

# Somatic Psychotherapy Today

**How do you speak when you don't know the words?**

**Inside:**

- The Creative Embodied Experience
- Institute for Embodiment Studies
- The Art and Science of Face Reading



A PUBLICATION OF THE UNITED STATES ASSOCIATION FOR BODY PSYCHOTHERAPY

VOLUME 1 | NUMBER 3 | WINTER 2011

# University of Massachusetts Boston

## Infant-Parent Mental Health Post-Graduate Certificate Program



By Nancy Eichhorn

**T**he body's wisdom begins at conception and continues throughout our lives. Our first sensation—touch (sensed on the face)—develops at around seven weeks, gestational age, and infants are born as sentient beings with their own sense of bodily understanding and wisdom.

The lived experience of the body has been respected and nurtured in pre and perinatal studies and infant development programs far longer than with adult populations. But this appears to be changing with the current paradigm

shift to an emotional focus emphasizing mind/body relationships, (Schoore, 2009), and the acceptance that the ability to regulate our emotions constitutes “the heart of the human experience” (Beauregard, Levesque, & Bourgoin, 2001, p. RC165). The use of emotional self-regulatory processes constitutes the core process of many therapeutic approaches. Because of this shift, interdisciplinary studies are on the rise and communication between different disciplines is increasing due in part to programs like the Infant-Parent Mental Health Post-Graduate Certificate Program (IPMHPCP).

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# The People of USABP

## Staff

Nancy Eichhorn, MA, M.Ed, MA *Editor and layout design*  
Diana Houghton Whiting, BED *Cover design and layout*  
Robyn Burns, MA. *Website coordinator*

## Regular Contributors

Jennifer Tantia, MS, BC-DMT, LCAT

## Executive Committee

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## About the Cover Art:

King Pigeon by Lindsay Satchell

“This print is a reproduction of my original watercolor painting of "King Pigeon" (Eka Pada Rajakapotasana). Graceful orange brushstrokes are topped with ink lines to define the pose.”

<http://www.etsy.com/listing/19721249/king-pigeon-print>

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## About the Staff



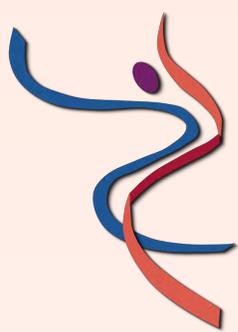
**Nancy Elizabeth Eichhorn, MA, M.Ed, MA** is a writer, editor, ghostwriter, investigative journalist, and credentialed educator. Her business name, Write to Be, mirrors the importance of writing in her life. She has masters degrees in clinical psychology, education, and nonfiction writing. Pending IRB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



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



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



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# From the Editor

Read us on the web! [www.issuu.com](http://www.issuu.com)  
Search: Somatic Psychotherapy Today

Readers are writing, practitioners are sharing their insights, and embodied teachers and researchers are gathering to explore and expand our current knowledge from an embodied perspective.

The articles in this issue offer readers an in-depth experience of *The Wisdom of the Body* from multiple viewpoints as the body secures its place in all fields of psychotherapy.



Thank you for sharing your stories.

Warmly,

Nancy Eichhorn



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](mailto:MagazineEditor@usabp.org)

## Upcoming Themes /Deadlines/Pub Date

### **Anatomy of a Conference/January 14, 2012/Spring 2012**

Topics include:

- Body Psychotherapy Past and Present so any themes that fit with that!
- Attachment and social bonding in infants and adults
- Relational body psychotherapy
- Embodied conflict resolution
- Eco psychology
- Social justice
- Practice related research in body psychotherapy

### **Multicultural Perspectives and Embodied practices/April 9, 2012/Summer 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.

Please email your submissions to [MagazineEditor@usabp.org](mailto:MagazineEditor@usabp.org)

## Across the Pond by Lidy Evertsen and Jill van der Aa

E  
A  
B  
P



Kings College, UK



Lidy Evertsen



Jill van der Aa

Keynote speakers are booked and more than 100 people have registered for the EABP's 13<sup>th</sup> International Congress, *The Body in the World – the World in the Body*, September 14-17, 2012, in Cambridge, UK. It looks to be a very exciting event.

Our central premise is that to truly inhabit our bodies is an invaluable resource with implications for us as individuals, for psychotherapy practice, and for the future of the planet.

The program is conceived as a journey from infancy to the processes that effect bonding between individuals in adulthood, and beyond that to the bonds that can hold groups and societies of individuals together or apart, and finally to the relationship between us as human beings and our natural world, the planet Earth. We have allocated the time of the congress to these different stations of the journey.

The Congress officially opens Friday

and includes a welcome address by Andrew Samuels, Chair of the UK Council for Psychotherapy, and an opening keynote lecture by Merete Holm Brantbjerg: Polarizing or Integrating differences? An experiential plenary presentation.

The congress proper starts with two keynote lectures on attachment: Daniel Stern on bonding and attachment in infants; and Stephen Porges on social bonding in adults.

Continued on page 8

Saturday is largely devoted to Relational Body Psychotherapy. The theme will be presented by a panel of speakers who will seek to embody relational work by involving all congress participants in the process.

Saturday evening is dedicated to a Gala Dinner at Kings College, followed by music and dancing.

Sunday's plenary speakers are Mary-Jayne Rust on ecopsychology, and Rubens Kignel on social justice.

Monday Jean-Claude and Dr. Arlene Audergon will speak to the topic: *Body of Learning: A group process about where we are and what we contribute as a field of body psychotherapy.*

Parallel Presentations will be offered on all three days as well.

The deadline for applications for workshop presentations is December 31, 2011; we welcome USABP members. For information [www.eabpcongress2012.co.uk/](http://www.eabpcongress2012.co.uk/)

#### Research Symposium

A Research Symposium will be held on Tuesday, September 18, 2011, following the main Congress entitled, *The Science of Body Psychotherapy: From Research to Practice and from Practice to Research.* Some burning questions that both practitioners and researchers in our field are struggling with will be discussed such as, How do we know that what we do works and for whom, and is it as effective as any other therapeutic approach? And, what is appropriate science and research as this applies to Body Psychotherapy? There will be two keynote lectures: one from a practitioner perspective and one from a researcher perspective, followed by plenary

debate.

The Symposium will give time and space for exploration of current issues and debates, information, networking and discussion amongst international body psychotherapy practitioners, researchers and students. We will also offer suggestions for research that practitioners can apply in their daily work and time will be given to establishing a Practice Research Network.

#### New Scientific Committee

The newly formed EABP Scientific Committee is keen to welcome practitioners as well as researchers. USABP members Rae Johnson PhD and Christine Caldwell PhD, associate committee members, will be participating in the Symposium. For information <http://www.eabpcongress2012.co.uk/en/programme/presentations.html>

#### International Body Psychotherapy Journal: The Art and Science of Somatic Praxis

The collaborative Journal unites the talents and directives of the USABP and the EABP. Dr Jacqueline A. Carleton is the Editor, and Katy Swafford PhD USABP President, Robyn Burns MA, USABP Executive Director, and Nancy Eichhorn MA, M.Ed., MA, Editor, *Somatic Psychotherapy Today*, serve on the Journal's editorial committee.

## The Body in the World The World in the Body



### 13th International EABP Congress of Body Psychotherapy

September 14 -17th 2012 - Cambridge, UK

A 21 member International Advisory Board has been constituted and more than 20 peer reviewers have agreed to participate. The first edition will appear in spring 2012. Submissions are currently being accepted. For information <http://www.eabp.org/publications-journal.php>

#### 2014 EABP Congress

The EABP has agreed to hold its 2014 Congress September 11-14 in Lisbon, Portugal in conjunction with the International Scientific Committee. Thomas Riepenhausen is the organiser and will be joined by people from the Biosynthesis and Bioenergetic communities in Lisbon.

The last months have seen increased contact between the USABP and the EABP, and we look forward to building on this cooperation further.

# Creating Space to Nurture the Wisdom of the Body: The Conference Experience

By Paul C. Briggs



Paul C. Briggs

In our daily existence and for absolutely everything we do, participation of the body and the evocation of its wisdom includes at some level the involvement of the entire sensoria of our being. We constantly blend the special senses of vision, hearing, smell and taste; the somatic sense of touch—the "felt" sense—expands, of course, to include our muscle senses and sensations of touch and pressure, pain and temperature. As body psychotherapists, we cannot forget, as well, the senses of intuition and the more innate senses of the body's memories and sensations at the cellular level.

How then does the wisdom of the body influence the making of a conference? Conversely, how does the conference experience nurture and become inclusive of the wisdom of the body? Conference planning, the execution and the experience of the program itself, consists of words, pictures, proposals, locations, schedules, time frames, topics, pressure, stress, activities and interactions, and the conveyance and dissemination of ideas and concepts. So, how is a connection with these elements facilitated to allow the body's wisdom to become a part of the experience?

One challenge faced by USABP governance provides a good example of the importance of providing a suitable

environment necessary to be welcoming to the wisdom of the body. USABP consists of membership, board members, and committee members who make their homes within a variety of areas of the continent, and even the world, and we continue to foster our relationship with EABP and people worldwide. As an organization consisting of like minded, body-oriented individuals, USABP often struggles with the vast geographical distances we must operate within.

As "keepers of the organization," we must be in contact to take care of the organization's business, and to work on the various projects that keep us going. Of course, with today's technology, we have e-mailing, forum discussions, and audio and teleconferencing at our disposal. We often use these mediums to conduct our work; unfortunately, these modes of communication do not fully support the entire experiences of "presence."

We must often do our work without the contact of face-to-face presence and interaction, and our work together can sometimes feel impeded, incomplete, when we cannot bring in the felt senses and the wisdom of the body. Organizationally, our by-laws require that USABP governance meet face-to-face at least twice each year, which provides us some opportunity to build in the "missing piece" of felt sense when we work together. This year, the conference planning committee made it a point to meet face-to-face during the development of the conference program, an opportunity that assisted in enriching the collective creativity put forth in developing a quality program.

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How does

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### Creating a program "feel"

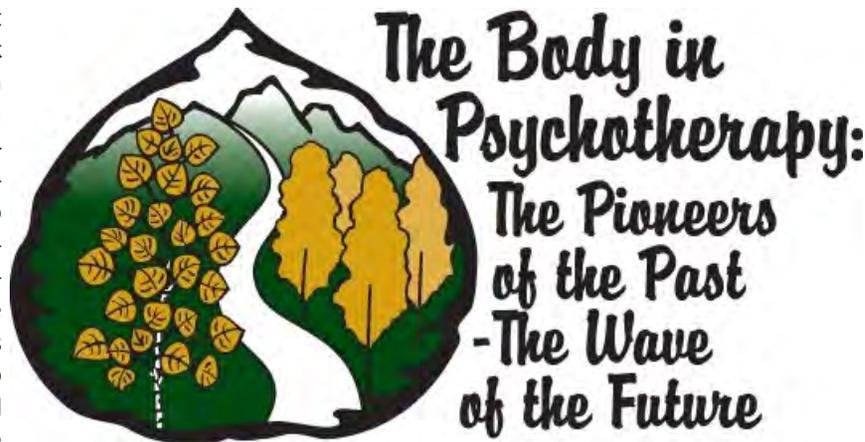
With this notion in mind, how can a conference for body psychotherapists be fully "experienced" and inclusive of the body's wisdom? How can we nurture the wisdom of the body and give it the means and resources to fully participate in the conference experience? We might consider starting at the beginning of planning. As conference planners, we might establish that we ask ourselves the question "How does the program feel?" If we then continue to ask this question as we develop each of the finer elements of the conference, we may be able to amplify the elements which are appealing to the special senses, and the felt senses, as we go along.

An example of this beginning step is in the design, development, and one interpretation of the conference's graphic design. We have chosen a provocative and visually appealing logo, utilizing the basic colors of USABP, enticing the senses, challenging the imagination, depicting the greening and growth of Body Psychotherapy, with a pathway leading from the past to the future of the profession, through the snow capped peaks of a Colorado landscape, through a steady climb into the mysterious "other side."

### Creating the physical environment

One surefire way of helping to connect with the felt sense, as we have learned from numerous "conferences past," is having enough opportunities for getting the body involved in as much daily physical activity as possible, opening a door for the body's wisdom to naturally enter through. Getting up out of our chairs is certainly a healthy way to par-

ticipate in the conference experience. Putting some motion into the emotion can further help us to enhance the feeling of our experiences and the experiences of our feeling. After all, the material presented and taught must be somatically integrated to be pertinent to the essence of Body Psychotherapy. Feedback from previous conferences has suggested that conference goers



want clinical tools that they can take back with them and use with their clients.

Since we cannot fully meet the unique needs and desires of each type of attendee, our aim has been to create a program that is appealing to the majority. As presenters were chosen for this conference, we remained mindful in considering a variety of presentation formats to meet a variety of learning styles. Presentation formats are inclusive of experiential learning opportunities in the forefront—didactic styles and panel presentations. Valuable feedback has also taught us to be more mindful of the influences of lighting, noise, and temperature within our presentation rooms, and we have done our best at considering everything that we might possibly have within our control.

Having reasonable food choices at the conference and having information about options for food choices outside of the conference venue are also important factors that influence the over-

all feel of our environment. As body psychotherapists, we have the opportunity for personal growth and a unique medium for experiential expression within a safe, supportive, understanding environment of individuals and physical space.

Sometimes, embracing the body's wisdom is to simply give ourselves the space to be spontaneous, to "do" or "not do" whatever we feel at that moment. Perhaps our needs are simply to keep to ourselves as we allow ourselves some safe or neutral space to process what we are in the midst of experiencing.

The essence of our felt sense might simply be to participate in the daily milieu and then retreat to our comfortable room, or to the spa's tub, whirlpool, or swimming pool. Or perhaps enjoy a quiet walk or meditation within the hotel gardens.

Maybe more activity is what we desire, and we might satisfy that need in the fitness center, on the tennis court, or even choose each day to transport ourselves by bicycle between our hotel and the sessions at Naropa University.

For those of us who live as flatlanders or urban dwellers, the magnificence and awe of spectacular views of the Boulder Creek Path or the Rocky Mountains can be a welcome change to our daily experiences back home and can evoke a contentment and inspiration for our body's wisdom. If given enough resources at our disposal, it then becomes a matter of how we may choose to access those resources to nurture the wisdom of our bodies.

If our body's wisdom guides us to be fully present as we participate and



connect within the larger environment of a conference, then the work of our keynotes and some post-conference intensive experiences will certainly be fitting as we navigate within this very notion of interaction.

Our first Keynote speaker, Dr. Robert Hilton, an International Bioenergetics Trainer, has trained or participated in the training of hundreds if not thousands, of somatic psychotherapists. He explores the ways therapists and clients interact and either add to or block optimal interactions and healing. And as a psychologist and psychoanalyst who works with children, adults, families, and couples in private practice in New York City, Dr. Francis La Barre, our second keynote speaker, integrates psychoanalysis with her studies of nonverbal research. We will have opportunities for exploration of our bodies' relationships with one another within the context of client/therapist relationships, through non-

verbal communication, with our connection with nature, and through the beauty and majesty of horses.

#### **Purpose and connection**

It is a given that some people attend conferences solely for the purpose of obtaining necessary continuing education to maintain licensure or certification within their specific discipline. But attending a conference should be more than just showing up and paying for CEUs. After all, for many of us, conference attendance can be a significant investment with the expenses of registration, travel and lodging, and the time away from work and earning money.

Fortunately, many of us attend conferences for other reasons as well. We often gravitate toward the types of conferences that pique our interests, or align with the type of work we are doing, or work that we desire to learn to

do. When we are passionate about the type of clinical work showcased by a specific conference venue, or by the featured presenters at a conference, we will often make it a point to attend.

If we are members of a unique professional organization, such as USABP, we often look forward to joining friends and with colleagues whom we may only get to see face-to-face and spend time on rare occasions. Conferences offer the opportunity to come together, to interact, to socialize and experience togetherness as a community of like-minded individuals. Conferences provide a place for people to unite. Students can meet those seasoned in the profession; old relations can be refreshed; new relations can be discovered.

As body psychotherapists, an opportunity to nurture the wisdom of the body while in connection with others is a great gift.

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To support other opportunities for purpose and connection, our conference provides a way to honor our work and to celebrate our Body Psychotherapy achievements through the recognition of our peers with awards such as the Lifetime Achievement Award, the Alice K. Ladas Research Award, and the Student Award. Other social activity and community nurturing events include three event lunches, some "fun and games," hospitality, and of course our Saturday night celebration dance, open to one and all, dancing shoes optional.

We welcome you, and your body's wisdom, to attend USABP's *The Body in Psychotherapy: The Pioneers of the Past- The Wave of the Future*, August 2012, Boulder, Colorado, USA.



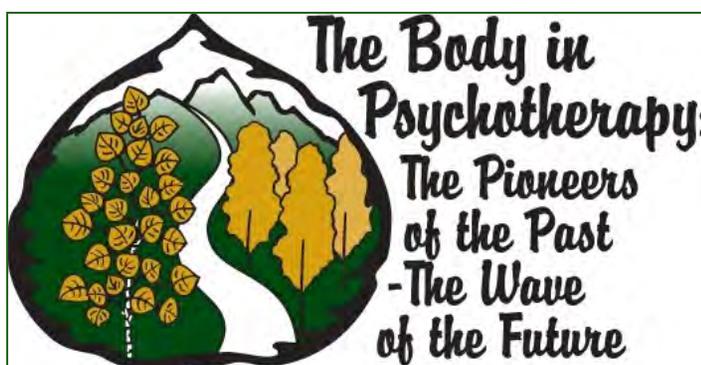
**2012 Research Prizes to be Awarded**



**Prizes**  
**1st Prize~\$500 • Student Prize~\$100**

**Deadline for Submissions**  
**May 31, 2012**

For eligibility and submissions go to [www.usabp.org](http://www.usabp.org) and click on "About USABP" follow the link to "2012 Research Awards Submissions"



August 2012,  
Boulder,  
Colorado,  
USA.



## 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 for on the site, or download. Printable transcripts available on request a few weeks after a conversation is published.

December's conversation is with Babette Rothschild, MSW, LCSW talking about Somatic Trauma Therapy. Babette Rothschild is the author of five books including *The Body Remembers—The Psychophysiology of Trauma and Trauma Treatment* (2000). She has been a psychotherapist and body psychotherapist since 1976 and a teacher/trainer since 1992. She continues to write, lecture, train and supervise psychotherapists worldwide.

Recent conversations include [Stephen Porges on The Polyvagal Theory](#) and [Garet Bedrosian on Bioenergetics & Imago couples therapy](#).

