



Stella Resnick PhD

Full-Spectrum Therapy

By Stella Resnick
and Nancy Eichhorn

Full-Spectrum Therapy (FST) combines cognitive-behavioral and somatic-experiential approaches, draws from attachment neuroscience, neuroplasticity, sexology, and the positive psychology of flourishing, and offers clients a new world view to adopt—to see problems as opportunities to evolve.

To Stella Resnick, founder of the “full-spectrum” approach to both psychotherapy and sex therapy (FSST), our “issues” become valuable incentives—they challenge us to mobilize our inner resources and to grow. With a reframing of a client’s concerns into a more positive, evolutionary perspective comes the ability to create constructive goals. The aim is not just to ease the pain or discomfort of a present dilemma but to heal from old wounds, examine limiting and often intergenerational patterns of thought and distress, and embrace a new way of doing things.

“That’s the cognitive part of the therapy and setting goals is the behavioral. Now, how do we get there? That’s the somatic-experiential part,” said Stella, a clinical psychologist in private practice in Beverly Hills, CA, who specializes in relationship and sexual enrichment. “That’s where



clients learn through an internal tracking process how to be present in the body, breathing deeply, and drawing insight from the images and memories stirred up.”

Stella says that it’s the experiential processing that mediates between the cognitive—both the old and new way of thinking—and the desired behavioral outcomes that animate the healing process. She considers the tasks of FST as shuttling between the cognitive realm of understanding and the somatic realm of focused attention on

physical and emotional sensations, visceral perceptions, and motoric urges.

Stella’s current work grew out of her early Gestalt training first with Fritz Perls and later with Laura Perls and many others. “I’ve been putting this together all my life,” Stella said. “Much of it’s been driven by my own personal distress in relationships. I started with Gestalt work. Then I got into bioenergetics and bodywork. I worked with Charlotte Selver, Virginia Satir, Anna Halprin, Stanley Keleman, John Pierrakos, Moshe Feldenkrais, and Milton Erickson. I practiced Vipassana meditation and studied with Jack Kornfield, Chogyam Trungpa Rinpoche and Tartang Tulku Rinpoche.”

“When I was in a relationship where the sex wasn’t working,” Stella continued, “I got into studying sexology and sex therapy

Continued on page 20

and worked with some of the early educators in those fields. Now I'm inspired by attachment theory, brain imaging, positive psychology, and the amazing studies in neuroplasticity that reinforce our ability to change old patterns, even overcome our handicaps, and make remarkable gains." She says that the data also confirm the value of a phenomenological body-based approach to healing trauma, which supports much of the theory and practice of Gestalt therapy.

Stella's practice involves helping client's move through a variety of emotional and/or sexual challenges in their intimate love relationships. She sees couples together and often individually, and she also works with clients on any number of other concerns that may relate to parenting, work, or creative challenges. "Much of it," says Stella, "is not only about the stress in their lives but more to the point, how they have been programmed by their early attachment experiences to deal with stress."

By learning to be present in the moment and to practice conscious breathing, clients can observe their inner subjective experience and see what early memories surface. They can have Gestalt style dialogues speaking both as themselves and as their disapproving fathers or distracted mothers, and they can re-do those memories by giving the child they once were the ability and opportunity to say the things that never were expressed before.

In the couple's relationship, they learn to slow down the tendency to be reactive and to interrupt their knee-jerk threat reactions that only make matters worse. Only then can they choose a more effective way of responding to a difficult situation with their partner, especially during an emotionally challenging situation or sexually intimate encounter.

Stella says she sees many couples in therapy who are initially motivated for therapy by a lack of fulfillment in their sexual relationship. One couple, she spoke about came in because the husband was much more interested in sex than the wife. But

it turned out that a big part of their problem was the way the husband was putting down the wife for her lack of passion. I call it "bad foreplay," said Stella. The other part of this dynamic was that the wife was allowing herself to be bullied into sex, so that rather than have loving sex that was a turn-on, she ended up servicing him and then feeling resentful and turned off to him. He was none too happy about it either as he considered his wife cold and unresponsive during sex and unloving toward him.

What makes a man think that he can bully his wife into having sex and get great sex from the experience? What allows a woman to silently go along with her husband's demands and be resentful rather than express her needs? That's where Stella refers to the attachment research.

Citing Alan Schore's work, Stella described how we're born with an undeveloped brain and nervous system that gets shaped in the interactions with the primary caretaker, usually the mother. Only the right brain, the emotional, nonverbal hemisphere, is functioning during the first 18 months of life. The left brain, which is associated with language, doesn't begin to develop until after that.

When the infant's autonomic nervous system is stressed, a warm intuitive mother is able to comfort and satisfy the infant and reduce his or her stress. The mother's own stress levels are then down regulated and through this mutual regulation process the infant learns to feel secure, which enables curiosity and exploratory behavior.





“If the mother is depressed or detached, and continues to be distant, the infant is likely to grow up as an insecure-avoidant child who learns not to depend on others for comfort and as an adult who tends to self-soothe during times of stress. Children raised by anxious, intrusive parents are likely to grow up to be insecure-anxious adults who have learned to depend on others to reassure and comfort them and tend to be clingy in a relationship.

