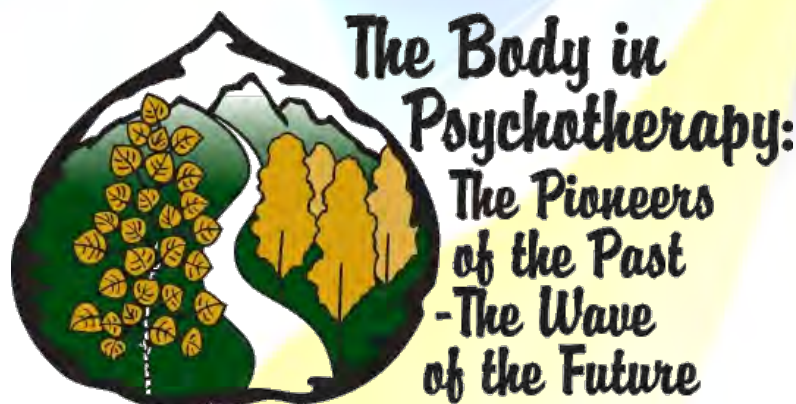
launch the central themes of this conference Friday morning. He will discuss, "How has body psychotherapy developed and incorporated elements of the traditional approach of talk therapy?" Dr. Hilton will also offer his view of how the future may unfold for our field.

The Saturday morning panel entitled, "What's the therapy in body psychotherapy?" will explore the unifying and integrative themes in body psychotherapy clinical practice. The panel composed of six experienced clinicians and moderated by Mark Ludwig, early USABP founder, will address clinical goals and modalities, research needs, training standards, and academic issues.

Following the panel's prepared comments, the conversation will continue in the second half of the morning with the entire assembly at round tables with facilitators and focus questions.

"How do different psychotherapy theories attend to the body experience?" is the question addressed by Dr. Frances La Barre, psychologist and psychoanalyst, at the final plenary on Sunday. A view from the other side of the field, Dr. La Barre expands our view and asks us to move "beyond the polarity of the body as nonverbal and the mind as verbal" and see "speech as action".

The values of integrative medicine are echoed in the diverse set of topics offered





Paramita Campus, Naropa University

by the afternoon workshop presenters—pre and peri-natal influences, eating disorders, yoga, anxiety, body bias, pain management, identity issues, embodied mindfulness, couples, spirituality, anger, trauma, family therapy. These breakout sessions will be held in the cocooning energy of the Paramita campus of Naropa. Our work together is enhanced by entering an environment where these and many other questions are being explored daily by the energy and enthusiasm of the next wave of practitioners.

Returning to Boulder has a tender nostalgia for me. I remember the wonder of a group of like-minded people approaching the complexity of helping others heal through asking the hard questions and putting their growing-edge techniques and theories on public scrutiny. One plenary asked, “Is the relationship important in body psychotherapy?” Did we need to ask that once? Wasn’t it brave to put it up front and on stage? Another panel of innovators and second-generation devotees explored carefully and openly the issues involved in succession: “How to pass on the organization and development of the system to the next generation?”



Naropa University

I remember the relief of release from the isolation of private practice as an outlier. I remember feeling I had finally found my community. I invite you to come and feel the wonder and struggle with complex issues, the relief and pleasure of companions on the path, and the excitement and refreshed energy of opening to new ideas.



Ann Ladd, PhD, is currently in private practice in Colorado and travels to Oregon to lead intensive weekend groups in the Heart of Healing method she has developed over the years. She is also on the Board of Directors for the United States Association for Body Psychotherapy, Treasurer and Conference Chair for the 2012 Bi-annual USABP Conference. She has written a book, *Heart of Healing: A Therapist's Journey with Clients (2010)* that provides a clinical manual, (conceptual maps and techniques), for her integrated, eclectic approach for healing through the body.

USABP Conference Attendees please note that the Annual Conference meets requirements for CEUs. Be sure to check online for updates.

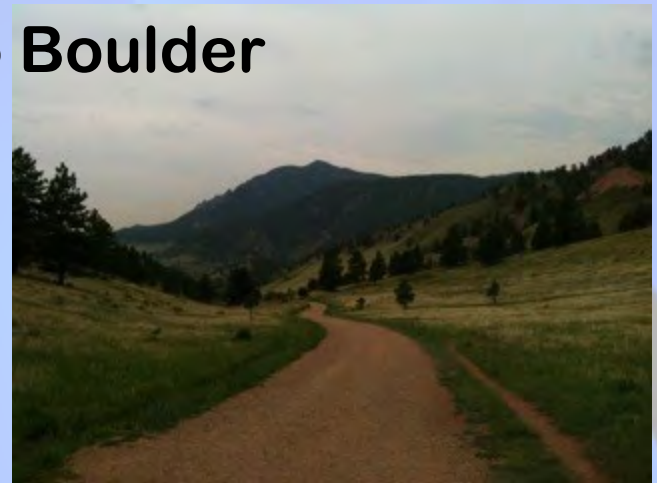
Per CBBS notification: “This course meets the qualifications for up to 26 hours of continuing education credit for MFTs and/or LCSWs as required by the California Board of Behavioral Sciences. USABP is a Board approved provider. #PCE no. 4095” And “This program is approved by the National Association of Social Workers (approval #886443278) for up to 26 continuing education contact hours.”

Other continuing education approvals will be posted at www.usabp.org as they become available.

A Triumphant Return to Boulder



By Ann Ladd, USABP 2012 Conference Chair



The setting for the 2012 Conference couldn't be more appropriate or more attractive. Surrounded by the majestic Rocky Mountains and bathed in Colorado's sunny climate, this year's gathering will focus on the growth and future of body psychotherapy since our first conference here in 1998. Colorado brings pioneers to mind, and the first USABP gathering welcomed many of the early creators of approaches to healing through the body: John Pierrokos, Albert Pesso, Peter Levine, Ilana Rubinfeld, and Lisbeth Marcher to name a few. Bold visions and tireless efforts of our association's founders brought diverse body psychotherapies together to create community and credibility and begin a conversation with our more traditional colleagues. Fourteen years later, we return for the seventh conference as a full-fledged professional organization poised to take our place in the more traditional mental health field . . . and have fun.

The conference sessions will take place in two venues: the Millennium Harvest Hotel and the Paramita Campus of Naropa University. The hotel has many pleasing outdoor areas for gathering with colleagues and friends, a primary value of attending the conference. There are tennis courts, an outdoor swimming pool, and an indoor fitness facility to help us keep our bodies happy, too.



The USABP community will have exclusive use of the somatic psychology campus for the afternoon breakout sessions. The Paramita Campus with its beautiful chapel, pleasant outdoor lawn gathering area, snack lounge, well-equipped classrooms, and meditation spaces provides a grounded and soothing environment. The bookstore and vendors will also occupy space here. The layout permits easy contact with friends in between sessions.

We are focusing this year on keeping the "body" in body psychotherapy conferences! Stretch and movement breaks, morning meditation and tai chi on the lawn, singing and dancing are all part of keeping us refreshed and having fun. The Saturday night dance with a live band is a traditional energy explosion release after the long days of mind focus. Boulder has excellent nearby restaurants that provide fresh, healthy food choices: Turley's all organic and local food; Chez Thuy's fresh thai; and Golden Lotus authentic Chinese to mention a few. Bike rental is available for moving between the two venues. A lovely, tree-lined trail along the river that runs beside the hotel is pleasant for running or biking . . . or if you like, bring your rollerblades.

If you choose to come a day early or stay a few days later to enjoy Colorado, there are many attractions in the Boulder area. The Celestial Tea Factory tour is a highlight for all aging hippies . . . and kids as they gape at robots folding boxes, applying cellophane wrapping, and packaging tea. The Pearl Street Mall with the Boulder Book Store, engaging free summer concert series, and the unique Dushanbe Teahouse all invite a trip downtown. Foodies know that food is a great way to experience a community's distinct lifestyle. Gourmet food is a given in Boulder sporting many top chefs including Hosea Rosenberg, winner of the TV show, "Top Chef". To work off all the calories, Rocky Mountain Park, an easy drive with gorgeous views, offers action-packed outdoor adventures—riding horses, hiking, mountain biking, climbing, exploring.

Nestled in the beauty of Colorado, the 2012 USABP Conference is a return to the site where body psychotherapists declared themselves to the mental health world. With friends and colleagues, this seventh conference provides a chance to celebrate the progress of the past and the promise of our future. Don't miss it! We'd miss you!

We've Come Full Circle, from Boulder to Boulder:

A Story of Seven USABP Conferences

By Mary J. Giuffra



On a Sunday morning in June 1998, sitting in the front row of a spacious auditorium at the Harvest House Hotel in Boulder, Colorado, I proudly watched Hakomi founder Ron Kurtz award the first USABP Lifetime Achievement Award to my friend and mentor, John Pierrakos, colleague of Wilhelm Reich, founder of Core Energetics and co-founder of Bioenergetics.



John Pierrakos

The impetus to attend the First National Conference of the United States Association for Body Psychotherapy sprung from my love, respect, and desire to honor John as he received this recognition. The experience changed my life. One of the attendees said, "I'm attending this part, (the awards ceremony) not just to see John receive an award, but because I knew I'd have my heart opened." Heart opening was John Pierrakos's specialty.

The conference, "Creating Our Community", was an exciting time for this nascent organization. The primary goal was to create a sense of community among numerous schools and disciplines considered part of the body psychotherapy field. According to the co-chair, Mark Ludwig, "everyday started with a plenary covering a broad topic with panelist commentary and a spirited hour of topic-related round table discussion by audience participants," (400 people attended). I was sold on the USABP and their conferences.

As a family therapist, I appreciated Al Pesso's practical workshop on experiencing and correcting challenging family situations. His process felt familiar yet different with a twist of Gestalt. Another workshop that touched me deeply was Peter Levine's workshop on trauma. My heart raced as I watched a film of a frightened Thompson Gazelle running from a cheetah. Some participants rooted for the cheetah but given an older brother who bullied me, I was a gazelle fan. Levine explained that our response could be diagnostic of our trauma history. Twelve other presentations focused on trauma.

Bessel van der Kolk talked about how the body processes trauma (from a laboratory perspective) while Pat Ogden and Kekuni Minton talked about "Bottom Up Processing" where "we're starting from the bottom and we're watching the other levels shift . . . a lot of somatic techniques use cathartic methods which can cause activation from the trauma to go off the scale meaning they're dissociated."

Having been trained in a cathartic somatic method, I experienced cognitive dissonance. Family systems work did not encourage catharsis but my body training thrived on it. It was reassuring to hear Bill Cornell's comment, "When we narcissistically identify with our training, we shape our clients, but our clients don't shape us . . . let's feel that relational force . . . when we're too dependent on the technique, we deaden the space."

Bill's comment reminded me of my NYU graduate school mentor, Martha E. Rogers, when she said, "Humans are continuously interacting with one another, changing and being changed." We were building our community with deeper explorations into our similarities and differences. I was hooked and subsequently elected to the Board becoming USABP's founding vice president.

One can watch the development of the USABP by studying their conferences. At the first conference, community building was the theme. The second conference focused on "The Art and Science of Body

Psychotherapy". USABP took an integrative giant step by headlining the 'art' and the 'science' of Body Psychotherapy. Much organizational work was conducted as two workshops prepared USABP members for the Fourth Plenary Session entitled, "Visioning the Future: A Map to Guide the Strategic Planning Process." After much give and take between the audience and strategic planning committee members (USABP President Peter Bernhardt, committee chair Elliot Greene, and myself), Elliot asked voting members to approve the USABP Strategic plan which was so inclusive and detailed that it is still guiding the organization. We have come far but have much further to go to fully achieve our strategic plan.

It was an exciting conference with keynoters, Allan Schore and Edward Tronick, two of the world's leading researchers in developmental psychology, neurological development, attachment and parent child interaction giving us new perspectives for body psychotherapy. Unfortunately, Tronick became ill; his colleague, Catherine Weinberg, did a superb job of pinch hitting. Since I had taught child development and attachment at NYU, it was a feeling of coming home, another experience of integration. Interestingly, Schore noted, "We are closer to an integration of psycho-neurobiological integration, to overcoming Descartes error, than ever before."

Pioneer presenters included: John Pierrakos, Dean Juhan, Susan Harper, Ron Kurtz, Lizbeth Marcher, Pat Ogden, and more. Alexander Lowen, co-founder of Bioenergetics and a prolific author, received the USABP 2000 Lifetime Achievement Award for his "pivotal work in the evolution of one of the first and most widely recognized approaches to body psychotherapy."

The First Research Award was presented to Pamela Pettinati for her research on chronic pain. Dr Pettinati randomized subjects into a control, group, a non-touch group, a touch group and a body psychother-

Continued from page 15

apy group using Rubinfeld synergy. Ilana Rubinfeld accepted the award for Pettinati acknowledging how scientifically sound and replicable it was for other body psychotherapy modalities.

The Third National USABP Conference marked our time to explore the integration and emerging applications of our developing clinical knowledge, “Convergence & Emergence, the Body in Psychotherapy: Integrative Approaches and Emerging Applications”. There were 60 theoretical and experiential presentations, six panels and four plenary sessions.

Institutes by Lisbeth Marcher and Bonnie Bainbridge Cohen, Al and Diane Pessa, Susan Harper, Ilana Rubinfeld, Bessel van der Kolk, the Hilton’s and others were well received. Rubinfeld received the Third Lifetime Achievement Award. However, she had left early that morning (a previous commitment), so her former student, Erica Goodstone, accepted the award and said: *“I was deeply honored, humbled and saddened at the same time. I could only imagine how Ilana’s face would have gleamed as she ‘qvelled’ with joy looking out at this audience that knows, loves and respects her as a true pioneer in the body psychotherapy profession.”*



There were two amazing keynoters. Ed Tronick applied his research on mother-infant interactions and mutual regulation of mother and child to adult interactions, and Stephen Porges discussed the

“Autonomic Nervous System, New Research and the Clinical Implications for Somatic Psychotherapists”. Many leaders from the field presented including: Babette Rothschild, Joel Ziff, and Jim Kempner. Another highlight was when the USABP Ethics Committee presented a Code of Ethics for Body Psychotherapists to the



membership still in place today. This was another nodal event for the organization. We had a community, a body of scientific knowledge, a strategic plan, and now a code of ethics. The conferences were a vehicle for our growth as a professional organization.

The Body of Life: Body Psychotherapy in the Real World. The Fourth National Conference focused on attachment, sexuality, and health. The goal was to come together as a group to dance, sing, moan and groan, breathe, move, sense, and just be. We decided to keep it in the family so all presenters were members of USABP.



Susan Aposhyan began the conference with an exercise on embodiment. It was sheer delight to have everyone out of their seats and moving their bodies to Susan’s flowing voice. She noted, “We begin this conference by looking

at what embodiment really means and how we cultivate it. The therapist’s own embodiment is the cornerstone of their clinical ability.”

The Lifetime Achievement Award went to

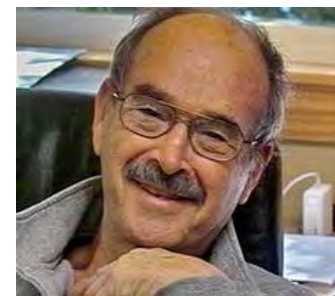


Stanley Keleman, founder of Formative Psychology and Director of the Center for Energetic Studies in Berkeley, California. Thomas Polk gave the keynote address: Science, Mystery and Healing. His presentation was personal, warm-hearted, and touching as he discussed the need for therapists to delve into sometimes unknown aspects of life as we support our clients. He presented body-centered mindfulness exercises to help practitioner and client open the mystery and potential for healing. He had each of us in our bodies as we explored his exercises. It was a time for deep connection.

This was an exciting conference for me as I presented “Biological Couples Therapy”, a theory-based approach to working with couples

synthesizing Bowen’s family systems theory, Porges’ PolyVagal theory, Schore’s attachment theory, and Levine’s use of ethology in working with trauma. Although I studied with Bowen and was a faculty member and supervisor at The Center for Family Learning since the early seventies, I was introduced to other theorists at past USABP conferences. I have studied Peter Levine’s Somatic Experiencing since 2000, and his work informs my practice. If I had not attended the previous three conferences and learned creative and embodied new ways of looking at clients and my practice, my professional life would not be so rich. My clients indirectly benefited because I attended every USABP conference and was exposed to the cutting edge of body psychotherapy and related fields.

The Fifth National USABP Conference entitled, Getting to the Heart of the Matter, included Ron Kurtz, Robert and Virginia Hilton, Thomas Pope, Becky Bosch, and more. We were delighted to present the Lifetime



Achievement Award to Kurtz, a well-loved and respected USABP member. We were fortunate to have him in the USABP as a shaper of who we are and to recognize what a powerful yet gentle force he was in the evolution of body psychotherapy. As I write this, I am reminded of the organic nature of life and death. We have been wise in selecting winners for our Lifetime Achievement Award because we have been carried on the shoulders of these talented and dedicated body psychotherapy pioneers.

The Sixth National USABP Conference saw a return to trauma, “Unraveling Trauma: Body, Mind and Science.” Keynote, neurologist Robert Scaer, talked about complex trauma, dissociation, and the accumulated procedural memories for a traumatic event, while Janina Fisher looked at neuroplasticity and mindfulness in trauma treatment. As people left the hall you heard the buzz of activity and chatter as attendees continued the discussion. Two Plenary sessions: In an



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Unspoken Voice: How the Body Remembers Stress, Trauma and Goodness by Peter Levine, and Formative Psychology: Defining the Stuff of Lived, Learned Experience by Stanley Keleman, were heard and favorably responded to by the total group.

Presentations that caused interesting chatter between breaks included the Research Panel with Rae Johnson, Christine Caldwell, Theresa Silow, Michael Sieck, and Wolf Mehling (who also presented interesting research on touch). I moderated a fascinating panel by trauma experts. This well-attended panel received top evaluations from all attendees (many identified it as a favorite). Panelist Thomas Pope presented a case presentation of rape trauma followed by Judyth Weaver on birth trauma. Scott Baum discussed soul murder. There was a pregnant stillness in the room as Peter Levine coached the entire audience in making “voo” sounds to help them stay present and process some of the intense emotion in the room. It was a rich afternoon.

Attendees received wide exposure to cutting edge trauma treatment. The biggest complaint was the difficulty in choosing workshops from such a rich and satisfying smorgasbord. Populations discussed in workshops included military veterans, the elderly, college students, fathers, couples, roots of family trauma, serious illness, oppression, dementia, growing up gay, developmental trauma, trauma in Northern Uganda, racism, war torture and mass trauma.



There was a full house at the Award Luncheon honoring Peter Levine as he received the USABP Lifetime Achievement Award. I met Levine at the first USABP National Conference and was taken with his approach to trauma. He remains my mentor. Levine teaches that trauma is in the body and not in the event, and that trauma is a fact of life but is not a life sentence.

When Levine received the award, his honesty, humility and gratitude touched my heart. It is poignant that I had attended the first national USABP conference to honor my first body psychotherapy mentor, John Pierrakos as he received the first Lifetime Achievement Award, and now at the sixth USABP conference, after 13 years as founding vice president and board member of USABP, I was honoring another mentor who had transformed my understanding of the body, trauma, self-regulation and resiliency. The circle of life continues.

And now we are dreaming of our Seventh National USABP Conference, “The Body in Psychotherapy: The Pioneers of the Past, The Wave of the Future”. The circle continues as we return to the site of our first national conference, Boulder, Colorado. In most cultures the number Seven has a special potency, seven brides for seven brothers, the seven Sullivan brothers, seven sons, seven seas, seven senses. The Pythagoreans (other cultures as well) consider seven a sacred number: seven ancient wonders of the world, seven sages, seven sleepers of Ephesus, seven colors of the rainbow, and seven days of the week. Apparently seven is a spiritual number and is composed of the number three of the heavens and soul and the number four of the earth and body. It represents perfection, security, safety and rest. What a lovely number to begin our conference!

Mary J. Giuffra PhD 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 developed Biological Couples Therapy, and has published chapters in books, articles in journals and presented internationally.

This is an excerpt from a larger article. To read the story in its entirety visit www.usabp.org and follow the link to Somatic Psychotherapy Today for the full story.



ATTACHMENT, TRAUMA AND THE BODY: THE USE OF SENSORIMOTOR PSYCHOTHERAPY

By Janina Fisher

Early experiences of attachment are body-to-body experiences: holding, rocking, feeding, stroking, gaze-to-gaze contact. Rather than using words, we communicate to infants with coos, mm's, and terms of endearment that evoke a lilt in the voice of the speaker. Preverbal children take in the warm gaze, the smile, the playfulness, and respond with sounds and smiles of their own, soothing or brightening in a dyadic dance with their caregivers (Schore, 2001).

But, equally, infants and young children take in the body tension of the caregiver, the still face (Tronick, 2007), the rough movements, the irritable tone of voice. Their immature nervous systems are easily alarmed by intense emotional reactions, loud voices, sudden movements, anger or anxiety in the mother (Lyons-Ruth et al., 2006). Whether care giving promotes secure attachment or is "frightened or frightening" (Lyons-Ruth et al., 2006), these "right brain to right brain," body-to-body experiences are later remembered not so much as verbal narratives but in the form of "body memories"—procedurally learned emotional, autonomic, motoric, visceral reactions (Ogden et al., 2006; Tronick, 2007). Each attachment style reflects a different emotional and body adaptation to the relational environment.

Mariela, a young woman in her early 20s, came with her mother to consult about her intense emotional reactivity to mis-attunement in her relationships with men. "I don't think it has anything to do with trauma, though. My only trauma," she said, "was spending my first nine months in a Romanian orphanage, but that can't be a trauma because I don't remember it."

After hearing about Mariela's anxiety, depression, intense swings of approach and avoidance in intimate relationships, and difficulties managing her emotions, I felt comfortable explaining to both mother and daughter that her behavioral and emotional responses were often found in traumatic attachment patterns observed in children who have experienced "frightened and frightening" care giving (Main & Hesse, 1990; Lyons-Ruth et al., 2006).

As Mariela recalled the first weeks of being in love with a boyfriend, how warm she felt inside during those early stages, she became aware of the physical sensations of 'opening' in the chest and heart area. Her intense yearning for the physical and emotional sensation of contact with another left her body open and exposed, which she expressed by opening her arms wide to show her therapist the extent of her vulnerability at these times. Without an ability to open by degrees as a relationship deepened, she was left vulnerable to the inevitable misattunements found in any relationship. Describing what happened next as a boyfriend might arrive late or forget something important to her she folded her arms across her chest and set her chin. As the therapist interrupted the narrative of these empathic failures to help her notice the posture, Mariela laughed. "I guess I just close up, and my body decides never, ever to open again."

For Mariela, the newfound awareness of her body's role in these relational impasses led to a somatic education about attachment and the body. Using her arms, the therapist demonstrated how a child in a secure attachment promoting family might learn to tolerate separations by closing her chest a little and refusing to say goodbye, then open physically and

Each attachment style reflects a different emotional and body adaptation to the relational environment.

emotionally just a little to the caretaker who came to mind her, then close a little if tired or feeling some separation anxiety then open again on reunion with the parent while still able to close again to screen out any over stimulating or distressing interaction. This embodied explanation encouraged Mariela to take the next step in a Sensorimotor treatment—to see how movement and action might contribute to changing the attachment ‘memories’ in her body.

Young children in secure-attachment promoting environments learn early on to execute ‘acts of triumph’, to use their bodies to say “go away” or “come closer” or “I can do it myself”. Successful execution of these actions generally increases the ability to auto-regulate in the face of the inevitable disruptions and separations of childhood. In Mariela’s case it was adaptive for her body to retain the capacity for wide-open receptivity in the orphanage environment to maximize any relational contact but also to develop an equally strong capacity for ‘armoring’ in the context of neglect and danger.

After demonstrating with her arms how a child might develop healthy flexible somatic boundaries, the therapist invited Mariela to use her arms in the same way and ‘notice what happens’. Mariela explored how it felt in her chest and heart area as she moved her arms out from her body in a wide-open posture, then slowly brought her arms in closer to her body. She was aware of feeling more solid and less exposed as her arms closed the circle and noticed that it was a different and more comfortable feeling than the arms-across-the-chest posture usually evoked by misattunements and disappointments. A thought came up that she would miss the ecstatic sense of closeness that went with the early weeks of a relationship but that was quickly followed by her awareness of the price she paid for that euphoria. The therapist again demonstrated how the arms might open wider as she got to know someone well enough to develop trust or at least be able to anticipate what

disappointments would ensue in a particular relationship.