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



Two researchers started ResearchGate when they discovered first-hand the intricacies of working with colleagues worldwide. They created the site for scientists like themselves with the idea that science can do more when it's driven by collaboration on a global scale. The site offers live feeds, ongoing conversations, publications, links to conferences, workshops and job postings. Topics cover just about anything and everything. A student, currently researching face perception with psychophysics approaches is seeking collaboration, while another is researching cellular consciousness. Others are pondering questions such as: How can Deja Vue' be defined through consciousness and how can cosmic consciousness be studied are drawing comments from across the globe. It's easy to join their conversations.

[For more information log on to www.researchgate.net](http://www.researchgate.net)



Remember to like USABP on Facebook



[www.Linkedin.SomaticPerspectives.com](http://www.Linkedin.SomaticPerspectives.com)

## Join the Conversation



By Nancy Eichhorn



The word “blog” has reached a zenith—it is one of the most popularly searched words on the internet. Why? People want to know what the hype is all about, and if they, too, should be blogging. A blog is simply an online log that offers readers some sort of information be it educational, informational or personal and opinionated. There are a multitude of uses and purposes for blogs, and many health care practitioners blog to market their professional presence. Some peer reviewed Journals and professional magazines are blogging now, too.

One of note is The British Psychological Society's (BPS) Research Digest blog which received an award for best psychology blog (2010) from Seed Media Group's Research Blogging Award.

The idea for a free blog that highlighted current research spawned from a BPS sponsored bi-monthly email (called Research Digest) that had started in 2003. Dr Jon Sutton, editor of *The Psychologist*, the BPS's monthly magazine, suggested the idea for the email connection as a way to offer quicker access to pertinent research material. Designed to impart data on the latest psychological research, the email Digest currently has over 27,000 subscribers (information can also be received via an RSS feed).

Christian Jarrett PhD (a BPS Digest writer and editor since 2003) created the blog to further increase access by providing timely accurate reports on novel, thought-provoking studies that were considered relevant to real life and that made important contributions to psychology.

According to their website, the blog's materials move beyond mainstream media reporting and offer the latest reports from all walks of psychological life. Their goal is to “demonstrate how interesting and useful psychological science can be, whilst also casting a critical eye over the methods used.” They have a comment button and hope readers will share their reactions.

The Blog also offers links to studies of interest that didn't make the final cut (Jarrett chooses and writes the final studies), as well as a “Special Issue Spotter” with links to the latest journal special issues in psychology, and guest features from time to time.

**For information log on to [www.researchdigest.org.uk/blog](http://www.researchdigest.org.uk/blog).**

(IPMHPCP) from page 2

Based on twelve, 3-day-weekend intensives, over a two-year time period, the program incorporates interactive and dynamic-didactic classroom experiences involving comprehensive training in infant and early childhood mental health research, theory, assessment, and intervention. The teaching process is founded on the belief that practitioners grow and develop within the context of community just as children develop within the context of family. Therefore, the program creates an environment of support, nurturance, and respect, and dedicates itself to training Fellows to address infancy and early childhood disorders within the milieu of relationship and family.

Although the emphasis is on clinical applications of the course material and dyadic parent-infant psychotherapy, the reality is, no problem in psychology can be addressed without understanding early development. Program founders, Ed Tronick and Kristie Brandt, are committed to an interdisciplinary approach; the program adheres to “the philosophical belief that young children and their families who seek treatment are best served within the context of professional relationships where referral and consultation are used to address specific issues while maintaining a comprehensive and collaborative care approach” (IPMHPCP website).

“Over the years we have developed ways to get into the clinical materials where Fellows can apply the theories and practical approaches to the people they are exposed to (*in their particular profession*). The program offers a better way to blend the

clinical and theoretical aspects,” explained Dr. Tronick.

The clinical skills cover a variety of domains because the field of parent-infant mental health is still defining its boundaries. Most Fellows who attend are mid-way or later in their careers and represent all sectors of care—psychologists, marriage and



family therapists, social workers, nurses, physicians, educators, special education teachers, occupational therapists, dieticians, speech and language therapists, and so on. Non-clinicians may also apply for admission. Each Fellow brings knowledge within his/her scope of practice creating an integrative interdisciplinary field of colleagues as they learn ways to work with parents and infants.

Dr. Tronick opens the program with a 2-day conversation discussing his Mutual Regulation Model, his ideas on meaning making, his work using dynamic systems theory, and his

dyadic expansion of consciousness hypothesis to create a frame for the entire program. While the program’s theoretical framework is based on the Mutual Regulation Model, it is not the exclusive model.

Each presenter shares his/her relational/neurodevelopmental models of infant social and emotional development. For instance, Peter Fonagy PhD offers his work with mentalization and its application to developmental psychopathology in the context of dysfunctional attachment relationships. While Bruce Perry PhD talks about his neurosequential model of therapeutics, Dan Siegel PhD shares his work with mindsight and interpersonal neurobiology, and Beatrice Beebe PhD talks about parent-infant interactions. Each speaker supports the program’s principal focus—infant-to-parent relationships (developing and optimizing their functionality and resilience through preventive interventions, assessment, monitoring, support, and treatment as well as considering factors impacting these relationships).

“I think it’s a pretty exceptional way to interact with the speakers. The Fellows have a full day and a half for formal presentations, but they also have plenty of time to engage in questions and dialogue. They come away feeling as if they’ve gotten an in-depth experience rather than simply attending a keynote address,” Dr Tronick said.

Each weekend includes keynote speakers as well as lecturers and faculty members faculty who present topics ranging from effects of trauma on infants and young children to cultural influences, sensory processing problems, disorders of relating

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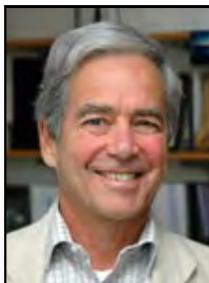
IPMHPCP continued from page 15

and communicating, family systems thinking and interventions, postpartum depression and infertility, and more. The core concepts represent a balance of theory, assessment and intervention. The speakers, such as Drs Tronick and Fonagy, discuss between themselves how they see and think about these models and the interpersonal processes within them to support a broader framework when the Fellows return to work with their own clients.

“The program is not based on one theory as the end all nor is it eclectic either. It is framed to provide a guideline to the work itself to enable Fellows to make choices about the techniques they are learning and how to work with families in the context of their own worlds,” Dr Tronick said. “The end hope is that the Fellows are framing on their own how to think in general about these processes and how to use them with their clients.”

The Fellows get a real feel for each other during the weekends and form lasting collegial supports and ties to the teachers and speakers. The end result is creating a foundation for change with a solid peer group.

Applications are now being accepted for Boston’s 2011-2013 program (beginning January 19, 2012), and for the Napa, California program. For more information contact:  
Dorothy Richardson, Ph.D.,  
Program Director,  
p: 617.232.3916,  
e: [dorothy@dttrichardson.com](mailto:dorothy@dttrichardson.com)



Dr Ed Tronick, the program’s Faculty Chief, is the University Distinguished Professor at the UMB, Director of the Child Development Unit Children’s Hospital Boston, Lecturer in Pediatrics at Harvard Medical School, and an internationally renowned researcher and lecturer.



Dr Kristie Brandt, IPMHPCP co-developer and Napa Program Director, also directs the Parent-Infant & Child Institute, is an Assistant Clinical Professor of Pediatrics VF at U.C. Davis Medical School, a Child-Trauma Academy Fellow, visiting faculty with the Brazelton Touchpoints Center at Children’s Hospital Boston, and spent 25 years in Public Health service.

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## How do you speak when you don't know the words? An interview with Suzi Tortora

By Nancy Eichhorn



Suzi Tortora

One are the days when infants were considered mindless beings. The concept of infant mental health has grown into a comprehensive field of research and practice that promotes healthy social and emotional development and focuses on the prevention and treatment of mental health issues in children and their families. Furthermore, according to Dr. Suzi Tortora, a board certified dance movement therapist, Laban Nonverbal Movement Analyst, and specialist in the field of infancy mental health and development, “the role of the body and embodied experience as it informs selfhood and informs attachment has increasingly gained more attention.”

“I’m a preventionist at heart,” she said, explaining that preventative actions bring more awareness into bodily experiences. “I want to give children a stable sense of self, and the experience of self expression and creativity, by exploring the self through the body and through movement. This gives them the tools for strong, self-expressive adult lives. I work with the whole life span from infants to adults. Working through all ages of development, I’m reading verbal and nonverbal cues—the body is an experiential

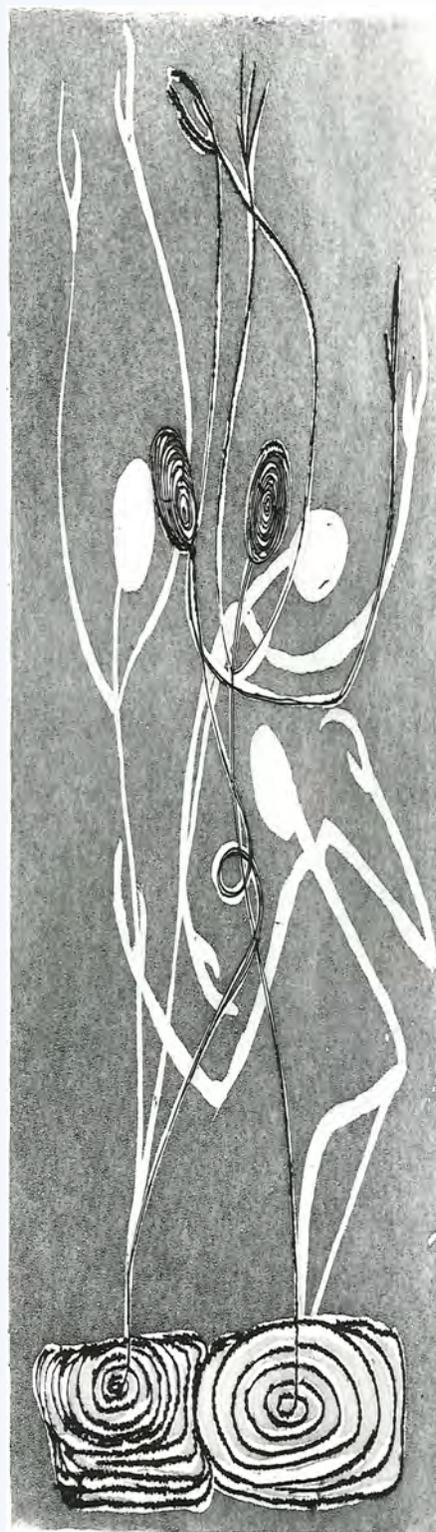
map. Everything we experience shows up in the body.

### The Mind Body Emotion Continuum

Early infancy experiences show up in our ways of moving, and remnants of these early experiences are distilled into our lifestyles. Dr Tortora works with patients to explore parts of their present life by listening to the body and letting the experience unfold. She combines “the creative process from an embodied state of knowingness and communication” with “nonverbal movement observation, dance, authentic movement, motor development, body awareness activities, music and play” to assess patients and develop in interventions (Tortora, 2011).

“One of the key therapeutic techniques in the field of dance movement psychotherapy is observing the expression of the body’s movement qualities. By focusing on the essences of the body in motion, we can listen to its tune, gaining insight into how that individual organizes their experience of the world” ([www.suzitortora.org](http://www.suzitortora.org))

“I have a male client in his fifties who had this particular gesture . . . when he spoke he would reach out with his hand then stop and make a fist. Every time he spoke he made this gesture. I had him explore that action, and he ended up curling into a ball. As I processed my own reaction to his movement, I had the feeling that he was trapped. Something was stopping him. We talked about this movement



Tortora continued from page 17

exploration, and he began to reflect upon how his mother cut him off and never attuned to him. He had an insecure attachment with his mother and she never acknowledged or listened to him. Whenever he tried to speak to her about something that troubled him she said, 'You can figure it out,' and then walked out of the room. He felt shut out. His father had similar reactions to him. The dynamic in the parent/child relationship in his early life manifested in every level of his present existence in bodily movement, and in the way he lived.

"This patient was a tennis player and this stopping action was also present in his serve. It created a shoulder injury due to stopping in the middle of the flow of the serve," she continued. "He stuttered and had difficulty getting through a sentence.

"I worked with him to literally create more fluid actions in his gestures, extending his reach beyond his stopping place. We explored this learned restricted gesture (a defensive coping strategy), by moving consciousness in this new way; as he explored what came up when he made particular movements, he listened to and let his body direct him as the experience unfolded," Dr Tortora added. "He worked to extend beyond his learned stopping point; by changing it, he changed many aspects of his life began to change and improve."

Because the body holds so much information, Dr Tortora said that she



has to be careful how she taps into it. The body has to feel safe; patients have to let their bodies open up when they are ready. There are no passive experiences in the authentic movements her patients make so Dr. Tortora listens, watches, waits, and observes movements unfold as the person becomes ready. Children work through their bodies all the time, she said, while adults sensor or shut down at the body level to stay at a verbal/mental level of conversation. During the therapeutic experience she supports her patients' to follow bodily sensations they feel rather than sup-

press them to create their own form of bodily expression. Within all this movement, however, Dr Tortora noted that she is not forcing or directing the patient. The body-oriented techniques she uses are housed in psychology and grounded in psychotherapeutic practice.

**Dyadic Attachment-based Nonverbal Communication Expressions (D.A.N.C.E).**

Dr Tortora has a strong body/dance background. Along with athletic

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pursuits, she started dancing when she was young. She spent six years developing her gymnastic abilities on the uneven parallel bars. Flowing through the air, her goal was to never touch the ground. When she returned to dance, she said it was strange to be on the floor again, to feel that sense of grounded-ness versus lightness and fluidity in the air.

Dr Tortora's passion for movement lead her to Japan to study indigenous Japanese dance styles for six months, as well as to ballroom dance classes, modern dance experiences, improvisational dance and liturgical dances where she interpreted stories from the bible through movement. Her experiences, along with mindfulness practices, focusing work, and all forms of expressive movement (not just formal studies) created the foundation for her views of the body and how people bodily experience their worlds.

"Any regular pedestrian movement can be changed into a dance to communicate what is happening without words," she said. "I can see something about who they are and where their soul is, and they how exist in the world."

"What you do speaks so loud that I cannot hear what you are saying" (Ralph Waldo Emerson, from *Letters and Social Aims*, 1875)

In a traditional psychoanalytic approach, therapists often think they are not giving any information away about themselves; yet, their bodies are speaking volumes. The office location and décor, even down to the choice of chairs, communicates information about them; every part of their interaction with patients

including business cards, brochures, phone messages and emails, reveal details about who they are and how they experience their world. Patients read their therapists, so it behooves therapists to be in touch with their own bodily presence. Embodied practices are moving to the forefront of therapeutic care and part of that practice involves self-awareness.

"We're kidding ourselves if we think we aren't communicating" Dr Tortora said. "I always know something is being expressed by my actions and gestures. In sessions I am aware that the actions and gestures I'm using provide information about me., How I use my body exudes a message; is that the message I want to impart? Our actions are being registered, and are informative especially when they lack coherence with what we are saying verbally."

Dr. Tortora described a young child (under age 3) she is working with that has been exposed to domestic violence for most of her life. Dr. Tortora describes how she experiences the child during a recent session. "There is a frantic energy present as she flits from

activity to activity. She exudes so much tension. Intermittently, in the mist of her play, I have her pause and we breath together to help her calm down," Dr Tortora said. To counter the air of tension and violence that predominates most of the child's life, Dr Tortora presents herself as stable and calm. She pays a great deal of attention to her own breath to make sure she doesn't feel tense on any level, and she creates a peacefulness in the room and in every activity they do. "She loves coming to our sessions and talks about them all the time," Dr Tortora said.

#### Creative Expression

"I teach creative dance to children. The goal of each class is to enable the children to create their own dance. I don't teach a technique but rather how to express themselves through by creating a dancing story," Dr Tortora said, referencing her Wellness Dance Classes. "Children think it's magical to talk without words."

Themes that arise during the classes relates to issues in their lives such as separation fears or sleep



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disturbances. Through the dance process, they get in touch with their feelings. They start with music and interpret what it means to them by drawing a picture. Then, they turn the drawing into a dance. It's a multisensory, cross-modal way of being and expressing one's self, and interpreting what they are experiencing. They can use this model to get in touch with what may be waking them up at night tuning into the felt experience, which they do not know how to verbally explain.

"Embodying the experience first acts as a catalyst, providing a way for

the children to begin to formulate ideas about how to speak about their felt experiences. Often the children do not know how to initially talk about their feelings and worries but they do know the experience and can recognize it when they experience through their dance," Dr Tortora said.

Suzi Tortora, Ed.D., BC-DMT, C.M.A., LCAT, LMHC, is a board certified dance movement therapist, Laban Nonverbal Movement Analyst, and specialist in the field of infancy mental health and development. Her expertise in early childhood development and the importance of early relationships inform her psychotherapeutic work across the life span. She has a private dance movement psychotherapy

practice, in New York City and Cold Spring-on-the-Hudson, New York. She offers training programs and lectures about her dance therapy and nonverbal video analysis work with infants, children and families, nationally and internationally.

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## The Creative Embodied Experience: The Role of the Body and the Arts In Infant Mental Health

By Suzi Tortora



*Editors Note: This article originally ran in The Signal, 2011, Vol, 19, No. 3, WAIMH. The article is available in its entirety at [www.usabp.org/magazine](http://www.usabp.org/magazine). All references are online as well.*

***"The body has to instruct the brain."***

***"Behavior does not live in disembodied form."***

Thelen (1996, p. 31)

In recent years the interest in the role of the body and embodied experience as it informs selfhood and forms of attachment has increasingly gained more attention. Many theories of psychological inquiry have addressed the body and the psyche: Freud, Reich, Winnicott, Darwin, Bowlby, Trevarthen, Stern, Boston Change Study Group. The advent of the mirror neuron system has brought the neurological underpinnings of this into sharper focus.

As defined by Gallese and his colleagues (Gallese, Fadiga, Fogassi, & Rizzolatti, 1996; Gallese, 2005; Gallese, Eagle & Migone, 2007), through neural mapping in the brain multisensory sensations, actions intentions and emotions of others are experienced and understood by the dyadic partner. Through this experience a "shared body state" is experienced supporting the development of intersubjectivity (Gallese, 2009, p.523).

Malloch and Trevarthen add a creative focus to this discuss emphasizing the role of creativity in this process using the term "musicality" to described the shared consciousness that develops in the emerging mother- infant relationship through moment-to-moment loving joyful rhythmic nonverbal movement and vocal exchanges (Malloch & Trevarthen, 2009, p.1; Trevarthen, 1980, p. 319; 2009, p. 508).

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This emphasis on the creative process from an embodied state of knowingness and communication is a core component in the field of dance movement psychotherapy (DMT).

Given the prevalent nonverbal nature of infancy and early childhood experience DMT methodology is an important addition to the field of infant mental health, providing activities along the spectrum of wellness to therapeutic treatment.

