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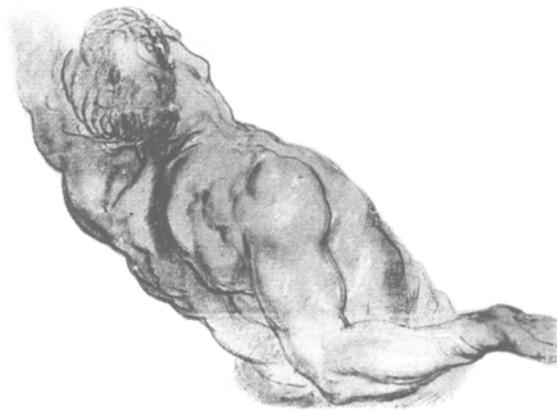


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USABP Mission Statement

The USABP believes that integration of the body and mind is essential to effective psychotherapy, and to that end, its mission is to develop and advance the art, science, and practice of body psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity. (revised October 1999)

# The USA Body Psychotherapy Journal

## Editorial, Vol. 2, No. 2, 2003

### The Articles

With this volume we inaugurate what I hope will be a series of review articles covering various aspects of our own and related fields. Aline LaPierre has surveyed recent Jungian publications related to the body and culled from them eight volumes of particular interest to review for this issue. Her obvious familiarity with this literature makes her critical evaluations of particular interest.

Theory and practice in the area of trauma work are offered in two very different articles by Peter Levine and by Marcel Duclos and Connie Robillard. Peter Levine lays out for readers a theoretical map of how trauma is lodged in bodily reactions and sensate experience. Then using several cases as examples, he carefully illustrates how the use of sensate experience can ultimately dislodge that trauma. He contrasts cognitive and sensate approaches to anxiety and shows anxiety's role in maintaining traumatic re-experiences. Using as an example the treatment of a native Eskimo youth, he focuses on how the immobility response fixates traumatic and panic anxiety, how it can be uncoupled, and the necessity of completing the defensive response, at least in imagination.

In stark contrast to Levine's theory/illustration approach to the topic, Marcel Duclos and Connie Robillard's very personal compilation of their own and their patients' trauma experiences take us right to the core of the sexual abuse of children. Their poetry and first person narratives take us directly into the child's experience just as their reflections as therapists take us to the heart of the healing relationship. Readers will appreciate the flow and integration of theory and application in the artful hands of skilled practitioners.

Two contrasting case histories from Bioenergetic analysts present different aspects of their work. Elizabeth Rablen explores the bodily expression of transference and resistance in the treatment of a middle aged woman, leading us through particularly significant sessions verbatim to illustrate how she works with these two important aspects of the treatment.

Scott Baum, on the other hand, offers reflections on selected aspects of the treatment of a young man whom he saw both individually and in a group. Of particular interest are his speculations on the aspects of his own history that are similar to the patient's.

In a 1997 address to the European Association of Body Psychotherapists, printed here for the first time, Katherine Ennis Brown explored the inevitability of the reassertion of the soul and the feminine in culture, but particularly in body psychotherapy. Using archeological and anthropological sources as well as her own clinical and teaching experience, she called for a better balance of the two sides of the autonomic nervous system and a reassertion of the values of the feminine, not at all confined to female persons. We must continually integrate the fascinating findings of neuroscience with explorations such as this.

### Musings

Some ancillary themes caught my attention as I reread the articles in this issue. One of these is the continuity of modalities. Our field is interesting sociologically in that it is an "academic" endeavor which has been nurtured in large part outside of academe. Long seen as alternative, both to traditional psychoanalysis and to medical practice, the content of body psychotherapy has probably also supported this structure. Only recently have somatics and body psychotherapy begun to be taught in undergraduate and graduate curricula. So, the very content of our field has exerted a pull toward marginality and some body psychotherapists became attached to that status as part of their and the field's identity.

Certainly beginning with Reich, many of the modalities have been birthed by strong, charismatic leaders, making succession and definition of theories and techniques far from routine. Some have split over whether and how to maintain the "purity" of their founders' theories and techniques while at the same time remaining ambivalent about whether to anoint a successor or try to make a transition to a somewhat democratic form of organization. That such transitions can be precarious and difficult was pointed out to me in a monograph I read in the '60's as a graduate student at MIT entitled "A Theory of Stable Democracy" (Princeton: Center of International Studies, Monograph #10, n.d.) in which the author, Harry Eckstein, points out that in any system, stability is increased if

forms of authority are isomorphic at as many levels as possible. That is to say, an authoritarian family does not easily breed responsible citizens of a democracy.

We can see the tragedy of trying to instantly imprint Western political culture on the tribal cultures of Afghanistan and Iraq, which have no civic culture in the Western sense, but on a smaller scale we are faced with the same dilemma. How do we, or do we even want to, make a transition from competing schools and training programs originated by highly original and charismatic leaders to a structure that would be inclusive and hopefully celebratory of originality and differences?

And, what of the authority structures within each “school”? How are students, supervisors, teachers really chosen? And, how does the relationship between patient and therapist, which is at the root of our work, affect and allow itself to be affected by the aforementioned structures? I don’t have answers, but I find these questions fascinating.

Another issue that came up was what training prepares us for and how it does it. In the Duclos and Robillard article, a patient is quoted as confronting her therapist about his/her ability to stay in for the long haul, confront the horrors of abuse and keep them both afloat. She is quoted as saying, “Your professors did not prepare you for this experience.”

What can possibly prepare us for the depths and heights of the work we do? Is it some innate or developed cluster of sensitivities and abilities? Or is psychotherapy like parenting: no matter what you have read or studied, you do it with who you are not what you know?

The head of my training unit at Columbia, DeWitt Crandell, once said, “Psychotherapists are born.....and then they need all the training they can get.” In that vein I usually insist to students that commencing any sort of career in body psychotherapy or related fields is a “life sentence.” By that I mean that as long as they do this work, they must be intentionally growing with additional training, workshops, supervision, personal therapy, teaching.....whatever keeps them evolving.

And, that is what we, the USABP Journal, must also do: continue to lead, hopefully in the way Gandhi suggested, by following our “followers”.

#### Acknowledgements

As the momentum grows, we have put more structures into place. And, this would simply not be happening without the dedication and hard work of Naina Dewan and Robyn Burns. We have put a peer review process in place and worked out a number of ways of tracking it and forwarding comments to writers. They have also dealt with copyright agreements, foreign subscription forms, authors’ reprints, and myriad other details. I am deeply grateful for their enthusiastic participation in this wonderful project.

Jacqueline Carleton, Ph.D.  
Editor  
New York City  
Fall 2003

# Panic, Biology, and Reason: Giving the Body Its Due

Peter A. Levine, Ph.D.

## Abstract

The key both to developing and healing traumatic symptoms resides in our primitive physiology. The involuntary and instinctual portions of the human brain and nervous system are virtually identical to those of mammals and even reptiles. Since the parts of the brain that are activated by life threatening situations are the parts we share with animals, much can be learned by studying how prey animals avoid traumatization even though their lives are threatened on a routine basis.

When faced with what is perceived as inescapable or overwhelming threat, humans and animals both use the immobility response. The important thing to understand about this function is that it is involuntary. This simply means that the physiological mechanism governing this response resides in the primitive, instinctual parts of our brains and nervous systems, and is not under our conscious control. This is why the study of wild animal behavior is vital to the understanding and healing of human trauma.

## Keywords

Biology - Healing - Panic - Primitive physiology - Reason

## The Substitute Tiger

My interest in the essential role played by bodily responses in the genesis and treatment of panic anxiety and trauma began quite accidentally in 1969.<sup>1</sup> A psychiatrist, knowing of my interest in “mind/body healing”—a fledging arena at the time, had referred a young woman to see me. Nancy had been suffering from panic attacks for about two years. She had not responded to psychotherapy, while tranquilizers and antidepressant drugs gave her only minimal relief. The referring psychiatrist asked me to do some “relaxation training” with her. My attempts were equally unsuccessful. She resisted; I tried harder. We got nowhere. Since I knew almost nothing about panic attacks at the time, I asked her for more detailed information about the ‘how and when’ of her attacks. Nancy revealed that the onset of her first attack occurred while she, along with a group of other students, was taking the Graduate Record Examination. She remembers breaking out in a cold sweat and beginning to shake. Forcing herself to complete the test, Nancy then ran out, frantically pacing the streets for hours, afraid to enter a bus or taxi. Fortunately, she met a friend who took her home. During the following two years her symptoms worsened and became more frequent. Eventually she was unable to leave her house alone and could not follow through with graduate school even though she had passed the exam and was accepted by a major university.

In our conversation, Nancy recollected the following sequence of events: Arriving early, she went to the cafe to have a coffee and smoke a cigarette. A group of students were already there, talking about how difficult the test was. Nancy, overhearing this, became agitated, lit another cigarette, and gulped a second coffee. She remembered feeling quite jittery upon entering the room. She recalled that the exams and marking pencils were passed out and that she wrote vigorously. She became almost breathless at this point and quite agitated—I noticed that her carotid (neck) pulse was increasing rapidly.

I asked Nancy to lie down and I tried to get her to relax. Relaxation was not the answer. As I naively, and with the best of intentions, attempted to help her relax, she went into a full-blown anxiety attack. Her heartbeat accelerated further to about 150 beats per minute. Her breathing and pulse rate then started to decrease. I was relieved, but only momentarily. Her pulse continued to drop, precipitously to around 50 beats per minute; she became still. Her face paled and her hands began to tremble: “I’m real scared...stiff all over...I’m dying...I can’t move...I don’t want to die...help me...don’t let my die.” She continued to stiffen, her throat becoming so tight that she could barely speak. Nancy forced the words, “Why can’t I understand this...I feel so inferior, like I’m being punished...there’s something wrong with me...I feel like I’m going to be killed... there’s nothing...it’s just blank.” (We had rather unfortunately co-discovered, some years before it was reported in the literature, “relaxation-induced panic syndrome.”)

The session continued as follows:

“Feel the pencil,” I requested without really knowing why.

“I remember now. I remember what I thought,” she replied. “My life depends on this exam.” Her heart rate increased now, moving back up into the eighties.

At this point, a ‘dream image’ of a crouching tiger jumping through the bush flashed before me. Quite startled, a fleeting thought about a zoological article I had recently read on “tonic immobility” or “death feigning” prompted me to announce loudly: “You are being attacked by a large tiger. See the tiger as it comes at you. Run toward those rocks, climb them, and escape!”

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<sup>1</sup> Peter A. Levine, *Waking the Tiger - Healing Trauma* (Berkeley: North Atlantic Books, 1997).

Nancy let out a blood-curdling yell—a shout that brought in a passing policeman (fortunately my office partner took care of the situation—perhaps explaining that I was doing “relaxation training”). She began to tremble, shake, and sob in waves of full body convulsions. I sat with her for almost an hour while she continued to shake. She recalled terrifying images and feelings from age four. She had been held down by doctors and nurses and struggled in vain during a tonsillectomy with ether anesthesia. She left the session feeling “like she had herself again.” We continued relaxation, including assertion training, for a couple more sessions. She was taken off medication, entered graduate school, and completed her doctorate in physiology without relapse.