In subsequent weeks of therapy sessions, as Mariela experimented with reaching out toward someone with her arms and hands, she could feel her body tense and an impulse to pull her hands back, but she also observed the same reaction when the therapist reached out towards her. With the yearning for closeness that had dominated her consciousness since her teenage years came automatic defensive responses: tensing, bracing autonomic arousal. Observing these tendencies allowed Mariela to practice relaxing her body as she reached out or as the therapist reached out to her. Experimenting with a gesture of reaching out with one hand and making a Stop gesture with the other afforded her the opportunity to experience without words how healthy boundaries allow closeness to others and to feel safer.

Attachment relationships are the body’s way of ensuring safety, and when safe attachments are not available the body must adapt. Early on, the baby’s body must make an adaptation to the quality of the attachment field—at times laughing and smiling while crying or collapsing, and shutting down emotionally and autonomically. Sensorimotor Psychotherapy allows client and therapist to work with these very early preverbal interactions at the level of muscle and autonomic memory. The experience actions in the context of attuned, interactive, psychobiological regulation is not unlike the experience of securely attached young children.

Interactive, psychobiological regulation is not unlike the experience of securely attached young children. In Sensorimotor work, though, the client is encouraged to become a mindful witness and collaborator. As Mariela was able to notice her bodily and emotional reactions *in vivo*, rather than retrospectively, she was able to inhibit explosive responses and relax the body in relationships. Practicing her new movements and somatic resources inside as well as outside of therapy helped her to have alternatives when dysregulated by attachment hopes and fears.

Finally, her ability to stay present in the context of emotion allowed her to witness being witnessed by her therapist and by those she loved. ‘Highjacked’ by the body memories of abandonment and threat, Mariela, hadn’t ever been able

to take in the experience of being ‘seen’ and valued by others in her life. Witnessing their witnessing began to challenge her shame and sense of defectiveness.

Mariela has discovered that the experience of safety in relationship is as much a body experience as it is an emotional one. When arousal is within the window of tolerance, when the body feels both solid and relaxed, and when we can tolerate a gamut of emotions without feeling either overwhelmed or numb, we know we are finally ‘safe.’

Janina Fisher, PhD is an Instructor at the Trauma Center, a clinic and research center founded by Bessel van der Kolk. Known for her expertise as both clinician and presenter, she is Assistant Director of the Sensorimotor Psychotherapy Institute, past president of the New England Society for the Treatment of Trauma and Dissociation, an EMDR International Association Consultant, and former Instructor, Harvard Medical School. Dr. Fisher has authored a number of articles on trauma treatment and lectures nationally and internationally on the integration of the neurobiological research and body-oriented psychotherapy into traditional therapeutic modalities.

*References are located online at www.usabp.org
Somatic Psychotherapy Today
Spring 2012*

Join Pat Ogden as she discusses



“Implicit Conversations, Therapeutic Enactments and Dissociation: A Sensorimotor Psychotherapy Perspective.”

at the **USABP Conference**. She will address unconscious communications that take place beneath the words during therapy that are arguably more significant than content, reflecting the ‘implicit self’, which might be relatively unified, or comprise several dissociative parts of the self. Her workshop will explore dissociation, including structural dissociation that develops along evolutionarily prepared psychobiological systems, embodied mentalizing, and therapeutic enactments. Dr Ogden will address how working within a clinical process that is ‘safe, but not too safe’ supports integration of dissociative parts and negotiation of enactments. Concepts will be illustrated through excerpts of videotaped therapy sessions with adults and children, and brief experiential exercises.

Relational Somatic Psychotherapy

An Interview with Robert Hilton PhD



By Nancy Eichhorn

“If it is bad human relations that created the problem then it must be good human relations that can provide the cure.” (Guntrip, 1994, p. 401)

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here’s grace in feeling met, sensing another attuned to you. You feel heard, but more than that, you feel as if the person you’re with totally gets you. The term attunement is often used to describe the ability to react to one another’s moods and feelings—to detect what another person is feeling and to reflect those emotions back through facial expressions, gestures, vocal features, and other behaviors. When two people are attuned both tend to experience positive emotions; when they are out of sync, feelings of discomfort and distress often result.

Attunement has been associated with mothers and infants as well as with therapists and patients. In terms of psychotherapy, attunement is a central part of the healing process. The therapist’s ability to perceive the nuances of a patient’s response and respond in a way that accurately captures the sense of how that patient felt in the moment is essential to creating a healing relationship. Therapy is not about technique, it is about relationships.

“Theories and techniques are what we use until the therapist shows up,” says Robert Hilton PhD, therapist, teacher, author, and co-founder of the Southern California Institute for Bioenergetic Analysis (SCIBA) (celebrating its 40th anniversary this year). Hilton, a pioneer in the field of Relational Somatic Psychotherapy, is a keynote speaker at the USABP 7th National Conference in Boulder, Colorado.

“I have witnessed the ever changing constancy of body psychotherapy. Techniques change but the goal remains the same—the integration of mind and body,” he shares. “The first big change in body psychotherapy (for me) was the understanding for the need for relationship. Whether it was through attachment theory or object relations theory, I realized the critical importance of the relationship with the therapist to the discovery of our true Self.

“It takes two to make one,” Hilton continues, citing an oft used quote by Donald Winnicott, a British pediatrician and psychoanalyst. “The counter transference of the therapist—how he or she influences the client or patient—is critical in this process of becoming. When the therapist experiences what he is trying to get the patient to experience, the patient gets better. This happens when the therapist can ask himself, ‘What feelings does this client create in me that I am resisting acknowledging. Is it fear, anger, sadness, longing?’ And almost always that is the feeling that the patient is resisting experiencing with you.”

“My first supervisor in graduate school was a Freudian analyst. There were four of us graduate students in a small group who would work with clients and then present our cases to him for supervision. On one occasion he said to me, ‘Bob, you think your clients would be better served if they had me or Freud for a therapist. Well they don’t have me or Freud, they only have you, and the problem is you are not giving them who you are. You are trying to be someone else.’ At that time I had no idea that who I was in my authenticity could possibly be a healing agent.”

Hilton initiated his training in 1968 with Alexander Lowen, MD, a former student of Wilhelm Reich. Lowen was an American psychiatrist who developed Bioenergetic Analysis, a form of mind-body psychotherapy, with John Pierrakos, MD (retrieved from <http://bioenergetics-sciba.org/about.html>). Hilton also worked with Stanley Keleman, who developed Formative Psychology™ which teaches

Continued on page 21

individuals how to participate in their own formative process (retrieved from <http://www.centerpress.com/about.html>). By 1972, Hilton and his colleague, Renato Monaco, M.D., had founded SCIBA.

“Renato and I began our training program, and we didn’t charge anyone the first two years because we didn’t think we knew enough,” Hilton says, then laughs at the newness of their belief and the passion behind their process. This was the beginning of an in-depth curriculum that Hilton created for the Southern California Institute that he continues to develop today.

Working with the bioenergetic techniques that were taught at that time, Hilton felt something was missing—namely, the sense of an open and deep connection between therapist and patient that could be utilized as part of the therapeutic process and recovery of the real self. Whether the gap was due to the bioenergetic theory or the personality of the therapist, the reality was that a relational process with the therapist was not available for exploration.

In regards to the relational aspect of therapy, Hilton stresses that in relation to others we are constantly forced to face our love and our helplessness at the same time. However, before our clients will acknowledge this truth, they need to know that we can accept this dilemma in regard to them as well as to ourselves. Hilton worked with a client who came to him for therapy and asked that he not use bioenergetics or body work with her. She had already been through therapy with a Bioenergetics therapist, and in fact had become a local trainer in this field.

However, she knew she needed something else. She was not sure what but felt certain it was not bodywork. Yet, she came to Hilton knowing his commitment to the importance of the somatic aspect of the therapeutic process.

“I accepted her challenge, and she began to teach me what she needed,” Hilton says. “Basically it was for me to become thoroughly familiar with object relations theory and practice. I read the books she recommended and attended conferences on this subject. One day she came to the session very depressed. She had been exploring the use of various antidepressants, and they did not seem to be working. I felt deeply for her, and I also felt that I had many ways of helping her by using my understanding of the body and its relationship to her depression. I knew for instance that if she could reach out toward me and allow me to contact her that it would break the cycle of her aloneness. Each time I suggested a somatic technique, she reminded me that I was doing that for me and not for her. I finally said, ‘You are asking me to sit here and watch you drown.’

She said, ‘Yes, Can you do that?’

I replied, ‘I don’t know if I can.’

I found myself sitting back in my chair with my eyes closed and became aware of what she was asking. She simply wanted me to be with her. I was aware that I had many techniques that could save her and me from this moment. I also felt how little I believe that presence alone would be of any help. But I also felt I must stay with her in the way she needed me to be. When I looked up I saw that her face had changed. Instead of the torment of depression there was a smile and a gentle feeling of love in her eyes. From this place

“I realized the critical importance of the relationship with the therapist to the discovery of our true

she slowly reached out to me to make contact. She said she had witnessed my struggle to give up everything I knew and was sure of in order to be with her. She now felt safe, loved, and loving. I hardly knew how to accept her accepting me in my humanness. I was being loved and healed by her as I surrendered to my love and my helplessness.”

Hilton’s work focuses on the development of the Self and the relational constructs that go with it. He notes that everyone who comes to see him as a therapist has a conscious or unconscious cry that says, “I want my life back. Help me remember and recover what I have lost.” He recalls in his early days as a therapist working with a client for several years who finally suggested that they stop. Hilton says he had a mixture of feelings. He knew she wanted something that somehow he could not give and there was a certain relief in her leaving—he wouldn’t have to face his own self-perceived inadequacies. She stayed away for about a year and then came back. During their first session, she broke into sobs saying, “You let me go.”

“I knew in my belly exactly what she



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meant,” Hilton says. “I had to admit that I did, and hearing her cry was like hearing me cry out to my own mother. I had become my mother to her, and she was crying my tears. We sat on the floor, and I held her as we both sobbed. In not having been able to fully mourn my own loss I had not been able to help her face that same loss when she left. Her courage in coming back and confronting that loss was now giving us both a chance to be with and eventually to leave each other in a different way than we did with our parents as children.

“The first big change in body psychotherapy (for me) was the understanding for the need for relationship.”

“I cannot over emphasize the importance of having the capacity to mourn and then surrendering to it. Early in my therapy I was told that my tears were my life. In order to mourn you must have had an internalized good object. You cannot mourn what you have never had. For the traumatized child, tears only lead to further isolation. We, as therapists, must provide the contact and the bridge to the deepest loss of our clients. Grieving is the body’s way of renewing and maintaining our love and allowing our softness to return.

“Our longing needs to be embodied. We need to allow it to find expression in our eyes, mouth, face, and arms. When you watch a newborn nurse you discover that his whole body is involved from the top of his head to the bottom of his feet. As he nurses over time he eventually makes eye contact with the mother, and in the contact he begins to experience how safe it is to be so vulnerable and needy. He also tests her commitment over and over to know if this contact that is so essential for his life is really for him and not for her. The mother needs to have a belly full of love in order to allow herself to give without demanding that it be returned.”

Five years ago, a former Bioenergetics student combined Hilton’s teaching materials and lectures and published, *Relational Somatic Psychotherapy: Collected Essays of Robert Hilton PhD*. “It was a gift of love,” Hilton says, a sense of honor present in the quiet touch of his voice. He underscores in the text the importance of giving in to the body to release the deepest cries, saying that with this release we reconnect with who we are. Our cries, he writes, are essential. They are affirmations of our wounded selves which allow the reintegration of the split in our personalities, bringing ego and body together as a single self-affirmation.

Over the past 40 years, as Hilton continues to experience and explore, to learn and share, he emphasizes that crying alone

is not enough to *sustain* contact with the Self. In the same way that our cries alone are not enough to keep our psyche/soma soul together as children, they are not enough now as adults. In the same way that we needed certain responses from our caregivers then to keep body and soul together, so we need them now. We need to allow the tears, but we also need a relationship that will provide a certain kind of nurturing environment where we can sustain contact with our fragile self.

“I am a privileged partner in another person’s journey of life,” Hilton says. “My task is to wait, watch and wonder at the mystery of another being, like myself, in their struggles to be who they are or want to be. From this perspective I have a deep felt body compassion for my fellow sojourner, which I describe as love. I offer a quotation from A General Theory of Love where the authors say, ‘Loving is mutuality, synchronous attunement and modulation.’ All of our interactions with each other are relational and somatic but not all of our interactions are therapeutic. They become therapeutic when we are able to incorporate the experience of love within them. To get there we must constantly open ourselves to the expression of our anger, grief and longing. We can only do that if in fact someone cares deeply enough about us to join us in that journey.”

To learn more about Relational Somatic Psychotherapy, where it’s been and where it’s going, be sure to attend Dr Hilton’s keynote address at the Boulder, Co. conference August 9-12, 2012. And by listening to his May 1, 2012 conversation with Serge Prengel on Somatic Perspectives (<http://somaticperspectives.com/>) sponsored by the USABP and the EABP.

Robert Hilton, PhD has been in private practice in Orange County, California for 45 years and has taught courses at the University of California at Irvine and San Diego, and the United States International University in La Jolla. In 1972 he co-founded the Southern California Institute for Bioenergetic Analysis where he continues to be a senior trainer. He is a member of the American Psychological Association, the California Association of Marriage and Family Counselors and the International Institute for Bioenergetic Analysis where as a senior faculty member emeritus he lectures at their International conferences as well as teaching throughout Europe, the United States and South America. In addition to his many publications he is the author of *Relational Somatic Psychotherapy: Collected Essays of Robert M. Hilton.*, Michael Sieck, editor.

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The graphic features a gold trophy on a ribbon, set against a background of laurel wreaths. The text is in bold, black and gold fonts, with a gold border around the entire announcement.

Parker continued from page 11

psychotherapy and many new were created (Goodrich-Dunn & Greene, 2002). It was a time of both growth and individuality so each person put their own unique stamp on the approach she/he developed even though all of them had many aspects of their theories in common.

The concepts of Humanistic and Gestalt therapy were integrated into body-oriented approaches as well. All believed that healing needed to include work with the body and many also incorporated some kind of verbal processing of the emotion(s) aroused. Pioneers such as Stanley Keleman, Charles Kelly, Al Pessio, Diane Boyden, Ilana Rubinfeld, Ron Kurtz, and Malcolm Brown brought new ideas to the work. Stanley Keleman developed Formative Psychology which uses a five step process based on voluntary muscular movements to help the client develop a somatic identity (Barshop, 2004). Ron Kurtz developed Hakomi which delineates eight character styles and approaches therapy from a mindfulness state. Charles Kelly developed Radix which focuses on pulsation and releasing the blocks in the body by tracking the life energy flow and working with the armoring and soft places where the flow is constricted.

Body-oriented approaches began to spread to Europe in the late 1960's (Goodrich-Dunn & Greene, 2002). David Boadella, Gerda Boyesen, and Malcolm Brown helped to develop different body approaches.

As travel between Europe and America became easier and less

expensive more collaboration among therapists in different locations continued to develop. The original theorists refined their approaches and others came along and added to them.

By the early 21st century, for example, Bioenergetic Analysis has incorporated many of the concepts of attachment theory into its explanation of character structure which began with Wilhelm Reich.

The 1970's through the 1990's was a time of development and integration for the theories developed arising out of the work of Reich (Goodrich-Dunn & Greene, 2002). The influence of Humanistic and Existential psychology softened the approach of some of theorists and led to the creation of other approaches as well. Hakomi, Radix, Rubinfeld Synergy, and the work of the Browns, and the Pessios became more consolidated and clear.

Today the work in neuropsychology is confirming what we in body-oriented psychology have been writing about for years. Dan Siegel states that the brain exists in the head, the heart and the gut (Siegel, 2010). He talks about the mind/body connection from a scientific point of view, and he is being heard everywhere.

Allan Schore and others are also contributing to this body of literature. It is important that we bring our collective wisdom and experience to this discussion as we have much to add to it.

At the time this article is written there are at least 41 different body-oriented approaches to working with clients (Barshop,

2004). What began as a splintering of differing approaches has begun to become a more cohesive group where there is a sharing of modalities rather than a strict division. This began with the development of USABP as well as EABP and continues as well with the formulation of university curriculums devoted to body-oriented psychotherapy as a major area of study.

While there are only three schools with these programs currently, John F Kennedy University, Naropa, and the California Institute of Human Science, it is encouraging that some other schools are developing courses where body-oriented therapy is studied.

As we move into a more integrated field hopefully we will continue to increase the collaboration between modalities. This is one of the challenges facing body-oriented psychotherapy as a field in the future. It is this author's opinion that the more we concentrate on the differences between the various approaches rather than the similarities the less progress we will make in having body-oriented psychotherapy accepted as a viable treatment approach by main-stream psychology.

The American Psychological Association's finding that body-oriented psychotherapy is not an evidence-based treatment and thus is not eligible for continuing education units through the APA is an indication of the need for us to work together to change the perception of our field of psychology through increased research, publications, and conference presentations. We will only accomplish

this by focusing on the similarities rather than the differences in our treatment perspectives.

The USABP conference in 2010 was my first such conference. I was struck by what I perceived as a lack of acceptance of the difference in the approaches among many of the participants. As someone who believes that there are always many ways to get to the same place I was concerned by this. In the 'talk-therapy' world the meta-analyses of treatment outcomes have shown that the treatment modality is not the most important variable. Rather, the client's belief that the therapist can help him/her, the therapist's ability to instill hope, and the quality of the therapeutic alliance are all more important than the therapeutic orientation of the therapist.

I strongly believe that it is essential for all of us who believe that working with the body is an important part of the path to wellness to work together and to welcome everyone under the umbrella of body-oriented psychotherapy. This is one of the goals of the 2012 conference. By looking at where we came from and focusing on where we are heading, it may be possible to become a more united field where the similarities are more important than our differences.

Jan Parker, PhD, MFT, CBT is a Certified Bioenergetic Therapist and Executive Director of the San Diego Institute for Bioenergetic Analysis. She is a psychology professor at National University in La Jolla, CA where she has taught for 22 years and has a small private practice in Poway, CA. She is the co-author of *The Clinician's Guide to 12-Step Programs* as well as journal articles and conference presentations.

References are located online at: www.usabp.org/Magazine

Off the Cushion and Onto the Horse: Equine-Assisted Mindfulness Practice An interview with Jean-Jacques Joris, JD, MA

By Nancy Eichhorn

“Mindfulness is a skill that should not be limited to the silence of a meditation hall. Honing the clarity of your intention and attention are skills you carry beyond your meditation sessions into your life in general.”



Studies have shown the powerful effects mindfulness meditation has on physical, mental, and emotional health. Defined by Jon Kabat-Zinn as “paying attention in a particular way; on purpose, in the present moment, and nonjudgmentally,” mindfulness implies a set of skills learned in meditation. Yet, the idea of sitting silently with oneself might appear daunting to some, while others may fear that sitting cross-legged on a cushion struggling to quiet mental chatter be simply a time-out from the regular patterning of their otherwise restless life. For those skeptics who still yearn to break free from routine and their limiting sense of self, wishing to disrupt that sense of, ‘this is how my life is’, and experience life anew from a

conscious, mindful vantage, a session at Twin Oaks Farm might offer just that.

“**Mindfulness** is actually something we should be practicing off the cushion,” says Jean-Jacques Joris, JD, MA, a counselor offering equine-assisted psychotherapy and co-owner of Twin Oaks Farm Center for Equine Therapy with his wife, Isabelle. “Mindfulness is a skill that should not be limited to the silence of a meditation hall. Honing the clarity of your intention and attention are skills you carry beyond your meditation sessions into your life in general.”

“**My approach** is mindfulness-based and resource-based. Mindfulness starts in the body, noticing how inner somatic experiences interact with our environment. Our experience of the present moment is made of our perception, and what we perceive is influenced by previous experiences, so how do we observe just what is out there?”

“**I’m not sure** we’re able to erase the filters through which we look at the world, but becoming aware of them allows us the opportunity to look again, to revisit what is out there. Mindfulness opens a gap, in which we have the choice to not carry the past into the present, and to take instead a fresh new look at what is in front of and within ourselves.”

“**I see people** come into a pen with two or three horses, they are petting one horse when

suddenly that horse walks off. I ask, ‘What are you noticing?’ and the person says, ‘Okay, that horse I just petted rejected me, it did not like me and walked away from me.’ So I invite my clients to tease apart what they actually observe from what they think they’re seeing, encouraging them to be aware that whatever they see is tainted with interpretation. As they look around with open, unbiased awareness, they may notice that another horse was coming their way and realize that perhaps the horse they were petting didn’t walk away from them but from the other horse whose ears are back and is flashing his teeth. Becoming aware of the gap between what they see and their interpretation opens their lens, allowing them to notice what they hadn’t seen and to revisit what they might have taken for granted. Not that we should not interpret what we see or hear; after all, we need to make sense of the environment we live in, but not mistaking a projection for an observation is immensely liberating.”

Jean-Jacques speaks from a rich depth of personal experience. A diplomat for 15 years working in highly charged environments, Jean-Jacques bought a horse while he was working at the UN War Crimes Tribunal for the Former Yugoslavia. The tensions of his job and the magnitude of the horror he was dealing with were negatively shading his view of the world, and he hoped riding





would provide respite and comfort. Typically, he would go to the stables at night, putting a happy face on his suppressed inner emotional turmoil. Whenever he approached his mare, with a large smile and carrots in hand, the horse's ears laid flat back on her head, her white-circled eyes threw darts at him, and she stood as far from him as she could in a corner of her stall.

“I asked myself, what's wrong with that horse? She was a wonderful mare, so sweet in the pasture when I bought her, and now she's so shut down and aggressive. For a couple of weeks after that all our interactions were unpleasant. She was reluctant to be haltered, she would bite me when I was grooming her and riding was horrific. I was at the end of my rope. That's when I spoke to the horse, naming what was going on for me. I said, 'I'm feeling hopeless, sad, rejected. You hate me, what am I doing wrong? I am feeling inadequate.' The horse came to me, put her head against my heart with her eyelids down, and breathing softly she leaned against me.

“All it had taken was to turn around the focus of my question from the horse to me, and ask, 'What's wrong with me? What am I bringing to the field of our relationship?' I realized it was not about the horse. I started reading about horses, not about riding or performance-based experiences, but about the horse-human connection.”

This experience introduced Jean-Jacques to mindful horsemanship. He had always loved horses but could not quite envision a career

change in that direction. Yet, he was ready for something else so after a last, three-year tour in the Middle-East, when he serendipitously read about equine-assisted psychotherapy, he resigned from the Swiss Foreign Service, moved to Colorado, and went back to school. Two years ago, Jean-Jacques and his wife Isabelle opened Twin Oaks Farm

as a center for equine-facilitated psychotherapy and healing arts, as well as a riding and boarding facility. The 65-acre historical farm is home to his 13 equine co-therapists (plus some llamas, and goats). The horses team up with clients interested in psychotherapy, mindfulness practice, yoga, conflict transformation, and the healing arts.

Most people do not have horses as part of their lives. Working in tandem with horses takes them out of their habitual patterns and opens up a space where they can reconnect with their “beginner's mind” and see things fresh, anew. The horse is not a therapy prop or an object of gratification. It is a partner in the process, a sentient being complete with a full spectrum of emotions (including sadness, anger, fear, love, joy, playfulness, grief and depression) and mirror neurons which enable it to perceive our emotional states, including those we try to hide.

Horses offer a different model for being in the present moment because they are 100% present. Their sense of hearing is more developed than humans, and their attention rests firmly in the here and now. How you relate to a horse in the present moment can offer uncanny metaphors for what's going on in your life, to what is relevant in the moment and outside the arena, Jean-Jacques says. Horses give you immediate feedback about your own actions and body language through mirroring. If you are tense and nervous, the horse will mirror this feeling. In the equine

assisted therapy setting, the horse triggers thoughts, feelings, emotions, and body sensations.