Specific movement, multisensory, creatively-based dyadic and group activities, which enhance the young child's growing sense of self, physically, emotionally, expressively, and cognitively are a core emphasis of the DMT-based program I have developed called *Ways of Seeing* (Tortora, 2004, 2006, 2010 a, 2010b, 2011). These activities are designed to support the parent-child attachment relationship and are used in preventative and intervention programs. Tools to teach parents how to read and understand their child's nonverbal cues while providing playful ways to improve the parent-child relationship are central elements of this program. Assessment and intervention components are also included in *Ways of Seeing* to support young children and families with a variety of difficulties including trauma, post partum depression, developmental and sensory processing disorders, medical illness, attention

deficit and hyperactivity and Autism Spectrum Disorders.

*Ways of Seeing* utilizes nonverbal movement observation, dance, movement, motor development and body awareness activities, music, and play for the assessment, intervention and educational programming of children and their families. These programs are based on the observational analysis principles of Laban Movement Analysis (LMA) (Bartenieff & Lewis, 1980; Laban, 1975, 1976; Laban & Lawrence, 1974; Stern, 2010); infancy and early childhood developmental theory; and dance movement therapy practice.

#### *Introduction to the Ways of Seeing program*

As I shared during my presentation in Leipzig (June, 2010) the focus of this work, with babies, toddlers, children and parents is to understand the role of movement, multisensory experience, and the nonverbal exchange in the expression of self, self and other, and the developing attachment relationship. *Ways of Seeing* is relationship-based. The word *seeing* in the title is used to emphasize that there are many ways to look, to assess, and to receive information about self and other (Tortora, 2006).

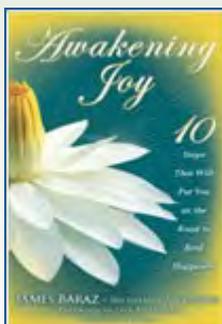
In this program the practitioner learns how to observe and understand the communicative elements of each person's nonverbal personal movement style. A key concept of this work is the understanding that quali-

tative aspects of an individual's movement style reveal information about one's emotional, social, physical, communicative and cognitive development. The nonverbal observational tool called, Dyadic Attachment-based Nonverbal Communication Expressions (*D.A.N.C.E.*) (Tortora, 2010a, 2010b, 2011) enables the practitioner to observe the nonverbal qualitative components of each person's style in the context of the dyad.

This tool provides specific information regarding the nonverbal dynamics that support or compromise self-regulatory and co-regulatory aspects of the relationship. Specific questions are provided to guide the infant specialist or psychotherapist to observe how the baby cycles through states of engagement and disengagement and how the adult caregiver supports or misses the baby's nonverbal cues. Contingent and non-contingent behaviors are delineated and can be approached by bringing the nonverbal elements that drive these behaviors into conscious awareness.

This tool highlights the embodied experience for both the caregiver and the baby. The nonverbal aspects of behavior can be quite overt or subtle. The key here is to consider how the nonverbal qualities that comprise these behaviors affect the developing relationship.

To read the complete article log on to [www.usabp.org/magazine](http://www.usabp.org/magazine)



A ten month experiential course facilitated by James Baraz [www.awakeningjoy.info](http://www.awakeningjoy.info)

## Institute for Embodiment Studies



Rae Johnson, PhD

By Nancy Eichhorn

What if we defined our humanness by the truth of our body? What if our human expansion and expression eclipsed anatomical structures, cellular combinations, and neural networks to define our state of existence? What if we honored the lived experience of the body in relationship with our self and others within the realm of all other domains? What if our human presence, contextualized within the physicality of the human body, was defined by the interaction between our physical reality and the world around us? The emerging field of embodiment studies is focused on exploring answers to these questions, based on the underlying premise that human life is fundamentally the life of a physical body in interaction with its environment (Hanna, 1970). The term ‘embodiment’ suggests that the subjective experience of being a body constitutes a legitimate and significant source of knowledge about what it means to be human, in that “knowledge as effective cognitive structure can only be constituted and reconstituted in individual bodies” . . . and people “can evoke, build, (*and*) organize it, but only in bodies already capable of reorganizing themselves to fit, and only in a world able to produce such bodies” (retrieved from <http://web.goddard.edu/embodiment/epistemology.html>).

Practitioners immersed in embodiment studies investigate both the experience and the implications of embodiment by exploring themes such as encultured bodies, engaged bodies and divided bodies. Students and scholars in this field investigate language and bodies, place and embodiment, and writing and bodies. Regarding the body as a mental, spiritual and physical whole, embodiment studies investigate what it means to live in a physical world that separates these bodily aspects.

Across a number of academic disciplines, the body is becoming an increasingly important topic of study. Just as somatic psychology is gaining a foothold in accredited academic institutions embodiment is making its way into the fields of sociology, education, philosophy, cultural studies, and the health sciences. The Institute for Embodiment Studies is a new non-profit educational organization dedicated to advancing interdisciplinary scholarship in the field of embodiment studies.

“I understand the Institute as being very different than a graduate program,” founder Rae Johnson, PhD, explained. She noted the intention is not to be a substitute for programs in somatic psychology or somatic education but rather the Institute’s purpose is to add the essential component of collegial support. The Institute provides an international forum for academics, practitioners, and community leaders to share knowledge about the role of the body in human experience, a place where the primary focus is on embodiment rather than on the originating disciplines, such as psychology, anthropology, education, or health. The idea for the institute derived from a gap Dr Johnson first identified as a graduate student and still experiences as a practitioner and teacher today. “I found there weren’t many places where I could find researchers, writers, teachers, conferences, and journals where the primary focus was on the body,” she said. Currently, people interested in embodiment studies usually have to enroll in a regular academic program



(with little to no focus on the body) and find professors to cobble together a support and mentoring team. “As a student, I rarely found fellow students or professors who focused on the body. I had to really dig to get people to support my studies, and to find places to get published,” Dr Johnson said. She added that scholars, worldwide, who are focused on embodiment studies are increasingly banding together to create a community that eventually will offer peer-reviewed journals, conferences, and a recognized body of work to build on.

“Of course, scholars and practitioners in embodiment studies do have other affiliations,” said Dr Johnson who wrote her dissertation thesis on the role of the body in creating and perpetuating social difference and the impact of social oppression on the lived experience of the body. “Most of my embodiment colleagues travel across several disciplines where the body is the common thread. For example, I trained as a psychotherapist, so psychology was my first discipline. However, I came to my psychotherapy training with a dance background, so dance and the performing arts is also an area of academic and professional interest. Much of my professional career was based in social work, where I looked at role of the body in social work theory and practice. Eventually, I pursued a doctoral degree in education because I realized that the one of the most interesting parts of embodiment for me was the potential for learning. So you can see how interdisciplinarity often becomes an important part of studying embodiment.

“The Institute provides an academic home for embodiment orphans,” she continued, referencing practitioners and scholars who may at times feel utterly alone in their “home” disciplines. “I think that’s what a lot of us feel like, and it is not necessary anymore.”

The focus on the body makes embodiment studies come together as a field. Across disciplines there is something about the body that is important to what people are doing, and in so doing they need a place to go whose focus is on the body. Through Dr Johnson’s initiative, people will eventually be able to attend a single conference where it is possible to discuss the role of the body in literature, look at somatic experience through the lens of neuroscience, and attend sessions on the embodied pedagogy. People can be immersed in a community of professionals who understand the body from multiple perspectives and can then go back to their home disciplines and professions, and say, “Here how it applies to . . .”

The Institute for Embodiment Studies plans to offer support for research, host conferences, provide training for scholars and practitioners, and engage in outreach to the academic and professional communities. Although the Institute was launched based on Dr Johnson’s ideas and interests, its ultimate success rests on collaborative effort—the project is about building a community, and it cannot be done by one person. If anyone is interested in being part of a community of scholars focused on the body now is the time to step forward to collectively contribute what is needed in terms of resources, services and activities. The real test of the Institute—to determine if this kind of interdisciplinary forum is really needed—lives in the results. It will happen, Dr Johnson said, because people hear about it and want to be part of the process; they will wonder, “How can I contribute to this?” and then reach out to connect and explore.

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## “Life is in the breath. He who half breathes, half lives.”

~Ancient Proverb

By Susan McNamara



Susan McNamara

**“To breathe is to feel. Unconsciously, we choose how much we’re going to feel by how much we breathe.”**

I heard my yoga teacher’s voice in the background. *Feel what, I wondered. The burning in my arms and shoulders? The tension in my hips? The judgment that circulates through my mind about myself and everyone else around me? The sense in this moment that something exists far greater than me and everything else?* After years of yoga practice with this teacher, I learned that he meant everything I was thinking and more.

As a yoga teacher, I teach that every thought and emotion has a corresponding rhythm in our breathing patterns. This mirrors Traditional Chinese Medicine approaches where the lungs, also known as the “tender organ,” are seen as overseeing the relationship between the internal and the external world. The lungs reflect the deepest attitudes I hold about myself, my life and my eventual death. And breathing serves as a gauge for how

things are in my life in any given moment. Every breath I take is an opportunity to inform all aspects of my life from my relationship to myself to my interactions with others to my connections to the world at large.

Breathing is also the ultimate tool for good health and vitality—it oxygenates the blood, decreases pain and nervous system arousal, improves sleep, and more. Humans take on average 28,000 breaths per day. Imagine that number multiplied over a lifetime. Quite literally, we all have millions of opportunities for growth, transformation, and healing within the context of a single breath. All of this from a basic life function that reflects our greatest survival need as well as a pathway for the full expression of our deepest potentials and thriving.

However, most of my students breathe in limited and restricted ways. Instant messaging, fast food, fast love and the feeling that everything was due yesterday not only encourages but downright demands people pace their lives beyond the human ability to fully experience and integrate whatever they are doing, thinking, feeling. Many people ignore and/or deny what they are experiencing because it’s inconvenient—it’s messy, complicated and time-consuming to feel one’s life. Immediate demands, pressing engagements and expectations take precedence over

simply being human, even down to the life sustaining act of taking a breath. Who has time to feel something that takes more time than

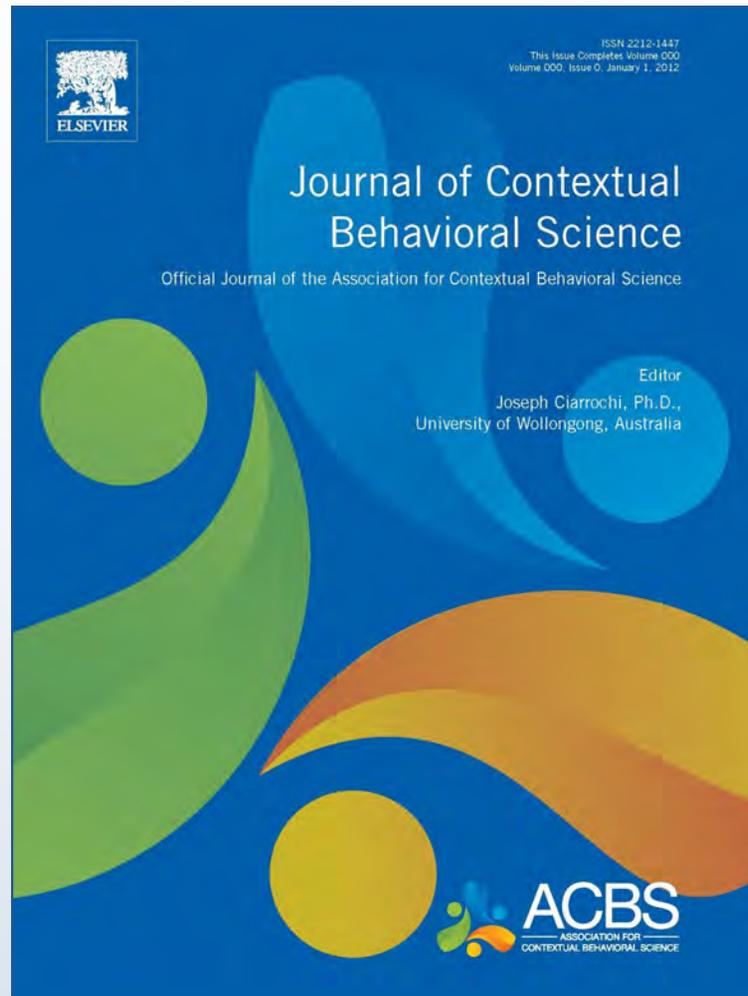


downloading a song off of iTunes or sending a text? Peoples’ experience of life mimics today’s world of technology—fast, perfect and two-dimensional.

However, unconsciously restricting and distorting the breath, while creating the illusion that everything is together, ultimately deprives the system not only of oxygen but of the aliveness necessary to live a fully joyous, fully expressed life. Our breathing patterns indicate how things are in our bodies in any given moment.

The **Association for Contextual Behavioral Science** has partnered with Elsevier to launch their new Journal in April, 2012. The journal will consist of two sections: Research and In Practice. The goal is to disseminate ideas and data that bridge research and practice interests, theoretical orientations, disciplines, and philosophical assumptions. Papers aligned with ACBS concepts as well as those that challenge their approach are welcome. All papers—empirical studies, reviews, conceptual papers and philosophical papers—that address ways to alleviate human suffering and advance human well being will be reviewed.

For information, contact the Editor-in-Chief, Dr Joseph Ciarrochi ([joec@uow.edu.au](mailto:joec@uow.edu.au))



McNamara continued from page 24

The trick is whether or not we are willing to breathe space into our lives to make room for connection with ourselves and with our lives. At one time I asked myself and today I ask my students, “What keeps you from breathing naturally, fully, deeply?” The question starts a guided exploration. Sitting silently, I ask my students to tune into their breath without altering its current rhythm. I have them stay present for several breaths, then ask questions such as: “Where do you feel the breath most? What parts of you moves with the breath? What parts resist movement? If you were to describe your breath, how would you characterize it? Does this in any way reveal how you are feeling inside?”

This type of exploration often leads students to access root causes of long-standing emotional challenges and physical imbalances. So, no matter what the mind may be telling them (keeping them stuck in old patterns), the breath offers a fresh, immediate, “honest” snapshot of what is truly happening. It is from this place that students report changes in awareness, mood, physical condition and sleep. It is from this awareness that deep and lasting lifestyle changes arises from. It is from this awareness that clients connect back to the experience of being a fully alive, fully expressed human being. And what could be more natural than returning to the breath as a source of connecting to the body’s inherent and ever-available wisdom?

## Spreading the Psychology of the Body:

### The Embodied Psychology Certificate Program in Relational Somatic Psychology

By Dyrian Benz Psy.D. and JoAnna Chartrand



We founded the Embodied Psychology Association (EPA)—an informal affiliation of experts, practitioners and innovators in the areas of attachment theory, neuroscience, trauma resolution, mindfulness applications and the body in depth in 1995 to advance practice, training, and education in embodied relational somatic psychology. We had been asked often enough, “Where can I learn and experience what somatic psychology and body oriented approaches have to offer?” We wanted to create a program to teach somatic psychology that cut across the different disciplines in the field, so we founded the Association and began to develop programs in that direction.

#### Esalen Institute

Esalen rests on dramatic cliffs jutting out toward the Pacific Ocean in Big Sur, California. Focusing on humanistic alternative education, the Institute is devoted to psychology, ecology, spirituality, Gestalt, yoga, meditation, and massage. Offering over 500 workshops and programs a year, the Institute’s philosophical grounding felt like the right place to initially offer the Embodied Psychology Certificate Pro-

gram in Relational Somatic Psychology. The Certificate program was also affiliated with the Santa Barbara Graduate Institute while Dr. Benz was the somatic psychology chairperson and subsequently an associate professor (2001 to 2011) until the school ceased operation. Through our own vision and collaboration with Esalen, the Certificate program (presented as a professional CEU program) functions at a high level of standard in terms of the latest research and developments in the field, while also being practical and experiential as an embodied learning program needs to be.

The courses are taught by experienced practitioners and innovators from various body oriented psychology methodologies and focus on the areas of attachment theory, neuroscience, trauma resolution, mindfulness applications, and the body in depth.

As directors and creators of the Certificate program, we have been present at all teaching units since its inception. It has been a privilege for us to see the continued evolution and increased recognition of the field of somatic psychology. The primary examples of this evolution can best be seen in the following areas.

#### Embodied Psychotherapy Practice

Psychology and psychotherapy in general has become more and more aware of a need to pay attention to the physiology and the nervous system signals (the level of tension and relaxation, the ability to read nonverbal signals, and so on) in our work with

*Programs focus on*

*areas of*

*attachment theory,*

*neuroscience,*

*trauma,*

*resolution,*

*mindfulness applications,*

*and*

*the body in depth.*

clients and patients. This has been most evident in the work with attachment and in the understanding of needing to create a secure enough attachment in the therapeutic setting for the client to be able to make significant progress.

#### Body and Self and Relationship

Monitoring the quality of relationship between the client and therapist has become of ever increasing importance in the field. Relationship is primarily an embodied experience in which the practitioner monitors the task of co-regulation.

#### Neuroscience: The Body and Relationship

Barely any area in psychology remains unaffected by the insights and advances of neuroscience these days. In our courses we have seen an ever increasing interest and deeper understanding of the attachment formation and the physiology of the brain development. Resilience and the overwhelming effects of traumatic events and their continued impact on our live through the after-effects of the fight flight freeze and social seeking systems are bringing a deeper understanding and more specific interventions for effective

trauma treatment. The development of the mirror neuronal patterns and our relational capacity in every phase of life in the influence of all social aspects as well as the activation and impact on our body are continuing and expanding.

#### Working With Character Trauma and Developmental Issues

The study of treatment and trauma has found a solid home in somatic psychology. The courses we offer relating to trauma, character development, resilience, and somatic resources continue to be some of the more popular courses of our training program. Another exciting development in the area of physiology is the emerging understanding of the social engagement system as theorized by Stephen Porges (1995) and his work with the specific social engagement system impulse related to the PolyVagal theory.

#### Attachment and Attunement

The entire spectrum of the various attachment styles as well as the capacity of both client and therapist to be in the relationship are highly embodied states. The therapist must be able to monitor and regulate

their own physiology and nervous system activation as well as having not just an idea but also a felt sense of the client's presence in order to experience the client's state.

#### Mindful Body Mind Psychology and Practice

The spread of mindfulness in psychotherapy may have been one of the most unexpected and far-reaching changes in the practice of psychotherapy. Mindfulness, a deeply experiential skill, has found its way into almost every form of modern psychotherapy—psychodynamic, behavioral, experiential, and so on. An area of these mindfulness and acceptance-based interventions that remains often overlooked in the mindfulness literature is the topic of embodiment.