When one partner is insecure anxious and relies on reassurance and soothing while the other is avoidant and under stress needs to be alone, you can see where there will be conflict. In the example, it was the husband who needed the constant reassurance and that’s what having sex did for him. For the wife, she couldn’t imagine being comforted by anyone but herself. She needed to be alone when she was under stress.

When an individual or couple comes for therapy, Stella always take a family history to see how their early childhood programming, particularly how

they learned to handle stress, is influencing their ways of handling stress as adults, especially in their relationships.

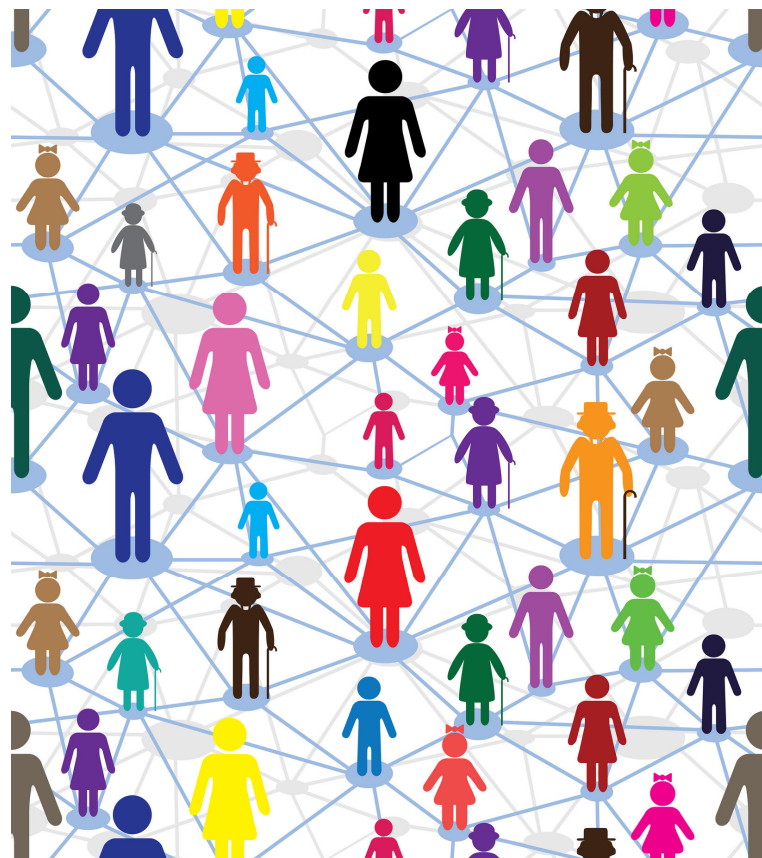
She asks people to draw a diagram of their family as they were growing up, until the age of twelve, assigning a circle to all the females in the family and a triangle to all the males and showing the emotional closeness or distance between all the members of the family. Then she asks them to describe the relationship between the parents, then between the client and each of his or her parents and siblings. She also asks about illness or trauma, religion, what they learned about sex, and anything else that clients consider important in their early development.

People’s early childhood experiences, particularly their observations of their parents’

interactions, becomes their template of what to expect in relationships—often called the working model of relationships.

When Stella asked the bullying husband and the docile resentful wife to draw their family interactions, she was able to show them that how they learned to respond to each other was a repeat of what they witnessed in their own families. The husband’s father was an angry, demanding man while the wife’s mother was the silent suffering type who was seething with anger. Neither one of them wished to continue the intergenerational patterns that had become their own habitual ways of responding to each other.

However, it’s not easy to change those patterns as our brains and nervous systems are programmed to automatically respond to stress in a particular way. For the man, it was to demand what he wanted,



for the woman, it was to suffer in silence and then get even in passive vindictive ways. Showing them how that was their programming lead to the cognitive dissonance that can motivate change. Neither wanted to repeat his or her parents' limitations.

That's where conscious breathing comes into play in helping people develop skills that can support change, Stella said. The sympathetic and parasympathetic nervous systems are governed by our breath, where each inhale activates the SNS and each exhale stimulates the PNS. When people are in a state of alarm, they tend to hold their breath. People who live in a chronic state of stress tend to breathe in with shallow breaths, like arrested startles, with only their upper chest moving. They don't exhale fully; the air seeps out, just enough to enable a little room for a bit more oxygen to come in. The breath is the one place in the body we have voluntary control over an involuntary process.