“In equine-assisted therapy (just as elsewhere in their lives), many clients walk into the pasture or arena and say, 'I am afraid, concerned, anxious. The horse will see through me and reject me.' They carry self-defeating beliefs that limit their own life. If they do not offer acceptance for those feelings, horses will mirror that, turn around, and leave,” Jean-Jacques says. “We can then work on the reality of what is happening in their lives, and, most importantly, on the role that their beliefs about themselves and their behaviors play in shaping their environment's response. Trying out new roles is a creative, playful, and restorative dimension of this work. When horses react well to it, I know that the clients have manifested a true aspect of themselves, albeit one that they might have pushed back out of their awareness. You cannot fake it with a horse, if it works, it is real. In that mirroring interplay, horses are partners to interact, communicate, negotiate, and play with.”

While talk therapy often relies on recast stories of past events, equine assisted therapy is immediate and largely nonverbal. Communicating effectively involves 10% word content, 20% expression (how words are said), and 70% body language. Horses react to all three signals, even words, whenever spoken authentically and in alignment of cognition with emotion. Horses relate to humans and to their environment in a way that we, as city dwellers in the 21st century, have forgotten, Jean-Jacques explains. They invite us to relate differently to our environment, and touch



the interrelatedness of being as we fully reconnect with our senses (touch, hearing, seeing, smelling) and all things in nature.

“Here, in Boulder, most people go outdoors with a purpose. When going to jog for 30 minutes or spending 45 minutes talking with someone on a hiking trail, how much connection with nature and environment can you have?” Jean-Jacques says. “Time with horses allows for contemplation, to see what’s inside and out, to see what is happening around you, to pay attention to sounds of wind and eagles flying. There is the pasture and mountains, trees, clouds, and sky. It’s about reconnection, opening up the scope of your experience, from the tunnel vision of neurosis to the vastness of life. And when someone leaves after a session, it’s not that the good time they had was incumbent on the horse and cannot be reproduced in ordinary life circumstances. On the contrary, thanks to the contact with the horse, they found their way back to their own inner aliveness and resources, thus taking a first step towards reclaiming a fulfilling life.”

Boundary work—accepting the necessity of healthy boundaries and/or rebuilding them, especially with incest and sexual abuse survivors—is a huge area of work with horses. Jean-Jacques explains that boundary issues often play out as the horse, unprompted, senses the lack of boundaries and comes right up to the client, invading her space, becoming a little mouthy and pulling on the client’s shirt sleeve. Clients do not necessarily freeze, but they often let themselves be invaded. Jean-Jacques will ask, “Is that comfortable? Is this fine for you to have this horse in your space and pull on your shirt button like that?” Most clients will admit that it is not comfortable, but then add something to the effect that they don’t want to risk losing the horse’s ‘affectionate attention’ by pushing him back.

So Jean-Jacques poses the question, “what would it look like to have a mutually respectful relationship”, knowing full well that the answer is not hidden in the past but exists in the present moment working to build spatial awareness, mutuality, respect, and boundaries with a horse. One of his goals is to support clients to say, “No” and know that it will

not end the relationship, but rather initiate a more satisfactory one.

“Horses react to congruence,” Jean-Jacques says. “When you can align cognition with your emotion, acknowledge and name your feelings and your emotions, neither suppressing, nor acting out on them, but making peace with them, horses react gently and accept you. On the contrary, when people suppress their emotions, be it fear, anger, or sadness, horses may show aggressiveness toward them. I have had to step in between the horse and client and ask the client to tell the horse what is going on, to name it, and offer it some acceptance. The horse then feels safer and comfortable in their presence, thus validating clients’ honesty and compassion towards themselves, whereas the energy and dissonance of inner conflict stresses them out.

“Abuse survivors explore what safety is all about, what they need to do in order to be safe. There are a number of things I can tell you about horses, be careful with this and that. I can say things about their ears moving back, their tail swishing, about their legs, mouth, and nostrils, but safety is not a list of do’s and don’ts, not a recipe. It is an experiential process that involves awareness of oneself and one’s environment. I can tell you what you ought to do with horses, but horses are unpredictable. You have to find a place of safety within yourself first, in order to move safely in a constantly changing environment, and develop the ability to ask yourself “does this feel safe to me, yes or no?”

Boundary setting is often difficult for incest survivors. Some are hyper-sensitive to safety and some have no feeling of danger at all, particularly if they experienced repeated relational patterns of abuse. Unless the situation warrants immediate action, Jean-Jacques will let clients interact freely with the horses. When things could become dangerous, he will often say to a client, “Let’s take a pause here. Come and me tell what you are observing.” He will invite them to open up their scope of vision and gain awareness of unseen risks. He might, for instance, help a client realize what being cornered by three horses with no way out may imply for him or her.



“Not rescuing clients, unless absolutely necessary, but helping them better assess the situation is truly empowering. This work helps clients reconnect with their intuition and develop the ability wherever they are to take stock of what is going on, to observe and not project their own related sense of safety or danger onto the scene. It teaches them to take a fresh look and see there is no way out and ask, ‘Does that feel good to have three horses surrounding me in a corner?’ With this reflection, clients are creating new insight that will shape their reaction in different situations elsewhere.”

To share more about mindfulness-based equine assisted therapy, Jean-Jacques is offering an experiential workshop at the USABP Conference on August 9, 2012. Transportation to the farm is provided. He will offer a short introduction about equine assisted therapy but most of the day will be experiential—horses will definitely be there and participants will interact with them. There will be much touch, movement, and observation.

Jean-Jacques Joris, JD, MA is a native of Geneva and a law graduate. He spent 15 years in the Swiss foreign service. Throughout his international career, he traveled, worked, and lived in conflict areas, confronted with acute human suffering and witnessing the power of human resiliency. Fluent in five languages, Jean-Jacques is passionate about building bridges among people of different cultural, political, and religious backgrounds. Wishing to shift his focus from the political to the individual realm, Jean-Jacques graduated from Naropa University with an MA in Transpersonal Counseling Psychotherapy. He is now uniting his passion for human nature, contemplative horsemanship, inter-species communication, and offers equine-facilitated psychotherapy services to children, adolescents, adults, couples, and families, with a holistic and non-denominational perspective. He is also an EMDR practitioner and a certified EAGALA.



Research in Brief

By Dawn Bhat

Fogel, A. (2011). Embodied Awareness: Neither Implicit nor Explicit, and Not Necessarily Nonverbal. *Child Development Perspectives*, 5(3), 183-186.

The development of embodiment may include more than self awareness, according to psychological science and theory on embodied self awareness from the University of Utah. Developmental psychologist, Allen Fogel, describes the concept of embodied self awareness (ESA). It is comprised of the following: interoception (the ability to feel one's own internal states and emotions); body schema (the sense that our bodies belong to nobody but us; our sense of movement and balance; our ability to locate particular parts of ourselves; our ability to sense our body size and shape; and the awareness that our bodies have boundaries that separate us from other objects and bodies). The neural networks associated with ESA form the basis of implicit embodiment. These neural networks are inherently linked to other networks (i.e., attention, self regulation, etc.) influencing mental and physical health. According to Fogel, embodiment may be related to subjective human experiences (i.e., implicit, ESA, autobiographical or conceptual awareness) and embodied attunement in interpersonal relationships (i.e., sensation, movement, speech, and emotions). There is a relation between embodied awareness/implicit embodiment and embodied attunement/embodied mismatch. For example, an indi-

vidual may not be consciously aware (implicit embodiment) of being in or out of attunement. With regard to parent-infant mental health practices and the intersubjective, the infant may, however, have an embodied awareness of mismatches in attunement leading to discomfort or distress without the parent even realizing this. While ESA is a sensing of internal conditions with full awareness, verbal articulation may or may not be evoked but the right words can evoke ESA. What is evocative is that the role of embodiment spans domains other than self awareness to involve the whole body (Child Development Perspectives, 2011).

King, A. (2011). WHEN THE BODY SPEAKS: TUMMY RUMBLINGS IN THE THERAPEUTIC ENCOUNTER. *British Journal of Psychotherapy*, 27(2), 156-174.

Does digesting psychological phenomenon and the synchronicity of the gut speaking what's on the mind mean something in the therapeutic encounter? This study, using grounded theory, described borborygmi (tummy rumblings), a bodily phenomenon and embodied reaction. This research on embodied knowledge revealed that when the therapist explicitly addresses borborygmi by engaging in verbal commentary the therapeutic process can deepen and fresh new material may emerge. Given that early prenatal experiences, wherein the fetus constantly

listens to the tummy rumblings of the mother, borborygmi may be a somatic entrance to deepen the psychotherapeutic process. Somatic psychotherapists are aware of the connection between the mind and the gut; this study fits with Gerda Boyesen's development of biodynamic psychotherapy and the discovery that peristaltic sounds are part of self-healing or self-regulating ability of the body. As one participant in King's study shared with regard to borborygmi in psychotherapy, "our tummies rumble together so it's like a conversation at a deeper level" (British Journal of Psychotherapy, 2011, p. 168). The tummy rumbling findings may generalize to other embodied responses (i.e., tears, tingling sensations and drowsiness) such that bodily issues may gain more attention in training and supervision in the mental health professions.

Dawn Bhat holds a Master of Arts degree in General Psychology from Queens College in New York City and has experience in neuropsychology. Dawn is working on a Masters of Science in Mental Health Counseling at a CACREP program on Long Island and is a counseling intern in psychiatric rehabilitation at the Zucker Hillside Hospital in New York. She studied somatic psychology at the Santa Barbara Graduate Institute and is a researcher with Dr. Jacqueline A. Carleton of the USABP. Dawn is a registered yoga teacher (RYT-500), and sees clients privately for therapeutic yoga sessions. Dawn has published in scholarly journals, presented at professional conferences, and has contributed to research in the subjects of neurology, cognitive neuroscience, emotion and interpersonal relationships. Feel free to reach Dawn: dawn.bhat@gmail.com

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Kinetic Temperament:

An Interview with Frances La Barre PhD

By Nancy Eichhorn

An exciting theoretical shift is undulating, wavelike, rooted in the past, continuing through the present; an energy started by founders in Body Psychotherapy, maintained by those willing to add their own pulse to the forward momentum. Concepts about thought in relationship to action are reaching toward a new framework of understanding. Frances LaBarre, PhD, a psychologist and psychoanalyst, as well as a second-wave practitioner of dance/movement therapy, is one of the foremost contributors to this theoretical and technical growth.

Her insightful work defining the “kinetic temperament,” invites people to explore patients’ individual movement repertoires, to truly watch and wonder at the communications conveyed by action, to be present and witness how action shapes peoples’ very perception of the world. She defines kinetic temperament as “the intrinsic foundational patterns of movement beginning to operate in utero and present at birth that initially shape a baby’s actions and affect and so contribute heavily to patterns of interaction constructed mutually by baby and parents. These body-based settings are quite specific and determine what kinds of early handling are welcome and what kinds cause stress. They are also the basis of a baby’s range of adaptability to different ways of being handled.”

“Being a dancer from a very early age trained me to see people’s movements—their repertoires—as if they were choreography,” La Barre said. After leaving college, she immersed herself in the dance world of the 1970’s in New York City. Her fascination with movement expanded in her work with young children through whom she studied sensorimotor development and its relationship to cognitive theories guiding practitioners at that time. She also looked at how movement forms the basis for one’s personal way of being in the world. In becoming a psychologist and psychoanalyst, she turned to an extensive study of nonverbal behavior research.

In the 1970s/1980s, LaBarre’s curiosity about movement and thought continued to evolve as she formulated her ideas about how behavior impacts thinking. At the time, psychoanalysis was dominant in the field, she said, and psychoanalysts framed

mental development within a sense of distrust in action—believing it got in the way of thought.

“As I got into the field of psychoanalysis in the late 1970’s, it was shifting, and it has been shifting ever since,” La Barre said. “The history and philosophies of body psychotherapy and psychoanalysis have changed over time. One major facet of that change is our theory of thinking. Current views support the idea that our action repertoires are fundamental to perception itself; for example, objects are defined by the possibilities for inter-action that they afford. I will be discussing this neuroscience-corroborated understanding and its implications for the psychotherapist at the USABP conference. This theory is quite different from the one in operation when Freud and Reich did their work. They both operated with the idea that thought and action were at odds with each other.”

“Freud’s early work suggested that action—acting out—must be restricted in order for thought to emerge because if the energy available were ‘discharged,’ it would not develop into thought,” she added. That is, thoughts could not emerge unless movement and acting out were restricted. Belief held that one must repress/suppress movement to help mental development to occur. Once thought emerged, then the analyst could point the body/mind in the right direction.

“Reich developed the opposite side of the problem—that thought restricted action, over-controlled it, due to socially generated fears. In addition, each believed that underneath human beings were all the same; we all had the same aggression, hunger, and sexuality. Our instinctual lives were uniform,” La Barre said.

La Barre’s understanding does not support that view. From the point of view of kinetic temperament, she thinks we are quite variable in the impulses that emerge and in our levels of adaptability—and to that we have to add the huge variability of relational contexts in which our constitutional givens take shape. We are not one uniform person underneath everything. In her study of psychoanalysis, La Barre realized that nonverbal behavior research, which was central in her own thinking at the time, had informed psychotherapy into the 1970s



“Nonverbal communication doesn’t stop after infancy, it continues to be just as significant through our adult lives”





but had not been carried forward after that except in the then-burgeoning infant research of Daniel Stern, Edward Tronick, and many others. It was as if this strong developmental thread of thought had been cut off from a broader range of research.

“My own thoughts were that nonverbal communication doesn’t stop after infancy, it continues to be just as significant through our adult lives,” La Barre said. “I wanted to see what movement was happening in individual patients and between me and my patients. This became my center of focus.”

Developing her sense of the importance of nonverbal interaction, LaBarre began the practice of writing a ‘kinetic text’ to see what happened nonverbally from when a client entered a room to when he or she left—watching all movement from walking, to sitting, to speaking. She noted how her patients moved and how she moved in response and wondered what it all meant, recognizing it as communication to be understood.

LaBarre does not usually explicitly create a movement intervention in her psychoanalytic work. Even if she may note, for example, that a client’s behavior could be linked with attachment behaviors (such as eye contact), La Barre might not overtly address this. Rather she writes a kinetic text over several sessions, noting her own spontaneous responses bringing a sense of, “let’s see what’s going on here . . . let’s just watch and see what’s going on.” Usually something quite meaningful emerges over time in action—often action changes emerge with growing awareness—and then this awareness of what has happened enters the dialogue.

“What I found was always at least a little surprising. What emerged might have been indicated in a verbal exchange but very often was

not at all, and so information that was unstated seemed to explode in seeing the nonverbal. Nonverbal behavior seems to telegraph ahead—it shows what’s emerging before it’s said. In addition, it reveals a great deal about what there are not yet words to say, and it can help us understand our ‘embodied history,’ those patterns of movement constructed over time that have a role in shaping current interactions, and that may emerge in a way that limits the possibilities for action in situations that are reminiscent of earlier formative relationships. Learning how to read this kinetic text, put most simply, enhances our abilities to perceive more,” LaBarre said.

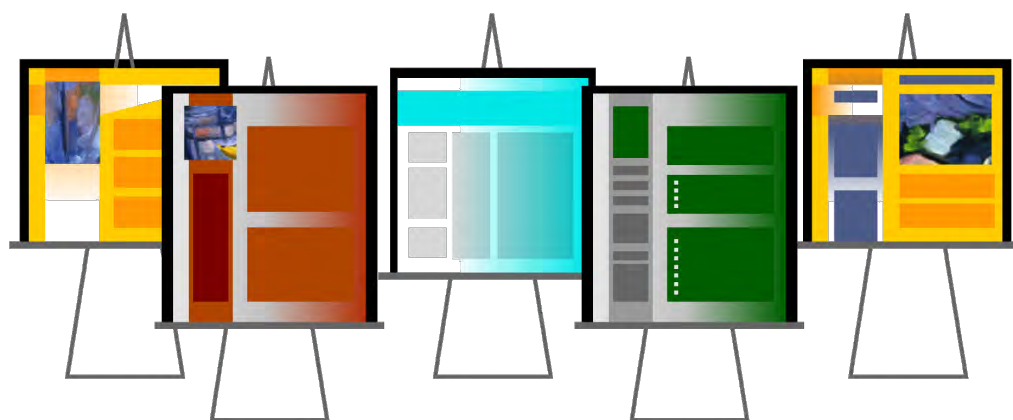
During her keynote address at the 7th Annual USABP Conference, LaBarre will speak to the history of conceptions of thought and movement, to current neuroscience and its impact on our understanding of movement and why what it tells us is important. She will demonstrate her ideas with tapes from her work as co-director of The Parent- Infant/Toddler Research Nursery at Pace University where she and Mark Sossin teach graduate students to observe and understand the nonverbal behavior of infants and parents.

“We teach the students how to see emerging patterns of interaction that are going on between babies and parents,” La Barre said. “Learning to see patterns, to witness nonverbal behavior also affects what emerges in the therapy setting. We look at what emerges and think about the meanings of what we are seeing in relation to what happens in and out of sessions.”

To learn more about La Barre’s work tune into Somatic Perspectives on Psychology (www.somaticperspectives.com) and attend her keynote address during the 7th Annual USABP Conference.

Frances La Barre PhD is a psychologist and psychoanalyst working with children and adults, families and couples in private practice in New York City. She teaches/supervises at the Psychoanalytic Psychotherapy Study Center, The Institute for Contemporary Psychotherapy, and The Center for Somatic Studies. She frequently presents her work in the United States and Italy. She is a member of the International Association of Relation Psychoanalysis and Psychotherapy. Her clinical work based on a multidisciplinary approach integrates psychoanalysis and her studies of nonverbal research. Publications include: *On Moving and Being Moved*, *Nonverbal Behavior in Clinical Practice*; *The First Year and the Rest of Your Life: Movement, Development, and Psychotherapeutic Change*; and numerous articles.





Effective Information Design: Getting the Correct Message across Quickly

The Scene:

Five years of research has led to an exciting discovery! Now you have the opportunity to share this work and its result with your colleagues here and abroad as a large-format poster at an international conference.

Hundreds, possibly thousands, of posters, three floors of exhibition space, different posters on display every few hours over the course of a week—all asking for the audience's attention. What competition!

Will anyone walk up to your poster? If they do, will they stay long enough to get your intended message, will they walk away with the wrong message, or will they just walk away?

The Scenario:

Your poster is a hit! Conference participants are crowded around your display. There is a buzz of conversation.

The design begins to tell the story as the viewer approaches the poster. Your title makes them want to learn more and you have made the path to that knowledge easy by organizing the content effectively.

You have divided the content into categories and clearly identified each category with a subtitle to aide navigation through the content. Everything to do with each category is placed together. Figures and graphics are placed near related text; there are no hunting games. Related graphs and tables are placed side-by-side, sharing legends and labels, making comparisons easy.

You have included no stumbling blocks, confusing graphics, excessive or repetitive text, misleading font style or size changes, blinding or bouncing colors.

Knowing that you will not always be with your poster, you have included contact information. You won't lose connection with a potential colleague or client.

This could be you!

There are 3 things you can do that will give you a strong foundation upon which to build a successful poster that effectively conveys the message you intend.

1. Know your story.

If you are unsure of this, the audience will be too!

In the short time someone stands in front of your poster, what do you want her/him to learn? The title should reflect the story being told and the poster should only include what supports that story.

You will begin by gathering everything you think you want on the poster. Then there will be questions: What to include? What to delete?

What colors and font styles to use? To reply you will ask yourself, “Does it help tell my story?” If you don’t have a clear idea of what your story is, you can’t answer the question.

Your poster is a visual display of information; the design used to present this information will depend upon the story you want to tell. The most effective design is content-driven. Before you begin thinking about a design, you must have a clear idea of what it is that you want to say with this visual tool.

2. Know your audience.

To choose the best way to reach your audience, you must know who they are. General public? Colleagues? If they include the general public, you may want to provide definitions of key words.

Do acronyms need to be defined? Terms you use may be common to you, but unfamiliar to others or mistaken for something else. If the poster is used in an international setting where many languages are spoken, consider less text and more pictures to tell your story.

If the title contains a word or phrase considered foreign to some audiences, provide a definition to make the poster more meaningful.

Review the images and text you are planning to use. Remember, some images or words may be offensive to some audiences.

3. Know how you are going to use the poster.

You are making a visual tool; consider every aspect of its use before beginning the design. Know the conference requirements. There may be a poster size limit or required font style and size. Will it ever be alone? Don’t assume that you will always be with it to “fill in the blanks”.

Where will it be displayed? Distance from the viewer will determine font sizes used. Will it be used as a reference, revisited or studied over time? If so, it could contain more text. Will it be part of a series? If so, a unifying color or graphic, or overall design will help tie the series together.

Will it be used more than once? Consider changes to size or content to accommodate all uses. Were you given support for your research? Consider an acknowledgement.

How will it be transported? Rolled? Mounted? Created in sections for a folding panel? Are you traveling with the poster? If so, take along a copy of the file to have another print made if the poster doesn’t arrive with you! This can happen, be prepared!

A word about templates.

Templates are often “one size fits nobody.” Ideally, column widths are determined by the content they contain; if you try to fit your story into another person’s template (pre-determined column widths), chances are, it will not fit. You may end up with related paragraphs scattered and lists broken. Example: There may be several points to the results section; if they are separated because of template constraints, some points may go unread—wrong message sent!

The conference may require use of a template, but know that you can often adjust the template to accommodate your unique content. If you choose on your own to use a template, do so with caution. Remember, the most effective poster design is content-driven.

A word about white space.

White space is essential for good design. Use lots of it! It has been suggested that 60% of an effective visual display is white space, space left blank! A poster with insufficient side margins or space between columns of text or around graphics is a chore to decipher. Your audience will not work to get the content and your story will go unread.

Example: A key word or phrase, such as “The purpose of this study...” in the middle of a paragraph may go unread. If the viewer misses this key information, they may miss the point of your poster. Provide space around this phrase, to make it stand out, and it will be seen.

White space is not wasted space; it serves the important function of helping the viewer focus on content and maintaining that focus.

The Seed For The Tutorial:

For ten years I designed research posters for faculty and graduate students, and assisted hundreds more as they started creating their own. I kept seeing the same problems diminish the effectiveness of a poster: excessive text, insufficient white space, poor flow of ideas, confusing graphics, designs that did not support the content, and in many cases, designs that projected the wrong message!

I created informative guides, gave presentations, and conducted hundreds of one-on-one consultations to review and improve posters. I printed hundreds of posters created in PowerPoint and gained valuable experience in the limits of the program, what to do and what to avoid.

I had much more to offer! The result was this comprehensive tutorial:

**Creating a Large Format Poster to Present Your Research:
What to Do and What to Avoid** (© Sherry Palmer 10/2010)

This is a self-paced, cross-referenced, comprehensive guide for creating a research poster. The format is PDF, not dependent on sound or animation. PowerPoint is the program detailed and research is the poster content, but the steps and principles outlined can be applied to any story you want to communicate with a poster, using any presentation program.

There are ten chapters. The first three are highly recommended: An Overview (emphasizing the power of the visual), Getting Started (essential groundwork), and Setting Up the Slide. The next five are subject-specific: Text, Images, Graphs, Tables, and Backgrounds. The last two chapters are Little Screen-Big Poster (how to maneuver on a small screen to create a large-format poster) and The Small Stuff (how and where to place references, acknowledgements, and contact information).

It is richly illustrated with screen shots of procedures and examples from actual scientific research posters. Text is kept to a minimum; even without knowledge of English, much can be gained from the illustrations.

Emphasis is on the need to focus on the story being told, and choosing and editing content that supports that story. It illustrates the use of design elements such as color, placement, and font style and size to aid the viewer and guide the order in which the content is read. The tutorial is valuable for its organizational and esthetic guidelines; even if someone else designs your poster, you will find it helpful in preparing the content.

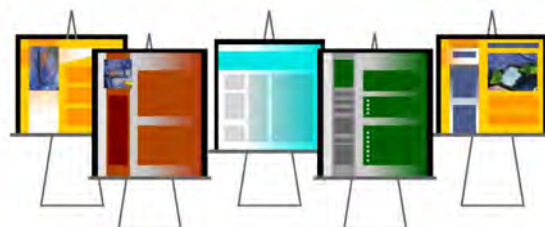
I strongly believe that the quality of the presentation should equal the quality of the research itself, anything less can diminish its credibility.