### The Body Has Its' Reasons...

Aaron Beck and Gary Emery, in their seminal book, *Anxiety Disorders and Phobias*,<sup>2</sup> make the point that to understand fear, anxiety, and panic, the person's appraisal of a situation is most important. In the chapter, “Turning Anxiety on Its Head,” the authors consider cognitive appraisal to be a critical fulcrum in anxiety reactions. They argue that because anxiety has a strong somatic-emotional component, the subtler cognitive processing which occurs may be neglected both in theory and in clinical practice. Clearly Nancy's belief of the difficulty of the exam—based in part on the overheard conversation in the café—lead to her thought: “my life depends on this,” an unconscious threat appraisal. By focusing narrowly on the cognitive aspects of anxiety, however, Beck and Emery overlook the fundamental role played by bodily responses and sensations in the experience of anxiety. When Nancy drank the coffee and smoked the cigarette (caffeine and nicotine, together, can be a robust stimulant), the physiological arousal of increased heart rate—both fed into and was fed by her cognitive assessment of the “threat” from the exam driving her heart rate sharply up. Together, both assessment and physiological activation, resonated with the ‘imprinted’ bodily reaction of being terrorized and overwhelmed, twenty years before, during the tonsillectomy. The panic attack was triggered from that synergy. In addition to recognizing the importance of cognitive factors, systematic study of bodily reactions and sensate experience is not only important, it is essential. This study needs to occur conjointly with the recognition and exploration of cognitive and perceptual factors. Appreciating the role of bodily experience illuminates the complex web called “anxiety” and connects many threads in understanding and modifying its physiological and experiential basis. In addition to turning anxiety on its head, we need also to connect the body with the head—recognizing the intrinsic psycho-physiological unity that welds body and mind.

Cognitive theorists believe that anxiety serves primarily to signal the brain to activate a physical response that will dispel the source of anxiety. The role of anxiety is likened in this way to that of pain. The experience of pain impels us to do something to stop it. The pain is not the disease. It is merely a symptom of fracture, appendicitis and so forth. Similarly, according to Beck, anxiety is not the disease but only a signal: “Humans are constructed in such a way as to ascribe great significance to the experience of anxiety so that we will be impelled to take measures to reduce it.” He notes that: “The most primal response depends on the generation of unpleasant subjective sensations that prompt a volitional intentional action designed to reduce danger. Only one experience of ‘anxiety’ is necessary to do this”<sup>3</sup> (italics my emphasis). As examples Beck mentions the arousal of anxiety when a driver feels that he is not in complete control of the car and which prompts him to reduce his speed until he again feels in control. Similarly, a person approaching a high cliff retreats because of the anxiety.

What is the wisdom of an involuntary, primitive, global, somatic, and often immobilizing, brainstem, response?<sup>4</sup> Is it exclusively for calling the individual's attention to making varied and specific voluntary responses? Such an inefficient arrangement is highly doubtful. A lack of refinement in appreciating the essential nuances played by bodily responses and sensations in the structures and experience of anxiety is typical of cognitive approaches. Beck, for example, flatly states that: “a specific combination of autonomic and motor patterns will be used for escape, a different combination for freezing, and a still different pattern for fainting. However, the subjective sensation—*anxiety*—will be approximately the same for each strategy.” In the following paragraph of this same article he adds: “An active coping set is generally associated with sympathetic nervous system dominance, whereas a passive set, triggered by what is perceived as an overwhelming threat, is often associated with parasympathetic dominance. . . as in a blood phobic. In either case the subjective experience of anxiety is similar.”<sup>5</sup>

Beck's statements reveal a significant glitch in the cognitive phenomenology of anxiety highlighting its paradoxical nature. According to his reasoning, the same body signal is relayed to the brain's cognitive structures

<sup>2</sup> Aaron Beck and Gary Emery, *Anxiety Disorders and Phobias: A Cognitive Perspective*, (New York: Basic Books, 1985), 188.

<sup>3</sup> Aaron Beck, “Theoretical Perspectives on Clinical Anxiety,” in *Anxiety and the Anxiety Disorders*, ed. A. Hussain Tuma and Jack D. Maser, (New Jersey: Lawrence Erlbaum Associated Publishers, 1985), 188.

<sup>4</sup> This reaction, found in almost all prey animals, will inhibit predatory aggression. See G. Gordon Gallup and Jack Maser, “Human Catalepsy and Catatonia,” in *Psychopathology: Experimental Models*, ed. Jack D. Maser and Martin E.P. Seligman, (San Francisco: W.H. Freeman, 1977), 334-357.

<sup>5</sup> Aaron Beck, “Theoretical Perspectives on Clinical Anxiety,” 188.

for all forms of threat. The “head” (cognitive) structures are then somehow expected to decide on an appropriate course of action. This top-heavy, Cartesian holdover goes against the basic biological requirements for an immediate, precise, and unequivocal response to threat. It is a view that is quite confusing because it requires that distinctly different kinesthetic, proprioceptive and autonomic feedback be experienced as the same signal. We have tended, in the post-Cartesian view of the world, to identify so much with the rational mind that the wider role of instinctive, bodily responses in orchestrating and propelling behavior and consciousness has been all but ignored.

Beck’s statement that “a specific combination of autonomic and motor patterns will be used for escape, a different combination for freezing, and a still different pattern for fainting” and that “the subjective sensation—*anxiety*—will be approximately the same for each strategy” contradicts both evolutionary imperative and subjective experience. As one working for thirty-five years in what is now called somatic psychology, these statements simply do not fit the subjective facts and would have had William James turning over in his grave. If you ask several anxious people at random what they are feeling, they may all say that they are feeling “*anxiety*.” However, if they are then queried with the epistemological question: “How do you know that you are feeling *anxiety*,” you will get several different responses. One, for example, could be, “because something bad will happen to me.” Another may be that they are feeling strangulated in their throat; still another that their heart is leaping out of their chest; another that they have a knot in their gut. Other people might report that their neck, shoulders, arms, and legs are tight; others might feel ready for action, and still others that their legs feel weak or their chest collapsed. All but the first answer are specific and varied physical sensations. And if the person who said what he thought (“...like something bad will happen to me,”) was directed to a scan of her body, she would have discovered some somatic/physical sensation driving and directing the thought.

If we feel threatened and assess that we can escape or fight back, we will feel one set of physical sensations. If, on the other hand, we feel threatened and perceive that we cannot escape or fight back then we feel something quite different. Now here is the key factor: both the assessment of danger and the perception of our capacity to respond are not primarily conscious. Let’s look to our distant ancestors to illuminate these questions.

### Instinct in the Age of Reason

Animals possess a variety of orientation and defensive responses that allows them to respond automatically to different, potentially dangerous situations rapidly and fluidly. The sensations involving escape are profoundly different from those of freezing or collapse. I am in agreement with Beck, in describing panic and post-traumatic anxiety states as having in common “the experience of dread with the perception of inescapability.” What I first gleaned from Nancy thirty-five years ago, and later confirmed by the ethological analysis of predator prey behaviors, was that the singular experience of ‘traumatic panic anxiety’ that Beck talks about occurs only where the normally varied and active defensive responses have been unsuccessful, that is, when a situation is both dangerous and inescapable.<sup>6</sup> Anxiety, in its pathological panic form (as distinguished from so-called signal anxiety), represents a profound failure of the organism’s innate defensive structures to mobilize and thus allow the individual to escape threatening situations actively and successfully. Where escape is possible, the organism responds with an active pattern of coping. There is the continuous experience of danger, running, and escape. When, in an activated state, escape is successfully completed, anxiety does not occur. Rather a fluid (felt) sense of “biological competency” is experienced. Where defensive behaviors are unsuccessful in actively resolving severe threat, anxiety is generated. It is where active forms of defensive response are aborted and incomplete that anxiety states ensue. Beneath the Monolithic label of anxiety are ‘camouflaged’ a wealth of incomplete and identifiable somatic responses, sensations, and bodily feelings. These body experiences represent the individual’s response to past experience, but also to their “genetic potential” in the form of unrealized defensive responses. The recognition that these instinctive orientation and defensive behaviors are organized motor patterns, that is, prepared motor acts, helps to return the body to the head. Anxiety derives ultimately from a failure to complete motor acts.

Jean Genet, in his autobiographical novel, *Thief’s Journal*, states this premise in bold prose: “Acts must be carried through to their completion. Whatever their point of departure, the end will be beautiful. It is (only) because an action has not been completed that it is vile.” When orienting and defensive behaviors are carried out smoothly and effectively, anxiety is not generated. Instead, there is the complex and fluid sensate experience perceived as curiosity, attraction, or avoidance. It is only when these instinctive orientation and defensive resources are interfered with (‘thwarted’) that the experience of anxiety is generated: I am not afraid of snakes or spiders, but of my inability to respond effectively to these creatures. Ultimately, we have only one fear, the fear of not being able to cope, of our own un-copeability. Without active, available, defensive responses, we are unable to deal effectively with danger and so we are, proportionately, anxious.

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<sup>6</sup> Ibid.

## Orientations, Defense, and Flight

A scene from an uplands meadow helps to illustrate the “motor act” concept. Suppose you are strolling leisurely in an open meadow. A shadow suddenly moves in the periphery of your vision. Instinctively all movement is arrested; reflexively you crouch in a flexed posture; perceptions are “opened” through activation of the parasympathetic autonomic nervous system. After this momentary arrest response your head turns automatically in the direction of the shadow or sound in an attempt to localize and identify it. Your neck, back, legs, and feet muscles coordinate so that your whole body turns and then extends. Your eyes narrow somewhat while your pelvis and head shift horizontally, giving you an optimal view of the surroundings and an ability to focus panoramically. This initial two-phase action pattern is an instinctive orientation preparing you to respond flexibly to many possible contingencies. The initial arrest-crouch flexion response minimizes detection by possible predators and perhaps offers some protection from falling objects. Primarily though, it provides a convulsive jerk that interrupts any motor patterns that were already in execution and then prepares the you, through scanning, for the fine-tuned behaviors of exploration or defense.

If it had been an eagle taking flight that cast the shadow, a further orientation of tracking-pursuit occurs. Adjustment of postural and facial muscles occurs unconsciously. This new “attitude of interest,” when integrated with the contour of the rising eagle image, is perceived as the feeling of excitement. This aesthetically pleasing sense, with the meaning of enjoyment, is affected by past experience, but may also be one of the many powerful, archetypal predispositions or undercurrents which each species has developed over millennia of evolutionary time. Most Native Americans, for example, have a very special, spiritual, mythic relationship with the eagle. Is this a coincidence, or is there something imprinted deep with in the structures of the brain, body, and soul of the human species that responds intrinsically to the image of eagle with correlative excitement and awe? Most organisms possess dispositions, if not specific approach/avoidance responses, to moving contours. A baby chick, without learning from its mother, for example, flees from the moving contour of a hawk. If the direction of movement of this silhouette is reversed, however, to simulate a goose, the baby chick shows no such avoidance response.

If the initial shadow in the meadow had been from a raging grizzly bear—rather than from a rising eagle, a very different preparedness reaction would have been evoked—the preparation to flee. This is not because we think: “bear,” evaluate it as dangerous, and then prepare to run. It is because the contours and features of the large, looming, approaching animal cast a particular light pattern upon the retina of the eye. This stimulates a pattern of neural firing that is registered in phylogenetically primitive brain regions. This “pattern recognition” triggers preparation for defensive responding before it is registered in consciousness. These responses derive from genetic predispositions, as well as from the outcomes of previous experiences with similar large animals. Non-conscious circuits are activated, triggering preset patterns or tendencies of defensive posturing. Muscles, viscera, and autonomic nervous system activation cooperate in preparing for escape. This preparation is sensed kinesthetically and is internally joined as a gestalt to the image of the bear. Movement and image are fused, registered together, as the feeling of danger. Motivated by this feeling we continue to scan for more information—a grove of trees, some rocks—at the same time drawing on our ancestral and personal memory banks. Probabilities are non-consciously computed, based on such encounters over millions of years of historical evolution, as well as by our own personal experiences. We prepare for the next phase in this unfolding drama. Without thinking, we orient toward a large tree with low branches. An urge is experienced to flee and climb. If we run, freely oriented toward the tree, it is the feeling of directed running. The urge to run is experienced as the feeling of danger, while successful running is experienced as escape (and not anxiety!).

If, on the other hand, we chance upon a starved or wounded bear, and moreover find ourselves surrounded on all sides by sheer rock walls, that is, trapped, then the defensive preparedness for flight, concomitant with the feeling of danger, is “thwarted” and will change abruptly into the fixated emotional states of anxiety. The word fear, interestingly enough, comes from the old English term for danger, while anxious derives from the Greek root *angst*, meaning to “press tight” or strangle, as conveyed in Edward Munch’s riveting painting, *The Scream*. Our entire physiology and psyche become precipitously constricted in anxiety. Response is restricted to non-directed desperate flight, to rage, counterattack, or to freeze-collapse. The latter affords the possibility of diminishing the bear’s urge to attack. (If it is not cornered or hurt and is able to clearly identify the approaching human being, the bear usually will not attack the intruder. It may even remain and go on with business as usual.)