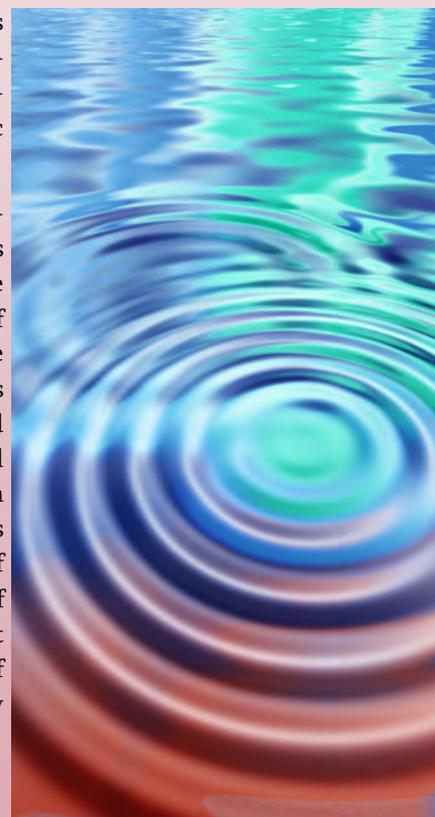
What is often forgotten is that mindfulness is a deeply somatic state that includes calmness of mind, balance of the nervous system, calmness of breath, a relaxed physical condition, and openness of presence. In that sense, mindfulness is not simply a way of thinking but a kind of integrated awareness that includes the presence of the entire person—body and mind.

Continued on pg 28



Hakomi is a body-centered, somatic approach to psychotherapy that combines Eastern traditions of mindfulness and non-violence with loving presence and a unique Western methodology.

[www.hakomiinstitute.com](http://www.hakomiinstitute.com)





Benz/Chartrand continued from pg 27

**Body, Soul, Energy and Presence in Somatic Psychology**

The movement towards embodied presence is a movement on the way to a state of being.

It has long been recognized by practitioners of somatic psychology that the deeper one penetrates into the core of the body, the more we find a deep sense of presence. As one well-known writer has stated, “The body is the shore on the ocean of being” (anonymous Sufi saying).

**The Body as Resource**

A well functioning, balanced, and energized body with a strong degree of awareness may be the best resource we can have on our side. Resources of movements and physical activity, ability to regulate our nervous system, the ability for breath regulation and awareness, and to train our mind and its capacity for attention and focus can be strong resources for an active life.

The ability to listen to our body, to withdraw when there is a danger of

overwhelm or to move forward when there is a danger of over-isolation again is learning to speak and listen to the language that the body is constantly broadcasting.

**The Story of The Body**

In this time of continuous external stimulation it is difficult to listen to the story that our natural body has to tell. Given all of these societal pulls of the present age, perhaps somatic psychology can be a voice to encourage a more attentive listening to the body, to its story and the impulses waiting to be expressed in our life in a way that gives our life a good measure of fullness and dignity, contentment and satisfaction.

**Final Thoughts and Promotion for Staying in Touch with the developments in our Field**

The current embodied psychology certificate program in relational somatic psychology, as it is presented at Esalen, is aimed at addressing the various topics and issues previously described in this article. The information for the courses can be found both at

the Esalen Institute website as well as the Embodied Psychology Association website ([www.embodiedpsychology.com](http://www.embodiedpsychology.com)).

**Dyrian Benz, PsyD** is co-director & co-trainer of the Relational Constellation Institute of California (RCIOC) in Santa Barbara. Dyrian originally trained with second generation European Constellation Facilitators, along with Bert Hellinger. As a Somatic Psychology Educator, he also brings in the focus on the body and includes it in Constellation Work. Dyrian has been a committed student of the Diamond Heart approach of A. H. Almaas since 1992, and includes psycho-spiritual practices in the learning program, e.g. cultivating presence, connecting to the knowing field & to the essential self.

**JoAnna Chartrand** is a European trained somatic psychology educator and has been in private practice since 1981 and leads trainings at the Relational Constellation Institute of CA, working with trans-generational issues with groups and individuals.

Reference

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# Esalen: A personal reflection

By Nancy Eichhorn

I felt stuck. I felt guilty for feeling stuck. And all I wanted to do was run. I was a runner in all abstractions of the word—from the emotional sense of running away to the daily count-your-mileage athlete. But at Esalen Institute, there was no place to run.

My presence at the Institute was mandatory—the Relational Somatic Psychotherapy Certification program was required for my doctoral program at the Santa Barbara Graduate Institute. I arrived with the intention of maintaining my daily six mile run. I quickly learned, however, that while Esalen's cliff side placement overlooking the Pacific Ocean affords spectacular sunsets and views of humpback whales, its running options are narrowly defined: South on Route 1 or North. No right, no left, simply up or down. Running alongside the tightly spaced lanes proved precarious. Oh I tried, twice, but when I made eye contact with a mountain lion and watched it divert down the cliff toward the ocean, I knew running was out. A felt-sense of doom crept in. Running was my way to self-regulate, and the course material was triggering layers of unexpressed experience.

On a whim I tried an authentic dance class. The teacher had us swirl around on the wooden floor wherever we wanted without fear of collision. Her premise was that your path was never impeded if you were willing to change directions. I flowed with a large group of people and never felt constricted. I moved as I wanted, and if someone was there, like that mountain lion, I simply diverted from my linear course and released into a spiral expansion.

And as Existence has it, the workshop complimented my physical truth adding the experience of an embodied existence and offering ways to work with a patient's bodily presence in concert with mine. I felt an intimate somatic knowing working with colleagues who also lived bodily in the moment. I learned how to move through the course materials and experiential components that Dyrian Benz, JoAnna Chartrand and Susan Aposhyan brought to our gatherings.

On my last morning, I sat in the hot tubs as dawn broke letting peace set my day's tone. Looking toward the horizon, I appreciated my Esalen experiences and realized that I could have learned the information provided in the workshop, but I would never have embodied it sitting in a classroom.

I have since attended eight workshops with Dyrian and JoAnna in concert with master teachers such as the late Ron Kurtz, Christine Caldwell, Kathy Kain, Stella Resnick and plan to attend more.

## The Embodied Psychology Certificate Program in Relational Somatic Psychology

### Upcoming 2012 Courses at Esalen Institute

- January 22 To Jan 27, 2012 • At The Center is The Heart: Exploring Transformation In Somatic Psychotherapy, Faculty: Bill Bowen, MA
- March 11 To Mar 16, 2012 • A Lifetime of Relationships and Connections: A Practical Workshop for Understanding Neuroscience and Attachment in Relational Healing , Faculty: Marti Glenn, PhD.
- May 20 to 25, 2012 • Trauma Healing Phases: Somatic Experiencing and The Relational Field, Faculty: Steve Hoskinson, MA
- August 26 to 31, 2012 • Relational Mindfulness – A Path To Intimacy And Reducing The Inner Barriers To Love, Faculty: Rob Fisher, MA. & Dyrian Benz, PsyD.
- October 14 to 19, 2012 • Attachment, Intimacy and Autonomy – Relational Constellations, Faculty: JoAnna Chartrand and Dyrian Benz, PsyD.
- December 2 to 7, 2012 • Developmental Trauma and Resilience, Faculty: Christina Dickenson, MA

# The Hope and The Fear



By Ronan Kisch

**"Every significant journey starts with a hope and a fear."**

These words signified the truth of my own journey and in turn my hopes and fears for my clients since I first heard them at the Gestalt Institute of Cleveland over three and a half decades ago. The hope is that we will overcome whatever obstacles block us from reaching our goal. The fear is that either the wounds of the past or the gravity of the obstacles make achieving the goal unattainable.

Over the course of my practice and my personal growth, I have learned that our body chemistry (neuropeptides) and nervous system (neuro-networks) can either work for us or against us. Without somatic awareness, cognitive recognition, and affective and behavioral support, it is fairly certain that our bodies will be hampered

by life's wounds. Bound by emotional pain, our bodies are often unable to appreciate and mobilize our perceptions, skills, and abilities. Though we are evolutionarily designed to survive, there is a glitch in the process—the body is designed to preserve itself when threatened (real or perceived), but our innate survival techniques, combined with behaviors learned early in life, often result in adaptations that become lifetime patterns resulting in misperception, chronic pain, and the inability to heal.

We can learn how to recognize, direct, appreciate, reinforce, overcome, and celebrate our achievements and make conscious choices by practicing body psychotherapy techniques such as the Trager Approach, relational somatic psychotherapy, NET, and embodied mindfulness. We can overcome obstacles and strengthen our self-esteem by paying close attention to our body's state of being in any given moment—its patterning of tensing or releasing, holding or letting go, hurrying or slowing, silencing or

liberating.

My own psychotherapeutic practice incorporates parts of all these disciplines to help my clients discover who they are, what is meaningful for them, what they need to do to overcome past wounds, and how they want to bring their uniqueness to respond to their life issues. The following case studies are examples of issues that may bring a client to a somatic therapist and the result of the work.

## Joyce

Joyce suffered from chronic back pain caused by constant spasms in her psoas muscles (the psoas originates between the lower rib and lumbar spine and attaches to the top of the femur. When in spasm this muscle can cause lower back and/or hip pain and can even create referred pain down to the knees). Her pain was not relieved by ongoing physical therapy; in somatic psychotherapy, she learned what physical therapy did not address.

Joyce's spasms were secondary to her psychological distress. She had learned to brace herself tightly, i.e. biting the

Our body

*chemistry*

( neuropeptides )

and

*nervous system*

( neuro-networks )

can

either work

for us

or against us.

Kisch continued from page 30

bullet, as a coping strategy to face life's events. When in pain, either physically or emotionally, she habitually braced herself even more tightly. As her physical pain increased, she braced tighter. During our somatic psychotherapy sessions, she learned to transform kindly thoughts to herself by gently placing fingers on her psoas muscles. As Joyce learned to bring a supportive, nurturing presence to herself, she became aware of the lack of recognition, understanding, and support she felt as an adolescent. Joyce also suffered from an eating disorder, but she did not want to tell her parents that she was not their perfect daughter and that she was out of control. In college she controlled her symptomatic eating by harnessing her will power.

In therapy, she learned how to listen to and respond to her body; she learned to listen to her somatic warning signs. She began to identify the connection between her intense con-

trolling behavior and her chronic pain. She learned how to care for herself by recognizing, confirming, and taking compassionate action through choice and flexibility, rather than control. She learned how to give herself what was not provided in adolescence and is now able to minimize her pain and enjoy an improved relationship with her family members.

#### Roy

Roy, a social worker, fell on his way to the post office. No ice, no snow, no wet slick sidewalk. His new rubber soled shoes clung to the pavement as his weight went forward and, all of a sudden, he found himself falling in space. He twisted on his way down, protecting his face, and landed on his right arm and shoulder. He had no broken bones but could not lift his arm. He mailed his letters and returned home driving his stick shift with his left hand while thinking, *I have to work. I have to support my family. An injury is not going to get in my way.* But it would be nine

months before he could lift his arm, bear weight with his hand, or brush his teeth with his right hand.

Over a year later, supported by a nurturing, somatic psychotherapist, Roy processed the fall. He performed a pendulation exercise in which the person, in slow iterations, shifts their body in the direction of a fall or trauma and then comes back again. The iterations are determined by the individual's ability to cope with the emotions that arise.

As he leaned to the right, creating the sense of falling, Roy was overwhelmed by the intensity of his fear, emotional pain, and grief that he did not originally allow himself to experience. Through his dedication to the roles he played, Roy numbed himself to the experiential affective awareness of the fall. The same dedication maintained the brace in his musculature. After repeating the exercise of slowly moving in the direction of the fall and returning to an upright posture, Roy's fear, grief and feelings of defeat dissipated. Continued on page 32



**The International Somatic Movement Education & Therapy Association offers a broad diversity of experience, wisdom and study in the collective field of somatic movement. Members expand their knowledge as they blend practices studied and pioneer new techniques.**

**For information log on to [www.ismeta.org](http://www.ismeta.org)**

Kisch continued from page 31

Roy also discovered that a telltale sensation in the sole of his foot, a memory trace of losing his balance, spontaneously disappeared. As his arm began to heal at an accelerated pace, he had a new and profound understanding and empathy for trauma clients.

### Anne

Anne, a massage therapist for thirty-five years, found her hands becoming chronically achy and stiff. In a body psychotherapy session she engaged in for personal growth, she was asked to become somatically mindful of her hands. She was then asked what her achy hands were saying to her. She was anticipating hearing them complain of overuse.

Quite to her surprise and exhilaration her hands said, "We love you. We are honored to be here for this journey." This was not merely a cognitive verbal message; for Anne, love was equivalent to the Divine. Anne received an embodied spiritual message of her success in fulfilling her mission in life. The energy from those feelings released the chronic holding that had built up in her hands from her years of manual labor. The ache and stiffness she experienced in her hands were spontaneously released, and Anne felt a deeper love and appreciation for her work.

### Back to The Glitch

Freud (1950) told us that memories that are too traumatic to have in consciousness are pushed out of awareness — knowingly (suppression) or unknowingly (repression). Gladys Knight more poetically puts it, "What is too painful to remember, we simply

choose to forget." Those of us who believe that mind, body, and spirit are one know that these painful memories may be out of conscious awareness but are neither out of our mind nor out of our body. The shunting of energy to keep these troubling memories out of awareness is exhausting and distorts our perception of ourselves, others, our relationships, and life itself. For Joyce, childhood shame led to adult back pain; for Roy, masculine duty hampered healing; and for Anne, the physical and emotional labor of releas-

"What is too painful to remember, we simply choose to forget."

ing clients' tight muscles lead to her own chronic holding.

Being open to the obstacles of our recognition and growth can often be problematic. Recognizing what is happening in the body, noticing the limitations blocking our ability to fully live our life confronts us with our vulnerability. This recognition can be overwhelmingly distressing, often makes us aware of, and perhaps defenseless to, the feelings of the threat, pain, or grief from past wounds and losses. Furthermore, there may be no more preparedness or problem-solving tools in the present than there were in the past to meet the challenge. Post-traumatic stress reactions can, for example, trigger memories of past trauma making the past and present indistinguishable.

In chiropractic work it is understood that when environmental cues explicitly or implicitly remind us of unresolved memories stored in the chemistry of our body, the body re-assumes the posture it was in during trauma. This somatic re-enactment causes the spinal cord to torque out of

alignment often leading to anxiety, depression, and pain. The memory and re-experience of the event that was not integrated and surmounted in the past, whether it be conscious or unconscious, feels overwhelming and re-traumatizing as met again in the present.

### Fixing the Glitch

This is precisely the forte of somatic psychotherapy. Therapists and clients can face the challenges together within the somatic therapy process.

First, a safe, therapeutic environment is created, and concern, attention to, and confirmation of the individual in mind, body, and spirit is provided. Within

this arena an intervention is created in which what is identified as held in the posture, respiration, organs, tissue, and musculature is externalized.

Through heightened awareness to body sensation, breath, movement, or verbal articulation, release is generated. What was unconsciously held in the body/mind is released as a result of keen therapist observation and compassionate intervention. Finally an alternative coping strategy to the obstacle can be generated.

### Five adjuncts supporting the healing process occur during the somatic therapy process

**Awareness** that the emotions a person is currently experiencing can be a reaction originating from the past when sufficient skills, abilities, and support were not available.

**Acknowledgment** that one has more strength, knowledge, and tools at her or his command to address and cope with these challenges in the present than they had in the past. One

example is the presence of a caring, supportive, and knowledgeable therapist at their side.

**Acceptance** of the experience as it is and its place within the context of understanding of what the emotions are and what they represented at the time. The act of acceptance pieces together the unfinished internal business and puts it into context.

**Allowing**—by experiencing the emotional discomfort in the present tense, clients are able to perceive that this process may be a helpful challenge and an opportunity for self-growth and greater mastery in life.

**Anchoring** clients' courage within themselves to confront their issues and create more effective resolutions through self-recognition and self-appreciation thus building their integrity and self-esteem.

Body/somatic psychotherapists bring light to the spirit of what started this profession decades ago — the study of the psyche. Independent of the particular somatic psychotherapy approach one takes, paying attention to the body and its responses and liberating the holding patterns identified in the body are the unifying elements.

Somatic psychological interventions can allow for release of psychological or physical duress or both.

They can provide for experiencing the joy and exhilaration of discovering the Spirit that lies within us all.

Ronan M. Kisch, Ph.D., is a clinical psychologist and bodywork educator in private practice in Dayton, Ohio. He received his doctorate degree from the University of Kentucky where he was an NIMH Trainee at the Department of Medical Behavioral Science. He received post doctoral training at The Gestalt Institute of Cleveland. Dr. Kisch is a Certified Neuro-Emotional Technique (NET) Practitioner, a Nationally Certified Bodyworker, a Trager® practitioner, and he holds an Advanced Certificate from The Santa Barbara Graduate Institute in Somatic Psychology. He has served as a counseling specialist at Kent State University and as a health psychologist in Dayton's Miami Valley and Sycamore Hospitals.

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## USA Body Psychotherapy Journal

The latest edition is available online at [www.usabp.org](http://www.usabp.org).

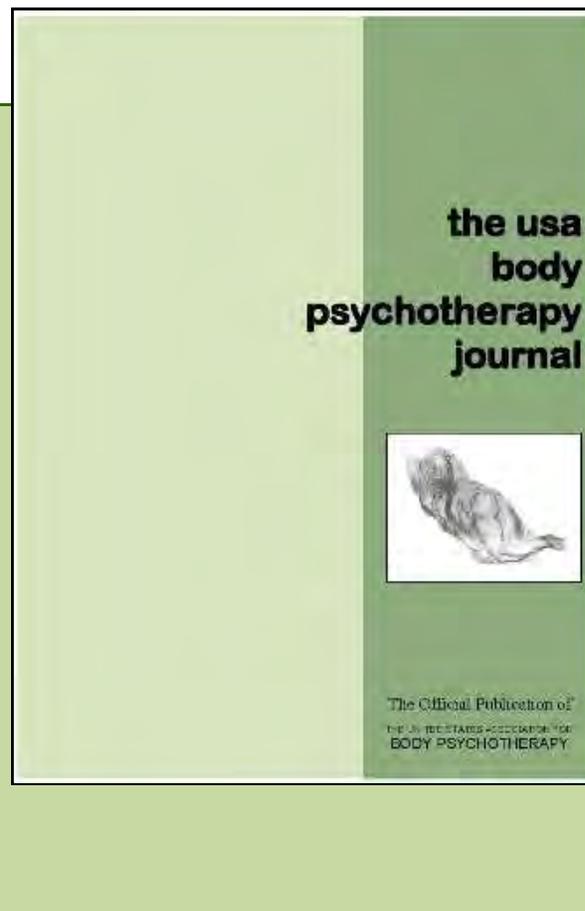
In this issue:

Editorial by Jacqueline A. Carleton, PhD

*Slow Attending: The Art of Forming Intimacy* by Stanley Keleman

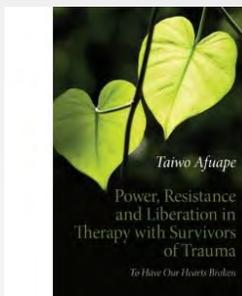
*Feeling Moving: Wandering Through the Flesh of Personal and Human Development* by Mary Abrams

*New Words: Exploring Embodied Language as a Holding environment in Body Psychotherapy* by Bernadette St. George



# Resources

Jacqueline Carleton PhD  
and the USABP Interns



**Power, Resistance and Liberation in Therapy with Survivors of Trauma: To Have Our Hearts Broken.** *Taiwo*

*Afuape*. 2011. 247 pages. Paperback. ISBN13:9780415611893. New York, NY.: Routledge.