To purchase:

The tutorial is available for purchase in PDF format on a CD from the Office for Research Partnerships and Commercialization, the University of New Hampshire, Durham NH, USA. Contact Maria E. Emanuel, Ph.D., Senior Licensing Manager, by email at this address: Maria.Emanuel@unh.edu



Sherry Palmer was a graphics designer at the University of New Hampshire for 20 years with a specialty in the presentation of scientific research, mainly in the design and printing of large format posters. She is the designer and author of a comprehensive tutorial, *Creating a Large Format Poster to Present Your Research: What to Do and What to Avoid*. She is now a full-time painter; visit www.sherryskye.com.





The Historical Basis of Body Psychotherapy Courtenay Young, Editor A Colleague's Response by Susan Aposhyan



I would retitl Courtenay Young's new book, *The Historical Basis of Body Psychotherapy*, adding *and Cultural Context*. It is more than a history, as it spends significant chapters looking at the present and even speculating in futurism a bit. All told, it is an excellent contribution to the body psychotherapy bibliography, graced by beauty and backed up with solid detail. Mr. Young has carefully compiled the writings of others to introduce and support his own chapters. I appreciate that the most patient bibliographer of our field has undertaken this task. It is, at once, a solid reference and an intriguing editorial—as illustrated by comments such as that without Elsa Lindenberg there might not be a body psychotherapy field.

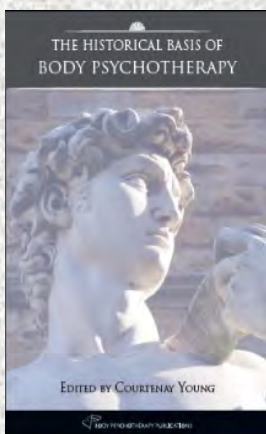
As an American, I have to admit my own cultural biases—I expect the European voice to be a bit more thorough, more academic, and, of course, document the European perspective more thoroughly. Mr. Young has satisfied me on all those counts. Having written my own, much shorter accounts of the history of body psychotherapy, I am aware that I tend to rush to the point, look for the broadest possible implications. By dedicating a full volume to the topic, Mr. Young has contributed a lasting document while not failing in breadth. And, then, of course, there is the touch of the Courtenay style. This means the book reads as if you are having tea in the cozy, cluttered office of your chatty professor.

Mr. Young's history is introduced by Barbara Goodrich-Dunn and Elliot Greene—Americans, of course, though far more erudite than this reviewer. Their lovely excerpt was first published in the USABP journal. I read the article when it came out, but this book places and frames it well, bringing forward its excellence more distinctly. Good placement and framing continue with the following excerpts from Geuter, Totton, Boadella, and Eiden—all covering the roots of body psychotherapy from a variety of directions and perspectives.

The final "Roots" piece, dedicated solely to Janet, again by Boadella, is a strong and substantial correction to our tendency last century to attribute the birth of body psychotherapy to Reich, rather than Janet. The reader will appreciate the authority of Boadella's article and clarity. Placing it in this volume sets the record straight with finality—Janet is our clearly beginning. On the other hand, far more pages of this book are devoted to Reich and his legacy, which rightly reflects the developmental reality of our field.

As a field, we owe our thanks to Mr. Young for years of dedication and for this latest offering. As we educate the next generation of body psychotherapists, I expect this book will be required reading.

Susan Aposhyan, M.A., L.P.C., maintains a private practice and trains helping professionals internationally in her work, Body-Mind Psychotherapy (www.bodymindpsychotherapy.com). Previously, she developed and directed one of the first graduate degree programs in Somatic Psychology at the Naropa University in Boulder, Colorado. She is the author of *Body-Mind Psychotherapy* (Norton, 2004) and *Natural Intelligence: Body-Mind Integration and Human Development*.



An Editor's Take by Nancy Eichhorn

Courtenay Young's latest anthology, *The Historical Basis of Body Psychotherapy*, is more than an accounting of the origins of this field of psychotherapy, it is a tribute to those whose devotion created the foundations for the work that continues today, and it is a limelight for those bringing their work into mainstream acceptance in the 21st Century.

An ardent editor and prolific writer, Young edited a series of essays written by a power pack of British, German, and American psychotherapists/teachers/trainers/authors who are pioneers in their own right including extensive publishing resumes. Their essays address the roots of body psychotherapy, offer an overview of the field in general, and present in-depth views of several of our founders such as Pierre Janet, a pioneering French psychologist who first noted the connection between past experiences and present day trauma and has been credited with coining the terms 'dissociation' and 'subconscious'.

Young's collection showcases numerous leaders in the field through interviews and personal publication.

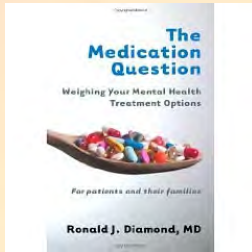
David Boadella, founder of biosynthesis. Nick Totton, whose multiple book titles include *Psychotherapy and Politics* and *Body Psychotherapy: An Introduction*. Ulfried Geuter who co-authored *The Professionalization of Psychology in Nazi Germany*. Bernd Eiden, a co-founder of Chiron psychotherapy. And Barbara Goodrich Dunn and Elliott Greene who combined interviews with many of the field's founding practitioners—Alexander Lowen, John Pierrakos, Al Pessso, Ilana Rubenfeld, Ron Kurtz, and David Boadella, Charles Kelly, and Malcom and Katherine Brown—allowing their voices to tell Body Psychotherapy's story. Young also contributes a series of six essays on the history and development of body psychotherapy, an essay on Elsa Lindenberg, and a futuristic view on European Body Psychotherapy.

Each essay in this anthology combines to create a composite view of Body Psychotherapy past, present and future. Young's perspective, experienced through the writers and essays he shares as well as his own writings, shows the impact not only of people who are passionate about their field of study but also the time, the place, the awareness and knowing that surround their work.

Several anthologies will follow: About the Science of Body Psychotherapy; About Touch in Body Psychotherapy (two volumes); About Relational Body Psychotherapy; About Trauma and Body Psychotherapy; About Transference & Countertransference in Body Psychotherapy; and About Movement in Body psychotherapy.

Resources

Jacqueline Carleton, PhD and the USABP Interns



The Medication Question: Weighing your Mental Health Treatment Options

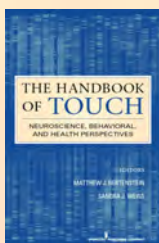
Ronald J. Diamond, MD. 2011. 302 pages. Paperback. ISBN: 9780393706307. New York: W. W. Norton &

Company.

Reviewed by Malorie Mella, New York University

In this informational volume, Diamond offers an alternative to the ‘doctor knows best’ mentality when it comes to taking medication for various mental health disorders. By outlining certain mental health disorders and describing the usual treatment as well as related medications, Diamond helps patients understand what they’re taking, why they’re taking it, and if they really need it at all. He also stipulates that not all individuals may benefit from taking medication in the first place and offers alternatives to medication. Some of the disorders he gives a thorough overview of include the following: anxiety related; depression; personality disorders; schizophrenia; and problems with concentration such as ADD and ADHD.

Additionally, he outlines how to plan a “Medication Trial” to see if a certain drug may be right for you. Written primarily for patients and their families, this volume is a great way to learn about medication and how to manage them correctly. It helps patients to understand the disorder they are working with as well as the medication they may have to take because of it. It can also be useful for health professionals in learning how to talk to their patients and families about the sensitive subject of medications. Diamond also provides suggested supplements to medication and advice on how to work with your doctor. And for your reference, he includes a list of the medications he discusses in the back of the book.



The Handbook of Touch: Neuroscience, Behavioral, and Health Perspectives

Matthew J. Hertenstein and Sandra J. Weiss (Eds.) 2011. 520 pages. Hardcover. ISBN: 978-0-8261-2191-2; E-book ISBN: 978-0-8261-2192-9.

New York: Springer Publishing Company, LLC.

Reviewed by Diane Botta, Columbia University

This anthology of research, featuring the contributions of 29 academics, including editors Matthew J. Hertenstein, PhD, Associate Professor and Director of the Touch and Emotion Lab at DePauw University in Greencastle, Indiana, and Sandra J. Weiss, PhD, DNSc, RN, FAAN, Professor in the Department of Community Health Systems and the Robert C. & Delphine Wentland Eschback Endowed Chair at the University of California, San Francisco, explicates the latest developments regarding the neurobiology of touch, ranging from discoveries about skin physiology and somatosensory pathways to touch-related genes and proteins. While the compendium emphasizes quantitative measures concerning neural processing and the perception of touch, it also includes research exploring the role of touch in social communication, focusing on variables such as gender, age, and status. Research discussing the influence of touch on neurodevelopment, brain plasticity, immune function, and parent-infant attachment is also included.



Shame: The Power of Caring

Gershen Kaufman, PhD. 1992. 241 pages. Paperback. ISBN: 978-0-87047-053-0. Vermont: Schenkman Books, Inc.

Reviewed by Diana Scime-Sayegh

Shame is a powerful word. To bring shame upon one’s family can be fatal for some, to shame someone is to refuse them, to force them to manifest as something disgusting, or revolting. To be ashamed is embarrassing and painful in an anxious, helpless, abject way.

What Gershen Kaufman hopes to do with the third edition of *Shame: The Power of Caring* is to shed light on this emotion, (falling low on the ladder, within a context that is straight out dismissed by many) and its potentially crippling effects. He shares the idea that shame is what lies at the core of many other problems, of varying degrees, but the core none the less. He argues that when

one’s parents instill shame, they rob their children of a part of their soul, as shame affects all human beings in ways that are incomparable to any other emotion.

When a mother tells her child, “You’re not angry, just tired”, she is correlating shame with anger. According to Dr. Kaufman, that woman’s daughter will grow up unable to detect, digest, and navigate what is truly anger (or whatever emotion is undermined). The same goes for a child who is told not to be a baby, to stop crying—shame, without having to be mentioned, will rear its ugly head—and soon the child will be unable to express sadness in a positive way.

Dr. Kaufman also lays forth the idea that stress is actually a symptom caused by shame and its inherent dismissal of true, felt, necessary-to-expel emotion. Addiction is also said to be formed by shame, and then once it has taken hold, acts as a catalyst for more shame, and so on and so on.

Shame: The Power of Caring is an eye opening, interesting, and important book. The misuse of shame robs our sixth, the gut feeling that makes a human being a human being, of all its vital importance. Until emotions are respected and not something to be ashamed of, will we ever truly be able to evolve?



Brain Change Therapy: Clinical Interventions for Self-Transformation

Carol J. Kershaw & J. William Wade. 2011. 354 pages. Hardcover.

SBN: 9780393705867. New York: W.W. Norton & Company, Inc.

Reviewed by Jillian D. Farrell, New York University

Drawing from an amalgam of the most up-to-date research and modalities, Kershaw and Wade present a new resource-focused method of psychotherapy called Brain Change Therapy (BCT), in which clients acquire the knowledge to manage their emotions and behaviors therefore enabling more stable neurological and emotional states.

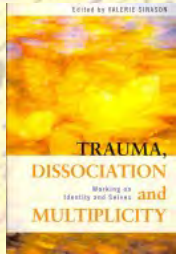
Key to this approach is the re-patterning of neural pathways to bring about therapeutic change that can lead to the reduction of stress and the regulation of emotional reactivity. With the modification of the brain’s neural-

patterning and the shifting of attention from a negative to a positive state, BCT allows the client to establish new emboldening experiences that serve as building blocks for new neural pathways.

This brain-mind state change is the focus of treatment, which not only holds benefits for individuals in problem states but also those who are interested in shifting to peak performance states of consciousness.

The authors provide extensive, insightful information to clinicians on the innovative BCT approach. Included are historical and biological references, definitions of significant concepts, and foundations for brain-mind interventions used in BCT. It offers instructive material regarding the neuro-assessment of new clients, brain change techniques and exercises, as well as case studies throughout the book.

Embedded with comprehensive explanations and diagrams, this book offers another way for therapists to assist clients, as well as themselves, in changing, developing, and thriving in their daily lives.



Trauma, Dissociation and Multiplicity: Working on Identity and Selves.

Valerie Sinason (Ed.). 2011. 203 pages. Paperback. ISBN: 9780415554251. New York: Routledge.

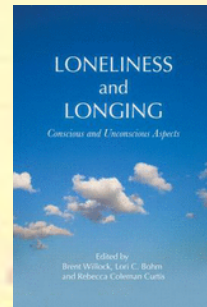
Reviewed by Malorie Mella, New York University

Valerie Sinason compiled articles by various clinicians, including herself, mainly discussing dissociation, and how dissociation can eventually lead to identity crises, that subsequently affects the development of the self, mentally and bodily. More specifically, the topic of dissociative identity disorder (DID) is widely discussed in adolescent patients. The exploration of this topic ranges from how studying disassociation can help us understand a child's grasp of language to how a child may express him/herself through art.

Though different authors may agree or disagree on certain topics, most all of the contributing writers in this volume agree that levels of DID emerge from some kind of trauma in early childhood. Interspersed between chapters are little tidbits or experiences from patients who have suffered from/still suffer with DID.

This book is written primarily for psychotherapists by psychotherapists, with the intention of discussing and giving psychoanalytic

insights to a subject—dissociation—that is not yet thoroughly understood.



Loneliness and Longing

Brent Willock, Lori C. Bohm, Rebecca Coleman Curtis. 2012. 338 pages. Softcover. ISBN: 9780415610988. New York: Routledge.

Reviewed by Raina U. Patel, New York University

Loneliness and Longing defines and explores the unwanted, yet familiar, emotional states of loneliness and longing. Prior to the publication of this book, loneliness was rarely explicitly addressed in psychoanalytical literature and one of the least conceptualized psychological phenomena. The authors of this book hope to aid in the elimination of this gap.

This book explores five different topics: loneliness in the consulting room; the relationship between loneliness and love; the effects of social networking and the internet; how loneliness changes throughout the life cycle; and healing the analyst's loneliness. It touches upon and explains different examples for each topic. For example, it illustrates how the constantly growing field of technology may seem a way for people to be in touch with friends and family at any time, at any location, with just the click of a computer mouse.

However, Dr. Karen Lombardi, states how technology serves as a way for people to "hide". Rather than opening up their social worlds, they are instead maintaining a schizoid adaptation. Another section illustrates how loneliness is more common at particular points in one's life.

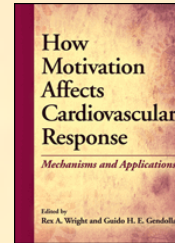
Although it is a feeling that has the ability to become present at any point, there are certain periods in life in which it is more prevalent. Two of these periods include the self-searching period and late life.

People generally react to loneliness with extreme emotions of fear and anxiety. It induces a strong feeling of emptiness that many people cannot bear to undergo. At the first sight of this feeling, they throw themselves into an ongoing round of activity, or take the first opportunity to do practically anything to avoid it, which is generally seeing a psychotherapist.

The last section of this book emphasizes the importance of soothing this psychological state, of healing loneliness and yearnings. It addresses various methods that psychothera-

pists can utilize in order to combat this unpleasant feeling that their clients' may experience. Psychotherapists are encouraged to pay

more attention to the feelings of loneliness that they or their patients may be experiencing and to make this inevitable condition more bearable.



How Motivation Affects Cardiovascular Responses

Rex A. Wright, Guido H.E. Gendolla. 2012. 424 pages. Hardcover. ISBN-13: 978-14338-1026-8; ISBN-10: 1-4338-1026-3. Washington, DC: American Psychological Association.

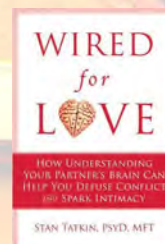
Reviewed by Raina U. Patel, New York University

How Motivation Affects Cardiovascular Response covers how cardiovascular responses depend on motivational influences. This motivational approach is thought of in terms of goal striving and pursuit, taking into account the effects of variables such as effort, needs, and rewards on cardiovascular responses.

This specific perspective aims to tie bodily cardiovascular responses to specific aims. For example, this topic would explore what happens to heart rate when people work to either absorb or block out environmental stimuli.

The book is split up into two sections. Part I focuses on the relationship between motivational variables and cardiovascular outcomes. It offers new discussions pertaining to how cardiovascular responses may be motive specific. Part 2 involves applications with focuses on goal pursuit in different circumstances.

Each part contains diverse perspectives on the topic being that it includes examples of research that has been or is being conducted in different quarters of psychological science. The ultimate goal of this volume is to inspire and encourage others to engage in further research on this topic.



Wired for Love: How Understanding Your Partner's Brain and Attachment Style Can Help You Defuse Conflict and Build a Secure Relationship

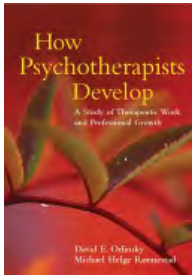
Stan Tatkin. 2012. 224 pages. Paperback. ISBN: 978-1-60882-058-0. Oakland: New Harbinger Publications, Inc.

Continued on page 36

Reviewed by Megan E. Solberg, New York University

Stan Tatkin has created a manual for romantic partners in relationships looking to better understand their partner's individual and engrained response mechanisms, particularly in moments of conflict or need. Ten key principles are spelled out at the beginning of the work and are explored further in subsequent chapters. While some neurological assessment is described, most of Tatkin's principles are better explicated through his anecdotal examples that cleanly and succinctly exemplify the three main relationship and attachment styles of securely attached (anchor), insecurely attached (island), and insecurely ambivalent (wave).

With accessible advice on how to improve communication, morning and bedtime rituals, partner security ("the couple bubble"), and even how to fight better, Tatkin offers a thoughtful manual that provides hope and effective means for change for those looking to understand and better their relationships.



How Psychotherapists Develop: A Study of Therapeutic Work and Professional Growth

David E. Orlinsky, PhD & M. Helge Ronnestad, PhD. 2005. 325 pages. Hardcover. ISBN: 978-1-59147-273-3. Washington, DC: American Psychological Association.

Reviewed by Megan E. Solberg, New York University

This thorough analysis explores an often-neglected subject, the development process and experiences of those considered to be the "technicians of private life" or the psychotherapist him or herself. *How Psychotherapists Develop: A Study of Therapeutic Work and Professional Growth* explores the significance of self-analysis and understanding for psychotherapists by designing an empirically sound scientific inquiry into these experiences.

The book is organized into four main sections that begin by outlining the background and the objectives of the study and then shift into an analysis of therapist experiences of their own psychotherapeutic work, including multi-dimensional determinants of these experiences. Then, the psychotherapists' experiences of professional development are explored, with the concept of development being given much consideration with its integral position in the working alliance with the patient relationship. Finally, recommendations for clinical practice and education as well as instruments to monitor and assess therapeutic work are offered based upon the careful analysis and integration of the findings of the study.

This work is an extremely useful and thought provoking examination that not only explores an often neglected subject but also challenges the systematic concept that considers psychotherapy as "a means to cure or ameliorate psychological and psychiatric disorders," instead reinforcing the importance of the interpersonal relationship between individuals."



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Reflections

By Christine Gindi

As

a JFK University alum, my masters in somatic psychology now in hand, it feels sweet to look back at my fond memories of attending and presenting at the USABP Conference on trauma in 2010. It seems like only yesterday I was crossing my fingers for my conference proposal on race-based traumatic stress to be accepted. When I checked my e-mail in the school library and found out I was presenting, I looked around wide eyed in amazement. Excitement and downright jubilant glee pulsed through my body; my ecstasy intensified by the studious nature of students face-first in textbooks surrounding me. The energy mounted, and I envisioned myself doing a series of cartwheels across the hushed study space. I had sacrificed financial security, close family and friendship ties, and guaranteed employment to attend graduate school. Presenting at this conference felt like a cosmic affirmation of all my fierce dedication.

My first USABP conference experience was very special for a variety of reasons. Firstly, I felt tremendous pride that my school was hosting the conference. I knew many professors and students from different JFK programs who attended the conference precisely because our school hosted it. What a powerful dive into the world of body based psychotherapy. Secondly, I received so much feedback about the incredible workshops, the kindness and approachability of the presenters, and the overall feeling of people being welcomed into the USABP community. And thirdly, the conference connected me to a greater sense of kinship as people from all over the nation travelled to share dialogue, learn from each other, and forge a sense of community.

What made the experience poignant was that Dr. Peter Levine, the founder of the modality Somatic Experiencing, received the 6th USABP Lifetime Achievement Award. My training experience in Somatic Experiencing strongly impacted my decision to apply to graduate somatic psychology programs. The healing and curiosity I experienced during my training changed the trajectory of my life in many ways personally and professionally. Years ago, I would never have imagined myself training as a somatically oriented clinician because I had radically different professional pursuits. Yet, here I was, amused by the directions my life had taken. The timing of Dr. Levine being honored at the same school where I chose to train in somatic psychology because of the modality he pioneered was powerful for me. What an honor to witness this moment in history. What a gift to present at the same conference where this prestigious award was bestowed on Dr. Levine's lifetime of dedication to Somatic Experiencing.

The whole conference was a gift. I reveled in the depth of connection with other graduate students and other conference attendees. My conversations felt collegial, and I did not experience the stereotypical academic hierarchy that I've experienced at other conferences. I felt that people were doing their best to mobilize communities and collaborate on how to become an even more inclusive organization. I am grateful for the enduring relationships that formed during the last conference. I still connect with people I met at the conference at different workshops in the Bay Area. Nancy Eichhorn continues to help

me find my own authentic voice through writing, and the bonds formed between students continue to flourish.

Learning what brought other graduate students to this conference was important to me. Some students were not formally studying somatic psychology but were passionate about the field. I remember a young man who flew in the first morning of the conference and was waiting for an official acceptance from graduate school program at any minute. I can definitely relate to his spirit of daring and adventure, and I admired him for travelling so far to follow his wonder and fascination with somatic psychology. Thankfully, social networking media has contributed to keeping some of us afloat in each other's lives. People can underestimate the power of social media, but there is a paradox about the digital age keeping the somatic student community connected to each other. The irony is that we all are fascinated with embodiment; yet, social media connects us through the ethers in a digital format. I can't wait for the next conference where we can make a more human connection in person rather than e-mail and Facebook messages going back and forth.

I still wonder how much time and planning it takes to pull off creating a successful conference. At JFK, I was part of the Clinical Forum planning committee that organized panel discussions hosted by CIIS and JFK. Sometimes it felt miraculous just to book a panelist because some people had international schedules that were booked years in advance. It can be a grueling task to put together a panel in terms of selecting speakers and arranging their participation. I can't imagine the level of planning it takes to create a national conference.

I cannot believe that the next USABP Conference is only months away co-sponsored by Naropa University. The workshops being offered sound incredible, I am particularly interested in the presentations on somatic psychology and social oppression. For me it is also exciting to connect with authors whose work I studied at JFK. What a gift it is to connect with someone in person with whom you have connected first on the page. I look forward to all of the connections and perspectives being shared as we continue to grow the legacy and community of our field.



Christine Gindi, MDiv, MA, SEP is a Feminist Women of Color. She has professionally trained in multiple body-based therapies including Sensorimotor Psychotherapy, Somatic Experiencing, Craniosacral and Polarity therapies, and Yoga instruction. In addition to writing a column for the USABP Newsletter, she has presented on healing from the trauma of social oppression at JFK University and the Center of Study of World Religions at Harvard University. Her long career in socially responsible nonprofits and foundations illustrates her passion for creative interdisciplinary strategies for community transformation. She is currently training to become a licensed somatic psychotherapist and diversity facilitator. She holds a B.A. in the Study of Religion from UCLA, a Master in Somatic Psychology from John F. Kennedy University, and a Master of Divinity degree from Harvard University.



Have We Forgotten About Sex?

By Maci Daye

A new sexual narrative is emerging within the field of psychology. Fundamental assumptions are being upended, like: “If a relationship is good, the sex will follow.” (Nelson, 2008). ‘Variant’ practices are no longer considered ‘aberrant’ and are instead wholeheartedly endorsed by sex educators and therapists (AASECT, 2004). This shift, towards inclusion and tolerance of diverse sexual behaviors, is also changing professional ‘standards of care’. Where do body-centered psychotherapists stand in the midst of this sea of change, and why has our voice been so quiet?