In summary, when the normal orientation and defensive escape resources have failed to resolve the situation, life hangs in the balance, with non-directed flight, rage, freezing, or collapse. Rage and terror-panic are the secondary emotional anxiety states that are evoked when the preparatory orientation processes (feelings) of danger-orientation and preparedness to flee are not successful—when they are blocked or inhibited. It is this “thwarting” that results in freezing and anxiety-panic.

## Tonic Immobility-Freezing

Anxiety has often been linked to the physiology and experience of flight. Analyses of animal distress behaviors suggest that this may be quite misleading. Ethology (the study of animals in their natural environment) points to the “thwarting” of escape as the root of distress-anxiety.<sup>7</sup> When attacked by a cheetah on the African plains, an antelope will first attempt to escape through directed-oriented running. If, however, the fleeing animal is cornered so that escape is diminished, it may run blindly, without a directed orientation, or it may attempt to fight wildly and desperately against enormous odds. At the moment of physical contact, often before injury is actually inflicted, the antelope abruptly appears to go dead. It not only appears dead, but its autonomic physiology undergoes a widespread alteration and reorganization. The antelope is in fact highly activated internally, even though outward movement is almost nonexistent. Prey animals are immobilized in a sustained (cataleptic-catatonic) pattern of neuromuscular activity and high autonomic and brain wave activity.<sup>8</sup> Sympathetic and parasympathetic responses are also concurrently activated, like brake and accelerator, working against each other.<sup>9</sup>

Nancy, in her re-experiencing of the examination room, exhibited this pattern when her heart rate increased sharply and then plummeted abruptly to a very low rate. In tonic immobility, an animal is either frozen stiff in heightened contraction of agonist and antagonist muscle groups, or in a continuously balanced, hypnotic, muscular state exhibiting what is called “wavy flexibility.” In the hypnotic state, body positions can be molded like clay, as is seen in catatonic schizophrenics. There is also analgesic numbing.<sup>10</sup> Nancy described many of these behaviors as they were happening to her. She wasn’t, however, aware of her physical sensations but rather of her self-deprecating and critical judgments about those sensations. It is as though some explanation must be found for profoundly disorganizing forces underlying one’s own perceived inadequacy. Psychologist Paul G. Zimbardo has gone so far as to propose that “most mental illness represents not a cognitive impairment, but an (attempted) interpretation of discontinuous or inexplicable internal states.”<sup>11</sup> Tonic immobility, murderous rage, and non-directed flight are such examples.

Ethologists have found wide adaptive value in these immobility responses: freezing makes prey less visible and non-movement in prey appears also to be a potent inhibitor of aggression in predators, often aborting attack-kill responses entirely.<sup>12</sup> The park service, for example, advises campers that if they are unable to actively escape an attacking bear, they should lie prone and not move. The family cat, seemingly on to nature’s game, bats a captured, frozen mouse with its paws hoping to bring it out of shock and continue in the game. Immobility can buy time for prey. The predator may drag frozen prey to its den or lair for later consumption, giving it a second chance to escape.<sup>13</sup> In addition to these aggression-inhibiting responses, freezing by prey animals may provide a signaling and decoy effect, allowing con-specifics, who are farther away, a better chance for escape in certain situations. Loss of blood pressure may also help prevent bleeding when injured. An immobile prey animal is, in sum, less likely to be attacked. Further, if attacked, it is less likely to be killed and eaten, increasing its chances of escape and reproduction. In a world where most animals are both predator and prey at one time or another, analgesia is a “humane” biological adaptation.

Tonic immobility demonstrates that anxiety can be both self-perpetuating and self-defeating. Freezing is the last-ditch, cul-de-sac, bodily response where active escape is not possible. Where flight and fight escape have been (or are perceived to be) unlikely, the nervous system reorganizes to tonic immobility. Both flight-or-fight and immobility are adaptive responses. Where the flight-or-fight response is appropriate, freezing will be relatively maladaptive; where freezing is appropriate, attempts to flee or fight are likely to be maladaptive. Biologically, immobility is a potent adaptive strategy where active escape is prevented. When, however, it becomes a preferred response pattern in situations of activation in general, it is profoundly debilitating. Immobility becomes the crippling, fixating experience of traumatic and panic anxiety. Underlying the freezing response, however, are the flight-or-fight and other defensive and orientation preparations that are activated just prior to the onset of freezing. The “de-potentialization” of anxiety is accomplished by precisely and sequentially restoring the latent flight-or-fight and other active defensive responses that occur at the moment(s) before escape is thwarted.

<sup>7</sup> See Desmond Morris, *Primate Ethology*, (London: Weidenfield and Nicholson, 1969); and A. Eric Salzen, “Social Attachment and a Sense of Security,” *Social Sciences Information* 12, 1967): 555-627.

<sup>8</sup> Gallup and Maser, “Catalepsy and Catatonia,” p. 345.

<sup>9</sup> See Ernst Gelhorn, *Autonomic-Somatic Integrations; Physiological Basis and Clinical Implications*, (Minneapolis: University of Minnesota Press, 1967); see also Peter Levine, “Stress,” in *Psychophysiology*, ed. Michael G.H. Coles, Emanuel Donchin, and Stephen Porges, (New York: Guilford Press, 1986), 331-354.

<sup>10</sup> Gallup and Maser, “Catalepsy and Catatonia,” p. 337.

<sup>11</sup> Paul G. Zimbardo, “Understanding Madness: A Cognitive-Social Model of Psychopathology,” invited address at the annual meeting of the Canadian Psychological Association, Vancouver, B.C., June, 1977.

<sup>12</sup> Gallup and Maser, “Catalepsy and Catatonia,” pp. 350-54.

<sup>13</sup> *Ibid.*, p. 354.

## Uncoupling Fear-Potentiated Immobility: An Example

The key in treating various anxiety and post-traumatic reactions is in principle quite simple: to uncouple the normally acute, time-limited freezing response from fear reactivation. This is accomplished by progressively re-establishing the pre-traumatic defensive and orienting responses, the responses that were in execution just prior to the initiation of immobility. In practice there are many possible strategies that may be utilized to accomplish this uncoupling of the immobility-fear or panic reaction.<sup>14</sup> An example of one type of reworking follows:

Marius Inuusuttoq Kristensen is a native Eskimo, born and raised in a remote village in Greenland. He is a slight, intelligent, boyish-looking young man in his mid-twenties. He is shy but open and available. As a participant in a training class in Copenhagen, Denmark, he asks to work on his tendency toward anxiety and panic, particularly when he is with a man he admires and whose approval he wants. His anxiety is experienced somatically as a weakening in his legs and a stabbing ache on the lateral midline of his right leg. There are also waves of nausea moving from his stomach to his throat, where it then becomes stuck. His head and face feel very warm and he becomes sweaty and flushed. After talking with him and using some exploratory images, he recalled an event that occurred when he was eight. While returning from a walk alone in the mountains, he was attacked by a pack of three wild dogs and bitten badly on his right leg. He remembers only feeling the bite and then waking up in the arms of a neighbor. He remembers, too, his father coming to the door and being annoyed with him. Marius still feels bitterly angry and hurt at this rejection. He remembers, particularly, that his new pants were ripped and covered with blood. When he describes this, he is visibly upset. I ask him to tell me more about the pants. He tells me that they were a surprise from his mother that morning; she had made them especially for him. He is in a transparent moment, experiencing pleasure, pride, and excitement similar to that day seventeen years ago. Marius holds his arms in front of himself feeling the fur and feasting on his "magic" polar bear fur pants.

"I feel like I want to jump up and down."

"Marius, are these the same kind of pants that the men of the village, the hunters, wear?"

"Yes," he responds.

"Do they wear them when they go out to hunt?"

"Yes." Marius becomes more excited. He describes seeing the pants with clear detail and aliveness. I have him feel the pants now with his hand.

"Now, Marius," I ask, "can you feel your legs inside the pants?"

"Yes, I can feel my legs. They feel very strong, like the men when they are hunting." (I am beginning to build, as a resource, a somatic bridge utilizing neuromuscular patterns of the leg.) Marius's walk into the mountains the day of the attack was an initiation, a rite of passage for him; his pants were power objects on this "walkabout." I have him describe the sensations and images of walking up into the mountains. His descriptions are bright, embodied with awareness of detail. The experience he describes is clearly authentic and present. He is also aware of being in a group of students, though without self-consciousness. I would call his state of being primarily a state of presence and 'retrogression' rather than regression. As images and kinesthetic perceptions unfold he sees an expanse of rocks. I ask him to feel his pants and then look at the rocks again.

"My legs want to jump; they feel light, not tight like they usually do. They are like springs, light and strong." He reports seeing a long stick that is lying by a rock and picks it up.

"What is it?" I ask.

"A spear."

"What is it for? What do the men do when they see bear tracks?" (I am hoping that this "play in dream time" will stimulate predatory and counterattack behaviors which were thwarted in being overwhelmed by the attacking dogs. This successive 'bridging' helps to prime required defensive responses that could eventually neutralize the tonic immobility-freeze and collapse which occurred at the time of the attack.)

He goes on, "I am following a large polar bear. I am with the men, but I will make the kill." Micro-flexor extensor movements can be seen in his thigh, pelvic, and trunk muscles as he imagines jumping from rock to rock in following the trail.

"I see him now. I stop and aim my spear."

"Yes, feel that in your whole body, feel your feet on the rocks, the strength in your legs, and the arching in your back and arms. Feel all that power!"

"I see the spear flying," he says. Again micro-postural adjustments can readily be seen in Marius's body; he is trembling lightly now in his legs and arms. I encourage him to feel these sensations. He reports waves of excitement and pleasure.

"I did it. I hit him with my spear!"

"What do the men do now?" I ask.

"They cut the belly open and take out the insides and then cut the fur off...to...make pants and coats. The other men will carry the meat down for the village."

<sup>14</sup> Levine, *Waking the Tiger - Healing Trauma*.

"Feel your pants, Marius, with your hands, and on your legs." Tears form in his eyes. "Can you do this?" I ask. "I don't know...I'm scared."

"Feel your legs, feel your pants."

"...Yes, I cut the belly open; there is lots of blood...I take out the insides. Now I cut the skin. I rip it off, there is glistening and shimmering. It is a beautiful fur, thick and soft. It will be very warm." Marius's body is shaking and trembling with excitement, strength, and conquest. The activation/arousal is quite intense.

"How do you feel Marius?"

"I'm a little scared...I don't know if I've ever felt this much strong feeling...I think it's okay...really I feel very powerful and filled with an energy. I think I can trust this...I don't know...it's strong."

"Feel your legs. Feel your feet. Touch the pants with your hands."

"Yes, I feel calmer now, not so much rush...it's more like strength now."

"Okay, yes, good. Now start walking down, back toward the village." A few minutes pass, then Marius's trunk flexes and his movements hold as in still-frame arrest. His heart rate accelerates, and his face reddens.

"I see the dogs...they're coming at me."

"Feel your legs, Marius! Touch your pants," I sharply demand. "Feel your legs and look! What is happening?"

"I am turning, running away. I see the dogs. I see a pole, an electricity pole. I am turning toward it. I didn't know that I remembered this." Marius's pulse starts to drop; he turns pale. "I'm getting weak," he responds.

"Feel the pants, Marius!" I command. "Feel the pants with your hands!"

"I'm running." His heart rate increases. "I can feel my legs...they're strong, like on the rocks..." Again he pales. He yells out, "Agh...my leg, it burns like fire...I can't move, I'm trying, but I can't move...I can't move...I can't move! It's numb now...my leg is numb. I can't feel it."