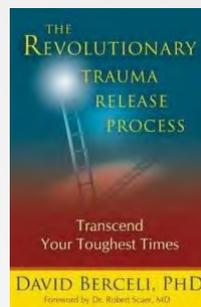
*Reviewed by Aakriti Malhotra, New York University*

Taiwo Afuape gives a critical and unique perspective into three different forms of therapy: narrative therapy, co-ordinated management of meaning (CMM), and liberation psychology. The book peers into the world of therapy and trauma. It is broken up into four parts: Part I investigates power and resistance in both society and in therapy; Part 2 critiques the three main forms of therapy Afuape uses, as well as explores how a therapist can pull the three together; Part 3 brings together Parts 1 and 2 by exploring the place of power and resistance in the clinical world; Part 4 finally looks into resistance and creativity in the therapy setting and ties the book together.

While aimed at therapists, parts of the book remind me of anthropological texts, with the focus being on power relations, the minority “Western”

world's imperialistic attitude towards others, and the importance of resistance within these settings. Afuape emphasizes a dialogue based therapy setting, with the client and therapist on equal levels of power, and continues to explore this within narrative therapy, CMM, and liberation psychology. These three therapies are applied to trauma situations, which can range from one-time catastrophes to continuous and repeated abuse.

The concepts were fascinating and give a critique of therapy through a more anthropologically based lens.

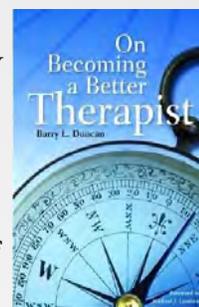


**The Revolutionary Trauma Release Process: Transcend Your Toughest Times.** *David Berceli*. 2008. 207 pages. Paperback. ISBN 13 : 9781897238400. Vancouver, WA.: Namaste Publishing.

*Reviewed by Sofia Vasilakos, New York University*

David Berceli seeks to explain stress, anxiety, and trauma in terms of their effects on both mental and physical health. He stresses the importance of accepting trauma in one's life by perceiving it less as a weakness and more as a sign of the human body's power of resilience. In other words, he defines trauma-induced behavior as the

body's means to protect traumatized people from additional trauma. One trauma-induced behavior he especially focuses on is tremors or the resisting of tremors. He explains that in wild animals, tremors serve the purpose of releasing tension after a fearful stimulus. However, humans resist exhibiting these tensions due to fear of embarrassment. Unfortunately, this resistance results in trapped tension in the body. For this reason, Berceli has created “The Trauma Release Process,” a series of seven exercises that are designed to stress the seven thigh flexor muscles. This stress causes the body to shake, which forces the body to embrace the present by creating a release of deep chronic tension and, ultimately, trauma. This book can be useful to those in need of methods to resolve trauma. It can also be useful to therapists and counselors who are looking for another tool in their work with those dealing with stress, anxiety, or trauma.



**On Becoming a Better Therapist.** *Barry L. Duncan*. 2010. 211 pages. Hardcover. ISBN13: 9781433807572. ISBN 10 : 1433807572. Washington, DC.: American Psychological Association.

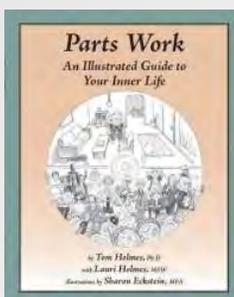
*Reviewed by Alisa Liu, New York University*

The premise of Duncan's book is to create effective therapists by combining outcome management with professional development. He provides evidence that collecting client feedback not only improves client treatment but also contributes to the therapist's professional growth.

Duncan encourages readers to not be overwhelmed by high client dropout rates and advocates practice-based evidence to improve client outcome. The book follows a progression from short-term goals to long-term professional development, from how to start collecting feedback to a reflection on the reader's identity as a therapist.

He introduces the Outcome Rating Scale (ORS), an assessment of the client's individual, interpersonal, social, and overall well-being and a predictor of client outcome, and the Session Rating Scale (SRS), the client's assessment of the therapist. He argues that collecting feedback through the ORS and the SRS increases Healing Involvement in junction with therapists who are committed, engaging, and able to communicate effectively with the client.

Throughout the book, Duncan stresses the importance of the client-therapist relationship and urges readers to remember why they became therapists—to help people. He claims client feedback will both improve client outcomes and therapists interpersonal skills.



**Parts Work: An Illustrated Guide to Your Inner Life.** Tom Holmes & Lauri Holmes. 2007. 129 pages. Softcover. ISBN:

9780979889714. Kalamazoo, MI.: Winged Heart Press.

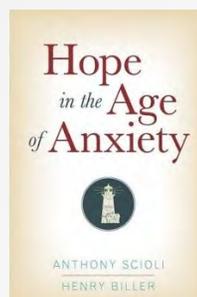
Illustrations by Sharon Eckstein.

*Reviewed by Sofia Vasilakos, New York University*

This illustrated guide combines the Internal Family System (IFS) model with teachings about the nature of consciousness from Buddhist teacher and scholar Thich Nhat Hanh. Through this marriage, Holmes attempts to help readers identify with the wishes and desires of the different “parts” or subpersonalities of themselves. Not until this identification is attained can the Self, the witness of the parts, create a balanced life. A balanced life, in terms of this guide, means accepting and integrating the conflicting parts, which are made up of different patterns of thought, feelings, and behavior.

The first chapters of this guide provide background information on the Self and the parts, specifically how they develop and interact with one another. The guide then provides a chapter on how to balance the parts by creating a dialogue, with the help of a therapist, between the client's Self and the parts. The last few chapters discuss parts and relationships, the various types of parts such as distractors, exiles, and firefighters, and finally how to find an inner spiritual guide. This book is geared towards helping clients understand their inner system and ultimately achieve a balance within it.

**Hope in the Age of Anxiety: A Guide to Understanding and Strengthening Our Most Important Virtue.** Anthony Scioli and



Henry B Biller. 2009. 427 pages. Hardcover. ISBN 9780195380354. New York, NY.: Oxford University Press.

*Reviewed by Sofia Vasilakos, New York University*

Scioli and Biller provide an approach to the study of hope by combining a diverse set of elements from psychology, philosophy, history, literature, and religion. Using these elements, they created a personal guide that allows readers to understand and use hope. The book is divided into two parts: “the roots” and “the wings” of hope. The “roots of hope” offers readers an understanding of hope from an evolutionary, historical, and spiritual perspective. It serves to establish hope's crucial role in individual development as well as in humankind as a whole. The “wings of hope” takes a more proactive approach by providing readers with strategies to use hope in the context of attachment, mastery, and survival. It examines fear and ways to overcome hopelessness. It also provides a guide to nurturing hope in children as well as to using hope as a medium for healing and ultimate well being. Though this work is geared more towards clients, practitioners can also benefit from the authors' unique integrative approach towards a better understanding and use of hope.

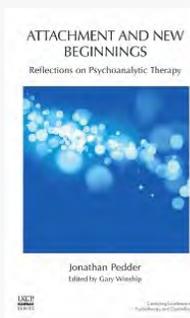
**Gestalt Therapy: Advances in Theory and Practice.** Talia Bar-Yoseph Levine. 2011. 191 pages. Paperback. ISBN: 9780415489171. East Sussex, UK.: Routledge.

*Reviewed by Sofia Vasilakos, New York University*

“Gestalt Therapy: Advances in Theory and Practice” provides a summary

# Resources

of Gestalt therapy in terms of theory and practice. Chapters, contributed from a diverse group of scholars, explore aspects of the Gestalt approach ranging from its application to the community to its connection to spirituality. The first part of this book investigates concepts of community life, “holism,” field therapy, varying perspectives of the self, ethics, neuroscience, and spiritual entities all in the context of the Gestalt theory. The second part looks at Gestalt practice and its use in breaking boundaries of closed systems, mindfulness and therapy in trauma work, and family and couples therapy. The last part includes two chapters, one focusing on ethics, and the other on Gestalt therapy from a cultural perspective. The editor frames the book in such a way that it supports her belief that culture and social systems at large play a vital role in well being. Gestalt Therapy: Advances in Theory and Practice may be found useful by both Gestalt therapists and non-Gestalt practitioners. Students of counseling, behavioral science, and psychotherapy might also find it useful.



Books Ltd.

*Reviewed by: Alisa Liu, New York University*

**Attachment and New Beginnings: Reflections on Psychoanalytic Therapy.** Edited by Gary Winship. 2010. 170 pages. Paperback. ISBN: 9781855756328. London, UK: Karnac

“Attachment and New Beginnings” is a compilation of Dr. Jonathan Pedder’s papers edited by his former psychotherapy supervisee Gary Winship. Published shortly after Pedder’s death, the book serves as a celebration of his contributions to the field of psychotherapy and as a guide to his novel way of thinking.

Pedder drew upon the theories of past influential psychotherapists to describe the Independent stream of psychoanalysis. In each chapter, Winship offered papers that Pedder wrote to support or reject, to different extents, the ideas of Freud, Klein, Winnicott, and others to formulate his own original definition of psychotherapy.

Pedder made claims about the nature of psychotherapy that arise throughout his papers. In the first chapter, he emphasized the role of play in therapy sessions and referred back to play in the sixth chapter in describing supervision. The importance of language also resurfaced; he suggested that the “defensive position” in mourning should be rephrased as “the stage of concern,” and “termination” of therapy should be reworded as “graduation.” Pedder also argued that the therapist-patient relationship can be a form of new attachment for some patients. He felt that the therapist should not fear patient dependency; rather, their relationship should resemble one between equals not between teacher and student. Finally, he used the history of psychotherapy in the British National Health Services as basis for what is to come in the future for the field of psychotherapy.



**Spirituality in Clinical Practice: Theory and Practice of Spiritually Oriented Psychotherapy.** Len Sperry. 2012. 282 pages. Hardcover. ISBN: 9780415957243.

New York, NY: Routledge, Taylor & Francis Group.

*Reviewed by: Alisa Liu, New York University*

Dr. Len Sperry’s book “Spirituality in Clinical Practice: Theory and Practice of Spiritually Oriented Psychotherapy” functions as a guidebook for psychotherapists seeking to incorporate spirituality into their professional work.

Sperry begins by addressing the growing presence of spirituality in America and the growing importance for psychotherapists to be sensitive to their clients’ spiritual needs. The first half of the book is dedicated to explaining the importance of spirituality. It provides empirical evidence for the impact of spirituality on the client’s well being and addresses the benefits as well as the dangers of spirituality. Sperry also emphasizes the importance of differentiating between spiritual emergencies and psychopathology. He acknowledges that spiritually oriented psychotherapy is a recent and developing field, but it is becoming increasingly evident that the client’s spirituality is related to their psychological healing process.

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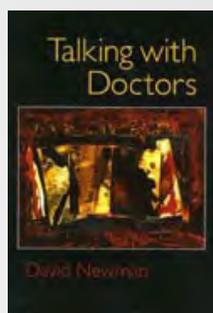
In the second half of the book, Sperry discusses spiritually oriented psychotherapy in practice. He uses the case of Maria—a 47-year-old third-generation Cuban-American female who seeks psychotherapy to acquiesce her spiritual issues and obsessive personality—to illustrate the importance of the therapeutic relationship, case conceptualization, intervention, termination, and cultural and ethical considerations in spiritually oriented psychotherapy. By following his guidelines for successfully establishing the therapist-client relationship, planning treatment, eventually terminating the relationship, and considering cultural background, psychotherapists can provide positive clinical outcomes for their clients.

**The Neurobiology of Attachment (Audio Disc).** *Allan Schore*. 2011. New York, NY.

*Reviewed by Alyssa Mayhew, Hunter College-CUNY*

In “The Neurobiology of Attachment,” Allan Schore speaks to psychotherapists in New York City, detailing the ways in which neuroscience and attachment theory are converging in the field of science. He provides a solid explanation for the physiology of attachment theory, along with a precise view of how different forms of attachment arise and how psychotherapists can better work with patients (whatever their attachment style may be). Schore’s lecture is divided into eight disks which are approximately an hour long each.

He cites an abundance of resources for further reading and investigation. A valuable part of the lectures involves audience’s questions, which provide extra insight into the neurobiology of attachment. Shore’s audio discs are ideal for psychotherapists interested in learning more about the physiology of attachment and how to better interact with patients in therapy from a more physiological point of view.



**Talking with Doctors.** *David Newman*. 2011. 238 pages. Paperback. ISBN: 9780983080718. Montclair, New Jersey: Keynote Books, LLC.

*Reviewed by Kristin Emodi, Columbia University.*

In his book, “Talking with Doctors,” David Newman recounts his experience as a patient facing a life threatening illness. At the young age of 44, he was told he had a large malignant tumor in his brain. Newman relives the feelings and experiences of such a trying experience, recounting the range of helpful and caring, to cold and condescending, doctors with whom he interacted. This book would be helpful to patients in terms of giving them something to relate to as well as for doctors who might not understand exactly how their desire to be helpful and informative and blunt may come off to patients. It is an eye opening book that every doctor should read and every patient can empathize with.

**Facing the Storm: Using CBT, Mindfulness and Acceptance to Build Resilience When Your World’s Falling Apart.** *Ray Owen*.

2011. 204 pages. Paperback. ISBN13:

9780415676595. New York, NY.:

Routledge.

*Reviewed by Aakriti Malhotra, New York University*

In his book, “Facing the Storm,” Dr. Ray Owen discusses ways to become more resilient in times of hardship and pain. Using CBT techniques and his own experiences in palliative care, he wrote the book for clients experiencing life crises.

The book is divided into eleven chapters, each taking the reader through the chronological steps of a major storm in his/her life. Although Owen is working with issues such as facing death and terminal illness, he explains that the same practices can be used in broad variety of situations. He uses case studies throughout the book to highlight individuals with different problems while employing the same techniques in specific ways to each situation. An example of the techniques provided are ways to make decisions when in a tough situation: satisfying (choosing the first option that meets the criteria an individual sets), going for the best, avoiding the worst, or simply flipping a coin. Owen also provides activities to help regulate and manage emotions such as yoga or Tai Chi.



## The Art and Science of Face Reading

By Ginger Bisplinghoff



# F

ace reading and discovering one's own innate nature dates back as far as Cro-Magnon cave drawings.

Throughout history, reference to facial structures and their corresponding function appears in literature, the arts and medicine. Aristotle was the first person to write a treatise on face reading called *Physiognomonica*.

From ancient time to the present, face reading has evolved from an art to a science. In the late 1930's Dr. Edward Vincent Jones, combined brain and genetic research with the philosophies of *physiognomy*, the assessment of a person's character based on their facial appearance, and *phrenology*, the study of human behavior based on the measurements of the human skull, to create *personology*, the study of facial structures and their corresponding behaviors.

Dr. Jones' work was carried on with a five year research study conducted by Robert and Elizabeth Whiteside. Their son Daniel, along with Gordon Stokes and Candace Callaway, refined the information into what is called *Structure/Function*, the study of how the physical structure of the face, head and body relates to human behavior and function.

Each physical structure is a clue to our innate behavior: who we are, how we relate to others and how individuals see us. Studying facial structures gives us a new perspective on relationships. Respect and understanding is developed for those with whom we want to effectively communicate.

Each individual structure represents one or more of the following:

- A strength
- An ability
- An advantage
- A talent
- A gift
- A lesson to be learned



For example, take the shape of the face. Face shape has to do with self-confidence—innate or learned.

A person with a **long, narrow face** is by nature, cautious. Their self-confidence and assurance comes from having learned all of the steps sequentially. They experience self-doubt when approaching unfamiliar people and projects. Frustration builds with this individual when they are expected to figure something out immediately and without the necessary information. Once they have learned the steps, they have all the confidence in the world.

I always have someone in my class who has a long, narrow face. It helps keep me from straying. On the first day of a four day workshop, I asked the class to turn to page 343 in their books. A look of horror came over Lisa (my long, narrow face student). You could see that she was mortified that I not only skipped page one, but also was starting at the back of the book. She was relieved when I asked them to simply take the page out as it was a worksheet needed for the day!

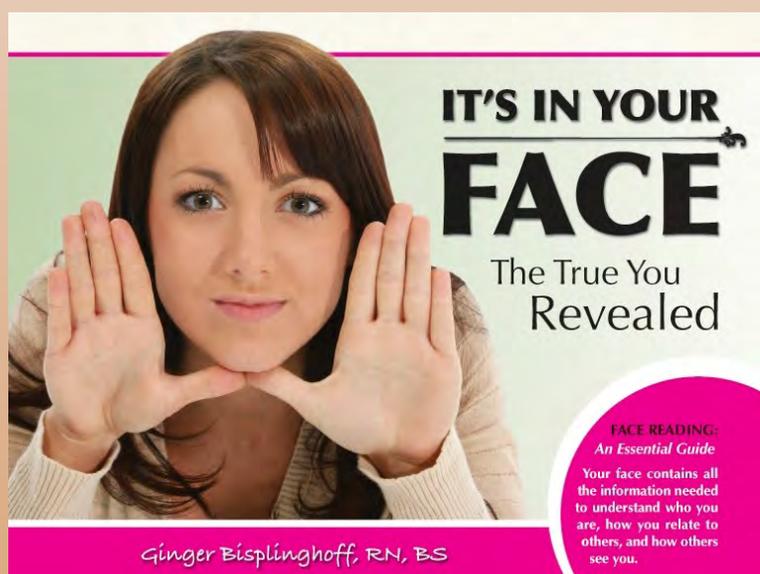


The opposite face shape is called **broad-shield**. The width is through the eyes. This person is innately confident. They feel that they can handle anything and tend to face challenges head on. They are very direct and will often be in a leadership position. Need a volunteer for a project or committee? Someone with a broad-shield face is likely to jump right in and fill the

need. They don't even need to know what the assignment is. Their mind-set is, "I can do anything I put my mind to." They also have a tendency to skip steps in the process, "1, 2 . . . 6. Who needs steps 3, 4 and 5?"

There are no good or bad traits to have. Each individual's life story is written on their face. All of their experiences, emotional perceptions, natural abilities, communication styles and needs are there for the world to see.