Never a stranger to controversy, Reich was an early proponent of sex education and an advocate for deep surrender to orgasm (Reich, 1942). His unorthodox ideas have infused many schools of body psychology, some of which still maintain that sex plays a central role in psychological life. However, in recent years, our discipline has done little to forward Reich’s liberal agenda. There is some irony here: in today’s ‘sex-positive’ era, mainstream psychology has made great strides in shifting limiting attitudes towards sex, while our field has observed a cautious distance from overtly sexual themes. Moreover, our disavowal of the sexual agenda has prevented us from applying our considerable expertise to the area

that connects us most to our heritage.

While Reich may have overstated the importance of sex, believing as Freud initially did that the root of all neurosis is undischarged libido, there is no denying that sexual well-being enhances quality of life (Laumann, 2006). Yet, in today’s post-modern zeitgeist, the focus is less on the motoric elements of sex, or the function of ‘release’, but rather on the personal meaning sex has for an individual or couple. Unfortunately, the processes available to those who want a more satisfying sex life are mostly performance-oriented or involve spiritual practices such as Tantra. These approaches may have value, but they do not access the implicit memories and beliefs that depth-oriented therapists argue shape our attitudes and sexual preferences (Bader, 2002).

Moreover, the sexual issues that afflict present-day couples—such as diminished desire due to familiarity, aging and stress—are complex and disheartening to be sure but are not always indicative of relationship problems. Quite the contrary: “Bed-death”, where couples function more as roommates than lovers, happens to couples who are especially connected because desire grows when there is some distance between what we desire and ourselves (Perel, 2006). In addition, the body’s failure to respond anew to a familiar stimulus is the developmental hallmark of ‘automaticity’—a by-product of psychological and somatic learning. Sadly, when automaticity enters the bedroom, this evolu-

tionary achievement is not cause for celebration but rather leaves couples aching for more.

The “mindfulness movement” (Psychotherapy Networker, 2010) has penetrated nearly every domain because of the collective readiness to embrace complexity with curiosity instead of reaching for pat answers. Can mindfulness also enliven Eros and revive relationships that have fallen into conjugal rigor mortis? If so, how?

First, the very nature of mindfulness is acceptance of what is. In the case of sex, this starting point is exactly where many couples need to end up—HERE—instead of trying to reach a performance-based goal. Second, mindfulness is about presence, which is a form of wakefulness to the experience at hand. A mindful

state invites not only curiosity but also sensitivity to subtle shifts in energy, sensation, emotion and mood. Becoming more attuned to these shifts enables partners to recognize choice points during love-making that may otherwise be overridden by the well-etched grooves of automaticity.

Third, mindfulness reduces reactivity, which enables partners to study and discuss their sexual desires and fears with curiosity and compassion.

Finally, mindfulness can access implicit memories and beliefs to support healing and transformation of sexual wounds as the Hakomi Method is noted for (Kurtz, 1990; Siegel, 2007). For example, guided self-study can reveal the biographical underpinnings of sexual shame if the client is in a mindful state.



By slowing down and directing attention to the felt experience of shame, images and memories often emerge spontaneously because a sustained inward focus stimulates the neural circuits of the emotional memory system. When implicit memories are available in consciousness, they can be encoded with a corrective experience to promote neural reorganization. Thus, clients can uncouple sex from trauma and pain by directing attention to the present moment to differentiate between then and now.

Mindfulness is a state of consciousness that promotes acceptance of sexual impulses and curiosity about the blocks to their expression. In this regard, body psychotherapists have a distinct advantage—exploring the psychological, emotional, and physical dimensions of sex is best achieved through attunement to internal processes monitored through the body rather than by techniques to make us more ‘robust and skillful

lovers’. Thus our expertise in psychocorporal processes uniquely qualifies us to support those who want to have more integrated, aware, and authentic erotic lives. What’s more, as mainstream psychology puts sex on *their* agenda, as evidenced by the current proliferation of conference presentations, publications, and professional societies related to sexual well-being, body psychotherapists can rightfully claim their position at the helm of this movement rather than remaining on the sidelines.

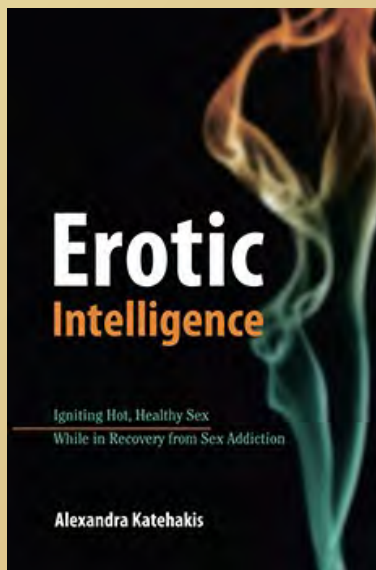
Maci Daye, Ed.S., is a Licensed Professional Counselor, Certified Hakomi Trainer, Certified Master Career Counselor and Life Coach who resides in Atlanta, GA, and Mallorca, Spain. She has graduate degrees in Education and Counseling from Harvard and Georgia State Universities, is a Level II Intermediate Practitioner of Somatic Experiencing, and created "Passion & Presence: The Art of Mindful Sex,"® with Halko Weiss, PhD. They will present a workshop on Passion & Presence® at the 2012 USAPB conference.

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Erotic Intelligence: Igniting Hot, Healthy Sex While in Recovery from Sex Addiction

Reviewed by Jillian D. Farrell New York University and Kristin Emodi, Columbia University



Erotic Intelligence offers steps for sexually-sober sex addicts to reintegrate healthy, joyful, and even lustful

sex into their lives, as well as grow a strong and supportive relationship with their partner.

Katehakis leads a new generation of sex addiction therapists focusing on how to have sex in healthy ways and reclaim what’s lost.

Written for recovering sex addicts and their partners wanting to know how to reintroduce sex into their healthy relationships, as well as a resource for those who help

them, the author’s clear and concise guidance towards sexual healing through the development of sexuality and intimacy offers assistance to individuals of any gender, relationship status, or sexual orientation.

From this perspective, reorienting one’s sexuality involves healing the whole individual and his or her relationships. The author includes both the information and the tools to become erotically intelligent thus enabling one to make sexual choices that sustain life in healthy and pleasurable ways and to keep from falling into the trap of unhealthy sex.

Katehakis claims that a healthy sexual relationship begins with ‘you’ and that nourishing yourself leads to a better relationship and sex life. She further indicates that self-forgiveness, being honest with one another, and a lack of shame will promote healthy sex.

Katehakis specifically states that her intention is not to give license to act out sexually but rather to lead toward sexual healing. The book addresses a multitude of ways to show how enjoying good sex and recovering from a sex addiction can indeed coexist, as well as ways to recognize the right kind of intimacy and how to achieve it. The author leads the individual through the stages of sex, ultimately bringing them to the notion of sex as a spiritual act.

Supplementing this material are techniques and exercises on building relationships that are mutual and supportive. Furthermore, there are first-person accounts from sex addicts and partners sharing recollections of the damage and restoration of their lives through the use of clinically proven methods.

For body psychotherapists, this book may enhance their work in the treatment of sex addiction. Great insight is given on the role of attachment and external experiences on intimacy for sex addicts. Katehakis explains attachment’s influence on self-regulation skills, which, if disoriented, can be a predictor of developing sexually addictive behaviors. Attachment as a factor of individuals’ attitudes toward sex may be of importance to body psychotherapists who work with the integration of various environmental stimuli and aid the body’s systems in adapting to people and circumstances.



Couples Touch and Communication Classes – why its time has come

By Rosanne Ratkiewich

“I’m in the doghouse again.”

My client, a successful business executive, entered with the air of one who has lost the battle again. She is referring to her relationship with her partner of some 30+ years.

“We were talking about buying that property up in Oregon again. I guess we can afford it, but not without making some sacrifices, and I’m just nervous about it. We’ll probably lose this opportunity, but I’m just not ready yet . . . so I told him, ‘No, I don’t want to do it,’ when he asked me. He got really quiet, and I could tell he was upset, so I reached out and put my hand on his shoulder. He turned and looked at me with such anger and said, ‘Don’t you treat me like that!’ I was stunned! I had wanted to connect. I wanted to make it better! What happened?”

I asked her what her intention was when she touched her husband, and she said it was to console him. I probed a little deeper and asked what the gesture felt like to her. After a moment of silence she said quietly, “I guess like a parent might console a child.”

So I asked her, “If it was possible for him to have felt that through your touch, could you understand why he might have reacted with indignation and anger?”

She paused for a while. “Yeah. Now I see it. But do you really think he picked up on that?”

I do. And I think it is time couples are given opportunities to learn about the nature of communicative touch. At the USABP conference in Boulder, CO. I’ll be talking about why I think teaching couples how to touch in the context of simple massage can be the perfect way to give them more resources for successful relationship.

Touch is one of the first essential ingredients determining healthy physical and emotional development including secure attachment behavior – all of which are critical to the process of forming healthy relationships from infancy throughout adulthood (Schore, 1994; Brazelton & Cramer, 1991; Stern, 1985; Trevarthen & Aiken, 2001). The qual-

ity of the attachment relationship between the caretaker and the infant is highly influenced by the quality of touch especially in the first three years of human life. Inherent in the act of touch is the relating of one person’s body and self to another. Thus, at the very core of the development of the self are touch, relationship, and the body.

Parent-Infant Massage programs teach parents how to massage their baby and in the process inform parents why empathic listening touch is so beneficial for development and bonding. Because development occurs throughout the lifespan, it makes sense that touch continues to play its role as well. However, there has been little research to substantiate the claim, and there are few programs that continue the education about healthy touch beyond infancy.

Where We Learn About Touch

Some people may have had the benefit of learning about healthy touch and its associated attributes in their family environment as they progressed from infancy through childhood into young adulthood. But many more

have had little or no consistent experience with caring, non-sexual, healthy touch that can engender a powerful sense of self and self-esteem, trust and respect, self care and self regulation, empathy and listening—the building blocks of intimacy, rich fulfilling sexuality, and healthy relationship. There are a few resources for adults to learn touch skills, such as massage classes for individuals or couples, or sensate focusing exercises to encourage new ways of exploring sexual contact with a partner. However, these classes rarely claim to contain more than technique. Working with a sex therapist or couples therapist might be another way to attend to the challenge of learning how to give and receive caring, healthy touch, but the level of education, instruction, comfort and safety around working directly with touch largely depends on the comfort, education, and theoretical orientation of the therapist toward touch, somatic theories, and techniques (Zur, 2007; Fagan, 1998).

The Literature

There is surprisingly little literature on topics related to touch in couples’ psychotherapeutic work, though much attention has been paid to the problems that arise in sexuality and intimacy between adults in romantic relationship. The inclusion of touch in adult therapeutic circumstances continues to be a topic of controversy (Zur, 2007, 2008; Smith, 1998).

Limited research has been published indicating massage between partners both lowers anxiety and depression levels, as well as improves the couple’s relationship. (Field, et al., 2007; Holt-Lunstad, et al., 2008; Latifses, et al., 2005; Uhm, 2010). In massage and bodywork trade magazines, no articles on couples massage classes were found discussing the role of touch as it might relate to the quality of the relationship or the way communication (and attachment styles) between partners might affect the way touch is given or perceived.



How Touch Can Be Taught

Touch cannot be taught from a strictly theoretical perspective. The event of being touched or reaching out to touch can stimulate deeply held beliefs, often non-verbal memories of historical experiences and significant current information about the self and the relationship with the other person. The involvement of touch inherently involves contact of boundaries, both physical as well as internal. In the case of my client and her partner, an unconscious, non-verbal intention was perceived as crossing a boundary causing a rift in communication and a disconnect. In a different example, a partner might not be able to say that the touch does not feel right in the moment because he/she values the relationship connection over maintenance of the authenticity of self. Another partner may shut down and become avoidant in protection of his or her sense of self when he/she is given the feedback regarding the nature of the touch he or she is providing. When individuals begin to recognize and accept their own specific cues around being touched, there is more opportunity to become emboldened to communicate his or her needs and desires.

In the same way the Infant Massage Parent Education classes teach parents how to read cues, connect, and communicate with their babies via touch and massage, “Couples Touch and Communication” classes use massage as the vehicle to teach adult couples similar relationship and communication skills. Taught in small groups, couples learn what I call the basic ABC’s of relationship (attachment, boundaries, and communication) by way of discussion, experiential exercises, and the application of basic massage techniques.

Attachment theory is discussed in the context of what differing styles might look like in interaction. Partners are led through a variety of exercises designed to increase body awareness, use that awareness to form a better understanding of their own and another’s personal boundaries, and how they communicate their awareness. They learn simple massage techniques, which are then practiced. It

is in the practice of the massage that it all comes together by attuning to themselves and each other through touch. In this way it is hoped each couple might discover new ways to form deeper connections with each other through touch that begins with non-sexual intentions.

A Beginning

The classes described here do not provide a solution to the touch-in-therapy debate, nor is the purpose to suggest that all psychotherapists should learn and incorporate touch therapies into their practices or that all massage therapists should learn about attachment theory. However, given how important touch is in continuing development, an approach is needed to provide education about healthy touch in relationship beyond the parent/infant stage. Couples Touch and Communication classes were developed to provide an accessible resource for couples to learn about the rich tapestry of relational information healthy touch can evoke which can deepen and enrich their sense of themselves as well as their sense of connection and intimacy.

Rosanne Ratkiewich has been a licensed massage therapist for over 13 years. She has a master’s degree in somatic psychology and is a certified educator of infant massage. She is passionate about integrative health and wellness. Rosanne studies current research in the fields of fascial development, interpersonal neurobiology, and early childhood mental health to find common ground and practical application in our every day life. Rosanne is a student of Dr. Schore and Dr. Seligman.

This article was condensed from the unpublished thesis “Relational Touch and Somatic Literacy Education: A Proposed Application of Affective Neuroscience as Applied to Couples in Therapy, Ratkiewich, R., Santa Barbara Graduate Institute, 2008.

References are located online at www.usabp.org/Magazine





Anhedonia

By Scott Baum

Among the most daunting experiences for a therapist is to work with a person living in a condition of chronic anhedonia. Anhedonia is a condition in which a person cannot experience pleasure, and in these people it is a structural reality, it is a feature of the way the person functions. Anhedonic states can come and go in anyone. A grieving person who finds no pleasure in anything, or a seriously ill person, also, are examples of that situational reality. But these states can and do often end, and the underlying capacity to feel pleasure returns.

In the condition of anhedonia the emotional and psychological damage done to a person very early in life results in a chronic and relatively intractable condition in which the capacity to experience pleasure is extinguished, or nearly so.

At the coming USABP conference, I will present a workshop on the somatopsychic reality and significance of anhedonia as a chronic and structured part of a person's personality organization. In this condition the capacity to experience pleasure is wholly destroyed. To understand this we must refine our understanding of pleasure and its related states and discriminate between relief, gratification, and satisfaction, and what I mean by pleasure, which is the capacity for connection to goodness and benevolence in the universe.

Destroying the capacity for the experience of pleasure, as I mean it here, is not easily accomplished. For this condition to be present I hypothesize that the person so suffering was afflicted in relationships characterized by chronic

not be reversible. Pleasure here must be understood as fundamentally related to love, kindness, compassion, and connection to others. All of these are unique energetic phenomena, none replaceable by another. When the capacity for pleasure, for apprehension of the benevolence between humans for the full-bodied experience of goodness is maimed and destroyed, the effect on the developing organism is profound. Early formulations of borderline personality organization by various theorists recognized the centrality of this condition in identifying that organization. I think that insight can be broadened to understand dynamics of early trauma.

It takes a lot to murder a soul, and once done it may not be reversible.

For clinicians to know what can be done first requires that we know how to identify that the condition of anhedonia exists. We also have to know how central pleasure is to basic human functioning. The connection to benevolence, even when still immature and unrefined, forms a guidance system to what is right and good and real. To be unmoored from the felt experience of goodness is to be cast adrift in a sea of negativity, that coming from others, and one's own, with few resources to cope with the situation. A therapist empathically entering this space with another human being is exposing herself or himself to a vortex of somatopsychic forces with the power of a black hole. Holding one's position while still being able to recognize the experience of the other, contain and metabolize it, and usefully use the event clinically, is no small feat.

The workshop I have planned focuses on the experiential nature of the anhedonic condition and the effect on the therapist. I present this material from the twin vantage points of clinician and someone living in the anhedonic condition, the reality of alienation from the vis-

ceral sensory apprehension of goodness that is the central characteristic of this condition.

I propose that therapists become connoisseurs of bad feelings. These feeling states, unmitigated by pleasure, carry vast amounts of information about the experiential reality of the other, that often cannot be rendered in language, and so require the therapist's receptivity to an empathic experience of the sensations.

It is in this of mutuality that possibilities for other experiences emerge from the anguish of the anhedonic condition. To be seen by another, the therapist, as a person living in this state of being, of anhedonia is truly miraculous. For a therapist to strive to see someone in this condition, to experience in her or his own body the reality of someone living like this is God's work.

I recently presented this material at the conference of the International Institute for Bioenergetic Analysis, and I sent a brief piece recently published in *Voices* to participants who registered in advance for the workshop to provide a background context into which to fit these concepts about such painful and difficult realities. I am happy to do so again, even if you decide not to attend.

Please feel free to contact me at docsbpsych@aol.com if you would like a copy, or if you would like reprints of the papers in which I have written on this material in more extensive and theoretically formal ways.

Scott Baum, PhD is a clinical psychologist and a Diplomate of the American Board of Professional Psychology. He practices in New York City as a bioenergetic therapist and is currently the president of the International Institute for Bioenergetic Analysis.

Nina Bull: A Somatic Pioneer



By Dan Lewis

Nina Bull was a pioneer in the study of the mind/body relationship and the role of the musculature in subjective emotional experience, yet little has been written about her work or her life. I am currently trying to piece together a coherent narrative from many tidbits of information I have picked up in disparate sources such as a poem printed in a 1915 journal of the Audubon Society (see page 45) as well as journals, letters, and writings of her acquaintances, and even books about buildings in which she happened to live. This has been quite an adventure!

She came from wealth and privilege so could do pretty much as she pleased. In the early part of the twentieth century she was active in progressive politics and alternative education. She was also interested in and lectured on Latin American culture and translated the works of at least one Latin American author. She was acquainted with many leading cultural figures, including D.H. Lawrence, Gertrude and Leo Stein, and John Dewey. She was already in her late fifties when she began her research, although her interest in the mind/body relationship appears to date from much earlier.

From the late 1930's through the 1950's she investigated the role of what she called the "motor attitude" in our emotional lives. Her thesis was that the motor attitude, in other words, physical

preparation for action, followed by a delay in actually carrying out the action, gave rise to the subjective experience of emotion by stimulating nervous pathways from muscle and viscera to the brain. For example, if I am ready to cry but not actually crying, I feel sad. When I am actually crying, I do not feel sad. Similarly, if I am prepared to strike an enemy, but not actually carrying out that action, I feel angry. Once I am actually carrying out the strike, I no longer feel angry. She wrote of ". . . the absolute dependence of mental attitude on motor attitude. Thus, a mental attitude may follow and accompany a motor attitude . . . [but] cannot possibly precede it" (Bull, 1951, p. 19).

Bull's theory seems radical even today, even among many practitioners of somatic psychotherapy. She gave primacy to the role of the body, the musculature in particular, in initiating subjective feeling states.

Bull tested her theory in a series of ingenious experiments. First, an emotion or postural attitude was induced in the experimental subjects, either by asking them to assume a specific postural attitude that was described to them, or to form an emotion named by the experimenter. Then the subjects received a hypnotic suggestion to hold and sustain this emotion or postural attitude.

Finally, they were asked to form a different emotion, still holding the postural attitude, or asked to form a different postural attitude while sustaining the prescribed emotion. Subjects could not experience a different emotion unless they first adopted

a different postural attitude. In this way, Bull demonstrated that emotion is invariably preceded by a motor attitude specific to that emotion.

Bull was an unusual Somatic Psychology pioneer in that she was neither a clinician, as was, for example, Reich and Lowen, nor did she develop a somatic growth practice as did Elsa Gindler, Moshe Feldenkrais and F. M. Alexander. She was a research psychologist who contributed Attitude Theory and a body of experimental evidence in support of the theory. Her role in the development of the field underscores the importance of research. She also made another contribution, the mentoring of another pioneer, Stanley Keleman (USABPJ, 2007, 5). Bull's work is one of the foundations of Keleman's Formative Psychology.

My understanding of Somatic Psychology has been enriched through studying the work of Nina Bull. For example, a turning point in my understanding of Formative Psychology came after immersing myself in Bull's idea of the motor attitude. Reading Bull helped me to read Keleman with fresh eyes, moving me away from the neo-Reichian 'lens' through which I had been viewing his work. Once I came to appreciate the role of motor attitudes in our functioning, I found that I understood Keleman's work much better.

My investigation into Bull's life and work has been an exciting adventure for me. I invite you to come to my talk at the upcoming USABP conference and learn more about this fascinating somatic pioneer.

Bull's theory seems radical even today, even among many practitioners of somatic psychotherapy. She gave primacy to the role of the body, the musculature in particular, in initiating subjective feeling states.

Dan Lewis, M.P.H., is an MFT Trainee at JFK University. His lifelong interest in Somatic Psychology led him to studies with Charlotte Selver, John Heider, Michael Kahn, and Stanley Keleman. He is currently transitioning from a long career in computer programming and data analysis towards a second career as a clinician/researcher.

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Dance Movement Therapy and Neo-Reichian Psychotherapy

By Corinna Brown



One's personality is manifest in one's movement repertoire: the idea of unity of psyche and soma—what occurs in the body effects the mind and what occurs in the mind effects the body (Levy, 1992), —was originally credited to Wilhelm Reich (1971). During my dance/movement therapy training in the mid 1990s at the now defunct Hunter College Dance/Movement Therapy (D/MT) Program, I was taught that the body and mind are a unitary system not a duality divided by the rational Cartesian split as trends in science and psychotherapy then believed.

Fascinated with Reich's theories prior to my D/MT education and wanting to know more about how these were applied in clinical practice after my graduate training, I wanted to experience a Reichian approach to therapy. I found Johanna Climenko, ADTR, LCSW, a pioneer in D/MT who integrated D/MT and Reichian Psychotherapy in 1986. After five years of healing my own anxiety and trauma through this potent combination of two body-based therapies, I decided to train with Dr. Bernard Rosenblum, Climenko's mentor, a psychiatrist in NYC who was offering a three year clinical training in his Neo-Reichian training institute and to utilize it with patients I saw.

Over the course of my training program I worked at Bellevue Hospital in NYC as a dance/movement therapist in addiction psychiatry doing mainly group work. I found many of Reich's (1971, 1972), Alexander Lowen's (1967, 1970, 1972), and Fritz Perls' (1969) (a former patient of Reich's) approaches useful in the group setting as well and began to integrate their approaches and theories into my work. For example, Reich's system of character analysis (1972)—how character structure manifests in a person's body structure—allowed me to understand the defensive structures individuals and groups were working with. Thus, looking at a patient's body type, for example, "Schizoid" (Lowen, 1967) helped me gear my clinical interventions. I used Lowen's (1970) guidance regarding the use of breath in my outpatient groups as well as exercises for discharging energy. Perls' attention to facial expression and unconscious movements of the face and body strengthened my observation and leadership skills in verbal groups as well.

As a result of my Reichian training experiences, I noticed several changes in my work with clients. The first main shift was to bring more focus and conscious attention to the patient's internal experience of his or her body, what I call embodiment. I approached this through breathing and breath awareness. This also meant I had to attune more to my internal state and how it shifted in response to being with patients. I found myself discussing the importance of paying attention to the body's signals and one's felt experience in verbal groups while also providing space and time for this type of exploration of individuals' somatic cues non-verbally in groups and in individual sessions. Then I began to include more sensory-based words in my verbalizations before, after, and/or in the middle of dance/movement therapy groups.

The second major shift in my clinical practice was to bring attention to how energy flows in the body, in movement, in between people (whether in a group or in a dyad), and in the environment surrounding the therapeutic encounter, and how it gets stuck. I found myself explaining how energy expands and contracts and that when we feel our energy stuck in one end of this continuum we feel at dis-ease and do not function well. This ultimately led to explorations of family and group dynamics in how the messages we received as children formed our physiologic structure, body shape, and relational selves or rather how we hold energy in the body.