"Turn, Marius. Turn to the dog. Look at it."

This is the critical point. I hand Marius a roll of paper towels. If Marius freezes now he will be re-traumatized. (This would occur if somatic bridges were not organized and in place.) He grabs the roll and "strangles" it. The group members, myself included, look on with utter amazement at his strength as he twists it and tears it in two. (I have asked weightlifting friends to replicate this and only a few have been able to do so.)

"Now the other one, look right at it." This time he lets out screams of rage and triumph. I have him settle with his bodily sensations for a few minutes, integrating this intensity. Then I ask him again to look.

"What do you see?"

"I see them...they're all bloody and dead."

"Okay, look in the other direction. What do you see?"

"I see the pole...there are bolts in it."

"Okay, feel your legs, feel your pants." I am about to say, "Run!" (in order to complete the running response). Before I do, he reports, "I am running...I can feel my legs, they are strong like springs." Rhythmic extensor-flexor undulations are now visible through his pants, and his entire body is trembling and vibrating.

"I'm climbing...climbing...I see them below...they're dead and I'm safe." He starts to sob softly and we wait a few minutes.

"What do you experience now?"

"It feels like I'm being carried by big arms. He's carrying me in his arms. I feel safe." Marius now reports a series of images of fences and houses in the village. Again, he softly and gently sobs. "He's knocking at the door of my family's house. The door opens...my father...he's very upset, he runs to get a towel...my leg is bleeding very badly...he's very upset...he's not mad at me. He's worried. It hurts, the soap hurts." Marius sobs now in waves. "It hurts but I'm crying 'cause he's not angry at me. I can see he was upset and scared."

"What do you feel in your body now?"

"I feel very peaceful now; I feel vibration and tingling all over. It is even and warm. He loves me." Again Marius begins to sob and I ask what happens if he feels that in his body, if he feels that his father loves him. There is a silence.

"I feel warm, very warm and peaceful. I don't need to cry now. I'm okay and he was just scared. It's not that he doesn't love me."

In reviewing the session, recall that initially the only image or memory of the event Marius had was the bloody pants, torn flesh, and his father's rejection. Yet here also was the positive seed of the emerging healing nucleus, the "magic pants." The experience of the pants is the thread by which the altered states, related to the traumatic event, were experienced and progressively renegotiated. In working with over a thousand clients, I have never found an instance where there was not this dual aspect of a critical image.<sup>15</sup> Within an initial image are the first stirrings of the motoric plan that a person will develop. The renegotiation processes occur stepwise, from periphery to center, toward a de-structuring of the particular anxiety response or thwarting pattern, and restructuring of the underlying defensive and orienting responses.

<sup>15</sup> Akhter Ahsen, *Basic Concepts in Eidetic Psychotherapy*, (New York: Brandon House, 1972) refers to this, I believe, as the "Law of Bipolarity."

The image of the ripped and bloodied pants was arousing to Marius, but so was the happiness (his legs wanting to jump for joy) he experienced when he saw the same pants for the first time earlier that morning. He was joyful when presented with this first possibility of manhood. In wanting, literally, to “jump for joy,” Marius activated motor patterns that were essential in the eventual renegotiation of his freezing response. It is necessary to build just such adaptive motor patterns successively with increasing activation. In moving from the periphery of the experience to the freezing “shock” core, one moves away from maladaptive neuromuscular patterns. The latter are neutralized by adaptive, flexible patterns at similar levels of activation.

As I encouraged Marius to track the initial positive pants experience gradually toward the traumatic, freezing shock core, the joyful extensor-dominated pants experience became linked to support, aggression, and competency, that is, when in somatic experiencing Marius sees the image of the rock field, the seed begins to sprout. In jumping from rock to rock and finding and picking up the stick, Marius’s dynamic body-unconscious propels the motor plan sharply ahead. He is now prepared to meet the impending challenge. He takes the offensive and moves toward mastery of the previously thwarted situation. Like the hunters, he tracks the polar bear as I track his autonomic and motoric responses. Supported by the magical pants and the village men, he makes the find and the kill in a crescendo of high activation, approaching ecstasy.

In the next sequence of events, the true test will be made. Empowered and triumphant, he heads back down toward the village. There is expansion and awareness. For the first time he sees and describes the road and the dogs. (Previously, these images were constricted as in amnesia.) He senses orientation movements away from the attacking dogs and toward the electric pole. Because he now senses his legs moving, the inhibitory freezing response is no longer the exclusive channel of response. The ecstatic trembling for the kill is now bridged into running. This action is, however, only partial; he begins to run but does not escape! I ask him to turn and face his attackers so as not to have him fall back into immobility. This time he counterattacks, first momentarily with rage, and then with the same triumph that he experienced in the previous sequence of killing and eviscerating the bear. The motor plan has succeeded. Marius is now victorious; he is no longer the defeated victim.

The event, however, is still not complete. As the sensations and autonomic responses shift from highly activated sympathetic to parasympathetic resolution, the more primary orienting responses can come into play.<sup>16</sup> <sup>17 18</sup> Marius not only sees the pole, he orients toward the pole and prepares to run. He had begun this maneuver years ago, but until this moment, it had not been executed and completed. He consummates this preparation now with the act of running. Since he has already killed his attackers this may not make “left brain” linear sense, but it is completely logical in the biological, reptilian (body-brain) language of preparation, defense, and orientation. It is that sequence of activity (somatic experiencing) that alters the basic patterns of an individual’s adaptive responses. When I returned to Denmark a year later I learned that Marius’s anxiety reactions were no longer a problem.

Jody-In a Fraction of a Second-Another Example of Resolving Anxiety States through Completing Innate Defensive Responses:

Twenty-five years ago, Jody’s life was shattered. While walking in the woods near her boy friend’s house, a hunter came up to her and began a conversation. It was mid-September. There was a chill in the air. Her boyfriend and others thought nothing when they saw someone apparently chopping wood. A madman, however, was smashing Jody’s head again and again with his rifle. The police found Jody unconscious. Chips from the butt of the rifle lay nearby where they had broken off in the violent attack.

The only recollection Jody had of the event was scant and confused. She vaguely remembered meeting the man and then waking up in the hospital some days later. Jody had been suffering from anxiety, migraines, concentration and memory problems, depression, chronic fatigue and chronic pain of the head, back and neck regions (diagnosed as fibromyalgia). She had been treated by physical therapists, chiropractors, and various physicians.

Jody, like so many head-injured and traumatized individuals, grasped desperately and obsessively in an attempt to retrieve memories of her trauma. When I suggested to Jody that it was possible to experience healing

<sup>16</sup> Gellhorn, *Autonomic-Somatic Integration*.

<sup>17</sup> Levine, “Stress,” pp. 347-48.

<sup>18</sup> The Polyvagal Theory represents a new understanding of the autonomic nervous system (ANS). The theory stems from the research and writings of the psycho-physiologist, Stephen Porges, Ph.D. This research has significantly altered the traditional, commonly accepted view of the ANS, which views two component subsystems, the sympathetic and parasympathetic branch. The parasympathetic maintains the essential, homeostatic background operations such as respiration, blood flow, and digestion, those of sustenance, maintenance and procreation. The sympathetic provides a global stress-response to mobilize vast sources of energy and muscular readiness for fight-or-flight. Ernst Gellhorn and others have suggested that the two branches work in an oppositional, reciprocal, manner. It was assumed that anxious states were associated with sympathetic hyper-arousal and relaxation with dominance of the parasympathetic branch. The Polyvagal Theory is rooted in comparative neuro-anatomy and autonomic psychophysiology. Porges showed that the ANS has three, rather than two, branches. In addition their organization is *sequential* rather than reciprocal. (See Porges: *Psychophysiology*, 32 (1995), 301-318. Cambridge University Press).

without having to remember the event, I saw a flicker of hope and a momentary look of relief pass across her face. We talked for a while, reviewing her history and struggle to function. Focusing on body sensations, Jody slowly became aware of various tension patterns in her head and neck region. With this focus, she began to notice a particular urge to turn and retract her neck. In following this urge in slow gradual "micro movements", she experienced a momentary fear, followed by a strong tingling sensation. Through following these movements, Jody began a journey through the trauma of her assault. In learning to move between flexible control and surrender to these involuntary movements, she began to experience gentle shaking and trembling throughout her body. Thus began, ever so gently, the discharge of her trauma.

In later sessions, Jody experienced other spontaneous movements, as well as sounds and impulses to run and to bare her teeth and claw at her assailant. By completing these biological defensive responses, Jody was able to construct a sense of how her body prepared to react in that fraction of a second when the hunter raised the rifle to strike her. In allowing these movements and sounds to be expressed, Jody began to experience a deep organic discharge along with the experience of her body's innate capacity to defend and protect itself.

Jody, through her felt sense, was able to follow her body's intentional movement. Intentional movement is non-conscious. It is experienced as if the body is moving of its own volition. Through completing the life preserving actions that her body had prepared for at the time of her attack, she released that bound energy and realized that she had, in fact, attempted to defend herself. Gradually as more defensive and orienting responses reinstated, her panic anxiety progressively decreased.

In Somatic Experiencing, traumatic reactions are addressed by a wide variety of strategies. What unifies them is that they are all used in the service of de-structuring the thwarted anxiety response and restoring defensive and orienting resources. The overall picture shows how each individual's needs and resources call forth a unique, creatively adaptive solution.<sup>19 20</sup>

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<sup>19</sup> Eugene T. Gendlin, "On Emotion In Therapy," in *Emotions and the Process of Therapeutic Change*, ed. J.D. Safran and L.S. Greenberg. (New York: Academic Press).

<sup>20</sup> *Waking The Tiger -Healing Trauma* - N. Atlantic press 1997

#### Biography

Peter A. Levine received his Ph.D. in medical biophysics from the University of California at Berkeley, and also holds a doctorate in psychology from International University. He is the developer of "Somatic Experiencing" and teaches trainings in this work throughout the world and in various indigenous cultures. He has been stress consultant for NASA in the development of the first Space Shuttle. Dr. Levine was a stress consultant for NASA on the development of the space shuttle project. He is a member of the Institute of World Affairs Task Force of "Psychologists for Social Responsibility" and serves on the APA "Presidential Initiative on responding to large scale disasters and ethno-political warfare.

Peter is the author of the best selling book *Waking the Tiger - Healing Trauma*, available in eight languages as well as three audio learning series for "Sounds True": *Healing Trauma, Restoring the wisdom of the Body,* *It Won't Hurt Forever, Guiding your Child through Trauma,* and *Healing Sexual Trauma-Transforming the Sacred Wound*

Peter is the Director of the Foundation for Human Enrichment and may be contacted through [www.traumahealing.com](http://www.traumahealing.com)

# Transference and Resistance: A Case Study in Bioenergetic Analysis

Elizabeth Rablen, M.D.

## Abstract

The theory of transference is explored as well as the basis for the integration of bodywork and psychoanalysis. The historical roots of bioenergetic analysis are presented. The case study demonstrates how using the bioenergetic stool brings defensive structures and strong feelings into the patient's awareness. Aggression expressed in exercises of kicking on or hitting the bed break through psychological and muscular inhibitions, elucidating the role of muscle blocks and transference. Exercises in learning to say "No" while hitting the bed help the patient discover and correct early experiences of this right denied. With boundary exercises the patient becomes aware of violations to his boundaries and learns to protect them.

## Keywords

Boundary exercises - Resistance - Transference - Transference and resistance

## Introduction

In early childhood we develop behavior to ensure that our care givers meet our needs for love and security. This behavior becomes automatic and unconscious. As adults we tend to use the same behavioral strategies when interacting with family and others important to us. Because such behavior is no longer adaptive to adult reality, it is the source of much suffering.

This unconsciously determined behavior was given the name *transference* by Freud. Since it served our early survival needs, we do not give it up without a struggle. This Freud called *resistance* (Bemporad 1989, p.1825).

The record of these early adaptations is kept in the unconscious mind. Wilhelm Reich discovered that it is also remembered in the muscles' chronic tensions, of which we are often unaware.