Ginger Bisplinghoff RN, BS is a behavioral kinesiologist, Australian Bush Flower Essence Practitioner and Instructor, and author. Children, teens and adults have benefited from Ginger's wisdom and her ability to connect loose ends to help them discover the true essence of who they are based on their unique facial structures. To learn more about face reading or to order Ginger's book, *It's In Your Face - The True You Revealed*, visit her website: [www.itsinyourface.com](http://www.itsinyourface.com). To read more face reading articles, go to: [http://ezinearticles.com/?expert=Ginger\\_T\\_Bisplinghoff](http://ezinearticles.com/?expert=Ginger_T_Bisplinghoff)



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## The Body as a Temporary Aspect of Your Wholeness

(Schucman & Thetford, 1976)



By Sandy Woodcock

An elegant trickle of soft music wafts through the room. The sheets create a soft clean cocoon of safety as the client melts into the table like some kind of chocolate syrup. The temperature of the massage table and the room are compatible for leaving the challenges of coping far away. Slowly the recognition of the sound of the mind's chatter rumbles through the space like a jet engine. I can feel it because the client is nudging me along for the ride. Calming that mental adrenaline is like landing an airplane—approaching the landing strip begins with total acceptance of the present moment and listening for a sense of willingness for letting go to be revealed. Physical and emotional discomfort can produce plenty of unnecessary mind chatter and that's where my professional training takes over.

I've made my living as a portrait artist for most of my adult life. I feel like I have come full circle. After asking people to show me their demeanor for so many years, now I ask them to let go of that preconceived notion of themselves in favor of a broader vision. We can all see how the body responds to our perceived circumstances, but the twists and turns of those nuances are personalized. We can actually celebrate the charming nuances of our character from a distance with a joyful giggle knowing we are really so much more than that. We can be detached from it all but yet fully observant.

I try to inspire my clients to move through this present bodily configuration. I try to reveal a portal for a kind of change that has no tendrils of fear, regret or guilt that can snag on memories that serve no worthwhile purpose. Since the body is a communication device, an expanded realization of the perfect harmony of our true nature will provide a more lasting effect for this change. It is a conversation that ultimately resides beyond articulation. During a massage session, listening for the appropriate tools

and approaches for that particular body is part of what training and experience brings.

Willingness is the first greeting acknowledged. Sometimes gentle pressure that sinks into the body can produce a palatable pain that speaks of just such willingness. Perhaps a slow and barely discernible myofascial (connective tissue) release will be one of the more appropriate tools. I'll admit that for me, our mutual connection to the earth, the feet, are a portal I relate to so I tend to feel guidance to touch base with that very telling area first.

Everyone has their own way of understanding the human costume as a creative expression of who we think we are here and now, and we all have our own way of uncoiling from where we think we are. Our experience of seemingly separate bodies is temporary and actually myopic in the grand scheme of things. We are ensconced in our temporary familiarity of form, simply unaware of our universal truth. The true nature of our oneness seems so abstract to us that the journey of discovering this seems to pave uncharted territory. The truth of what we are is far too magnificent to be contained in these fragile vessels.

The manifestation of our souls into a body seems to be something we are drawn to for the experience, but it is not necessarily a requirement for enlightenment. This is a little bit like trying to tell someone the earth is round and not flat who has no present experience of it being any other way. It is hard to think of a way of being that does not depend on form. Now try adding to that a way of being that does not depend on time.

Outside of time and form, your true self has always existed in the perfect harmony in which it was created. Your form merely represents one temporary aspect of your wholeness. It is a physical extension of a flawless state of being. The body does embrace our immediate concept of familiarity.

It can be very difficult to let go of familiarity until you can conceive of it differently. I remember clinging to the familiarity of my six-point crampons on the side of a 3,000 foot vertical snow field unwilling to let go of the grip my crampons had in the ice and snow and depend only on my ice ax until I was eventually able to realize that glissading is actually fun. My fear lost its foundation when I was able to reside solidly and only in that present moment.

We hang on to thought patterns as long as we feel they serve us. Thoughts can come from learning patterns that

we reincarnate over and over again bringing feelings like not good enough, unlovable and damaged that often manifest as bodily holdings. Thought patterns can come from a collective conscience that is removed from our immediate awareness so we need to recognize thoughts that do not serve us and give them no resistance so they can pass through with no opportunity to manifest. Ideas that come from our true nature like forgiveness, unconditional love, and innocents are expressions that offer no resistance. We bring resistance into form as dis-ease within the body, and we also bring it to the collective conscience that way. We do have perfect freedom to choose the perspective from which we observe these experiences; but, the willingness to dance lightly on the perception of form invites the wisdom for your true self to be more accessible.

During a massage session I use technical knowledge as tools in an attempt to unleash an intuitive conversation with the client that blossoms effortlessly as our mutual interaction silently unfolds. At times, information spontaneously arises, felt perhaps as an intuitive sense, or perhaps as a realization that crystallizes from outside any patterned way of thinking. These ideas and/or intuitions are realized through “in-Spirit-ation” (Akers, 2007). The resultant shift of perception that comes from connecting with this inspiration resonates with the reality that there are no such thing as individuals. We are actually one universal being and our perception of individualization is only a temporary illusion. Clients can realize they are not stuck in their present bodily configuration when they connect with a feeling of restorative balance after a massage. As we become more in tune with the realization of our true nature as this infinite, loving, unlimited, formless

For further reading:

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state of being, it will come to us naturally to use whatever vehicle or tools we are familiar with to emanate that expression. The way you relate to this broader concept of consciousness reflects the way you express yourself in form.

Some will relate eloquently to the creative and flowing learning experiences of the body and some will not. If the body is a tool you can understand then it is likely that is what you will recognize your lessons through. Just like all experiences, this adventure holds all the meaning you choose to give it.

The characteristics of the true nature of our universal way of being are always accessible. The journey to this realization begins with willingness. By dancing to the vibrations of the realization of this perfect harmony we can loosen up and free our spirit, and in doing so influence the pulse of the oneness of us all. We can expand our capacity to experience joy. Life is a dance if you take the steps!

Sandy Woodcock is a student of “A Course in Miracles,” an LMT, and a portrait artist. For information log on to [www.simplymassage.info](http://www.simplymassage.info) or [www.portraitsbysandy.com](http://www.portraitsbysandy.com)

## Resting and Befriending Thoughts: Remembering

By Lee Lipp



### Stepping out of the boxcar

A mindfulness pause, even for 1 minute, can offer spaciousness to simply be with thoughts as they come and go, without feeling that you have to believe them, get rid of them, fix them or fight with them.

Thoughts are simply the “stuff or stories” that minds interact with. We don’t necessarily cause thoughts or create them.

Sometimes the same old thoughts that incline us to lowering and/or anxious mood states come so quickly from years of conditioning (when this...then that) that we actually believe they’re real and feel trapped in a boxcar with them. The more we fight with them (sometimes having many repeated battles with them) the stronger they seem to get and we can feel out of control—sensing our body/mind rushing towards highly anxious mood states—clickity-clack, clickity-clack, fueled by hormones getting ready to flee, freeze or fight.

When we practice mindfulness we offer a way for the train to slow itself down so that exits from the boxcar can become apparent. As the train slows down, boxcar doors can open in the present moment and the fresh air of spaciousness and light can waft on in. Spaciousness and light allow us to see more clearly that thoughts come and go in an ever changing flow of experiencing and how we perceive and relate to flowing experience also changes. What a relief!

Thoughts are not necessarily true, solid or fixed reality. Everything changes.

Over time, when you are able to include longer periods of formal mindfulness meditation (setting an intention with yourself to mindfully meditate for a specific period of time), you may notice that the onslaught of thoughts, accompanied by emotions and body sensations begins to slow down. You may also notice that you’ll be able to become aware of each element of experience with more clarity and ease. Space between experiences and perceptions of experiences may become apparent and thoughts and feelings may not continue to feel as powerful and out of control as they have.

Taking a pause for 3 minutes or for a longer period of time inclines the train towards slowing down. This can be helpful to strengthening our ability to clearly see thoughts as ever changing mental experiences rather than fixed facts. It may be that this mental experience often occurs with feelings of anxiety and this does not mean that the thought is true. It simply means that when “this thought experience” arises it is often linked with “this feeling experience.”

When we interrupt this link, by bringing the light of curiosity to the thought...feeling link, we are

Thoughts  
are simply  
stuff  
or stories  
That  
our minds  
interact  
with.

practicing out of the boxcar. We can move with freedom to examine what a thought is telling us about ourselves that may incline us towards feeling out of control, reactive.

When we notice that we are in a reactivity mode that appears unstoppable, please congratulate yourself for noticing. The moment we notice reactivity, is a moment of mindfulness. When reactivity is noticed we have an opportunity to see thoughts that are accompanied by strong emotions and it may appear to be impossible to simply be with them for even a 30 second pause. The “reactivity train” has already left the station! At these times it may be helpful to write thoughts down. This interrupts reactivity and strengthens your ability to relate to thoughts in a less emotional,

overwhelming mood state. Also, by pausing the thought, feeling link with writing, you are giving yourself the time and space to reflect on the thought and get off the “reactivity train” that leads to feeling out of control. Ask yourself the following questions: Did this thought just pop into my head automatically? Does it fit with the facts of the situation? Is there something about it that I can question? How would I have thought about it at another time, in another mood? Are there alternative ways to view the situation?

And right now, as this article comes to a close . . . how about trying out a 1 minute pause . . . Hmmm . . .

“what am I noticing now?” I’m hungry, better grab a chocolate! I’m thirsty, better grab a beer! Instead of doing that, just for this moment, by taking a pause we can ask ourselves the question of what’s actually going on right here, right now. Where do we notice hunger, thirst in the body. As we do so we are practicing stepping out of the boxcar of “when this thought . . . then that action” reactively patterned responses. As we step out of reacting to thoughts, we are stepping into a spacious field of possibilities that we may not have noticed before. And so we might ask ourselves, “what am I noticing now?” and then we wait for the answer.

Lee Lipp, Ph.D., MFT has been facilitating workshops and practice groups that combine psychotherapeutic strategies with mindfulness based meditation for issues related to depression and anxiety mood states, as well as for preventing substance abuse relapse since 1993. Having taught in psychology graduate programs for 16 years, her recent work has included teaching at the San Francisco Mental Health Association and San Francisco Dept. of Mental Health, San Mateo County Behavioral Health and Recovery Services, The Drug Court of the Superior Court of California-San Francisco County, Haight Ashbury Psychological Services, as well as at many of the Bay area’s Buddhist Centers, i.e. San Francisco Zen Center, Spirit Rock Meditation Center, Insight Meditation Center, Zen Hospice Project, Tassajara Mountain Center, San Francisco Insight, Arcata Zen Center, Gay Men’s Buddhist Sangha, and East Bay Meditation Center. Dr. Lipp has been a member of Thich Nhat Hanh’s Order of Interbeing and has engaged in meditation practice for over 20 years. Her most recent work has also included being Diversity Coordinator at San Francisco Zen Center as well as supervision of interns at Haight Ashbury Psychological Services. For more info: [www.leelpp.com](http://www.leelpp.com).  
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## The shift from living in your head to living from your heart

By Serge Prengel



In the science-fiction mythology of the 1950s and 1960s, extraterrestrials were represented as humanlike creatures with enormous heads and tiny bodies. The idea was that more evolved people would have less and less to do with the more primitive aspects of existence, e.g. the body, and would develop even further what is most developed in us, the brain.

I don't know that any one, even at that time, actually aspired to evolve into a big brain housed in a big head carried by a tiny body. In any case, today, that vision feels like a nightmare as opposed to an evolutionary goal. So, why do I mention this caricature?

While none of us actually would like to become one of these creatures, many of us spend significant amounts of our time living as if we were one of them.

How so? Our sense of our self, our sense of who we are, is very often a reflection of the relationship we have with our thoughts. To use a cliché, we "live in our head". Now, like all clichés, this one is both very evocative, and very difficult to actually pin down. As a result, it

is not very actionable: Having said that you "live in your head", what is it that you can actually do about it?

So it makes sense to spend a little time exploring what it is that we call "living in our head". What this means is that too much of the information we get is from our thinking brain. Now, just stating this is not sufficient. What helps clarify the above paragraph is to ask the question: As opposed to what?

Well, as opposed to paying attention to other sources of information about the world, and about ourselves in relation to the world. Specifically, the sensations that arise in our body, the gut feelings that we have about situations . . . in other words, perceptions that have not yet made it into explicit thinking or that are too diffuse to actually filter into articulate thoughts.

When put into this perspective, "living in our head" is not just an empty cliché. It is a way to point out that we often have a very narrow focus: We focus on our thoughts and judgments, as opposed to other sources of information such as body sensations, intuitions, gut feelings, felt senses.

Of course, this does not in any way mean abandoning the wonderful sources of information that our intellect provides. The alternative to evolving into the kind of extraterrestrial I mentioned at the beginning is not to cut off our head.



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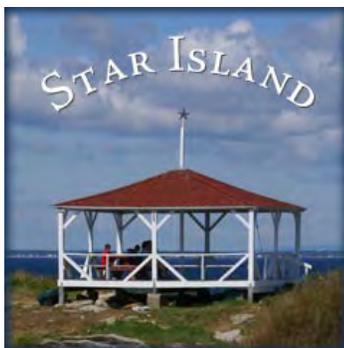
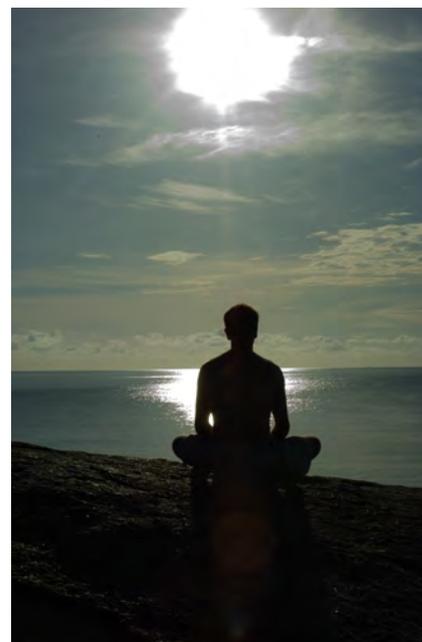
We very much want to keep our head, but we want to keep a balance between the head and the rest of what makes us what we are.

So I am talking about shifting focus. This means developing the capacity to observe that, at certain times, we are almost totally focused on our thoughts. And at that point, to consciously pay attention to something else, like body sensations or felt senses.

This way, we literally expand our con-

sciousness, our sense of self. This is not some kind of a mystical operation. It is simply a matter of shifting our focus in order to utilize more of our resources. Then, we have more information available to us than just thoughts—more points of view, so to speak. We have enlarged our database of information about how we interact with the world and how it feels to do so.

*Serge Prengel, LMHC, is certified in Focusing, Core Energetics and Somatic Experiencing. He is in private practice in New York City, and also edits the monthly Somatic Perspectives conversations series.*



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Susan Stibler, MSW, is a Licensed Independent Clinical Social Worker, Experienced Registered Yoga Teacher (E-RYT), Certified Ayurvedic Yoga Therapist, and a Wise Earth Ayurveda® Practitioner. She has trained in Yoga Nidra with Dr. Marc Halpern. Susan is the proprietor of Innerpeace Healing Arts in Dover, NH., offering counseling, yoga therapy, and other holistic therapies.

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# Current Research Reviewed

By Jennifer Frank Tántia



*Clinical trials, phenomenological studies, case studies, grounded theory and literature reviews. Research in the fields of medicine and mental health is finally growing toward a closer understanding of the body/mind continuum. This column is dedicated to sharing new research that may impact our work in the field of body psychotherapy.*

Merker, B. (2007). Consciousness without a cerebral cortex: A challenge for neuroscience and medicine. *Behavioral and Brain Sciences*, 30, pp. 63–134. DOI: 10.1017/S0140525X07000891

What makes a body wise? As defined by the free on-line dictionary, wisdom is described as, “The ability to discern or judge what is true, right, or lasting; insight” (<http://www.thefreedictionary.com>).

According to the theoretical foundations of somatic psychology, body wisdom refers to the ways in which the body takes in and expresses the present living truth of a human being. In somatic philosophy the body is adaptive, multidimensional and has the innate ability to heal itself. Some have claimed that the body doesn't lie . . . others have said that it does lie (D. Hanlon Johnson, personal communication, April 4, 2010). Perhaps both are true and simply contingent upon an individual's state of health. Body/mind duality has been debated since the time of Descartes and only since the increasing interest of eastern medicine has Western psychology adopted the body/mind continuum. More recent interest in embodied experience has defined a kind of “body consciousness” in which the visceral self “knows” something about experience prior to analyzing it (Porges, 1993).

Researchers such as McCraty et al., (2004) began the journey to extrapolate the ways in which the body can detect and respond to the environment without cortical awareness. Their findings showed that the heart and its electromagnetic field can pick up and process emotions

separate from traditional sensory means (like seeing an image or hearing a sound that evokes emotion). McCraty's work in the “intuition of the heart” strongly supports the conjecture for the wisdom of the body.

Even more recently, Merker (2007) reported observations that contribute to centrencephalic theory, originally proposed in 1958, that consciousness may exist without a cortex (Thompson, 1965).

Merker's literature review reveals studies of several types of experiments involving hemispherectomies in epileptic patients (pp. 65–66) as well as the “Sprague Effect” in cats (p. 67) that reveals evidence of subcortical activity. The study describes a process by which, following the removal of part of the visual cortex, orientation is restored when the midbrain is *further damaged* (p.67).

By damaging the midbrain, which is considered part of cortical consciousness, the brain stem (upper portions, according to the author) has some mechanism for “picking up” awareness (in this case, visual) that was not previously acknowledged. These studies resemble the famous story of Phineas Gage, a railroad construction worker who survived an accident in which a tamping iron entered under his left cheekbone, and exited the right frontal bone of his skull, with little but a personality change.

Following a history of sub-cortical awareness, Merker's study challenges yet again the current scientific trend that consciousness is processed only in the cortex of the brain. Merker observed children with hydraencephaly, a rare disease in which the cerebral cortex fails to form and is replaced by cerebrospinal fluid. In these children, consciousness is observable and present, and they have been known to live for “years, sometimes decades”. Although they cannot speak, children with hydraencephaly respond to tickling, prosody, and eye gaze, and use movement and sound to communicate what appears to be a personal emotional experience when engaged by another. In dance/movement therapy this is called *mirroring*, by which two individuals can communicate a mutual nonverbal experience with one another that includes posture, gesture and emotion, while simultaneously holding one's individual embodied perspective.

Continued on page 47

Tantia continued from page 46

The author found that the responsiveness of children with hydraencephaly is due to sub-cortical activity, located at the top of the brain stem. Containing more than the simple deduction of primitive reflex, Merker found that supra-brainstem activity holds facets of consciousness. To his observations, Merker (2007) summarizes, "To see, to hear, to feel, or otherwise to experience something is to be conscious, irrespective of whether in addition one is aware that one is seeing, hearing and so forth . . ." (p. 64). His words clearly define the ways in which the direct experience of embodiment is its own wisdom. In Body Psychotherapy, this translates to the term *body consciousness*.