The last major shift I experienced was introducing the use of touch and focusing on releasing energy with my patients. While touch is used in dance therapy, such as holding hands when forming a circle and dancing in dyads, I had never used touch to release energy held in the body before. I discovered how holding a patient's hand or placing it on someone's shoulder or back grounded someone in reality, a useful intervention for working with patients that I saw in the hospital who easily dissociated or lived in the world of fantasy.

Over time I found evidence in my clinical practice for the following D/MT ideas:

- ∂ Difficult to reach and non-verbal patients could be accessed and helped through movement interventions.

- ∂ Creativity and D/MT accesses the healthy aspect of an individual, which builds the ego.
- ∂ Expanding a person's movement repertoire expands a person's ways of coping with their inner struggles and the world, thus creating change.
- ∂ Working with a patient's strengths builds the ego and helps formulate a therapeutic relationship between patient and therapist.
- ∂ Groups are healing but even more so when they are focused on movement as a means of interaction, expression, and understanding.

My beliefs and observations about D/MT have grown out of the Marion Chace approach to D/MT (Sandal, Chaiklin, and Lohn, 1993) which focuses on the therapeutic relationship, symbolism, body action, and rhythmic group activity. In my upcoming workshop at the USABP conference. I will discuss how I have combined dance/movement therapy and Neo-Reichian psychotherapy in private practice with individuals and in hospital outpatient groups over the last 13 years. I will show how, through this special combination, I have been able to help clients abstain from abusing substances, begin to heal trauma, decrease depressive symptoms, alleviate anxiety, improve self-esteem, and improve relationships. The synergistic effect of these two modalities is stronger than either one alone and efficacious in working with a range of patients.



Corinna Brown is a licensed creative arts therapist, dancer, choreographer, board certified dance/movement therapist, and body psychotherapist in private practice in NYC. She worked at Bellevue Hospital for over 10 years and is Visiting Assistant Professor at Pratt Institute in the Graduate Creative Arts Therapy Department, GAC Chairperson of the ADTA, and former President of the NYSADTA. She holds a MA in Criminal Justice, a MS in DMT, a certificate in Neo-Reichian psychotherapy, and a certificate in alcohol and substance abuse counseling from Long Island University.

References are located at www.usabp.org/Magazine



The Mockingbird

Nina Bull

Gray singer, of the song-range limitless,
Thy name but ill befits thee-is a slur
Upon thy golden morning-heartedness;
No mocker thou, but an interpreter.

Thou dost divine and utter forth in words
All brooding joys, winged hopes, and soaring
prayers,
Mingling the simpler songs of other birds
In the rich beauty of an art not theirs.

From: Bird-Lore, an illustrated bi-monthly magazine devoted to the study and protection of birds. Edited by Frank M. Chapman, Contributing Editor Mabel Osgood Wright, Official Organization of the Audubon Societies, Volume XVII - 1915 D. Appelton and Company, Harrisburg, PA and New York City

Please note: according to our research, this is considered an open sources poem. If for any reason we are incorrect, please accept our sincerest apologies and gently guide us in the right direction as we (student volunteers) learn the ways of publication.



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*** Honor the Past * Be Present Now * Build the Future**



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The focus of this series is the recent developments in the practice and application of somatic psychology and psychotherapy. The program is designed for verbal psychotherapists who want to integrate direct or indirect work with the body into their clinical practice and for body psychotherapists who want to refine their current approach.

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- Mindful Body-Mind Psychology and Practice: The Hakomi Method
- Working with Character, Trauma and Developmental Issues

Created and directed by Dr Dyrian Benz.

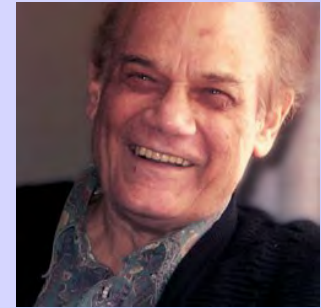
JoAnna Chartrand is the onsite coordinator and ongoing continuity person.

Experiencing the Body: Past, Present, and Future



Brief Image Therapy: Ahsen's 10-Session Model

By Leslie J. Dagnall



Akhter Ashen

Since publishing his first book, *Eidetic psychotherapy: A brief introduction* (1965), Akhter Ahsen has demonstrated that we store all important life events in the form of images. While memory records the “facts,” another part of the mind stores perceptual images, known as eidetics, or ISMs — (I) Images, (S) the Somatic relationships, body and emotional states, and their (M) Meanings. This ISM relationship is the preeminent cornerstone in his psychological and learning theories from the 1950s to current times. “Where’s the body?” is his clarion call to educators and therapists alike to go beyond the more limiting current cognitive/behavioral models to the more expansive realm of these multifaceted images that reveal the mind in a direct experiential manner.

Ahsen’s Brief Treatment Model uses these eidetic images and techniques in a focused and effective manner to quickly target presenting symptoms. The method postures an activated consciousness for the client throughout. The client is asked to remain in an active state of attention. All material is taken down in the client’s own words; all images emanate from the client’s mind. The emphasis is on a systematic processing of the images by client/therapist that ultimately leads to renewal of deep strengths within the individual.

Whether the symptoms come from developmental themes or isolated past traumatic episodes, the image is the ultimate guide. The role of the therapist is as educator in how images work in the mind and how they affect various emotional and physical states. The therapist teaches the client to experience how these images that emanate from the past now impact current life and are trajectories into the future. When the impasse of a stuck state is broken by seeing a single image, a neuro-physiological response occurs resulting in physical, emotional, and cognitive change.

In this Brief Image Therapy one walks into the theatre of the mind where one can see, feel, interact, play, dialogue and engage with a vast reservoir of imagery potentials that already exist within the individual. The therapist demonstrates how the ensuing painful images connect to the difficult and obstructive somatic states in the here and now and how the concomitant positive images allow for release of these states. By oscillating the negative and positive polarities within the first session, the person experientially attunes towards hope and an active state of consciousness. This process immediately breaks the status quo of negative soma and the rigidity of fixed thinking.

Each week the client is asked to do homework with a pertinent image utilizing the image process or technique learned during the previous session. When clients return the following week, they report on their revisiting the image from the previous session and are often amazed by the spontaneous movement of the image towards a positive life connection. This movement towards resolution, known as image progression, occurs by just seeing the image and allowing various “feelingful” states to emerge. That resource within becomes a total reality of *presence*, with or without the therapist, thus instilling again the notion of self-reliance, which is excellent in the realm of brief therapies.

When the client contacts these innate resources, there is deep union with this robust consciousness that is available and most agreeable at all times. There is a flow of pleasure and play that enters into the engagement of client–image–therapist interactions. Learning about the mind and its natural operations that have been temporarily thwarted allows for a natural athleticism to occur which is gifted within each person. This can transform the presenting symptoms and the ongoing real world experience, thus reclaiming the self to its natural state of harmony before the disruptions of trauma and pain.

Each session is structured towards new techniques and imagery processes that continue to build on the feeling of self-reliance. Each week the homework assignment deepens the gains made during the previous sessions and creates a deeper contact with one’s mind and its natural regenerative capacities. Activation of the mind, the honing of the client’s abilities to utilize the images effectively, and the resultant developing of strength and autonomy makes Ahsen’s 10-Session Brief Image Therapy a marvelous tool for therapy and for new ways of envisioning life.

Leslie J. Dagnall serves on the Board of the International Imagery Association as the Director of Training since 2001. She is a Member of the American Academy of Experts in Traumatic Stress since 1999; Board Certified Diplomate since 2003. Leslie uses her expertise in eidetic imagery models: trauma, brief treatment, and learning.

For more information contact Leslie J. Dagnall at LJDag@aol.com; www.eidetictraining.com

Reference

Hochman, J. (2007). *Brief image therapy: Ahsen's 10-session model*. New York: Brandon House.

The Body in the World - The World in the Body

13th International EABP Congress of Body Psychotherapy

September 14th-17th 2012
Cambridge, UK

EABP



www.EABPCongress2012.co.uk

conference@body-psychotherapy.org.uk

The 13th International EABP Congress of Body Psychotherapy A conversation with Kathrin Stauffer EABP Congress Chair

By Nancy Eichhorn



The body in the world, the world in the body. A metaphor holding the belief that we are all one body, one organism, one soul. A title creating the context for an International Congress. A phrase embracing the wisdom of keynote speakers, workshop presenters, symposium facilitators, book sellers, student poster presentations, even disco dinner dancing with the “Howlin’ Shrinks” at Kings College.

The 13th International EABP Congress of Body Psychotherapy, September 14-17, 2012, in Cambridge, UK, curled itself around this title, a work of art, actually, that evolved through hundreds of emails between committee members seeking the right stimulus to focus this worldwide event. Over 5,000 emails have since passed between committee members as they formulate plans and exact details to offer attendees an experiential Congress that honors the body of psychotherapy while highlighting the field of body psychotherapy.

“We really wanted to offer something a bit inspiring,” says Kathrin Stauffer, Chair of the EABP Congress Planning Committee. “We wanted the program to appeal to all modalities. Sure we wanted to showcase body psychotherapy, and we wanted to invite all to come along. We hope to attract people from all fields of study and practice not just body psychotherapy.”

In the light of inclusion, keynote speakers range from Daniel Stern MD to Stephen Porges MD to Mary-Jayne Rust PhD and Ruben Kignel PhD. Stern, a psychiatrist/psychoanalytic theorist, has dedicated his life to observing infants, recreating early life experiences, and studying early affective mother-child bonding. His research is credited as bridging psychoanalysis and research-based developmental models. “He’s the grand old man” Stauffer says, noting Stern’s prominence as a pioneer in the field of infant development and attachment/bonding. Stephen Porges, often associated with his Polyvagal Theory, will address social bonding from a

more adult perspective while Mary-Jayne Rust will speak to eco-psychology, and Ruben Kignel will address Social Justice. Merete Holm Brantbjerg will offer an experiential plenary presentation on: Polarizing or Integrating Differences? Jean-Claude and Dr. Arlene Audergon and Ruben Kignel will address Social Justice. Merete Holm Brantbjerg will offer an experiential plenary presentation on “Polarizing or Integrating Differences?” Jean-Claude and Dr. Arlene Audergon will offer a group process investigating where body psychotherapy is today and what practitioners contribute as a field of body psychotherapy. Shoshi Asheri, Dr. Asaf Rolef Ben-Shahar, Roz Carroll, Michael Soth, and Nick Totton are offering a panel presentation on Relational Body Psychotherapy. Other panel presenters include: Dr. Eric Wolterstorff and Dr. Herbert Grassmann; Dr. Lily Anagnostopoulou; Tom Warnecke with Carmen Joanne Ablack, Dr. Lily Anagnostopoulou and Michael Randolph; and Carmen Joanne Ablack.

Continued on page 50



Churchill College

Selwyn College



For ongoing updates see EABP website: www.eabp.org and the 2012 EABP Conference website on “The Body in the World; The World in the Body”, September 14-17, 2012 Cambridge, UK: www.eabpcongress2012.co.uk

Continued from page 49

Workshops will also be conducted two days before and two days after the Congress proper presented by: Itta Wiedenmann; Lowijs Perquin; Halko Weiss; Professor Stephen Porges and Sue Carter; Mary-Jayne Rust; Pam Billinge and Lindsay Fovargue; Michael Soth and Nick Totton; and Siegmar and Cornelia Gerken.

Relational Body Psychotherapy, considered a British Specialty Stauffer says, has always been part of mainstream psychotherapy thanks to a concerted effort by British body psychotherapists, especially the members of CABP (the British National Association of EABP) to both know and understand other approaches including an integration of object relations, Jungian work and traditional body psychotherapy, such as neo-Reichian work and biodynamics and to initiate intense dialoguing with other practitioners.

“We’ve made ourselves a good name in our community,” Stauffer says, adding that Greek body psychotherapists also note they are very well respected. “We may have departed a bit from Reich’s legacy. Other body psychotherapy modalities work within one body/one person, whereas we have long been interested in what happens in the interaction between two or more bodies/persons.”



The Bridge of Sighs, Cambridge, England

Cambridge, England

Cambridge is a favorite tourist destination—third after Big Ben and Stonehenge. It’s an old University town—it celebrated its 800th anniversary in 2009. The Congress proper will be held in the West Roads Concert Hall, a large venue offering space for meetings, formal and informal, as well as book sellers and student posters. The workshops will be held at Churchill College.

For specific information log on to <http://www.visitcambridge.org/VisitCambridge/Home.aspx> to visit the official website for Cambridge Tourism. It has places to stay, things of interest to see, events and general information about Cambridge and the surrounding area. The Tourist office is located in Peas Hill, near the market square.



Punters going by Kings College

Congress organizers offer the following information:

If you would like to get an overview of Cambridge, we recommend taking the Tour Bus. You can pick up the bus tour at the railway station or any of the stops in the centre of town. The tour lasts for about 1 hour 20 minutes. Alternatively, you might like to try a tour by bike or one of many good walks.

Points of interest:

Top of the list must be the Colleges, especially the old ones that are mostly arranged along the river. Parts of the river are entirely enclosed by college grounds – this stretch is called 'The Backs' and is very pretty. It is best viewed by punt. A punt is a flat-bottomed boat that gets moved along with a long pole. Punters can be hired, with or without chauffeurs. Individual colleges have buildings worth seeing. The most famous are Kings College Chapel, the Bridge of Sighs in St John's College, and the Wren Library in Trinity College. The buildings of Queen's College are the oldest and very pretty. The newest attraction is the Chronophage clock in Corpus Christi College. Most Colleges have extensive and beautiful gardens; among the best are the ones in Clare College and Pembroke College.

Things to do:

Museums and galleries:

The Fitzwilliam Museum is the largest museum in town and recommended. Entry is free.

There is also a museum incorporating a gallery called Kettle's Yard which is a delight to visit.

The university has a number of interesting museums, for instance: the Museum of Ar-

chaeology and Anthropology; the Museum of Classical Archaeology; the Museum of Zoology; the Scott Polar Research Institute Museum; the Sedgwick Museum of Earth Sciences; and the Whipple Museum for the History of Science.

Music events:

There is a lively Folk and Jazz scene – for details see 'What's On'. A classical music event worth going to is Evensong in King's College Chapel, a chance to hear the famous King's College Choir live.

Atmosphere:

For those who want to soak up the atmosphere of Cambridge, areas of interest will include the area around Market Hill, Trinity Street, the 'Quayside' around Magdalen Bridge, and the Mill Road area with a more multicultural feel.

Markets:

The main market is the place where locals have been trading for 700 years. It is open every day and caters for a wealth of different tastes. Apart from food it also sells local crafts. Another crafts market is just off Trinity Street, opposite St John's College.

Pubs:

The most popular pubs in the city centre are the 'Eagle' in Benet Street, the 'Granta' in Newnham Road, the 'Anchor' in Silver Street and the 'Mill' in Mill Lane both facing the river, and the 'Baron of Beef' in Bridge Street. The Eagle serves good pub food, or you could try the Clarendon Arms in Clarendon Street.

Where to eat:

One of our favorite places is Wagamama which serves Pacific Rim food at good

prices. Indian restaurants are all good and moderately priced. Some Greek restaurants are very good, notably 'Eraina' and 'The Gardenia'. There is a new Jamie Oliver restaurant in Wheeler Street. For Italian food the trendy choice seems to be Carluccio's in the Grand Arcade. Brown's on Trumpington Street is always a good choice for international brasserie-type food. Nearby is Loch Fyne for seafood. The Eagle pub serves good English pub food. There are various cafes some of which offer good food as well. Valerie's Patisserie is a current favorite.



West Road Conference Hall

Safety: The Preamble for Social Engagement

An interview with Stephen W. Porges, PhD



By Nancy Eichhorn

Our bodies, brains included, are designed to respond without thinking. Primed to protect our personhood via reactionary behaviors, our brain's reliance on pre-patterned programming impacts how we interpret what we perceive and how we react behaviorally. Yet, if we slow down the automaticity, if we read our environment from a state of openness and conscious awareness and override our internalized, evolutionarily-organized, knee-jerk response, our lives change.

To save time, unconsciously of course, our brains learned to scan and capture parts of experiences real and written, a glimpse or two, a syllable or so, and fill in the rest, for better or worse, right or wrong. And in that instant we determine the situation, assign meaning, and respond.

With this in mind, I offer two words bandied about in psychological literature today and invite you to notice what comes to mind the instant you read "attachment theory"? Most

likely other terms popped up associated with the concept itself and what you know about it, and perhaps names like John Bowlby and Mary Ainsworth arose since their ideas constitute the basis of said theory.

Next I offer the term social engagement. Then I'll add the name Stephen W. Porges. The words social and engagement most likely moved from a general concept based on different perspectives to a specific argued position and theory, namely the Polyvagal Theory which Dr Porges originated, which spawned a plethora of

clinical applications in a multitude of science based and educational focused fields.

The problem, however, with terms like attachment and social engagement is that they are definitively linked to theories—Bowlby, Ainsworth, Porges—when we hear the word attachment we intuitively interpret it and limit it to the theory. Intellectual expansion, clinical application is stalled unless someone can stop the thought process for a moment, confound the known, and intrigue the listener/reader to look with their mind's eye.

Porges does just that. Building

on a lifetime of research, he spreads his viewpoint beyond current theory, including his own, to build new constructs that positively impact peoples' lives. Take for instance the term 'social bonding'. It presents a larger concept; there is no specific theory in the mainstream lexicon to address the question, "What facilitates social bonding?"

The answer, according to Porges, resides in the concept of safety—without safety there is no social engagement which is the precursor for healthy social bonding.

"The real issue in therapeutic modeling and relationships is

whether the individual is safe in the presence of the other,” he said. “If safe, then you (the therapist) have created a neural platform, a biobehavioral platform and social bonding. If the platform is not safe, if it is chaotic with unpredictable relationships, it will fail.”

Safety, it seems, is tied to predictability. If we are in a predictable environment (geographically as well as relationally) people may experience a sense of inner peace and connection; unpredictability triggers the physiological states of flight/fight associated with the sympathetic nervous system. The degree of predictability colors our experiences, Porges said.

“To feel safe in a defined environment and to turn off our adaptive defensive systems is the goal of civilization; the underlying strategy to optimize attachment is to negate evolution,” Porges said. “We have wonderful defense systems, but we can’t create relationships, can’t access wisdom and creativity unless we can turn off our evolutionarily programmed defense systems.”

When we are mobilized for defense we give up access to social engagement components: benevolence, care, compassion, shared experiences,” he continued. “Being mobilized for defensive states results in ‘biological rudeness’ and the whole aspect of what is gained by being interactive with another can’t play out because we are in survival mode. The parts of the prefrontal cortex that give us the ability to be relational go offline, we can’t separate beyond good and bad. Our

expansiveness, creativity and social relationships are hampered.”

Addressing our current educational system, Porges noted that current theory assumes humans are learning machines which conflicts with the reality that we are mammals trying to survive. Because adaptations to survive perceived dangers limit our processing systems, children who do not feel safe in the classroom setting cannot process language—there goes following verbal instructions. Children who do not feel safe in their classroom cannot remain calm—their bodies are primed for defensive maneuvers.

Despite the reality of physiological impacts on learning and engagement, the predominant features of learning theory minimize the importance of individual differences and developmental differences. Colleges of education base their curriculums on a behavioral level learning model with no respect for individual development and state (affective state), Porges said. By understanding features of the environment that trigger sympathetic nervous system responses, we can change where and how we learn (and work), such as focusing on low frequency noises and predictable environments to create states of safety that promote proximity.

“To balance our needs for social interaction with our needs for safety, we must know when to turn the defenses off and when to turn the defenses back on,”

said Porges. “This is a major issue in our society. When are we safe to be in the arms of another? When are we safe to go to school? When are we safe to go to sleep? People often say they don’t feel safe, and because they have difficulties turning off their defense systems, they can’t truly experience safety. We don’t want our clients to live their lives tightly wrapped, anxious, and defensive—if they are tightly wrapped with tense muscles and a highly activated sympathetic nervous system they convey a state of defensiveness to others that signals it isn’t safe to be in close proximity with this person. Social interactions are characterized by continuously transmitting cues of danger whether it is safe to be held in the arms of another or retreat and protect ourselves. I have used the term ‘neuroception’ to explain this dynamic interactive process.”

“From a therapeutic perspective, we look at people as being capable of using another human being to regulate their (affect) state, can they use someone to calm, to feel comfort, or are they better off isolated from other people and using objects to regulate?” he continued. “Sure there are individual differences and state variations in the ability and propensity to regulate with others or alone; yet, society has mandated that we need to always use other people. In the clinical world, we focus regulation on the interpersonal interaction restricting the individual to interact with the other. Face-to-face or hands-on-the-body, the recipient is required to feel safe with features of the environment whether he/she feels safe or not.”

“If we are not safe, we are

“To balance our needs for social interaction with our needs for safety, we must know when to turn the defenses off and when to turn the defenses back on.”

chronically in a state of evaluation and defensiveness,” Porges added. “However if we can engage the circuits that support social engagement, we can regulate the neural platform that enables social engagement behaviors to spontaneously emerge. From a Polyvagal Perspective, this is the objective of therapy.”

Our nervous system is bombarded with cues to be on the alert, to be prepared to protect and defend. Yet, safe environments are important for everything we do, especially psychotherapy. Thinking about various therapeutic approaches such as Sensorimotor, Somatic Experiencing, and Mindfulness Meditation, Porges realized that even these exercises need to be conducted in a safe environment. Mindfulness meditation, for example, involves experiencing a state of non-judgmental existence while our defensive system, associated with the sympathetic nervous system, is all about judgment and evaluation. Furthermore, if someone is practiced in the art of self-regulation during a meditative state, he often loses that regu-

latory ability when he returns to the outside world (and interacts with others). One goal of therapy, then, might be to help clients regulate their visceral state both together and then in varying degrees alone in order to engage and enjoy interactions with others. Perception, Porges said, involves a degree of awareness and cognition, while neuroception emphasizes that the process also occurs on a neural basis.

Safety is an embodied experience, sensed first within the pulse of our blood, the beat of our heart, the rate of our respiration, even the sweat on our skin. Our bodies offer subtle cues, a slight sense of dis-ease, as well as overt reactions. In social interactions our bodies function very much like a polygraph, Porges explained, and we need to learn more about how to read and to respect our body's responses. We have to know that when we feel uncomfortable there's a reason our body is feeling uncomfortable. Rather than dismissing or denying this bodily feeling, we need to adapt and adjust to it.

People are often pushed to evaluate behavior as good or bad rather than being supported to see the adaptive function of their behaviors as regulating physiological and behavioral states. When we can view our adaptations as a means to secure survival and respect how our body and nervous system put us into a physiological state to survive, Porges said, we can also acknowledge that those same adaptations now hamper our ability to live fully and creatively and engaged.

Offering the example of a rape victim who dissociated during the attack, Porges noted, what if her body didn't betray her but actually saved her? If the client focused on the power of her body to do what it needed to do in that moment to keep her alive, it changes the human narrative of the experience and shifts her body from a position of victim to hero.

"Humans have the ability to develop narrative," Porges said. "If we feel bad, we have to justify it with a story. We need to understand that the motivation behind these personal narratives is to make sense of our experiences. However, the experiences are not merely behavioral events and situational challenges. The experiences are neurobiological. Thus, we need to understand that our nervous system, including specific areas of our brain, is involved in dynamic processes translating bodily sensations and visceral feelings. The effective narrative then shifts from elaborating on the horror of the event, but towards an understanding of adaptive function and the predictability of the bodily reactions."

"I participated in the workshop in which a clinical case was presented of a young lady who believed she had been sexually abused as an infant. She had no memories of the abuse, nothing concrete, no family documentation, yet her belief impacted her ability to be loved and to be touched by another. All she had was a sensation of something being forced down her throat. I wondered if these vague memories had a different history. What if she had been incubated (a tube

"The real issue in therapeutic modeling and relationships is whether the individual is safe in the presence of the other."

put down her throat) as an infant? She would have had the same bodily memory, the same oral sensation of choking. How would she function if she developed an alternative narrative that focused on a medical procedure and not sexual abuse? Would it enable her to restructure her life?"

"With this change in narrative, the physical sensations would not be challenged, but she would no longer be the victim of abuse. Rather than being violated by relatives entrusted to protect her, she would have cast the same sensations in a context of a procedure delivered to be helpful and not hurtful. The change in the personal narrative from victim has massive consequences especially on the ability to develop safe relations with others."