The bioenergetic approach of working directly with the body brings the patient quickly in touch with the unconscious, obviating the temptation to intellectualize. What was an unconscious memory becomes an experience in the present. Painful events from childhood and transference reactions become lived events. The difference between patient expectations based on transference and actual therapist behavior makes the patient correct his misrepresentation of the therapist. He begins to live in the present rather than in the past.

The inclusion of the body in psychotherapy brings transference and resistance more sharply into focus, as will be evident in the case study.

## A Brief History of Bioenergetic Analysis

Bioenergetic analysis has its roots in the work of Wilhelm Reich, an analyst who lived in early twentieth century Vienna and was a member of Sigmund Freud's study group. In analyzing his patients Dr. Reich observed that certain groups of muscles were in a state of chronic tension. He began to work directly with these muscles and asked his patients to breathe deeply in order to increase the body's oxygen supply and energy. As a result patients underwent remarkable changes: they became more alive, their eyes began to sparkle, their faces gained color, and their voices became stronger. In other words, "bioenergy" became more available to them.

Reich noticed that many patients experienced strong emotions, recalled vivid memories from childhood and gained access to repressed material, when in this state of heightened energy. Reich theorized that tight muscles represent the somatic aspect of psychological defenses.<sup>1</sup> The rigid body holds a record of a person's life history, including all aspects of transference and resistance.

When Reich came to New York City to give a course on character analysis at the New School for Social Research, Alexander Lowen (Lowen 1975, pp. 13-17), a lawyer interested in sports, heard about it. He was intrigued by the catalogue description referring to the fact that personality traits and the chronic muscular tensions in the body are functionally identical. His imagination was captured with the first lecture and Reich became Lowen's teacher for many years thereafter. In the second year of their relationship Reich suggested that only by undergoing therapy with him could he really know what his work was about. Lowen was not aware of having any emotional problems, but his first session taught him otherwise. Eventually he considered Reich's innovative

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<sup>1</sup> Freudian psychoanalysis, through the use of dreams, free associations and transference analysis, performs the same function but it takes longer and is not as transparent as bioenergetic analysis.

approach to traditional psychoanalysis so revolutionary that he decided to study medicine and become a bioenergetic analyst.

After completing his medical studies Dr. Lowen went into private practice.

As he worked with patients using Reich's methods, he added postures as well as stretch and stress exercises to relax chronically tense muscles. He often gave these exercises as "homework" to his patients. He formulated the concept of bioenergetic grounding. A person was well grounded who was in energetic contact with reality. This energy, unhindered by muscular blocks, flows to those areas of the body that interface with the world—the sensory and sexual organs, hands, feet and skin. For Lowen the best example of a well-grounded person was a small child reaching for its mother. He saw how full of life such a child was and how harmonious were its movements. With energy flowing unimpeded in his body and to the world the child can express himself with soul and body integrated.

### **A Case Study in Bioenergetic Analysis**

In the following case study it is important to note that bioenergetic work with the body is not an add-on or support for analysis but is integral to the analysis itself. Both bodily and psychological experiences become the material for therapeutic formulations.

#### *Session 1: History*

Carol is a 61 year old woman. Four years ago she began suffering from dysthymia, which three years later changed into depression with severe agitation, a gloomy view of the future and an inability to concentrate. Although she had been a sound sleeper, she was now waking up early, still tired. She worried constantly, blamed herself for being a failure and, although she knew it was irrational, considered whatever went wrong to be her fault. Although she had been strong and competent all her life, now she was weak and needy. She could not keep up with the ordinary tasks of life. Nothing except TV-watching could distract her from these morbid preoccupations.

Her early history revealed that Carol had been living in fear of her mother's emotional outbursts and impulsive behavior. She did everything to prevent upsetting her mother. When this failed, she hid in a corner or under the table. As a two-year old she became the protectress of her younger brother, urging him to hide with her under the bed and calming him down. Her father, a kind and loving man, was helpless with his wife's outbursts and could do little to protect his daughter.

Her recent history revealed that Carol developed dysthymia after having given up working as administrator in her father's firm, a position she had taken in order to help her father some seventeen years before. She waited six months before visiting a psychiatrist, whom she saw twice a month for two years. In the course of these two years she gradually lost all her meaningful care-giving responsibilities. Two of her daughters married. She was forced to give up the care of her sick brother, and an ailing aunt whom she was attending until she died that same year. Finally she had to give up the social work she loved and to which she had returned after leaving her father's firm. With no one left for whom she had to care, the depression became more severe and she began to see her psychiatrist on a weekly basis for another year. There was no improvement, and they agreed that traditional analysis had achieved all that was possible. Half a year later Carol came to me for bioenergetic analysis.

Based on her history I make a tentative formulation. Carol had learned even as a two-year old that she must avoid doing anything that might anger her mother, who would often get so upset that she would walk out of the house and leave a note saying she was not coming back. In order to prevent losing her mother, Carol had to be in control of herself. Surprisingly her mother was loving and playful when not upset.

As an adult Carol continued to care for the needs of family members and patients. Unaware that such responsibilities were the source of her security, she actually looked forward to the time when no one would need her assistance and she would be able to enjoy her independent life—concerts, lectures, more time with family. She was surprised to find that the loss of care-giving made life seem empty, meaningless and filled with anxiety. I explain to Carol that her experience is similar to what she had to repress as a two-year old. Suffering through these painful feelings will enable her to surrender the belief that in order to prevent abandonment she must serve the needs of others and deny her own.

#### *Session 2: Basic grounding*

I explain the nature of bioenergetic analysis and introduce her to the basic grounding exercise (Lowen 1977, pp. 17-22). This consists of standing and breathing deeply while making sounds, followed by hanging down from the waist until the legs shake or vibrate. One then comes up slowly, pushing into the feet rather than lifting the torso.

Carol begins the grounding exercise. When her legs begin to shake she complains that they hurt and that the exercise annoys her. She persists nonetheless and I let her continue.

Knowing the sort of relationship Carol had with her mother, I thought it essential not to intervene as the caring doctor. Otherwise she would try to “take care” of me and make me a successful therapist. But the old mother-child pattern would be enforced.

### *Session 3: The bioenergetic stool*

After her grounding exercise I introduce her to the bioenergetic stool,<sup>2</sup> asking her to stretch over it and breathe deeply. After a few minutes she breaks into a spell of sobbing, occasionally interrupting with: “God, I can’t take it any more . . . I know I disappoint you . . . help me . . . I am so ashamed . . . I can’t let it happen . . . I want to scream.” I encourage her to scream. “Don’t I scare you?” she asks.

The lessening of chronic tensions in her back, bronchi and diaphragm caused her self-control to break down and overwhelming emotions to be released. Mother transference made Carol believe that she had disappointed me and that I would be upset by her screams. However, when she realized that I was not disappointed or frightened, she became aware of her transference.

After Carol comes off the stool we discuss her experience. She tells me that she was astonished at the power of her feelings. Never before has she felt such emotional pain. I point out that she has indeed felt this before—as a child. She had to make sure not to lose control over herself. She needed to be calm in order to protect her brother and not upset her mother, using all her will power to suppress frightened feelings. This memory prompted “I can’t let it happen” while she was over the stool.

### *Session 4: The bioenergetic bed*

Carol again expresses her amazement over the intensity of her emotional experience in the previous session. Since then she has come to the realization that, in order to become whole, she must go through the suffering of her childhood. It now makes sense that psychoanalysis could not alleviate her depression. Simply talking to a therapist about her early experiences was not enough. She has to re-experience the terror she felt when her unpredictable mother would decide to abandon the family.

I ask Carol to stretch over the bioenergetic stool. She tells me that she feels too exposed in this position but continues nevertheless, breathing deeply, making sounds, all the while sensing her body and its changes. After a while I notice that she is trying to hold back her tears with a loud “No” to herself. Then she gives in to her longings and pleads, “I want to be taken care of . . . help me.”

Because I want her to feel safe, allowing her body to let go, I ask her to lie down on the bed. This position eliminates the stress of gravity. Carol rests on the bed, hides her face in her hands and closes her eyes. She tells me that she is in touch with the little girl who wants to be loved and comforted. When she opens her eyes, however, she becomes the impotent adult again. I ask her to keep her eyes closed and to stay in touch with the little girl as long as she can. After a while she remarks with disdain, “I am such a slob . . . so needy.” I say, “There is a lovable little girl in you; don’t judge her.” She breaks into tears.

Sadness soon changes into anger. Wanting to involve her body in the expression of this anger, I ask her to shout and kick on the bed (Lowen 1977, pp.108-109). This she does but only for a short time, saying that she feels ashamed and afraid.

We sit down and explore her bioenergetic experience. I explain to Carol that I did not hold her so she could discover that she did not need me for support, that she could be supported by the bed. She remained in touch with the lonely, sad child only briefly. Soon she was the adult again, critical of the needy child in her. My comment about not judging herself made her cry, because for the first time the superego mother had become as compassionate as I was.

We then look at the second part of the bioenergetic session when her sadness turned into anger. With eyes closed she was able to remember her childhood sadness, but soon the underlying anger emerged. Shouting and kicking made her get in touch with the intensity of the anger at her mother, which she had never before expressed. It also reminded her how her mother reacted to unrestrained behavior. Carol stopped kicking to let me know that she was again in control of herself, had misbehaved, and was ashamed. Because I did not need her admission of wrongdoing, Carol became aware of her transference and her superego became less stern.

### *Session 5: Learning to say “no”*

Carol tells me that she now has a part that is out of her control, “mysterious,”; she prefers the familiar one in control. During the past week she was unable to work, get involved with life and forget about herself, as she did in the past to cope with difficulties. It upset her that she was so helpless in the last session and asked that I take

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<sup>2</sup> This stool is 24" high with legs flared and braced with crosspieces to provide a wide and solid base. Two rolled up blankets are strapped to the stool, increasing the overall height by 6-8". One lies with one's back over the stool, with the blanket at the lower ends of the shoulder blades. This level is where the main bronchus divides into two branches, one going to each lung. It is an area of severe constriction in most people (Lowen 1977, pp. 118-128).

care of her. She was grateful that, despite her refusal to take the antidepressant medication I had recommended, I was still willing to work with her.

Since Carol was so pleased that I let her have her way, I knew I must give her opportunities to oppose me. She has to find out that saying “no” to others does not lead to losing them. A typical bioenergetic exercise used for this purpose consists of standing in front of the bed and pounding it with fists while shouting “No, I won’t!”<sup>3</sup> She watches me demonstrate this, and in a tone of surprise exclaims: “My God, that was my mother!” She agrees to try the exercise, even though behaving like her mother frightens her. She hits the bed with short weak strokes, then stops and tells me that she is upset and wants to be held.

I have her hang down in the grounding position, and with her permission I gently pound her back.<sup>4</sup> My goal is for her to feel in her body that she is an adult, but is not abandoned, as she was as a child when assuming an adult role with her mother. In touch with my body and grounded on her feet she could become aware of being an adult, independent, but not alone. After a while, overcome with sobbing, she says, “It sounds as if I am giving birth.” I wonder to myself whether she is not giving birth to the adult self. Soon she ends the exercise, stands up and tells me she wants to be alone. She permits me to stand behind her and place my hands on her shoulders.

Before leaving she asks: “Will I stay this way for the rest of my life?” I reassure her that life will change once she becomes familiar with her “mysterious” part and accepts it.

### *Session 6: The towel fight*

Carol tells me that her sobbing during the last session reminded her of how lonely she had been as a child. The kicking exercise made her feel that she was like her mother, an unreliable person. She now understands why her brother often complains about her behavior.

I ask her to lie down on the mat, bend her hips and knees and oppose me by vigorously kicking a pillow I hold in front of me. She shouts: “Get away . . . leave me alone . . . I won’t do what you tell me . . . you trick me!” I then ask her to kick and shout while lying on the bed, without me as opponent. This she does, but her protestations turn weak and she stops. “I feel lifeless.” To help her experience a successful fight for life I introduce Carol to a towel fight. We each grab an end of a rolled up bath towel. I tell her that this towel represents her life, and I will try to take it away from her. She wrestles the towel from me, then hugs it and strokes it lovingly. At the end of the hour Carol says that she fears leaving the safety of the office, that the outside world seems untrustworthy.