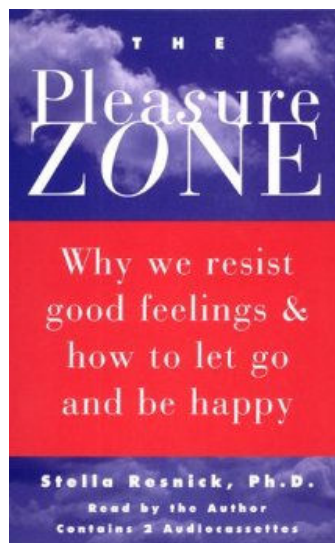
Learning conscious breathing, as a way of getting in touch with emotions and balancing the nervous system, is a part of the skill set that Stella teaches her clients. She calls this the "principle of relaxed excitement." According to Stella, "The key to success in everything—whether in health, work, intimacy, fulfilling sex, or thriving during hard times—is being able to cultivate the ability to relax into your excitement. If your SNS starts to really fire, you need support from the PNS to stay open so you can

comprehend what's going on and not just react reflexively based on the past and your programming. "I teach people to slow down, breathe, look around and see what's happening, see what your options are. I want them to be mindful and to know that, 'I don't have to react. I can lower my stress level, assess the situation and decide on how I want to respond,'" Stella said.

A big part of FST is about helping clients to expand their repertoire of pleasures, to learn to de-stress, to play, to relax and to be present to everyday delight.

"Why do people resist feeling good?" she said. "This brings up the importance of enhancing the capacity to enjoy pleasure, which research continually shows is good for health. Her first book, *The Pleasure Zone*, researched the field of psychoneuroimmunology,

PNI, and showed how pleasurable experiences boost the immune



system, helping us to resist illness, even illness that we are genetically predisposed to, and to

recover from ill health. Yet most of us have learned to hold ourselves back from feeling as good as we can.

Studying Wilhelm Reich and his notions of "pleasure-anxiety" and "pleasure-resistance" influenced Stella's insights: "much of our negative conditioning around pleasure comes from early childhood during the encounters with parents over displays of exuberance or sexual interest," she said.

"We are born sexual," Stella said. "Little boy babies have erections in the womb; little girl babies begin to lubricate by three days of age. The data show that sexuality is independent of reproduction. It is one of the early sources of pleasure."

Stella observes that most attachment researchers don't take into account the fact that the attachment bond developing between a parent and child is forming with a child who is awakening to sexual feelings—that attachment and sexuality become intertwined. John Bowlby, the founder of Attachment Theory, knew that as Stella quoted him as saying, that the attachment behavioral system and the sexual behavioral system "have unusually close linkages."

As babies our bodies feel good to the touch and we experience joy. But we often learn at a very early age, that it is not okay to be sexual in the presence of family. If parents frown during diapering when the baby touches his or genitals, or they slap the baby's

developing child, he or she will learn to suppress his/her sexual feelings at home and direct their sexuality toward strangers. That's a good thing in one way because it discourages incestuous feelings, but it becomes a problem when we fall in love and make a commitment. When we move in together, and start treating each other more like family and less like a lover, there's an automatic tendency for the pelvic area to turn off sexually. Stella calls this the "love-lust dilemma," which is the subject of her second book, *The Heart of Desire: Keys to the Pleasures of Love*.

In the family history inventory, Stella asks questions like, "Did you ever see your parents kiss or be affectionate with each other?" These childhood experiences are significant with how they feel about their own sexuality. Kissing, hugging, that's enough for programming positive sexuality."

Stella is now very interested in training psychotherapists and sex therapists in her "full-spectrum"

approach and to gain a greater understanding from each other's fields. She says that few psychotherapists are knowledgeable about sexual development and how the sexual self is at the core of personality development, while most sex therapists often treat sexual concerns primarily as an activity that requires developing better sexual skills. So while psychotherapists often deal with the emotional aspects of clients' issues, sexuality, which is a core aspect of our self, is often not talked about at all.

For Stella, it's important for psychotherapists to become more informed about the interconnections between a client's emotional and sexual development. For sex therapists, she wants them to know more about the deeper emotions—the anxiety, feelings of inadequacy, or shame—that may impact how the client feels about sex and to learn how to deal with those feelings more effectively. Stella has been leading trainings on this work twice a year for the last six years at her office in Southern California. Starting in February of 2014, she will be leading five day trainings at Esalen Institute in Big Sur, California.

Stella sees intimate love relationships as fundamental to human well-being. She recognizes sexual aliveness in long-term relationships as fostering feelings of romantic love, even in long-term relationships, and engendering contentment with oneself and one's partner. She describes relevant research in positive psychology and the science of flourishing to help clients broaden their understanding of what works and to build skills that

Intimate love relationships are fundamental to human well-being.

nurture loving feelings and sexual pleasure. Her therapeutic model blends cognitive and somatic methodologies using present-centered body-based Gestalt processing, breath and body attunement, and visceral and sensory perception exercises. The aim of FST and FSST, Full-Spectrum Sex Therapy, she said, is to inspire insight, reduce stress, and enhance the ability to enjoy feelings of love and sexual pleasure.

Stella Resnick, Ph.D., is a clinical psychologist, certified sex therapist, author, speaker, and seminar leader in private practice in Beverly Hills, California. She also trains and supervises therapists in her Full-Spectrum approach to psychotherapy and sex therapy. Her latest book is *The Heart of Desire: Keys to the Pleasures of Love*. She can be reached through her website at www.drstellaresnick.com.