Although Merker clearly appreciates the necessity of ego, presumed to be located in cortical consciousness as a necessary factor for optimal human existence, on many levels the existence and articulation of "body consciousness" through traditional research such as the current article is integral to our value as body-based psychotherapists.

First, from a developmental and pre and perinatal psychology perspective, the way in which the brain forms prenatally strongly suggests that consciousness may very well be "online" prior to birth. Second, as body psychotherapists, we work from the foundation that we do not have a body but are embodied beings (Heidegger, 1991).

We acknowledge the places in experience that provide truth for ourselves and for our clients that reach beyond what they "think". We work to provide our clients with tools to engage in the direct experience of life as it is happening prior to judging of it. We honor the felt experience of the body's awareness as a legitimate, alive testimonial for our existence.

Merker's findings that consciousness is alive and well in the sub-cortical domain of the brain supports the long-practiced use of body consciousness as a type of awareness

that is different from the "thinking" brain-cognition as we know it. Explained by Koch, (2011), "...any cognition is primarily situated in the lived body" (p. 276).

Therefore, to answer the question, *what makes a body wise*, one might simply ask one's body...and then see what wants to happen!

Jennifer Frank Tantia is a Dance/movement Therapist and Somatic Psychotherapist in New York City and serves on the faculty of both Pratt Institute and Adelphi University. She leads Authentic Movement groups and frequently presents at conferences both nationally and internationally while completing her Ph.D. in Somatic Psychology at The Chicago School for Professional Psychology. All responses and comments to this article are welcomed. Please contact Jennifer at: [JFTantia@gmail.com](mailto:JFTantia@gmail.com)

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## STRESSING OUT

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## Sensations, Emotions and Their Movements

By Erik Jarlmaes



In my work, I value sensations highest, then emotions. I have experienced again and again that clients who sense their sensations, point out where they are in their bodies, verbalize them, and take them as serious messages to act/react have a healthier quality of life. Emotions are necessary to sense, experience, and express both in contact (*relationship*) and without falling out of contact with yourself or others because holding back emotional vibrations can spoil you from the inside out. It is equally important to expand your possibilities for expressing your emotions.

I have found it interesting and useful to examine which movements, vibrations (and their amplitude) and speeds belong to which emotions, and in turn use this information to teach clients how to experience different emotions. Embodying these skills allows clients to rely on their bodily knowledge today and enhances their life quality. I also share with clients what I observe going on in terms of movements (and thereby emotions), especially when they do not know what is happening. For example: one client noted that “nothing” was happening when I asked; yet, I noticed a small fast vibration in her torso when she was

inhaling as if her in-breath happened in small jerks. I suggested that maybe she was afraid. She denied feeling fear, but I told her why I thought it was. She sensed herself again and opened up for this fear—because it was fear—and from there the session took off.

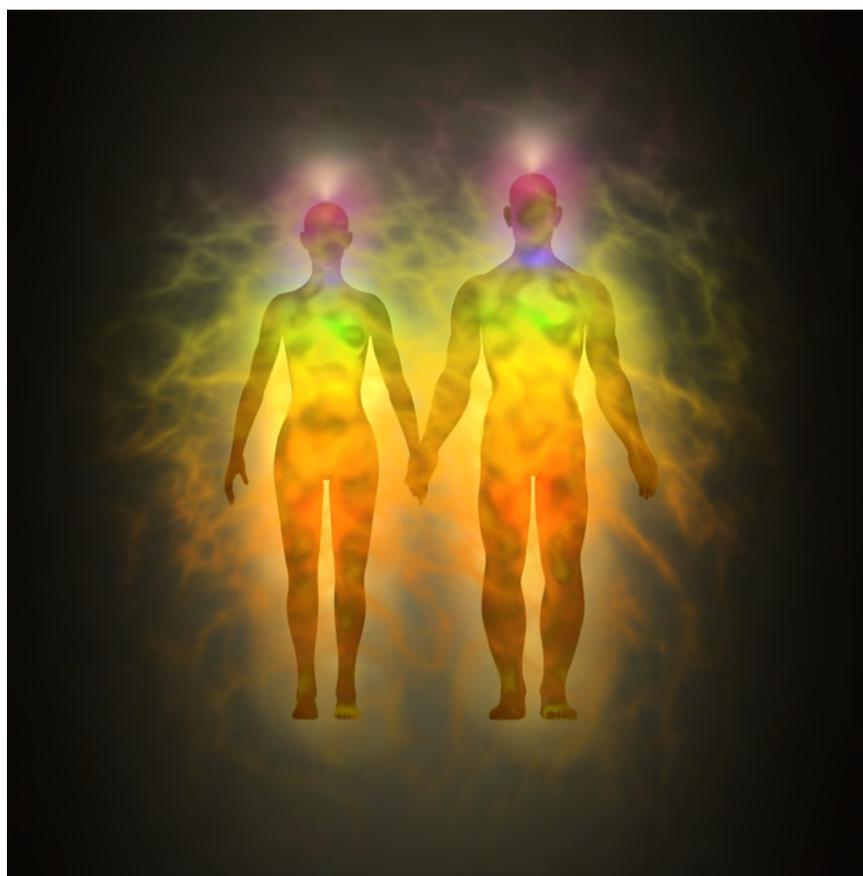
Another client talked about being afraid when she was sexual with a man. I asked her to describe the sensations she felt while being afraid, where she felt them in her body, and what kind of vibrations she felt. She described a slower vibration and a little bigger amplitude than fear. I had her demonstrate the movement with her hand; the movements had a little heaviness in them. I realized she was not afraid but rather was having sexual vibrations. I taught her the difference and she has since dared to enjoy her sexual relations with her partner (personal communication, June 12, 2010).

### Teaching Emotional Movements Using Sensations

When clients are unable to recognize their own emotions, I teach them to sense what goes on inside of themselves while doing movements associated with specific emotions. For instance, joy and happiness are often associated with an upward movement (up in the air); the speed increases from the start of the movement to its full expression. Shame is often bodily reflected as a backwards movement combined with turning the body away (hiding the face) and letting the head fall forward. It often starts with slight stiffening before the turning and the moving backwards. Overall, the speed of the movement is slow.



Don't miss teacher, Jungian analyst and art therapist Mary-Jayne Rust discussing the fundamental role Ecopsychology plays in response to our current social and ecological challenges in the Spring Issue of *Somatic Psychotherapy Today*



As we work with the emotions, I have them compare what they sense from each movement with an incident where they probably had this emotion without recognizing it. They then use this new body knowledge in their life (home assignment) to support the learning experience. Clients report they are much surer of what is going on inside of themselves after these lessons as well as being better able to recognize different emotions in other people. One client declared she wanted to use our session to get in touch with her emotions as she experienced herself as being flat (emotionless). So I introduced her to the concept of feeling sensations in her body and described the learning process we were about to begin. I explained there are basic emotions and combined/mixed emotions and that we would address the basic emotions people use. I also talked about emotions being small, big, or somewhere in-between and that it was okay to sense small emotions and to put small words to them.

But, first, we need to recognize them. I asked her to notice her body and note what she was sensing in that moment to create a baseline for no emotion/flat emotion to compare with the results of the upcoming exercises.

The first emotions I worked with were joy and happiness. I asked her to start jumping up and down, to get free from the floor, not a lot but enough to sense she was free and to look at me while she jumped. I supported her by also jumping (if necessary I might have asked her to hold one or both of my hands to support her balance and enhance the contact). The distance between us was approximately 70-80 cm. I asked her to notice what was happening in her face and around her mouth and if she sensed the changes there. After 30 seconds we stopped. Her breathing was fuller and her body was straighter. Her posture reflected a stronger upward stance than compared with her starting position, which I pointed out and she could recognize. "This is joy," I said. And she said, "AHA."

Next we worked with sadness. I asked her to collapse forward in a standing position. Her head became heavy and fell forward and down, her sternum caved in (the area between the shoulder blades rounded), and she breathed out as if "emptying" herself. When a client feels "empty," you have her blow out a little more so she can sense her chest and belly are being impacted. My client breathed in

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again and kept her body hanging down without forcing it; when she exhaled, she let her body hang down even more. She repeated this “emptying” six more times. This sense of bodily hanging fits with people feeling sad; these actions often get people in touch with their tears. I had my client compare this sensation with her starting sensation. “This is sadness,” I said. And she said, “AHA.” We went through our seven basic emotions and each ended with her “AHA.”

### Emotions and Their Movement: The Beginnings of a Qualitative Study

To create these emotional bodily composites, I worked with several groups (10-15 in each group) to explore how people physically expressed/showed the different basic emotions. Participants were asked to show their movements in a group format, and I wrote down the individual responses for later comparison. The results so far are based on 90% agreement for joy, sadness, anger and fear; 80% agreement for disgust and sexuality; and 60% agreement for shame.

#### Current Composites:

Joy and happiness – the movement is up (in the air), and the speed increase from the start of the movement till its full expression (after which it is like fireworks slowly getting slower).

Sadness – the movement is down (towards the ground), e.g. the head often falls forward down, speed decreases from the start of the movement till its full expression

Anger – the movement is forward, and the speed increases into an explosion where the movement ends.

Shame – the movement is backwards combined with turning the body away (hiding the face) and letting the head fall forward. It often starts with slight stiffening before the turning and the moving backwards. Speed is slow. Amplitude is the smallest of all seven basic emotions.

Disgust – the primary movement is backwards, short and fast, while a secondary movement goes forward (like pushing something away/vomiting forward).

Fear – Very small amplitude (less than 1 cm) and fast vibrations.

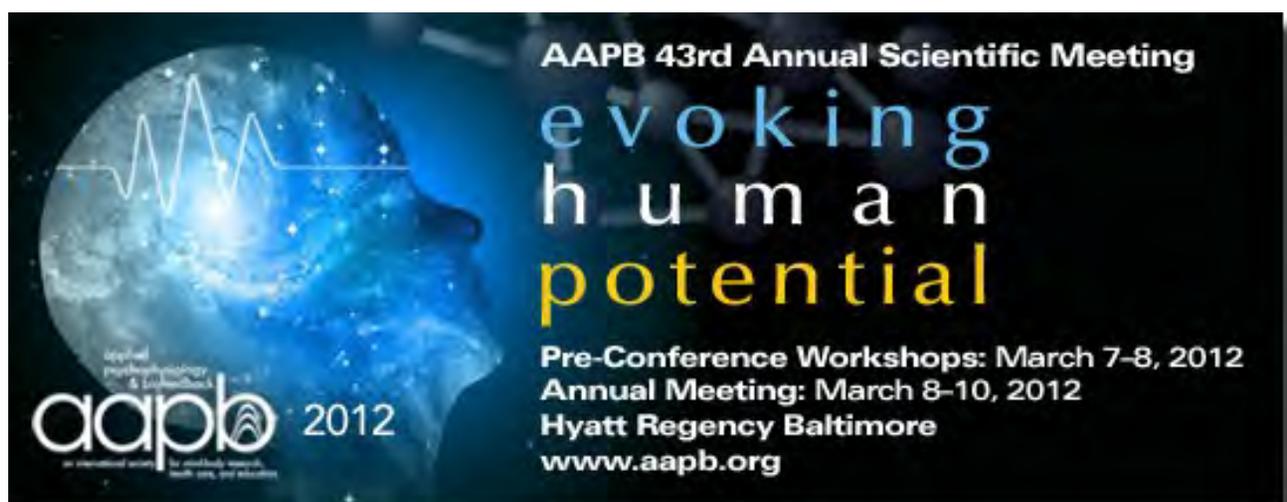
Sexuality – bigger amplitude (approx 5 cm) and speed vibrations that are heavier than fear vibrations. The energy also radiates out of the body from all over the body.

#### Seeking Collaboration

At this juncture, I am seeking collegial input. I call it, “The Beginnings of Qualitative Study” and invite anyone with a similar interest to join my study and work toward a research article.

I wonder if colleagues notice the movements of emotions, and if they use this information with clients (training clients to sense, develop and express emotions).

I wonder if colleagues notice the movements of emotions, and if they use this information with clients (training clients to sense, develop and express emotions).



I wonder which therapy systems have which basic emotions? And why? We have seven. Gestalt Therapy, as I learned it, has four. Silvan S. Tomkins, who developed Affect theory, mentions nine affects (Demos, 1995), and Paul Ekman (2003) mentions six universal emotions, but we do not overlap—he has surprise and not sexuality or shame. And does it even matter?

Do these systems differ between basic emotions and mixed emotions (that consist of two or more basic emotions)?

Do these systems examine which basic emotions and what percentage of each create a mixed emotion? I often use the metaphor that mixed emotions are like mixing paint—for instance you take 30% anger (red), and 15% sadness (blue) and 2% jealousy (green) to create the composite emotion jealousy.

Do other therapists train students/clients to express basic emotions full power (100%)?

Do other therapists train students/clients to put words on also when the power is only 0-5% of full?

I hope to stimulate conversations and sharing with others in my field as I continue to explore emotions and their

bodily expression.

Please send responses to

Erik Jarlmaes Bodydynamic International trainer  
[jarlmaes@bodydynamic.dk](mailto:jarlmaes@bodydynamic.dk) or (sms +45-29216633).

Or Nancy Eichhorn [MagazineEditor@usabp.org](mailto:MagazineEditor@usabp.org)

Erik Jarlmaes has a small practice in the DK and is a senior trainer for Bodydynamic International in 10 countries. He specializes in Bodydynamic educational 4-year programs, peak-experiences, communication and conflict resolution (educated trainer in conflict resolution) and shock trauma therapy. He is an educated trainer in Human Element (Will Schutz) and is a Certified Bioenergetic Analyst with former trainings as a journalist (1976-85), a political scientist and a psychomotor educationalist. Erik is a former Danish champion and record holder in 400 m hurdles, a trainer for the Danish national chess team and the lightweight rowing team.

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Demos, E. V. (Ed.). (1995). *Exploring Affect: The Selected Writings of Silvan S Tomkins*. UK: Cambridge University Press.

Ekman, P. (2003). *Emotions revealed: Recognizing faces and feelings to improve communication and emotional life*. NY: Henry Holt and Company, LLC.

## Participants Needed for Research Study on Body-Oriented/Somatic Practices in Group Psychotherapy



I am a graduate student seeking volunteers to participate in a research project examining how therapists integrate somatic/body oriented practices in group psychotherapy. I am writing a master's thesis on this promising therapeutic integration which has been neglected by clinical research.

Are you a licensed mental health clinician?

Do you (or have you in the last year) run group[s] with interpersonal process components?

Do you regularly utilize somatic or body-oriented interventions or do you regularly attend to the body in your group [s]?

Are you interested in participating in an interview in which you would have an opportunity to reflect on your own practice and contribute to research working towards building an expanded notion of the body as a therapeutic resource in the mental health field?

I invite you to contact me, Alissa Kimmell, with more questions or to set up an interview [AKimmell@smith.edu](mailto:AKimmell@smith.edu) or (510) 394-2492. You may also contact my research advisor, Annemarie Gockel, Assistant Professor at Smith College School for Social Work, at 413-585-7957 or [Agockel@smith.edu](mailto:Agockel@smith.edu).

# From War to Peace

By Ashley Davis Bush



She stood in front of the mirror and sighed, mashing her hands on her hips. “Why do these stick out?” My 14-year-old daughter was bemoaning the fact that her previously stick-straight, adolescent, boy-like body was acquiring a woman’s rounder curves.

“Those are called your hips,” I responded. I used a teasing tone to let her know I felt her frustration, and I wanted to offer another point of view. “They’re beautiful and they’re part of being a woman.”

“I don’t like them,” she said. “I think they make me look fat.”

Thirty years ago I had voiced similar words. I remember the elusive quest to be thinner, ever thinner. I remember my personal teenaged dissatisfaction with a body changing beyond my control. Raising my daughter, I had tried to head this off at the pass by telling my baby turned toddler turned youngster turned adolescent that she was beautiful and that her body was a work of art. Yet, this lovely slender young woman was already at war with her body. Peer pressure and the media were imposing the oppressive message that she must have thin thighs, toned abs, and straight hair if it’s curly or curly hair if it’s straight. I sighed in disbelief.

For two decades in my psychotherapy practice, I have listened to women of all ages, shapes and sizes, telling me that they are not comfortable in their own bodies. Many women will only have sex with the lights off because they are embarrassed by what they believe are their imperfections and don’t want their husbands to see them naked. If I ask them to write a list of 10 things that they love about their bodies, they are stumped.

Personally, I made peace with my body during my first pregnancy. At twenty-nine years old, I was amazed – nay, awestruck – that my body knew how to take a single cell organism and grow it into a perfect baby. My body became a miracle worker, a temple of life. How could I possibly insult it by judging a little roll of fat here, a stretch mark there?

Perhaps another miracle is necessary to help the majority of women to accept and love their magnificent goddess bodies just as they are. In the meantime, I continue to suggest to my daughter that having a woman’s body is a joy and a privilege. And yes, it means having hips. Likewise, I continue to work with my female clients around learning to love their bodies in all phases of the life cycle.

To counter society’s negative influences, I have developed these simple daily practices that I recommend for all women. When you allow daily events or thoughts to prompt or “trigger” your practice using these tools can become a new habit in just a few weeks.

## Pretty Baby

**Trigger:** when you get out of the shower or bath and are drying off with a towel

**Tool:** with the reverence that you would use toward a baby intentionally dry off your body parts with tenderness and amazement. Look at your perfect fingers, your perfect toes. Notice your perfect ears. Cradle your limbs and marvel at this body that carries you through your life.

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## The Body Doesn't Lie: Or Does it?

By Kathy Kain and Nancy Eichhorn



The cliché, the body doesn't lie, is often equated with the phrase "the wisdom of the body" to infer that while words may distort or deny reality, the body's holding patterns, gestures, and facial expressions reveal everything. Many practitioners are taught to follow the body's lead during somatically focused work—if they trust the body, it will guide the healing process.

This trust may be misplaced, however, especially when working with trauma responses. According to Kathy Kain M.A., our bodies do indeed reflect the history of what has happened to us, but they also express the adaptations, distorted forms of function and accumulated stress that were perhaps forced upon us as a result of our efforts to survive highly stressing or life-threatening experiences.

That means we may no longer respond in healthy or functional ways to our inner or outer environment. As practitioners we may be well-guided by attending to the somatic information about past experiences, but if we simply follow the body's lead without questioning what is driving the client's physical responses, we may not be supporting the healing process. Bodily responses can be strongly distorted by life's experiences so practitioners need to consider the cause(s) of the body's behavioral strategies.

"Our bodies lie to us all the time," Kain said. "You cannot always believe the body." Citing the example of panic attacks, Kain notes that the precipitating trigger is most often benign and people often cognitively assess that nothing harmful is going on, that the environment is safe. Yet the body behaves as if life is at risk, with deep physiological responses—escalated heart rate, heavy, rapid breathing—that are out of sync with the environment.