### *Session 7: Therapist in the role of her brother*

As Carol begins the basic grounding exercise, I encourage her to push more strongly into her feet and heels. Her grounding improves; her voice becomes louder and more expressive. I ask her to move to the bed and pound it with her fists. She shouts, “I hate it . . . it’s stupid!” She stops and turns around to check if I am still there (transference: did I leave?). Reassured, she continues hitting a little longer. She notices fear in the pit of her stomach and begins describing a vivid fantasy. She is standing naked on a beach, feeling vulnerable. Then she becomes Mephisto, a red-rimmed cloak around her shoulders. She fantasizes displaying her power but then realizes that her mother and brother will be incensed over this new aggressiveness. She feels helpless and terrified.

I tell her that I will impersonate her brother and that she should face me with our palms touching. With anger in my voice I say, “Carol, you always make mistakes!” She does not respond. I tell her to yell at me using words like, “I won’t deal with you if you talk that way to me.” She cannot utter a word. To help her feel the drama of standing up against her brother I suggest another towel fight. Carol defends her life with incredible vigor and succeeds in wrenching the towel from my hands. Triumphant she exclaims, “I got rid of my brother!” The tone of victory vanishes abruptly, and with fear in her voice she adds, “But that’s what frightens me—to be all alone.” I encourage her to take the towel home with her and bring it back next time.

### *Session 8: Strengthening boundaries*

Carol has again been helping her brother but worries that he will find something wrong with her work and yell at her. Since our last session she spent too much time in the “never-never land of TV-watching” and worries that she will remain irresponsible. Then she recounts the dream she had last night. She was in the upstairs bedroom

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<sup>3</sup> To express aggression with body and voice is essential for the patient to get the courage to override his irrational fear of authority. By striking the bed he can safely experience the power of his body. Transference to the therapist inhibits or makes impossible the expression of aggression. Aggression towards the therapist can be introduced gradually, however, as is done in session 6. In bioenergetic analysis aggressive activities are emphasized because persons with emotional or character problems, including those whose aggression is based on will power, always exhibit a limitation of aggression. Aggression enables us to meet and handle stress and to be in the present moment (Lowen 1977, pp. 112-115).

<sup>4</sup> For most people having one’s back pounded is safer than being held. The strong muscles of the back make us feel well protected. In bioenergetics we have learned that the back represents our aggressive side and the front our vulnerable one.

of her home where she had lived with her husband and three daughters ten years before. She was alone with her cat, that looked intensely at the door. A matron appeared, hair in a bun, the way her mother used to wear it. Beside her was a man in a trench coat who looked like her brother. The matron grabbed Carol's arm, as her mother often had done, and forced her to leave the house. She awoke terrified.

We attempt to grasp the meaning of this dream. Did her mother and brother force her out of her home because she failed in her obligations then and now? Could her recent irresponsible behavior have the frightening consequences portrayed in the dream? I ask her to do the basic grounding exercise, while I stand some eight feet away. I tell her that I will wait for her to come up and make eye contact with me. She does so but feels anxious and vulnerable. To increase her sense of safety with me I ask her to stand facing me, our palms touching, in order to help her get a bodily experience of boundaries.<sup>5</sup> After some minutes she says that she is no longer frightened but now worries she will hurt me.<sup>6</sup> She moves away and crouches behind the bed. From her hiding place she announces that she wants to be free of all responsibility and be taken care of.

Coming out from behind the bed she tells me that, despite the fact that such regressive wishes frighten her, it is appealing to have someone else be responsible for her. I agree that she has to accept having to take care of herself but should also give the child a chance.

### *Session 9: Progress*

A few days ago Carol had a telephone conversation with her brother that was surprisingly pleasant. I suggest this was because she had gotten rid of him two sessions before. Through her words and tone of voice she gave her brother the message that she would no longer put up with his unreasonable behavior.

Carol observes that recently she has been so undependable that she cannot recognize herself. She is afraid she will never change. I suggest that she set priorities and take care of her most urgent obligations first. My suggestion angers Carol. I ask her to pound the bed and express this anger. She does so with great verve but then says with surprise, "I am just like my mother—dangerous and unpredictable."

We repeat the towel fight. She is the dangerous mother and I am the strong, unfrightened child, holding firm to my end of the towel. Carol enjoys our equal strength. Knowing as I do that her mother's power lay also in her neediness, I switch roles and become the mother by saying in a kind voice, "You are my good girl; I need you very much." She says "That sounds like my mother!" She drops the towel, fills with tears and says that she wants to hide.

### *Session 10: The boundary exercise*

Carol tells me about the positive changes in her recent life. She feels more alive, cares for people and enjoys contact with them. At home, however, she remains worried and helpless, and the loneliness has become even more painful. Carol wants to be better grounded and does some work over the stool. Then she tries kicking on the bed but stops, looking frightened. Hoping that the pillow kicking exercise would make her feel less helpless, we try it. Her anxiety only worsens.

I suggest we do the boundary exercise (Rablen 1982, pp.51-52; Rablen 1985, pp. 185-195; Rablen 2001, pp. 39-44). I tell her that we will stand ten feet apart with palms facing outward. I will slowly advance. When she notices any bodily or emotional changes, she should tell me to stop. She lets me approach until I am very close. She says nothing. When I am beyond *my* comfort zone, I stop and describe the bodily changes I observed in *her*—her smiles and shallow breathing. With a guilty smile she acknowledges her transference that caused her to let me cross her boundaries.<sup>7</sup>

### *Session 11: Carefree child with mother*

Carol is disappointed and angry at the cancellation of a party to which she had looked forward. She expresses her anger by pounding the bed. Then she lies down on a mat and tells me that she feels lonely and sad, that nobody is there for her. I sit down on the floor next to her. I remind her of her conviction that, unless she takes care of some one else, there is nobody there for her. She reaches for my face. Still on the floor, she curls her body around me, saying that this position makes her feel safe. Then she remembers that she never cried over the loss of her parents.

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<sup>5</sup> A simple boundary exercise. A much-expanded version is used in session 10.

<sup>6</sup> Note the difference without and with palms touching. The body contact with the palms touching strengthened her boundaries, making her feel safe, but it released the wish to get back at others that underlies her fear of being hurt.

<sup>7</sup> Because Carol could not use a fight or flight response to her mother's outbursts or invasiveness she had to let her boundaries be violated.

We discuss her being curled around me. She was the carefree child again with her good mother—the mother who was lost to her when she was two years old. At that time her father was also lost to her because he could not protect her from her mother’s frightening emotional outbursts. She could not mourn these losses until now.

*Session 12: Back-to-back exercise*

Carol reports good news again. She has learned to prioritize her obligations. She sleeps well, has taken on some volunteer work and is enjoying life. She is more spontaneous, her old self again. The beauty of spring touches her. She was never aware of the passing of time, but now it saddens her that spring will soon end. I mention that a person concerned with obligations must focus on the future. Someone with an open heart lives in the present moment and experiences the beautiful as a singular event, never to be repeated.

We sit on the floor, back to back, exploring our contact in silence for some time.<sup>8</sup> We turn around and she tells me that my back strengthened hers, but that she feared becoming too dependent on me. We repeat exercise. This time she gets up, walks around the room and returns to lean on my back.

We discuss the experience. She tells me she was glad that she could make up her mind to get up and leave. She felt safe and independent and was sure that I would still be there when she returned. When she sat down again, she found herself leaning more lightly against my back and was using her whole back rather than only the upper part of it. She could be a whole person when alone or with a trusted other.

*Summaries of sessions 13-29*

*13-14* Although Carol had discovered that she could be a whole person when alone or with a trusted other, as in the back-to-back exercise, the demands of the child returned. I ought to take care of her since she has waited for this since she was a two-year old. She should not need to struggle with adult responsibilities. When I say this is impossible, she goes to the bed on her own to express her anger at me. She hits with her fists and shouts that she does not want to be told what to do. In an approach-withdrawal exercise<sup>9</sup> she becomes fully aware of her ambivalence towards me, needing me but fearing to become dependent. She can see now that the need for mother love made her accept the burden of serving her mother’s needs. I help her to feel the weight of this burden in her body by leaning on her shoulders, a bioenergetic masochism exercise. To her surprise she feels her confident old self rather than burdened.

*15* Carol is thrilled that her emotions are stronger than ever. Spring delights her and the recollection of her parents’ deaths saddens her. Since she believes that strong emotions indicate loss of control, I must be disappointed in her. That I am not makes her aware of the mother-transference. She remembers how important her mother’s love was for her. She fills with tears over her mother’s not having loved her for her-self.

*16* Carol so enjoys coming that she is even angry that sessions have to end. At home she distracts herself to avoid the unbearable feelings of loneliness. I suggest that being alone makes her aware that her parents are no longer alive. To help her mourn I have her talk to her deceased mother in a Gestalt session. She sobs when telling her mother she loves her but feels used by her.

*17-18* She tells me she loves to laugh with friends and enjoys food as never before. Alone, however, she feels miserable, mostly frightened. She now knows the importance of anger and is upset that traditional psychoanalysis was unable to help her access it. She is surprised that the grounding exercise makes her feel angry rather than frightened, as it did in the past. This suggests to me that she is finally able to be angry at her mother without fear. She has the same dilemma with her brother as she had with her mother. Because he is sick, she wants to help him but fears engulfment. I suggest that protecting her boundaries should have priority over her obligation to fulfill his needs. Although this makes sense to her, it sounds like heresy.

*19* Her daughters tell her that she has changed, that they enjoy being with her and that she is easier to talk to. However, she still feels anxious and depressed. She admits that she does not do her “homework,” the “silly” bioenergetic exercises. “Why don’t you rebel openly?” I ask. She hits the bed but becomes terrified with the memory of being tied down as a child when her eardrum was pierced to treat otitis media. Neither the doctor nor her mother had explained the procedure beforehand. I suggest she say “no” to me while we confront each other with palms touching. She cannot say a word. I remind her that she had no trouble opposing me by refusing to do her homework. She laughs, “But that’s a secret.”

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<sup>8</sup> People are often better grounded while sitting. The back, as mentioned before, is a strong part of our body. Sitting back to back represent an intimate contact with maximum integrity of boundaries.

<sup>9</sup> I stand next to her when she is hitting the bed and telling me off. When I move away to my chair, she says she needs me close; when I again move close, she objects, “I don’t want to become dependent.”

20-22 She accepts having a split self but worries that this is self indulgence. Quite the contrary, I tell her, it is actually brave to tolerate this split self. She hides behind a pillow and says she wants to try being alone and deciding what to do. She hits the pillow complaining angrily about life's injustices.

She observes that she has three sides: a calm, observing one; an absent one that watches TV; and a frightened one that is panicky over being split, vulnerable and out of control. When the end of the hour approaches, she fills with tears, disappointed that I do not let her stay.

23 Carol's many contradictory feelings make her fear that she is going crazy. I encourage her to let her body express this craziness. She takes the towel and twists it, strangling it with satisfaction. At the end of the hour she wants to tie herself to the bed so she can be without responsibility. At the same time she is angry at being tricked into coming here. The ambivalent bond to her mother is being re-enacted with me. She realizes this, saying that she needs to "wait it out." I suggest she get grounded to help her endure the chaotic, ambivalent feelings and the waiting.

24 I tell Carol that she believed she had to earn her right to exist by serving her mother's needs. Feeling the truth of this causes her to break into sobbing. That she must free herself from this bondage frightens her. Once she permits the self that is in bondage to fall apart, the true self will be revealed, I tell her; this will be hard work.