For detailed information on social bonding in adults, be sure to attend Dr Porges' keynote lecture at the 13th International EABP Congress of Body Psychotherapy.

Stephen W. Porges, PhD is currently Professor of Psychiatry and Biomedical Engineering and the Director of the Brain-Body Center at the University of Illinois at Chicago. He leaves the University of Illinois in July, 2012 to become the Principal Researcher for Behavioral Neuroscience at Research Triangle Institute (RTI) International in North Carolina. He is a former president of the Society for Psychological Research and also the Federation of Behavioral, Psychological, and Cognitive Sciences. He is a former recipient of a National Institute of Mental Health Research Scientist Development Award. He has published more than 200 peer reviewed scientific papers across several disciplines including anesthesiology, critical care medicine, ergonomics, exercise physiology, gerontology, neurology, obstetrics, pediatrics, psychiatry, psychology, space medicine, and substance abuse. In 1994 he proposed the Polyvagal Theory and published "The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-Regulation" (Norton, 2011).

The Polyvagal Theory:

Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-regulation

By Stephen W. Porges, PhD

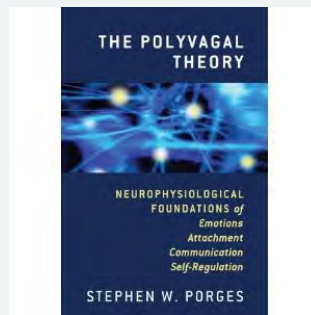


Reviewed by Dawn Bhat

Since the 1960s, Steven Porges, PhD has developed and continues to enhance the Polyvagal Theory of the autonomic nervous system, which started with his research on the heart. The Polyvagal Theory is a developmental, evolutionary perspective on the social nervous system. As a neurobiological basis of social behavior and adaptive survival behaviors, the Polyvagal Theory posits that neural regulation of the autonomic nervous system is inextricably intertwined with the distinct functions of the two branches (ventral and dorsal) of the tenth cranial (vagus) nerve. Porges refers to this as the social engagement system and presents compelling empirical evidence for the role of the vagus nerve in determining the range of emotional expressiveness, quality of communication, adaptive behavioral strategies, and the ability to regulate bodily states.

According to the Polyvagal Theory, neural regulation of the heart rate via the ventral vagus nerve is linked to the detection of fear and safety. When the environment is perceived as safe, cardiac output is inhibited, the parasympathetic nervous system is activated, and the organism perceives internal states that enhance social engagement. When there is a perceived (real or unreal) environmental threat, cardiac output is disinhibited; the fight/flight/freeze responses of the sympathetic nervous system are activated mobilizing or immobilizing the organism. The Polyvagal Theory helps to shed light onto some of the neurophysiological mechanisms involved in somatic psychotherapies, such as Somatic Experiencing developed by Peter Levine, Ph.D.

An assertion of the Polyvagal Theory is that the social engagement is enhanced by one's inner experience of calm visceral states. The Polyvagal Theory proposes that the dorsal and ventral branches of the vagus nerve have different neurophysiological roles and are related to three phylogenetic subsystems in the mammalian autonomic nervous system: com-



munication, mobilization and immobilization. Porges explains that the more primitive phylogenetic unmyelinated dorsal vagus is present in all vertebrates and is associated with mobility (i.e., fight/flight) and immobility (i.e., vegetative states) as a survival function (i.e., the freeze response or playing dead). In the mammalian brain, there is a myelinated ventral vagal pathway that serves an evolutionary function linked to social and affective behavior.

To further clarify how these processes occur, Porges reminds us that the vagal nerve is located in the brain stem but in the mammalian brain it regulates striated muscles of the head and face (i.e., emotional expressiveness) as well as the heart and other visceral organs (i.e., the gut). As such, there is a strong connection between communication and mobilization.

Phylogenetically, this connection and its neuroanatomical substrate (the nucleus ambiguus) are not present in reptiles and is unique to mammals. Based on the evolutionary function of the myelinated ventral vagal complex, Porges asserts that the complexity of social interactions is regulated via visceral state.

Porges work and this compilation is a fundamental building block for body psychotherapists and researchers in somatic psychology. Body psychotherapists put at the heart of their work two extraordinary bodies of literature: the neuroscience of attachment, and the psychophysiology of affect regulation. The Polyvagal Theory is a neuroscientific explanation for the somatic aspect of being in connection with the other and abiding deep within oneself -- one goal of many somatic psychotherapies.

This volume also offers a body/mind perspective on clinical syndromes, such as trauma, borderline personality disorder and autism spectrum disorders. Further discussion is presented on the role and development of attachment relationships on physical and mental health. While the book is extremely detailed in terms of neuroanatomy and early developmental theories, it is an absolutely fantastic contribution to our understanding today of somatics from the inside out.

Dawn Bhat holds a Master of Arts degree in General Psychology from Queens College in New York City and has experience in neuropsychology. Dawn is working on a Masters of Science in Mental Health Counseling at a CACREP program on Long Island and is a counseling intern in psychiatric rehabilitation at the Zucker Hillside Hospital in New York.



The Relational Turn

By Michael Soth and Nancy Eichhorn

D

o we have a shared understanding of what we mean by 'relational'?

The term 'relational' has recently achieved buzz word status. Therapists are quick to quip they are 'relational' because they see themselves as relating well to their clients and because they consider that the 'quality of relationship' with their client/patient is crucial to the work.

Books are written, conferences are held, workshops are offered based upon the increasingly wide-spread conviction that healing takes place in the relationship – 'it's the relationship that matters'. And it is indeed a precious achievement that the profession is now placing such significance on the relationship, rather than primarily on the supposedly 'correct' therapeutic theory or technique, whatever it may be. But unfortunately the apparent consensus across the profession around the centrality of the relationship in therapy is only skin-deep; the closer we look, the more apparent it becomes that being relational means profoundly different things to therapists from different approaches.

Each therapeutic approach tends to assume that relationality is to be understood through its own framework, neglecting the important recognition that different approaches understand therapeutic relating in diverse, and often profoundly contradictory, ways. Relationality, therefore, is too easily appropriated by the paradigms and preconceptions of each partial approach, without the field having plumbed the depths of the fertile and precious conflicts, contradictions and paradigm clashes between and among the different approaches.

Sure, there are some agreed-upon active ingredients, considered conducive to quality of relationship and to a robust working alliance, such as Rogers' core conditions, (empathy, unconditional regard, and congruence), psychoanalytic neutrality, secure attachment, embodied or right-brain-to-right-brain attunement, reciprocity or mutual recognition, but "what do we mean by relating? How do we define relating? What therapeutic activities does relating include, and which ones doesn't it?" (Soth, 2006).

Relational Body Psychotherapy Panel at the 13th International EABP Congress for Body Psychotherapy

These questions and more will be approached during the Relational Body Psychotherapy panel at the 13th International EABP Congress for Body Psychotherapy in the United Kingdom this fall. The panel members, through the background of their own training, therapy, and further development, represent an integrative mix of paradigms and approaches which they will bring to the exploration. Shoshi Asheri, Asaf Rolef Ben-Shahar, Roz Carroll, Nick Totton, and Michael Soth bring together an integrative wealth of personal and

professional experience around a shared core of somatic psychology and Body Psychotherapy, having partaken in Chiron Holistic Psychotherapy, various schools of body psychotherapy, psychoanalysis, and other humanistic and energetic forms of therapies as they evolved in the United Kingdom. Their panel interaction is designed to clarify the significance of relational ways of working within Body Psychotherapy and will touch on topics that may deserve deeper, more intimate inquiry. One of these topics has been called "The Relational Turn", by Michael Soth, and based upon a recent interview with him forms the central point of this article.

Different Kinds and Modalities of Therapeutic Relatedness

That there are different kinds of relating, different kinds of therapeutic relatedness is an idea which has been established in the US by Martha Stark ("Modes of Therapeutic Action") and in the UK by Petruska Clarkson ("The Therapeutic Relationship"). Validating different and diverse kinds of relating (or modalities of the therapeutic relationship) is a significant step beyond the traditional dogmatism of the therapeutic field, where certain therapeutic stances embedded in the different traditions

used to be taken for granted. That they are *all* valid at certain times with certain clients establishes an integrative foundation which allows us to think beyond 'which approach is right (across the board)?' and become interested in the particular relatedness between client and therapist right now, as part of a dynamic shifting process.

Clarkson initially identified and distinguished five modalities: working alliance, authentic, reparative, transference-countertransference, and transpersonal (but these have been added to by various suggestions by others). But the ideas of relationality which have developed since these initial integrative steps were taken in the early 1990's point to another possible paradigm shift beyond an integrative embrace of the different modalities.

A Student's Take on an In-depth Conversation

For me, as a student entering this field with a passion for knowing, a zest to understand what was and what potentialities exist, I want leaders who are willing to broach the forefront of our developing approach with new insights based on both scientific research (statistical helps) and personal experience. I want possibilities and exploration. I want to reach out and experience and from my sense of being allow Existence to guide my work. My views may sound simplistic and perhaps even naïve. And yet, interviewing Michael Soth, an Oxford-based integral-relational Body Psychotherapist and a member of the EABP panel on Relational Body Psychotherapy, I heard a deeper level of knowing combined with a keen sense of what may be. The questions he posed motivated me to

ponder, moved me energetically to experience his what-if's, and see how they applied to my own clinical practice, as well as to all relationships in my life today. I felt a shift, a sense of 'pleasure' as Al Pesso would say, when the right words matched the bodily sensations and a release occurred (personal communication, January 2012).

How Helpful is Neuroscience to Body Psychotherapy?

Over the last 15 years, neuroscience has confirmed what many body psychotherapists have intuited all along. Even Reich got a posthumous leg up as current research finally validates what he knew and others in the field know today—what he called 'functionalism' is today's systems view of holism by another name.

Reich pioneered a holistic view of the bodymind as a mutually interwoven whole system, rather than a top-down mind-over-body dualistic view as implicit in 19th century neuroscience and early psychoanalysis. Neuroscience now compares the brain to an 'orchestra without a conductor'; this resonates deeply with decades of humanistic and body-oriented intuitions which encourage surrender to the wisdom of the bodymind and its self-regulating and self-organizing capacities. Many body psychotherapists are riding this wave of credibility and recognition.

However, many people, myself included until I spoke with Michael, may not fully recognize the double-edged implications for our practice when we try to draw conclusions for our subjective and intersubjective discipline of therapy from another field such as neuroscience which relies upon and is pervaded by objectifying assumptions. Buoyed by the sup-

port and credibility which neuroscience is lending to 80 years of holistic intuitions, we may be importing objectifying attitudes, assumptions, and even instructions for practice which undermine and sabotage the intersubjective relational foundations of our work, unless we do so consciously, with an appreciation of the inherent paradigm clash between subjectifying and objectifying modes of relating.

I have heard statements to the effect that neuroscience now "proves" that interpretations don't work, or that confronting a traumatized client is inevitably damaging rather than empathic or reparative, and that as neuroscience has proved that broken attachment is the root of all later difficulties so parents and therapists 'must be' attuned.

According to Michael, these are simplistic conclusions extrapolated from partial half-truths, and they have limiting and restrictive, and sometimes damaging effects on therapists who try to adhere to them, as well as on their practice. And while it may be true that broken attachments (insecure and disorganized) do have an impact, practitioners cannot just turn scientific findings into formal instructions for therapy without over-simplifying reductively the relational complexity at the heart of the therapeutic encounter (e.g. a plethora of workshops are now offered on attachment-based psychotherapy). Using supposedly objective findings to create a training curriculum for therapists creates an objectifying paradigm that is liable to cut across the essence and basis of our work which is ultimately rooted in thera-

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pist's subjective stance, sense of self, and embodied stream-of-consciousness.

Traditional Body Psychotherapy - Reversing or Transcending Body-Mind Dualism?

The name 'Body Psychotherapy' was coined in the early 1990s with the word 'body' in the label reflecting, according to Soth, the prevalent idealization of the body inherent in the theory and practice of the post and neo-Reichian community of practitioners at that time. Soth remembers and reflects, "We quite accurately diagnosed the body-mind split at the root of all psychological problems and were passionately attempting to overcome mind-over-body dualism, which we recognized as dominant in the culture as well as in the field of psychotherapy. We declared with Perls that 'all reasons are lies', and 'lose your head and come to your senses'. These are all valid, precious and true, but at the time we thought we had already arrived at a final destination."

"However, we did not understand that you cannot overcome any sort of dualism simply by reversing it or turning it around. The fallacy of mind-over-body cannot be transcended by the reverse fallacy of body-over-mind. We oversimplified the problem of the body-mind split by equating the head with the ego and with suppression; we saw inhibition as caused and maintained only by the mind, specifically by the disembodied, dissociated, patriarchal mind. We equated the body with the life force, with the unconscious, the 'noble savage' to be liberated through primal catharsis."

Objectification – How Do We 'Treat' the Objectified Body?

Objectification is one of the main symptoms of disembodiment. The more an individual is disconnected from the direct experience of their living body—their moment-to-moment sensations—the more they tend to treat their body as a 'thing', as an appendage below the head. This stance of objectification then becomes visible and symptomatic in and via the body. Take for example body image. Michael suggests that we can recognize two forms of objectification—the negative objectification of the body as a slave (to the mental identity), and the positive stance of the body as a narcissistic fashion object (to mirror the attempted perfection of the self-image).

Under the banner of the valid postulation that ultimately the body can be experienced as much more than that objectified shadow of what it could be, e.g., the recognition that the sense of self is rooted in the body, and that the body is an essential ingredient in subjectivity, led many body psychotherapists to pursue therapeutic strategies which unwittingly exacerbated the existing objectification of the body through techniques, exercises and interventions intended and believed to enhance embodiment.

The Therapist's Stance: Doctor, Teacher, Body Expert?

"There's this sense floating around in the space of the relationship that the therapist is being paid to be some sort of body expert or body magician," Soth says. "It's tangible in how the therapist positions him/herself as the one who apparently knows better, and based upon that superior knowledge and understanding, makes interventions geared to change the client's cur-

rent state of disembodiment, somewhat like a doctor administering a treatment.

"Operating as the body expert is a bit like being a doctor who says, 'Sure it's bitter medicine, but it's good for you', while the therapist says, 'Here, you're angry, bash this pillow, it's good for you.' Subliminally the client perceives and experiences the therapist's implicit stance as authoritative doctor, and reacts to it through their own established relational pattern, so the hidden and disavowed 'medical model' paradigm operating in the background of the therapeutic relationship is *also* tangible in how the client relates back to the therapist (but then it is often understood and interpreted as the client's 'stuff')."

The Wisdom of the Body – Easy to Experience, Hard to Pass On

Many therapists have embraced body practices such as listening, following (gestures and movements), impinging from within, stress positions, creative expression etc. all based on the neglected wisdom of surrendering to the body and the resulting embodied knowledge. These are all experiential avenues, as all body psychotherapists well know, into the wisdom of the body and the recognition that the body can be experienced as a source of subjectivity. Our tradition knows what it means to be embodied. We have been taught by our mentors how to experience this wisdom and honor our own embodied sense of self. These experiences constitute an essential frame of reference, which as body-oriented therapists we take for granted, but which is not generally understood by the rest of the culture, and therefore most of our clients. This frame of reference doesn't manifest spontaneously.

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The ordinary client doesn't know how to feel into his/her body; they usually perceive it as an unruly, symptomatic servant, or as an enemy or threat. Most ordinary clients start from a place of being disembodied, dissociated, or repressed, or at least not knowing. Bodily knowing and embodiment involve a profound learning (and un-learning) process.

And once acknowledged as a learning process, then we must ask, "What position does the therapist take in this process? How do I, as a therapist, engage with the disembodiment that the client brings into the room? What is the process that helps the client move toward a more enlightened embodied state? What is the therapist's relational stance towards the client as he/she goes through that? And how does the client perceive and experience my stance? And how does their experience of my stance and of me relate to their characterological history?"

Can We 'Educate' the Client into Embodiment?

"Clients get attracted to body psychotherapy for their own reasons and through the lens of their own understanding or misunderstanding. They read about it and interpret the rationale of therapy, the notions of character armor, trauma and dissociation through their own life history and through the lens of their ego's partial and idiosyncratic perception of the world. One stance a therapist is likely to take is 'the teacher'; the explicit version of this is psycho-education, and we know from trauma work that this can have a calming, containing effect, and be beneficial and necessary. But as an exclusive or dominant stance, a 'teacher' position is likely to have limiting consequences to psychological 'internal'

and intersubjective work (which may *also* be necessary, or even more so). In that case, the therapist's 'teacher' position may become positively counter-therapeutic (just remembering many people's previous life story with teachers and authorities generally). So I can tell the client how important it is to notice how they are breathing and how they have just stopped breathing. But as I do so, what kind of person am I being perceived as by the client, and especially by the client's unconscious (including their characterological disposition)?"

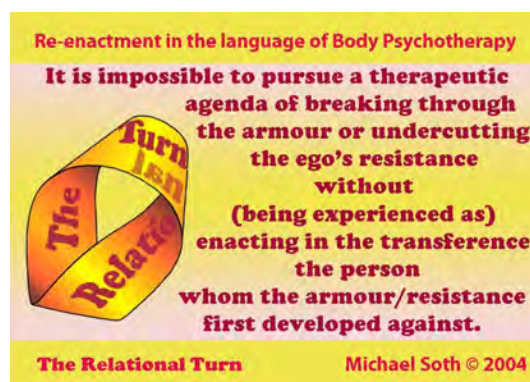
"So however appropriate an educational stance may be in many situations, none of this gets us around a fundamental relational conundrum which traditionally body-oriented and somatic practitioners have not paid much attention to. If I position myself as a 'body expert', my interventions might be translated (unconsciously by the client) as, 'Don't be like that with your body', 'Do as you're told,' and, 'When you notice yourself repressing an impulse, don't.' Doing that creates a relational atmosphere like a doctor's consulting room, an expert or teacher. In short, one more authority who 'knows better' and who knows where the client 'should' end up. To integrate the work with the body relationally, whether or

not the client experiences it as objectified or not, requires a new approach. Perhaps even a new paradigm. Here we can take some inspiration (rather than direct instruction) from neuroscience's recent appreciation of how the infant's embodied sense of self develops originally, in an intersubjective dance with the mother," Soth says.

When an Objectifying Authority is Not Good-Enough

Speaking from over 30 years of experience in this field, Soth offers his thoughts on relational body psychotherapy in general as he personally transitioned through various stages of Chiron's evolution including multiple name changes starting with Chiron Holistic Psychotherapy to holistic body integrative, integrative-relational, and finally Integral-Relational Body Psychotherapy.

Based on these experiences, Soth arrived at a notion he calls 'The Relational Turn' (formulated in the mid 1990s) based on a shift that seems to him may potentially impact every sort of therapeutic/clinical intervention regardless of one's methodological affiliation. From this perspective, the therapeutic relationship becomes much less etiologically perceived and all the more complicated. According to Soth, nothing we've been taught is untrue, it can all be included and valued. And in fact, therapists will *have to* rely on every tool they have at their avail working with-



The more we take the assumptions and implications of character formation seriously and do follow them through into the therapeutic relationship, the more we need to consider how the client experiences the therapy and the therapist

in this new paradigm.

There are two key differences, Soth says, to how he understood Body Psychotherapy 25 years ago: one integrative, and the other relational. In the past, our special expertise and our attitude was partial to the Body Psychotherapy tradition, which excluded other and contradictory approaches, while today we are able to take an integrative stance within which there is a wider embrace of other therapeutic approaches. There is room for all knowledge, all methodology, all ideology.

In the past, our relational stance was more fixed, based upon restrictive, implicit assumptions, not to say dogma, that attempted to legislate for supposedly 'correct' relational configurations such as dialogic, humanistic equality which disavowed (as described above) hidden 'medical model' elements of our practice. Our special focus on the bodymind came at the expense of relational awareness, in the pursuit of our embodiment agenda, we were relationally oblivious; so we did not follow through some of our theories into the experiential relational reality of therapy.

Flying in the face of our own theories and assumptions about the bodymind in the context of therapy, we operated as if clients were always capable of some sort of mental dualism (dual awareness) by which the therapist and their emotional reality could be perceived from outside the client's characterological patterns; as if the client's brain

were able to relive a traumatic experience whilst maintain a reflective, mindful presence vis-a-vis the therapist.

Following Character Theory Through into the Therapeutic Relationship

The key to most schools of Body Psychotherapy is character formation, a model of developmental injury which leads to what Soth likes to call 'the wound' (of which there are of course many, on many interwoven levels, in terms of timing and in terms of the bodymind). Where neuroscience simply sees attachment and its disturbances (leading to a simple relational typology), Body Psychotherapy sees character structures and styles (leading to a complex bodymind, multi-dimensional typology, through traditionally not consequently followed through into the relational realm). The more we take the assumptions and implications of character formation seriously and do follow them through into the therapeutic relationship, the more we need to consider how the client experiences the therapy and the therapist *through* their character, *through* their wounding.

To what extent can the client experience therapy from outside their character?

The chronically frozen embodiment of the wounding within and throughout all levels of the body mind also has implications for how clearly and realistically the client can see the therapist. Or, conversely, to what extent the therapist is going to be seen and experienced *through* the wounding experience. The more the wounding experience has become unconsciously embodied the less reflective capacity we can take for granted, and the less the client will be able to recognize and reflect on the degree to which

they transfer the wounding into therapy and onto the therapist. This constitutes a conundrum which so far has largely been ignored or not sufficiently recognized.

The Conundrum

According to Soth, it is impossible to pursue a therapeutic agenda of breaking through the armor, or under-cutting the ego, or wrangling around the resistance without the therapist being experienced by the client in the transference as enacting the very person against whom the armor, the resistance, the defense was first developed. In psychoanalytic terms, the therapist will inevitably be experienced as the 'bad object'. The client's unconscious sees the bad object enacted by the therapist in the transference. What appears to be happening between the client and therapist, how each person experiences the embodied bad object, and how it enters the room may have substantial impact on the relational interactions that follow.

"Neuroscience often looks at the therapist from a reparative bias. It is already presumed that the therapist experiences him/herself as being reparative, and the bad object is excluded from the reparative construct. You cannot exclude the bad object without short circuiting the fullness of spontaneous transformation we are envisaging as possible. The embodied experience of the bad object is not cognitive; it is not a mental image in the client's mind. Just as once said, 'the issue is in the tissue,' the bad object is in the tissue (as it is on each and every level of the 'turning against the self' which we

recognize as essential to character formation).

"We can include the body in psychotherapy in a way that doesn't minimize the transference or side-step the bad object. The wound always already includes the bad object. Deep therapy at the characterological level inevitably enacts the wound. Rather than presume that therapy only *heals* the wound, I now bring awareness to the enactment and invite that awareness to deepen across the bodymind and relational dimensions of the therapeutic relationship. The more the enactment can be included in awareness, the more a spontaneous process of the wound healing itself becomes likely," Soth says.

For more information on Relational Body Psychotherapy and 'The Relational Turn' be sure to attend the panel on Relational Body Psychotherapy at the 13th International EABP Body Psychotherapy Congress.

Michael Soth is an Oxford-based integral-relational Body Psychotherapist, trainer and supervisor (UKCP), with more than 25 years' experience of practicing and teaching from an integrative perspective. Practicing and teaching from an integrative perspective. Drawing on concepts, values and ways of working from an unusually wide range of psychotherapeutic approaches across both psychoanalytic and humanistic traditions, he is interested in the therapeutic relationship as a bodymind process between two people who are both wounded and whole. He has been pursuing the notion of enactment as central to therapy for the last 15 years or so. He has written numerous articles and several book chapters and is a frequent presenter at conferences.

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A Call To Arms! Let Us Further Embrace Science!

By Courtenay Young, EABP – USABP Scientific Research Committee



Most people, reasonably well-informed about Body Psychotherapy (BP) and/or Somatic Psychology (SP), will acknowledge that (a) there are huge issues around what is ‘scientific’ and what is ‘relevant’ in psychotherapy research, and particularly in BP/SP research; and also (b) that – in comparison with some other types of psychotherapy (mainstream / modalities) – BP/SP does not have a very good track record for doing scientific research - indeed there is almost a paucity of BP/SP research. Many papers, essays and books have explored the nature of BP and made important contributions to the field recognizing the multidisciplinary and dynamic nature of the clinical work, but much more is needed regarding the clinical relevance of BP, and the existing evidence-base for BP needs to be strengthened.