"If we think of 'the body' as a somewhat separate entity which was somehow immune to the ill effects of highly stressful events, and managed to maintain good function in spite of the challenges, we may sometimes be lead astray in our attempts to be helpful to our clients. If we instead think of the body simply as the physical aspect of self that has its unique language to express our experience of being human, then it may be easier to understand that sometimes our physical selves are so altered by experience that we no longer have access to enough healthy function to adequately act as the guide for the practitioner helping us in our healing journey," Kain said.

"I see many practitioners getting into binds by trusting what the body is doing and simply following its lead," she continued. "I was taught that technique, and I had to learn by direct experience that you can't always let yourself be lead by the body's information. At times, the physical/physiological responses are severely out of relationship to what a healthy and appropriate response should be. Especially in the context of traumatic stress physiology, you have

to take into account how or why the physical self was pushed into that survival strategy. It is rarely a conscious choice, but rather an accumulation of responses that were formed under great duress, and often with very limited options. It may be survival wisdom, but that doesn't necessarily translate effectively to a healthy strategy for our daily responses. I believe the practitioner needs to bring a healthy dose of educated awareness about when the wisdom of the body can be trusted to lead accurately, and when *not* following actually better supports the client's healing process."

### Body Wisdom

All of us as practitioners would hope for the best possible support for development of healthy functioning and deep wisdom in all aspects of the self, including the physical or somatic self.

Unfortunately, what we all know to be true is that some of us did not have the opportunity to develop good function in the first place, or later life experiences were so overwhelming that they overcame our ability to integrate them.

One of the definitions of trauma is an overwhelming sense of helplessness in the face of feeling our physical life or sense of self is at risk. Such experiences can so strongly change our physiological, psychological, and emotional capacity for self-regulation that we are literally out of control of our responses. The dysregulation itself creates its own problems.

Their responses come back into more natural relationship to their internal and external environment and become more trustworthy as a guide to the healing process.

Under these circumstances, the practitioner has to be exceedingly careful about simply following the body's impulses – those impulses now lead back to the feeling of overwhelming helplessness that “re-set” the physiology into the traumatic stress response in the first place. The wisdom of the body has become lost in the looping of traumatic patterning.

From a biophysiological perspective, trauma can cause dysregulation in the autonomic nervous system (ANS), meaning that the organic and healthy interplay between the Parasympathetic Nervous System (PNS) – which prepares us for rest and relaxation – and the Sympathetic Nervous System (SNS) – which prepares us for activity and threat response – becomes disrupted. In that circumstance, we can lose our ability to self-regulate some of the essential physiological processes such as heart rate and breathing. As in the example of a panic attack given above, our bodies can be hijacked by physiological responses, sometimes even in spite of what we know to be true from a cognitive perspective. An oversimplified description of this is that our bodies may behave as if the world is a dangerous place, even when we know cognitively that we are not at risk. Just as we can develop psychological or emotional belief systems, or have misunderstandings about our motivations and behaviors, we can also create somatic belief systems and misunderstandings.

Our bodies now contribute to the misinformation about how to understand our internal and external environments – not exactly lying, perhaps, but not giving us reliable information.

“A strong component of what I do is about re-educating at the body level, relearning what kinds of information the body needs access to in order to have more accurate responses,” Kain said.

Trauma very often distorts body belief systems and creates a somatic self-referencing system which contains errors. Some people see their body as the enemy or as their punisher. It is a new concept to think of their body as being on their side, that it elected these strategies for survival purposes, and while not perfect it was the physical self's best attempt to survive. Kain helps clients develop a positive relationship at the body level by teasing out the errors, the misinterpretations, and the habits born of survival rather than of thriving.

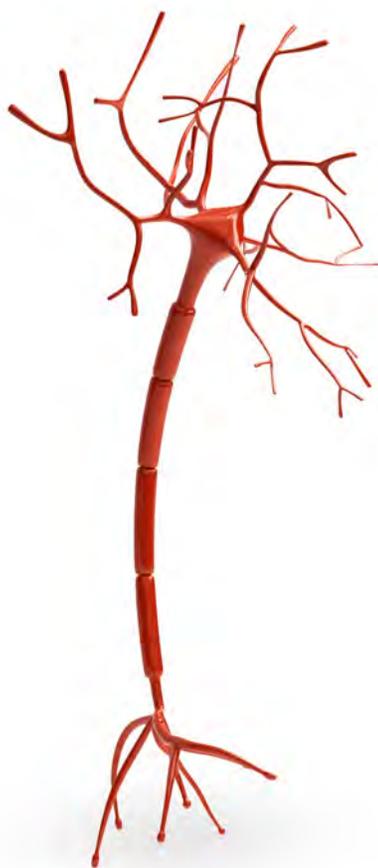
She helps clients regain faith in their body, to see it as an ally not an enemy and to discern which somatic information is trustworthy and which is problematic (which information creates the distortions). Kain helps people recalibrate their bodily systems by re-synchronizing their body with their environment—clients get to the point where they can again trust the body's responses because it is a more reliable witness to the experience.

### Touching Trauma

One method Kain uses when working with trauma survivors to re-educate their bodily patterns is called Somatic Experiencing (SE), a biophysiological model for working with trauma developed by Peter Levine. The SE model gives practitioners an idea of

what to look for when assessing a client's capacity for self-regulation, and assessing the impact that traumatically stressing experiences have had on their overall physiological patterns. It focuses on supporting the client in re-regulating their physiological responses, and on educating them somatically so they learn not to be swept away by their own strong sensations and responses. This supports the slow re-integration of previously overwhelming experiences so body responses can return to a more neutral resting state.

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The sense of empowerment that arises from the client no longer being at the mercy of their own physiology is very important in the healing process. It's precisely the process of learning *not* to constantly be drawn into the disrupted impulses that helps develop that empowerment. The client begins to re-experience their somatic self as being a source of joyful expression and of pleasurable sensation. "When a practitioner better understands how people respond in the face of trauma, the client's responses become more predictable," Kain said. "The SE model is helpful because it gives a structure for how to understand likely disturbances in the body. The physiology of trauma has been well-studied, and the SE model helps practitioners understand the most common disruptions, such as the ANS dysregulation that is a hallmark of traumatic stress. Clients can't manage arousal effectively, they are either hyper or hypo aroused. They also sometimes lack self-protective impulses, such as the ability to physically protect themselves by putting their hands out when losing their balance, or less-physical versions such as being unable to accurately assess the potential for threat in their environment.

"My focus with clients is highly education-oriented," Kain continued. "I want them to come to deeply understand their somatic selves, to be able to recognize when their body information may be unreliable, how to be present with their own sensations and come to understand the variations of awareness that are available to them. It's very difficult to do all of that if the client is stuck in survival physiology, with all of their physiological alarm bells ringing constantly. Often the first order of business is to support some capacity for self-regulation, and then from there to move to a greater sense of presence and awareness."

In addition to the SE model, Kain also employs a weave of trauma recovery, somatic touch, self-self-regulation skills, and resiliency skills to create a unified somatic approach to touch, awareness, and relationship.

"I feel strongly that touch can be a very important component of the restoration of self-regulation and resiliency. By literally touching the traumatic stress responses as they manifest in body tissues, physiological responses, and habits of posture, the practitioner can guide the client back to better function, so the wisdom of the body is in fact more accessible to them," Kain said.

technique now a relic from the past. She may have trouble feeling the effect of her muscles even while moving, and may have to look to see if she is being touched by the practitioner – the tactile sense is so numbed that the visual system has to provide the accurate information about contact. Someone like this is likely to make poor body decisions, to be somewhat accident prone, simply because they are out of good relationship with their own perceptions.

### **Awakening the Body**

"The challenge when someone has lost good connection with their somatic self is to restore that connection without dropping them into the overwhelming experience that likely caused the disconnection in the first place. This is where it is critical for the practitioner to understand the survival strategies underlying these forms of somatic dissociations and not simply trust that following body responses will inevitably lead to healing. In the example above, a common source of the somatic dissociation or numbing would be that the experience of body sensations was too overwhelming to be tolerated, so a survival strategy of dampening sensation arose over time. Under that type of survival pressure, it would be unwise to invite the client to awaken to her body sensations all at one time.

As noted above, when traumatic stress has so strongly altered the physiology that it has its own momentum, the more likely outcome of following body responses is that you will end up repeating the feeling of overwhelming helplessness that underlies traumatic stress. The practitioner needs to help the client reawaken slowly and carefully. In the SE model the term used for this is Titration, which means taking the physiological responses, or somatic experience of overwhelming events, in small enough increments that the client can stay in relationship to their own responses, not be swept away by them. If titration is not attended to, the client is most likely to simply drop back to the old coping patterns that are the very things they are trying to change.

Most people can feel at least some aspect of their body sensations, even if it's just their breath, Kain said, and all it takes is one small area for her to focus on as a start. She helps clients refine their ability to notice bodily sensations and to build a vocabulary to express what they feel as well as develop the capacity to bring attention to their own body.

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and to build a vocabulary to express what they feel as well as develop the capacity to bring attention to their own body.

When people cannot be in good relationship with their body they miss the most basic qualities of the body's wisdom: joyful expression; the body self; the willingness to invite deeply somatic presence and awareness; to somatically feel joyful nuances and pleasurable sensations.

### Somatic Practice

"My primary work now is in educating practitioners in how to work with their clients in this deeply somatic way that responds to each client's history by understanding both the wisdom they have gained in their living of their life, and also the challenges that have altered their course in unhelpful ways. I want people to understand the body from their own unique perspective, in the context of what they know.

"I think of this process of getting to know our clients (and of the clients getting to know themselves) as a form of ongoing practice, more along the lines of a meditation

practice or musical practice. It's not that you finally arrive at an end point where you can say 'Now I know what I need to know,' but rather an ongoing process of continued learning and refinement of skill, learning how to use these skills in the context of trauma, and in supporting clients who want to inhabit the somatic self more deeply.

"When clients engage in this kind of ongoing somatic practice, it does in fact support greater wisdom in the body. As I work with clients over time, I see these changes and see how much more true it becomes that we can trust their body wisdom and be guided by it," she said.

Kathy L. Kain has practiced and taught bodywork and trauma recovery skills for 30 years. She teaches in Europe, Australia, Canada, and throughout the U.S., and maintains a private practice in Albany, California. She is a senior SE trainer and is an adjunct faculty member at Sonoma State University, and a former adjunct faculty member of the Santa Barbara Graduate Institute. As a senior trainer for 12 years in an Australian Somatic Psychotherapy training program, she developed the Touch Skills Training for Psychotherapists and the Touching Trauma programs that she now teaches. Kathy co-authored the book *Ortho-Bionomy: A Practical Manual*. <http://www.somaticpractice.net>



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### Healing Hands

**Trigger:** whenever you are feeling sluggish

**Tool:** notice how the body works to regenerate itself. See how a cut heals. Notice how sleep restores the body. Watch how the body takes in food for nourishment and knows how to eliminate waste. Note how the body mobilizes to fight infections. The body is nothing short of miraculous in its efficient design. Pause throughout the day and notice its brilliance.

### Gratitude

**Trigger:** whenever you say or think something negative about your body

**Tool:** as an antidote to a negative comment, say something that you are grateful for with regards to your body. Be grateful for your legs that allow you to walk, for your hands that allow you to communicate by typing, for your eyes that bring sight, for your lips that allow speech. Lavish your body with gratitude.

These easy exercises weave naturally through an ordinary day. Over time, as we cultivate new habits of thinking, my hope is that a new age will dawn in which women finally move from war to peace with their bodies.

Ashley Davis Bush, LCSW is a psychotherapist and author of several self-help books, including *Shortcuts to Inner Peace: 70 Simple Paths to Everyday Serenity*. She lives and works in southern New Hampshire. For more resources, visit her website at [www.ashleydavisbush.com](http://www.ashleydavisbush.com). Contact the author: [ashley@ashleydavisbush.com](mailto:ashley@ashleydavisbush.com)

## The Whoosh

By Terry Monell



Sometimes, “the still small voice” isn’t a voice but a feeling or body sensation that informs us far more than the brain. It tells us who we respond to by the safe warm feeling opening our heart and who doesn’t match our intentions by the constricted warning in our belly. The mind, that’s another matter, an elusive immeasurable that scientists can’t quantify and spiritualists live by. Jallal al-Din Rumi’s poem captures the mind-body spirit that somaticists aspire to:

**A thinker collects and links up proofs**

**A mystic does just the opposite.**

**He lays his head on a person’s chest**

**And sinks into the answer.**

Our brain feeds us 70,000 repetitive thoughts a day, yet never quite gets to the bottom of endless loops of should have’s and what if’s. It keeps us in the past or in the future, distracting us from being present to our body, and questioning if this is a moment of resonance, resistance, or anxiety. It overlooks the constriction in the chest and the sharpness in the lower back dismissing any meaning those sensations might communicate. We translate them into feelings and let our brains loop along through childhood patterns that don’t apply until the unresolved issue gets repressed, and we become like Mr. Duffy, James Joyce’s character in *Dubliners*, “who lived a short distance from his body.”

Recently though I got a big message about where answers come from. Tak-

ing a seminar in somatic theory, I was paired for dyadic work with a young man who reminded me of the husband of an old friend. He had what in my mind was a sculptor’s body, a powerful physical presence, solid and strong without being overly muscular. His appearance was bold, with shaved head and winding tattoos on his arms and legs. Energetically he had a fierce sensitivity, the kind that moves straight out of an honest heart and lets you know there is no room for anything less. In the morning he had introduced himself with a soft voice and eyes of compassion. It was no surprise that he was a somatic practitioner, he was perfect for it. The unconscious projection of his nonverbal messages would inspire his clients to embrace their dualities of wisdom.

After the experiential exercise was over, the class took their seats in the circle, and my sculptor-like friend and I sat next to each other. The floor opened for discussion, and as someone to our left began to speak, he leaned forward, placing his elbows on his knees to pay closer attention. There was no eye contact, no energy directed my way, just his body quietly shifting forward, when suddenly an intensity rushed through me from head to toe. If it had been audible it would have been a whoosh. I couldn’t place it, so I closed my eyes and tuned in, immediately hearing the word “protection.” It was true that the volume of his body created a shielding, but I had not felt unsafe so why had something in his new position triggered such a powerful signal of protection? Pondering the transmission of safety, I sensed a void beginning to fill.

But drifting into that place, I was abruptly interrupted by an oppressive feeling of male dominance, and there, on the image screen of my mind, were the two men I had married. Instantly I knew why they had seemed like a fit or a large part of why. In the beginning of each relationship, I had resonated with that feeling of being protected, and perhaps had subconsciously structured my marriages on choosing men who were on guard against a perilous world. It was no wonder that the feeling of being unsafe would have amplified instead of abated and sooner or later, as one partner tipped the balance towards being safer an implosion of conjoined roles would follow.

This unexpected insight played out within days of the experiential exercise while having dinner with someone who had stirred my apprehensions on our first meeting. All went well until a tirade against life shot out in rapid-fire; his unspoken fears and desire to control a world gone awry flooded my senses and twisted my stomach. Still, I may have engaged in the vortex where clarity gets lost and an intended rescue is read as collusion. My somatic experience though, had collected the floating fragments of a shattered puzzle and assembled them into a form from which I could discern meaning. With conscious awareness, I listened to my body, chose to act, and bowed out of a pattern that was all too familiar.

## Somatically Tracking My Truth By Christine Gindi



**M**y internship as a hospital chaplain at a Boston cancer outpatient hospital marked the real beginning of my education in the wisdom of the body. Long before I knew the field of somatic psychology even existed, my supervisor taught me to track the coherence between a person's verbal communication and their bodily expression in order to understand what was really being communicated to me. I learned to attune to nonverbal behavior as a way of learning the deeper truth of a person's experience. When I look back on my internship, I feel such an appreciation for the somatic tracking skills my supervisor taught me.

I not only applied these skills in the context of an official hospital role but in the world of my day to day life. I enjoyed learning to trust the resonance of a conversation as a tangible felt sense and this practice opened a door for my heightened awareness of the somatic dimensions of conversations. Being attentive to my body while I am listening and communicating helped me become more present and accepting of what I was actually physically experiencing rather than trying to rationalize my way out of it. Tracking my own felt sense proved crucial to my self care as an intern because it helped me stay present and honest about my energy levels and emotional states. I began this internship being more intentionally conscious of my own self care needs since I wanted to prevent compassion fatigue and vicarious traumatization.

During my internship I was surprised that many patients didn't know that the hospital had a center for integrative therapies which was dedicated to integrating complementary medicine into their cancer treatment. The complementary therapies included acupuncture, creative arts therapy, massage therapy, meditation, qigong, and many more. I was proud to work at a hospital that offered such a myriad of integrative therapies that were easily accessible to cancer patients. As a long time advocate of complementary medicine, it's been exciting to experience

firsthand the paradigm shift from Westernized medicine to alternative treatments in our culture.

One of my earliest heroes who recognized the healing wisdom of the body is Dr. Herbert Benson. As a Harvard trained physician, Benson personally risked his professional career in order to conduct rigorous scientific studies on the health outcomes of meditation. The issues that body centered therapies are struggling with now in regards to being recognized as evidence based approaches are the same issues that Benson struggled with in his time in regards to meditation. When Benson conducted his medical research in the 1970's, meditation was largely regarded a taboo subject for the medical mainstream because it was considered a spiritual practice that belonged to the world of religious discourse.

Benson conducted studies at Harvard Medical School and Beth Israel Hospital and demonstrated that meditation practiced as a relaxation technique has immense physiological benefits that include lowered blood pressure and a reduction in heart disease. While Benson asserts that he did not risk anything because he was a scientist following the data, I will always admire his tenacity for pursuing a critical scientific investigation of a taboo subject in his medical profession. Benson became renowned as a pioneer in mind body medicine, and his work must be acknowledged for its historical precedent and brought into dialogue with the inheritors of his somatic legacy.

When I read Benson's book *The Relaxation Response* years ago, it was empowering to learn about the body's innate healing intelligence. Benson (1975) attempted to teach people that their bodies are naturally imbued with "an inducible, physiologic state of quietude," and that the external treatments for their ailments often proves costly and unnecessary given their natural ability to heal (p. xvii). I deeply resonated with his statement that "as a society we lend medicine too much power over us, searching for answers outside of our bodies, when they lie within us" (xiv).

As a somatic psychology graduate student at JFK University, my education continues to teach me about the wisdom of the body, and that the answers "lie within us" (Benson, 1975, xiv). I am so grateful for the enduring legacy of such revolutionary pioneers who continue to teach and inspire me.

Reference: Benson, Herbert. (1975). *The Relaxation Response*. New York, NY.: Avon Book

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*Whenever a thought is perceived or a feeling is felt, we experience it in the somatic realm.*

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