25 Carol says therapy is pointless and will never lead anywhere. I ask her to ground. She has a sudden wish to be destructive and scream. However, she can only make an agonized sound. She feels as if her back and head carry a heavy burden. Again a destructive urge overcomes her, followed by an intense anger at her mother for having denied her the privacy of her room and for having read her diaries. She is enraged, I say, because she had to carry the burden of earning her right to exist. At the end of this hour Carol holds onto the chair, does not want to leave and feels intense anxiety, as if she were going to die if she separated from the chair. I tell her that she if she survives this deadly separation, she will no longer be in bondage to her mother.

26 Carol sees a glimmer of hope. She recounts how she successfully accomplished a task she thought would fail. This raised her spirits and she feels like her old, positive self. She is no longer angry at her brother or afraid of him. However, she still fears engulfment when taking care of him.

She becomes aware of a wall at her left, somehow connected with the previous session and then she remembers that I told her she has not yet separated from her mother.

27-28 Carol tells me she often laughs. Now it is from her belly and not from a wish to charm. The hopeful feelings are still there. She cannot remember the last session but no longer thinks that she needs to remember it. Twice Carol expressed anger at her brother, once yelling at him, once hanging up on him. However, she feels guilty about it. "What would happen if you put down this burden of guilt?" "I would feel so light, I would float away" she says with a smile.

She remembers games she and her brother played as kids. They were movie actors, he a cowboy, she a barmaid. They played being seductive and kissing each other. When Carol was twelve she stopped without an explanation. She just knew it had to end. From then on her brother continued to get into trouble. Some years later at her wedding he seemed like a lost child. These thoughts about her brother make Carol anxious. She grounds on her own initiative. Her shoulders begin to feel lighter, as if a load has been removed. On impulse she hits the pillow, then stops, ashamed. She returns to the pillow, sobbing as she caresses it.

29 She reports a wonderful dream of loving a man and being loved by him. She was disappointed at waking up and glows when she recounts the dream. "Value this dream," I tell her, "because it demonstrates your potential for such love."

### *Postlude*

This 29-session phase of analysis took place over a period of ten months. It is remarkable how much progress was made using bioenergetic methods. She continued coming for 41 additional sessions over a period of one year, during which she repeatedly experienced the intensely ambivalent relationship to her mother. As mentioned in the introduction, behavior based on transference is exhibited in all our interactions with significant others. Carol had come to correct this with her brother and others with whom she had similar difficulties. With support she no longer submitted helplessly to demeaning or controlling behavior but defended herself. Over time she became increasingly competent in her daily life. She could not believe how much joy she felt in living. At the end of the year therapy was terminated with the option that she could come back for a bioenergetic refresher.

After six months she comes back for ten more sessions over a period of half a year. At some point she tells me that she fell in love with a man she had known when she was young. The dream of session 29 has become reality.

We end the final session with a bioenergetic leave taking. After grounding we stand opposite one another. I approach slowly until she tilts her head and says, "I am waiting." I retreat a little and stop. "You come with a message," she says. "You are my mother—the way the sun shines on your hair." She continues, now addressing her mother directly: "You are at peace now, no hard feelings. That's the message." Now to me, "It is important that *you* come towards *me*. I always had to go to her. You show me respect." She pauses and reflects, then ends with, "My mother needs me no longer; she is at peace."

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#### Biography

**Elizabeth Rablen** has a medical degree from the University of Graz, Austria. She holds the Diploma in Psychiatry from McGill University, Montreal and is board certified by The American Board of Psychiatry and Neurology. She completed the two-year Career Child Psychiatry Training Program of The American Association of Psychiatric Clinics for Children. For six years at the Worcester, MA, Youth Guidance Center she was Training Supervisor of psychiatrists, psychologists, and social workers. She was Medical Director at United Community and Family Services in Norwich, CT, for thirteen years and worked in Connecticut for four years as a child psychiatrist at Elmcrest and Altobello hospitals. She is a certified bioenergetic therapist and local trainer in Connecticut. She was in private practice for 25 years before retiring in 2001.

# Shadows on the Moon: The Neglect of the Soul and the Feminine in Body-Psychotherapy

Katherine Brown, MA

## Abstract

This paper, originally a talk in Lindau at the 1991 EABP conference, deals with the unique challenge to every body psychotherapist to remain true to his/her inner self in the role of a psychotherapist and never to be straitjacketed by what the mind or rational ego has been taught by others. Women body psychotherapists who imitate the masculine orientation in terms of its dominant logos and spiritual warrior modes that affirm the will primarily betray the feminine soul. We must learn to trust the slower, quietly pervasive energy flow which emanates through our dominant chest and belly regions from endodermal depths. This flow connects us intuitively by way of immediate feeling resonances with the client's longings for personal growth and encourages the latter to explore and discover the natural healer within.

## Keywords

Ego - Feminine - Flow - Masculine - Self - Shadows on the moon

Various aspects of the soul and the feminine have been working in the more unconscious dimensions of my body-psyche for many years. As they became more conscious they assumed great importance, demanding more and more of my attention, time, and devotion. My search for my own soul and for my feminine roots has not been an intellectual exercise, but an inner journey.

While struggling with the elusiveness of soul, these words of the poet John Keats captured my attention: "Call the world if you please, 'The Vale of Soul-making' then you will find out the use of the world". They come from a letter to his brother dated April 1819 in which he goes on to say, "...I say 'Soul-making'... There may be intelligence or sparks of divinity in millions but they are not Souls till they acquire identities, till each one is personally itself. This point I sincerely wish to consider because I think it a grander system of salvation than the Christian religion."

I was haunted by this quotation. On the one hand it seemed to sum up the direction of my inner journey and of my work as an organismic psychotherapist. On the other hand I knew that something was escaping me and that my continuing preoccupation with it was pointing to a deeper meaning. For years my major concern for others and myself has revolved around the necessity for acquiring personal identity by discovering and living the peculiar and unique aspects of our being in this world which guides each of us toward becoming who we truly are<sup>30</sup>. Finally I realized that during all my years of personal psychotherapy, body-work and analysis, years of asking myself "Who am I?", I had not been asking the larger question, "Who am I as a woman?". I slowly realized that finding my identity as a woman demanded a much broader understanding of what it means to be a woman than the one I had learned growing up, and that finding my identity as a woman was connected with finding my soul. Only after years of therapy did I realize that I had any right to be other than the sweet, kind, quiet, polite, loving, thoughtful child my parents and grandparents expected me to be. It took me even longer to realize that, although I had always been "feminine identified", I had failed to see that my ideas of what it meant to be "feminine" had been narrowly conditioned by the cultural demands, and that from the wide range of inherent feminine possibilities, the patriarchal ego had found only the life-giving and protective motherly qualities acceptable. With this new understanding, I begin to ask myself how a girl or a woman could be if she were rooted in the feminine dimensions of her organism - instead of in the cultural ideas of how she should be. That question took me beyond psychology into the studies of myth, of history and prehistory. Those studies have brought me to a better understanding of why I had to be outside the field of psychology to find my feminine roots and they have also raised many questions about my work as an organismic psychotherapist, and about the field of body-psychotherapy.

Now I realize that each moment or stage in our individual lives has its own requirements. My preoccupation with the neglect of soul, although it began years ago, may be an expression of aging, that time of life when the needs of the soul eclipse ego needs, when an internal rightness with Self becomes more important than rightness with the values of the outer world. My concern for the neglect of feminine principles and values, however, cannot be laid at the doorstep of my age. It represents a change of consciousness toward the inclusion of feminine values, which is not mine alone: many others are actively engaged in this process also.

The words and ideals of the patriarchy, which have shaped our lives, continue to shape the language, concepts and theories of psychology and of our field of body-psychotherapy. And they will continue to do so until we begin to realize that the scientific-medical model, which we follow, and the essentially soulless tenants of academic psychology we have been taught are the products of and the perpetuators of the disembodied ego

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<sup>30</sup> Modified from an address by Katherine L. Brown to the 3<sup>rd</sup> European Congress of Body Psychotherapy, Lindau, Germany, 17-20 Sept. 1991.

which formulated them. This ego, which is the representative of the cerebro-spinal system, has separated itself off from the totality of the organism and assumed dominance over the body and other parts of the psyche that are essential to our wholeness as human beings. It is the dominance of the disembodied ego that has split us within, depriving us of the richness of our inner-world - of connection to the feminine aspects of our beings - to our own souls and to the souls and bodies of others. This dominance of ego-consciousness can be corrected only by a descent into our bodies and to the more unconscious parts of our psyches where we will discover the unlived parts of ourselves. Bringing those hitherto unknown parts into consciousness will serve to balance the arrogant demands of the ego, thereby broadening and deepening our lives.

It has been heartening for me to discover that, although there has been little mention of the soul or the feminine in the literature of body-psychotherapy, there has been an increasing flow of publications from other disciplines which indicate that the shift of consciousness toward the incorporation of feminine values which I mentioned earlier is occurring in the hearts and minds of others. In the latter half of the last century, from Eric Neumann's "On the Moon and Matriarchal Consciousness" in 1950 to Elinor Gadon's The Once and Future Goddess in 1989, we find expression of the growing awareness that the eons-old repression of feminine values has resulted in a one-sided masculine-egoic view of the world, of nature, and of the relationships between human beings which begs correction. What is emerging in consciousness in women and men is the realization that despite more than 5,000 years of repression by the forces and force of the patriarchy - the Goddess still lives! When her temples in the outer world were destroyed, She went underground, withdrawing into the unconscious depths of the body-psyche where She still dwells. Her passion and power will never be destroyed for She is the other side of ourselves and we will never be at one with others or ourselves until we realize that the dominance of the patriarchal-ego, which drives us, also divides us. Whether we are male or female, wholeness demands a balance between our feminine and masculine sides. And if we want to re-discover and renew our connection with our feminine side we must be prepared to make the journey inward into our unconscious depths where we will discover not only the memories and images of our personal history, but our collective prehistory as well.

This journey inward and backward in time has been a long and often lonely one for me, and coming into the presence of the Goddess shook me to my core. Those of you who have had such experiences whether waking or sleeping will know what I am talking about, or if you have ever seen and been transfixed by the frescoes in the "Villa of Mysteries" at Pompeii you will know something about the power and numinosity of the archetypes which, once constellated, tend to refuse to let go until they are assimilated. Those messages have the power to change our lives and assimilating them demands all of our faculties, rational and irrational. They have the power to turn our attention away from the demands of the outer world to the demands of the Soul and the inner world. We have been taught to place our trust in outer world authorities - mothers, fathers, pastors, doctors, teachers, etc. - and it is therefore extremely difficult for us to discover our inner authority and to have the courage to look at, or listen to the demands from our own depths, especially when we discover that those demands diverge sharply from what we have been taught. In those moments when we are caught between the demands of inner and outer authority we may distrust our sanity and need containment, understanding and support.

In the last two years the writings of Elinor Gadon, an art historian, and Riane Eisler, a sociologist, anthropologist, and attorney, have not only supported my search for an inner feminine image which would guide me but have also made me aware of the explosion of archeological findings data which have been discovered since World War II. Those discoveries have confirmed the worship of a female deity for nearly 30,000 years, from the latter part of the Paleolithic Age through the flowering of her worship in the Neolithic period, and well into the early Christian era when the last of the Goddess temples was closed in the fifth century BC. Goddess religion, as Elinor Gadon describes it,

...was earth centered, not heaven centered, of this world not otherworldly, body-affirming not body-denying, holistic not dualistic. The Goddess was immanent within every human being, not transcendent, and humanity was viewed as part of nature, death as a part of life. Her worship was sensual, celebrating the erotic, embracing all that was alive. The religious quest was for renewal, for regeneration of life, and the Goddess was the life force.

That is a far cry from the Judeo-Christian religious tradition, which posits a male god as the creator, whose realm is in heaven not in this world, and who decrees that our only means of attaining salvation is to deny the needs of our bodies and our instincts.