As an indication of this, in over 20 years of publication and with more than 80 issues, the Society of Psychotherapy Research (SPR)’s [fairly] prestigious journal ‘Psychotherapy Research’ has just one single article where ‘body psychotherapy’ is actually mentioned in the title. As another indication, in Frank Röhrich’s (2009) excellent and well-referenced analysis of current BPT research, he states (in the Abstract):

“However, the evidence-base [for BOP] is not yet sufficiently developed in order to get BOP (body-oriented psychotherapy) recognised as a suitable mainstream treatment by national health services and their commissioning bodies. Strong academic links are urgently required in order to support practitioners in their efforts to evaluate the clinical work in systematic research. ... From a scientific perspective, projects on the interface between neuroscience and psychotherapy research should be conducted ... Qualitative research is needed to further investigate ... Provided these requirements will be fulfilled,

BOP could be established as one of the main psychotherapeutic modalities in clinical care, alongside other mainstream schools such as psychodynamic, cognitive-behavioural and systemic.”

This paucity of proper research is now beginning to undermine the proper professional establishment of Body Psychotherapy and/or Somatic Psychology on a par with other branches on psychotherapy / psychology. It is highly likely that we will need a concerted international effort, on many levels – over the next 20 years – if we are going to try to rectify this deficiency. This involves engaging with the latest findings and the immense contributions that each study makes to the development of therapeutic work, and, at the same time advancing available knowledge and recognizing the gaps requiring further exploration. We also need practitioners to support the kind of empirical research that would help to establish the evidence base for Body Psychotherapy and Somatic Psychology. Finally, or primarily, we also need to be paying particular attention to human values and to a scientific attitude. Holding the possibility of both is potentially creative.

Since the formal re-establishment of the EABP Scientific Committee in Oct 2010, now also linked-in to various members of the USABP as well, we have had two meetings to work on a number of issues: (1) to start to build a database of existing Body Psychotherapy research projects, with details, possibly on-line and thus openly accessible – so that we know what is ‘out there’ already and how to access it; (2) to build up a ‘network’ so that science and research articles can be exchanged and commented on within the BP/SP community, prior to external publication; (3) to find ways to ‘evaluate’ existing research and to determine what research is useful to Body Psychotherapy and in what areas where is further research needed; (4) to start working on a ‘lexicon’ of Body Psycho-

therapy terms, so that we all know what we mean by ‘this’ or ‘that’; (5) to advertise the EABP Student Research prize, to identify guidelines and parameters and to adjudicate submissions; (6) to help try to get more articles about BP/SP published in ‘regular’ and mainstream ‘scientific’, psychology & psychotherapy journals - and this will also probably necessitate helping get the new USABP-EABP Journal properly ‘cited’ on the Social Science citation index; and (7) - one which promises to ‘bear fruit’ quite soon – is to hold a one-day Symposium on Scientific Research, immediately following on from the CABP-EABP Conference in Cambridge, UK on 18th September, 2012.

The title of the symposium is *The Science of Body Psychotherapy (BPT): From Research to Practice and from Practice to Research*. Some of the burning questions that both practitioners and researchers in our field are struggling with are: “What do we body psychotherapists add to the field of psychotherapy?” “How do we know that what we do works, and for whom, and that it is as effective as any other therapeutic approach?” “What are the ‘active ingredients’ in BPT, and what do we know about the specific aspects of the therapeutic relationship in BPT.” “What is appropriate Science and Research – as this applies to Body Psychotherapy?” Exploring the interface between practice, research and the range of discussions on the Conference themes, the Scientific Research Symposium will provide a place to share, innovate and interact. We all feel strongly that the whole clinical aspect of BPT has to be intimately involved as well as being informed by research and informing research. The great strength or resource (or research potential) that we have in BPT is in the large practitioner-base, the membership of EABP and USABP. They need to become more informed about, and more involved in

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Ecopsychology: An interview with Mary-Jayne Rust, PhD

By Nancy Eichhorn



Psychotherapy is relational. A dialogue connects one to the other be it therapist to patient, patient to other or patient to Self. Traditionally these conversations reflect what people think about their thoughts and their feelings within relationships with people (past, present, or future tense reflected). Body-based therapies have attempted to create a Gestalt of sorts, a pretense of wholeness inclusive of brain and body; yet, the focus remains on human interactions. What appears to be missing from the process are interactions with other-than-human entities and energies, including where the action occurs. There is power in place, in the environs we find ourselves and how they impact who we are and how we respond. Our relationships with Spirit, with animals, with Nature in general are part of who we are.

Psychotherapy is (naturally) human centered. It does not offer any theory for other-than-human relationships. It has forgotten that the rest of nature shapes our development along side and with human relationships,” explained Mary-Jayne Rust an art therapist and Jungian analyst in private practice in North London who lectures and facilitates workshops on ecopsychology. “The land we are born into shapes our psyche. We have intimate connections with a particular place;

we might for example have a relationship with a tree or an animal. Our first experience with death is often when a family pet dies. Patients experience major trauma when they move from one country to another, their whole being is disrupted by losing their place both in terms of human relationships and their general relationship with nature.

“**We are all familiar** with falling in love with a place, an area, be it a woodland or a particular beach,” she continued. “People are born with an innate ability to form deep and long lasting bonds with nature and the more-than-human world. But, in therapy, and in life in general, people don’t tend to talk about erotic feelings when noting the Earth; we keep this domain with humans.”

Social historian Theodore Roszak coined the term Ecopsychology in 1992 to bridge what he viewed as an artificial divide between the psychological and the ecological to encourage people to

experience the planet’s needs and their own as a continuum (Kanner, 20110).

Roszak challenged Freud’s historical view that nature, a wild unruly entity, rose against us and that our principal task was to defend ourselves against our inner nature and against Nature in general. Roszak envisioned a synthesis of ecology and psychology resulting in the skillful application of ecological insight to the practice of psychology through the study of emotional bonds with the Earth and environmentally based standards of mental health (Scull, 2008).

“**In our dominant culture** Wild connotes a sense of being out of control; we have a long history of fighting nature. What would it mean to trust it?” Rust said. “Over the years people have felt betrayed by nature—their own bodily nature as well as by Mother Nature.

Wilderness is thought of as an external entity to be tamed, contained and controlled as if we can step outside of our nature with a superior power and purpose.

“**We have withdrawn** from our intimate relationship with our inner and outer nature to protect our vulnerabilities and fears,” Rust continued. “We end up living fragmented lives, separated from each other as a disembodied ‘I’. This ‘I’ exists in the head, and we are no longer aware of ourselves as tiny cells within a whole living system.”

She referenced the term, the “Ecological Self” (*attributed to Arne Naess*) which allows us to identify with other beings, to know that we are part of a greater living whole. “The Earth is our collective body and recovery comes as we shift from our relationship with things to a relationship with our inner and outer nature,” she said.

John Scull (2008) writes that “ecopsychology explores connections between the ecological crises and the spiritual or psycho-



logical crises resulting in our increasing experience of separation from the more than human world” (p. 68). He notes that ecopsychology is rooted in a multitude of beliefs and practices including the following: Daoist and Buddhist philosophies; Europe’s mystic traditions and America’s transcendental movement; in ecofeminism, religion and spirituality; and in therapists who considered human-nature relationship such as Freud, Jung, Skinner, and James; as well as ecologists who viewed the significance of the human nature connection including Muir and Shepard.

While some offer a solid definition of ecopsychology and its applications, Scull (2008) added that others assume a broader view—seeing ecopsychology as a field of inquiry rather than a set of beliefs to offer room for multiple perspectives and rule out the possibility of it ever becoming a discipline.

In its current evolution, ecopsychology is said to be experiential, speculative, philosophical, and theoretical (Scull, 2008). Current proponents are formulating a language and a set of models of the human-nature relationship to support practical applications. Experience is said to be the heart of ecopsychology and for the past seven years Rust and co-facilitator Dave Key have facilitated workshops on the West Coast of Scotland to explore sustainability and the human-nature relationship at a deeper level.

“We both felt strongly that we needed to do something, to make a difference in this huge collective catastrophe,” Rust said. “Many people will not be shifted by alarming facts and figures; in fact, shocking information can often push people into a numb state where they get overwhelmed by the state of the world and what to do. They then retreat rather than get actively involved.

I felt that trying to give lectures in a room in London might not reach peoples’ hearts,” Rust continued. “Our courses are designed to drop down to a deeper level of experience. We send people off on solo experiences out in the wilds. The first two days are spent preparing for this, and on the third day we share ‘dawn’s’ first light in silence then have people find a spot to sit alone for the entire day, returning at dusk. On the following day we share what went on inside and outside, noticing the connections and the synchronicity that happened both internally and externally. People return extraordinarily nourished by this simple experience, which offers time to explore what it means to reconnect with nature. Sometimes people feel very excited and even turned on by what happens and this can lead to a whole body feeling of arousal. It doesn’t always happen, but it reminds us that erotic feelings are often stirred in the face of awe, beauty, and love, being moved in body and soul at the deepest level. This does not have to be confined to love for another human but can be stirred by a feeling of love for the earth, for the larger mystery that we are part of.”

Rust then emphasized that the phrase ‘reconnect with nature’ is often overused, that it has in fact become rather clichéd. Her reaction stems from the word ‘reconnect’ as she queried, “What does that mean? It implies that we are disconnected. But just stop breathing for three minutes and it is obvious we can never be disconnected from nature!”

So what does it mean to be disconnected from nature if we are not really disconnected? How do we begin to reconnect? “It is a kind of illusion, a *physiological* disconnect; in my opinion this is caused by our gradual withdrawal from intimate relationships

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Photography by Diane Doherty

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from the other-than-human world. If we think about how we might have lived as indigenous peoples, we would have to know the ways of nature in order to survive; it requires an intimacy no longer required for survival,” Rust said.

“As a result,” she continued, “we’ve lost touch with the rhythms of nature, the rhythm of the seasons, and of the day, and in turn the rhythms of our bodies. We have also lost perspective. When we are out in the wide harsh world, we learn extraordinary lessons that humble humans. Our dominant culture currently views humans as the most important beings. We learn that we are truly just a tiny little speck in passing of huge eons, a huge cosmos.”

“Part of the withdrawal on a psychic level is from what we don’t like in nature. We have made ourselves very comfortable (*referencing Western Culture*), and we understandably want to make a safe world for ourselves, not to be at the mercy of the elements. Furthermore, we have withdrawn from our bodies. It is painful being embodied, and yet, withdrawing from the pain also means we have withdrawn from the joy of the body and the nourishment we feel. Many people are stuck in the city, in an office at a desk with laptops and emails. Sensual pleasures of city life often revolve around food, drink, and sex. We develop obsessions and lose our wider embodied nourishment. We’ve lost touch with much of our greater joy. Ecopsychology addresses the wisdom from the world of psychology to be of real use,” Rust said. “The definition of Ecopsychology can be seen as a modern shamanism. How do we understand that, as the Navaho say, every illness is a wound to or from Nature? We are really getting to the root of it as we turn around how we look at illness and health and community suffering. Ecopsychology is incredibly challenging to the Western Mindset. Many people have the attitude that it is ridiculous to believe that trees feel and that nothing beyond humans have a soul. Yet ecopsychology resonates with the indigenous view that the human psyche does not live in individuals, it is us that lives inside psyche. To get at



Photography by Diane Doheny

this sense of knowing has been a major, deeply spiritual endeavor for me, it felt like a way of grounding my spiritual journey,” Rust said.

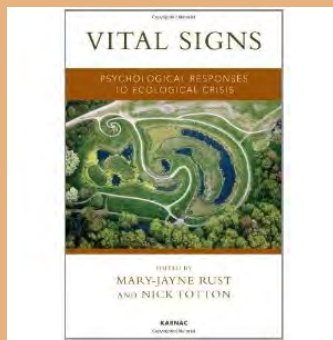
For more insights into the field of ecopsychology, be sure to attend Rust’s lecture “Eros, Animal and Earth” and workshop, at the EABP conference.

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Mary-Jayne Rust PhD is an art therapist and Jungian analyst in private practice in North London. She lectures and facilitates workshops on Ecopsychology in a wide range of settings. She discovered Ecopsychology after a 1990s trip to Ladakh (on the Tibetan plateau). Her interest in eating problems expanded into an inquiry into our collective consuming of the earth, and the relationship between mind and body, soul and the land. She loves color and is a visual artist.



Vital Signs: Psychological Responses to Ecological Crisis

By Mary Jayne Rust and Nick Totton

Reviewed by Megal E. Solberg, New York University

In *Vital Signs: Psychological Responses to Ecological Crisis*, a variety of essays produced by practicing psychotherapists provide insight into and seek to expand upon existing dialogue and debate within the developing field of ecopsychology, the study of the diverse psychological responses to the multiple ecological crises facing individuals and societies, and the attempts to assist in the transformation of these responses into healing forms of ecological consciousness.

The book describes the intrinsic placement of ecopsychology within the context of the climate-change-awareness-raising movement. This contextual placement is critical to understanding ecopsychology's distinctiveness within the realm of traditional psychotherapy. While most psychotherapy analyzes the history, experiences, and traumas of the individual, "ecopsychology brings psychological principles and practices to the study of socialization, individuation and development in ways that avoid making the human being the single object and aim of psychology."

In the first section entitled, "Contexts", Viola Sampson opens with, "The Darkening Quarter: An Embodied Exploration of a Changing Global Climate", describing her personal relationship to her home on a hilltop in North London through a lyrical and metaphorical expression of the changing seasons. She describes the evolving recognition of the planetary and emotional effects of climate change on both herself and humanity. Readers are introduced to the deeply emotive relationship between human and earth and begin to see the interdisciplinary connections between science, feeling, and experience.

The book's second section, "Other-than-Human and More-than-Human", explores the relationship between human beings and other

species and attempts to breakdown the existing superiority human beings currently possess. Alternatives ways of relating are proposed, including more equitable and sustainable relationships with other organisms and places in general. This section even features an example of a creative transformation experiment conducted by Inger Birkeland and Astri Aasen working with kindergarteners in Norway. Birkeland and Aasen explored children's place making activities by asking the question, "What happens when we see schools and kindergartens as resources for the local community and not only the local community a resource for children's learning and development?"

Other essays include a more scholarly tone from Margaret Kerr and David Key's, "The Ecology of the Unconscious", which explores the human psychological relationship to places, our conceptions of nature, and the explication of the concept of wilderness as a form of unconscious space. Rust and Totton offer a more intellectual rather than emotional way of relating to ecology in "The View from Postmodernism."

Here, simple and romantic accounts of nature are criticized and a "possibility of an ecopsychology which rigorously questions its own assumptions and privileges concepts" is introduced as a possible future trajectory (p. xx). Despite the complexity and philosophical debate surrounding these topics, *Vital Signs* remains accessible to a non-scientist reader and retains transparency in its own self-questioning thought processes as an emerging field.

The final three sections "What to do: Possible Futures," "What to do: Influencing Attitudes," and "What to do: Clinical Practice" offer insight into possible solutions. After a

thorough evaluation of the dynamics circulating within ecopsychology, the reader is finally privy to "psychologically formed approaches to changing people's behavior around environmental issues" (p. xxi). While this by no means offers concrete clinical recommendations, it does begin to demonstrate the value of this form of philosophical inquiry as beneficial and effectual in psychotherapeutic practice.

The range and diversity within this collection of writings is evident from both the contrasting perceptions of the self to nature relationship and from differing anxieties caused by consciousness of the inevitable changes facing a fossil-fuel, consumer driven culture. Due to the mostly negative predictions supported by a majority of earth scientists, many ecopsychologists articulate their future role and goal as one of assistance in the management of "the pain and despair that will accompany the end of the world" (p. xviii). This is not to suggest the world will not psychically exist, rather that the existing systems and ways of living will require certain adjustments that might induce a large amount of stress into certain individuals and communities.

These varying responses signify the complexity and vibrancy contained within the progressing field of ecopsychology as more work is published and the field itself becomes increasing self-aware.

In conclusion, this book serves as a foundational text for ecopsychology, uniting a variety of differing philosophical lenses and offering a launching point for practitioners to responsibly design psychotherapies to provide healing and counsel for patients experiencing the collective and individual impact of ecological crises.

Alex Curtis reviews three Eco-psychologically premised books:

Guns, Germs and Steel, Off the Map, and Collapsed

Society and nature appear to exist in two separate and distinct spheres. Beyond a trip to the park or a yearly camping trip, the environment doesn't tend to enter into the life of the average citizen. What these three books—Jared Diamond's *Guns, Germs, and Steel* and *Collapsed*, as well as Chellis Glendinning's *Off the Map*—aptly show is civilization's wide-ranging relationship with and dependence on the environment. While these books vary as far as style and scope are concerned, they all converge on the fundamental importance of geography.

Geography forms the basis Diamond's *Guns, Germs and Steel*. He starts the book with an anecdote, accounting the time he spent doing research in what is now New Guinea. While in New Guinea, Diamond spends time with a charismatic, local politician named Yali who asks the question, "Why is that you white people developed so much cargo and brought it to New Guinea, but we black people had little cargo of our own?" which in turn guides the rest of the book, (a dense and academic presentation). Tracing back 13,000 years, after the most recent Ice Age, Diamond seeks to explain why Eurasian civilizations ended up conquering most of the world. Through doing this he also hopes to refute any notion of inherent Eurasian superiority: intellectual, genomic, or otherwise. What follows is a series of natural advantages that generate positive feedback and compounding strength.

While summing up the course of thousands of years of history is an ambitious task, he does so in a surprisingly clear and succinct manner. According to Diamond, though many societies transitioned from hunting and gathering to agriculture around the same time, the Fertile Crescent, containing parts of modern day Mediterranean border countries including Egypt, Turkey and Israel among others, yielded the most widely varied and suitable plants and animals for domestication. Better crops led to a food surplus, which allowed for the division of labor, which led to accelerate technological and economic growth. This was coupled by a large land mass and east-west orientation, plants and animals could be exchanged across long distances, finding themselves in an array of similar climates. This exchange in environment led to an intellectual and

cultural intermingling. Unlike, for example, the monolithic Aztec empire, these societies were strengthened through keeping in contact with each other. In short, there has been a series of fortunate circumstances that has led to an apparent Eurasian superiority throughout the world's modern history.

Glendinning, in *Off the Map* details the oft-adversarial relationship between human history and global geography. It is eco-psychologically oriented—with eco-psychology here meaning the study of how people positively or negatively impact the surrounding environment. Her definition of eco-psychology serves the book's two main purposes: rejecting globalization, and embracing the natural world. More specifically, she views globalization as another strain of Western imperialism that is ultimately unsustainable. As a result, she argues for a more sustainable culture, one that is land based, as opposed to one that emphasizes massive production or drastic economic and technological advancement. This would serve two purposes: lessening the sense of alienation often felt in a rigid, compartmentalized culture and reducing environmental exhaustion and abuse.

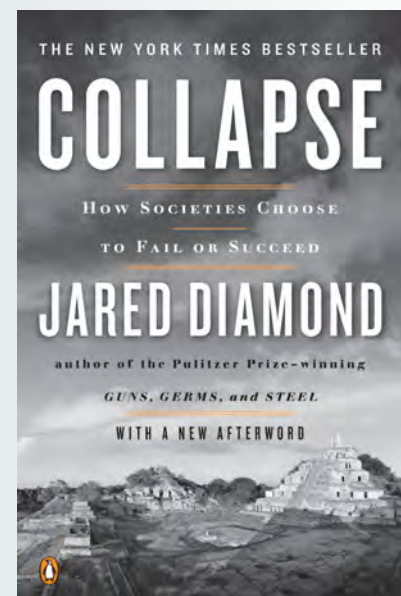
The book itself is anchored by three different stories—one of her rocky childhood, a brief summation of the past 300 years of Western history, and a horseback ride with her friend through northern New Mexico. Glendinning is sparse, elegant and poetic. She does an excellent job at weaving the nuts and bolts of culture with the transcendent earthiness of the natural world: "The facts of history do not lend themselves to the songs of the river." This statement is particularly indicative of the book as a whole. The balance of rational linearity and unexpected fluidity ran throughout the book as well, serving as bedrock for the sublation of the personal and the political, internal and external.

In contrast, Jared Diamond's *Collapse* is warmly scientific. Here, we return to the same dense, yet readable style as *Guns, Germs and Steel*; this time examining the collapse of societies, not the buildup. Like *Guns*, his explanations in *Collapse* are centered on geography and the environment. Instead of looking intensely at one group of societies—Eurasian—he was able to look at a vast array—Easter Island, Maya, Greenland Norse, Rwanda etc. The five core

factors that he contributed to societal collapse were: climate change, hostile neighbors, collapse of essential trading partners, environmental problems and failure to adapt to environmental issues. Every society he studied suffered from at least two of these problems.

Since he describes the collapse of societies distant enough in time in time and place, the reader—or, more accurately, the First World reader—can read this book with a kind of detached enjoyment. However, when he brings up the city of Los Angeles and lists its structural problems a sense of thick immediacy brings the message home efficiently. From his perspective, the way Los Angeles is organized leads to increasing environmental problems, driving and traffic, as well as an unwillingness to adapt to those issues. The city is becoming increasingly more divided, with the wealthy more and more closing themselves off from the rest of the city and its problems.

Regardless, the book finishes on a note of what Diamond calls, "cautious optimism". While the scenes of societal collapse have occurred time and again, they are all the result of problems that humans created and that humans can fix. In addition, with the increasing interconnectedness of the world, we are learning about the past in ways that were previously impossible. We are also more aware that these problems do exist. As one would expect, no book offers a grand solution. All large-scale change has to be gradual.



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research in BPT.

The three main topics in this Symposium will therefore be: (i) *The Science of Body Psychotherapy: relevance, methods and future perspectives*; (ii) *Evaluating therapeutic processes and outcomes in BPT research projects*; and (iii) *Other scientific findings, projects and developments relevant for theory and practice of BPT*. Presenters currently invited include: Christine Caldwell, Rae Johnson, Frank Röhricht, Sheila Butler, Courtenay Young, Stefan Priebe, Joop Valstar, Dave Tune, Helen Payne, Maurizio Stupiggia, Herbert Grassmann, Eric Woltstorff, and others.

We also hope to have, at both the main EABP Conference and the Scientific Research Symposium, other forms of dialogue and debate, many of which can be extended out to people (BP/SP ‘members’ – especially in the USA) who cannot be present: these can be ‘proceedings’ of papers and articles, submitted previously and available at the Confer-

ence, Symposium and via the EABP (possibly USABP) website; ‘poster presentations’ are invited about specific research studies and projects (these can also be ‘posted’ on the EABP website); videotapes and recordings of previous relevant presentations, started by Serge Prengel (see: <http://somaticperspectives.com/>); structured discussions and internet discussion forums on some of these topics (some are already happening on LinkedIn discussion groups; and we – of course – welcome any contributions of any sort from EABP & USABP Members, as well as other people involved in the wider Body Psychotherapy / Somatic Psychology community.

We intend to hold a similar Scientific Research Symposium again, in conjunction with the next ISC-EABP Conference in Lisbon, 11-14th September, 2014.

Hopefully this date will not clash (again) with the USABP Conference and maybe the USABP Board & conference team will even consider starting to hold their own Scientific Research Symposia, maybe in the years in

between the bi-annual conferences, and on more of a regional basis.

I also think that it will become absolutely necessary – at some point – to establish a Somatic Psychology division of the American Psychological Association (APA) (www.apa.org/about/division/index.aspx) and maybe this could be done sooner, rather than later, by any USABP members who are also members of the APA.

Anyway, we look forward to your involvement – on any level – and hope particularly to see you at these EABP Scientific Research Symposia in September 2012, or 2014.

For more information on the work of the EABP Scientific Committee and/or if you would like to get involved please go to the EABP website: www.eabp.org and click on the link under “Research” to the EABP Scientific Committee. For ongoing updates see EABP website: www.eabp.org and the 2012 EABP Conference website on “The Body in the World; The World in the Body September 14-17, 2012 Cambridge, UK: www.eabpcongress2012.co.uk

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David J. Linden, PhD - The Neurobiology of Pleasure



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You can find information about his work at www.soth.co.uk (extracts from his published writing as well as hand-outs, blogs and summaries of presentations), and his training work at www.counsellingpsychotherapycpd.co.uk (the website of INTEGRA CPD).

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