When the first evidence of the Goddess-oriented societies was unearthed in the 19<sup>th</sup> Century they were referred to as "matriarchal". The assumption then was that because they were centers of Goddess worship, they must have been ruled by women, and that, therefore, men were subservient. More recent evidence reveals that while they were matrilineal or matrilocal they were not "matriarchal" - that is, women did not rule those societies. As Riane Eisler, Elinor Gadon, James Mellaart, Marija Gimbutus and other archeologists, sociologists and ethnologists have demonstrated, those societies were far more egalitarian than any society that has developed since they were overrun by the barbaric invasions of nomadic tribes from Northern Europe and Asia between 4300

- 4200 BC. In those early societies which conceptualized the powers governing the universe in female form, neither women nor men were subservient and both revered the life giving - life sustaining feminine qualities which the Goddess represented. They were concerned with protecting and nurturing the lives and the quality of life of all who lived within their borders: women, men, and children, and they revered and sought to live in harmony with the natural resources upon which their existence depended. In Eisler's words,

that although the feminine principle as the primary symbol of the miracle of life permeated Neolithic art and ideology, the male principle also played an important role ... neither was subordinate to the other: by complementing one another their power (was) doubled ... a power that was more equated with responsibility and love than with oppression, privilege and fear" (The Chalice and the Blade pp. 26-28).

In the peace and prosperity, which those early civilizations enjoyed, our social, cultural and technological evolution was advanced, and in a social system that promoted partnership, rather than male dominance and hierarchy, the basic technologies on which civilization is erected were developed.

The dominance of patriarchal consciousness was built upon the loss of reverence and respect for the Goddess, for the values of the feminine, and for nature. That loss affects all of us, for the feminine is not the prerogative of women - it belongs to men also - and the repression of the feminine principle has resulted in the sense of a loss of soul that both men and women are suffering today. Women, whose bodies have been bought, sold, bartered, and beaten for centuries have lost reverence for their own bodies. They are no longer aware that their bodies are closely aligned with nature: with the cyclical phases of the moon, the tides and the seasons. When men chose the life of the Ego and the Spirit over the life of the body and its instinctual needs, they were compelled to repress the values of the feminine - not only in the outer world but in the inner world as well. Men lost trust in their capacity for feeling and denied the mystery of their emotional depths. Little wonder that today both men and women find themselves isolated and faced with discontent, loneliness, and a loss of meaning.

The balance between the masculine and feminine principles, which has the power to unite us internally and externally, has been sundered by the over-evaluation of masculine ego-consciousness and rationality. The suffering of our bodies and psyches is trying to tell us that we have become too one-sided and are in a perilous state of imbalance. Physically, for example, the warnings come from the rise of stress-related disorders: high-blood pressure, heart attacks, and strokes. The psyche sends other messages of distress: in the day, by feeling states of isolation and distrust of ourselves and others; through our sense of boredom, restlessness and the loss of meaning in our lives; and through our fantasies of becoming ill, crippled, unable to work, poor, deserted, homeless and unloved. At night the dreams come: nightmares of global destruction, of earthquakes, storms, tidal waves or fires raging out of control. Perhaps we see ourselves mired in quicksand or enormous piles of shit - or running from thieves, rapists and murders. We awake in terror, soaked with sweat or tears. The disease of our psyches and the diseases of our bodies are two sides of the same coin, and both are trying to correct our one-sided preoccupation with the masculine principle and the dominance of the disembodied ego. These messages from the personal and collective body-psyche beg to be heard, not as manifestations of psychosomatic symptoms, or of personal neuroses, but as descriptions of the soul's suffering both personally and collectively.

In work with many women and men during these last years, I have seen how they have been forced from within by their own dreams and fantasies and the unconscious needs of their bodies to re-examine the value-system in which we have all been raised. Furthermore, as the feminine aspects emerge, the language of psychology is inadequate to explain or express the changes in inner and outer worlds. Our language has become as impoverished as our hearts and souls. The language, which we have all been taught, is the language of the disembodied ego - abstract, rational, scientific and above all impersonal and unemotional. It divides, separates and categorizes us and is descriptive of logical and mechanical causation, not of relationship. There are no words - no metaphors - to express the mystery of life, which is woven into the complexities and interrelationships that exist within and between human beings and the natural world they inhabit. We have been slow to realize that this language was formulated by and is the expression of an ego, which had separated itself from the body. We have also been deluded by centuries of rational, scientific thought into believing that it is the only language that has validity. We have long been taught that reason is the guiding authority and that only the mind thinks. We have forgotten the speech of the heart, which is imaginative and poetic, and have lost faith in the language of the body, which circulates through every cell.

Eric Neumann tell us in The Origin and History of Consciousness (p.310) that

the development of ego-consciousness is paralleled by a tendency to make itself independent of the body. This tendency finds its most obvious expression in masculine asceticism, world negation, mortification of the body and hatred of women ... (and the point of the struggle against the body and the feminine) was to strengthen the ego's stability, the will, and the higher (i.e. Spiritual) masculinity, and to establish a conscious sense of superiority over the body.

Those words of Neumann's offer an exact definition for and description of the term disembodied ego that I have been using. It seems necessary to me that we realize (1) that during the third Millennium BC it was the development of this disembodied ego-consciousness which fostered the rise of the Patriarchy, (2) that well before the writing of the Hebrew Bible, in a process which required some 2,500 years the values of the patriarchy had become well established and (3) that the Hebrew Bible crystallizes, codifies and records those established sustaining beliefs of the patriarchy that: a male God created the world, humans have the right to dominate nature, and men have the right to dominate women.

It was inevitable that during centuries of rule by the patriarchy those beliefs would become accepted as natural and unassailable. However, if we accept the premise that the strivings of the body-psyche are toward wholeness, it seems just as inevitable that eventually the one-sidedness of such a belief system and the culture which has been built upon it would demand a reversal, and that the energy and power of the repressed feminine would eventually attempt to reassert itself.

Our power ridden, materialistic western culture and the ecological fragility of the planet on which we live bear witness to the "success" of the dominance of masculine ego-consciousness. It seems that it has taken the extremity of our outer world situation and our inner-world distress to bring us to our senses, to our bodies, and to the unconscious dimensions of our psyches where the Goddess still dwells and where she waits to lead us back into a connection with the feminine side of ourselves. This renewal of feminine energy is needed in the world today to balance the masculine forces, which have led us to the verge of self and other destruction. I believe that we have reached the point which Eric Neumann spoke about 50 years ago when he wrote, "Only in later periods of development when patriarchy has fulfilled itself or gone to absurd lengths, losing its connection with Mother Earth does individuation bring about a reversal" (The Moon and Matriarchal Consciousness, p. 60). Certainly this reversal is only beginning to make its way into consciousness but as the destructive values of the patriarchal system continue to be lived out in their extremity - such as we have witnessed in Kuwait and Iraq and in Eastern Europe, Africa and other parts of the world - the need for the regenerative power of the repressed feminine will assume more and more urgency.

I am not advocating a return to the "Great Mother" - or to some matrilineal or matrilocal pattern of society - that would be neither possible nor desirable. I am suggesting that we need to find a balance between the masculine and feminine forces within and support that balance in the outer world. We need to acknowledge that we are divided internally as well as externally. Until each of us finds his or her own way of uniting the feminine and masculine elements within, the outer world will continue to be the battlefield upon which we enact our inner dilemma. It seems to me that we are again at one of those points in time when the voice of the repressed feminine is rising above a whisper. The future of civilization may well depend upon whether we listen to it, focus our attention on it and amplify it - or whether we continue to follow the din of the well known voice of masculine consciousness, which preaches power over others and backs up its demands with threats of violence backed by megatons of nuclear energy which can destroy us and lay waste to the planet which has nurtured us.

Now what, if anything, does all that I have said before about the feminine and soul - about prehistoric partnership societies and their overthrow by patriarchal dominance - have to do with the practice of body-psychotherapy today? First, I believe that we can gain new perspectives on our lives and our work if we attend to our own souls by befriending our bodies and the feminine in ourselves. Second, we have been so conditioned by the values of the patriarchy and the dominance of the disembodied ego that it is extremely difficult for us to see them for what they are - to see that they are parodies of our human possibilities. Third, we need new insights and information, such as those provided by recent archeological evidence, to stimulate our creative imagination and to confront our established ways of thinking and being. And fourth, we need new images and understandings of the body-psyche connection with which we all work. I do not believe that they will be found only by our refining and re-defining the concepts of EGO-psychology, which we inherited from Freud, Reich and Lowen.

The threat of global destruction that has brought questions of soul into consciousness, and the growing concern for the repressed aspects of the feminine in men and women, indicate that psychological consciousness is changing. Yet much of the language of psychology, psychiatry and psychotherapy which was developed during the 19<sup>th</sup> century by medical doctors and academic psychologists schooled in the diagnosis and treatment of disease remains the same. As Hillman points out in The Myth of Analysis, the words we use tend to become reified, giving us some kind of security that there are things to which those words refer. In using diagnostic categories - whether they come from the classic psychiatric model or from the character-muscular typology of Reich and Lowen - we make judgments about people from the outside and classify them according to what we call their disorders. Then we attempt to "cure" them of whatever illness we have conferred upon them. That reminds me of a very old joke - a famous psychiatrist was asked how long it took him to "cure" a patient. He was silent for a few moments and then replied, "Well, it depends on the "case", I'm very fast in "curing" schizoids but sometimes it takes a long time to make them into schizoids before I can cure them."

The language of diagnostic categories - of labeling, treating and curing what has been named - has been an anathema to me. Furthermore, in my 18 years of practice as an organismic psychotherapist I have found no justification for using these diagnostic categories to describe the soul suffering of the students and clients who

have come to work with us. On this point of diagnoses, Malcolm Brown's concept of the "Four Dynamic Being Centers of the Embodied Soul" and his theory of armoring - which bears little resemblance to Reich's - provides a much more fruitful approach to understanding the interpenetration and interdependence of body-psyche phenomena than do the character-muscular typologies of Reich and Lowen. The writings of Jung were support for my strong intuitive feeling that the abstractions of diagnostic categories obscure more of the individual than they reveal. Jung was concerned with Soul and, in contrast to his contemporaries, he steadfastly refused to provide a systematic theory of neurosis, descriptions of the etiology, or prescriptions for treatment. While others criticize him for this "lack", I feel indebted to his point of view.

I believe neurotic classifications are based on outwardly observable, classifiable behavioral acts, and in using them, we reduce the individual to the categories of behavior, such as oral, hysteric, masochistic, compulsive or whatever. Then, as therapists, we attempt to change the outward behavior to effect a "cure." This may give us some false sense of security - some belief that we know what we are doing - but it may also blind us to the fact that the individual differences, the unique qualities or quirks which distinguish one individual from every other individual, are overlooked and unsupported and the needs of the Soul which brought the individual into therapy in the first place remain unmet. When clients come to us they are searching for someone who understands their suffering. If we meet them from the outside - from our analytical, rational ego-consciousness - they will feel that they have not been seen or heard. On the other hand, if we meet them from our inside - from our embodied souls rather than as authority figures who "know what's wrong with them and how to fix it" - we may instead communicate our willingness to accompany them on their journey inward, to the unknown parts of the psyche, and downward into the depths and mysteries of the body which has been plundered, desecrated, and subjugated by the demands of the ego and the will.

Now it may well take a leap of faith - faith in ourselves rather than in theories - for us to trust and work from our embodied souls rather than from the rational ego, which we have been taught, to believe has all the answers. To make this leap toward soul-connection with the other we must be willing to leave our theories in the background and work phenomenologically, moment by moment.

Even to want to work in this way assumes that we have discovered - from our own journey inward and downward - the necessity for bringing the needs of the vegetative or autonomic nervous system into awareness before there is any possibility of challenging the power of the rational ego and the will which are the products of the dominant cerebrospinal circuits in combination with the voluntary musculature. In other words, if we have discovered and learned to trust the balancing power of the slower, more quietly pervasive energy flow which emanates from our endodermal depths we will understand the necessity for helping our clients - male and female - to sense, by experiencing moment-to-moment in the sessions, the immediacy of the body and the workings of the autonomic nervous system upon which the endodermal flow is dependent. Our focus as therapists then will be on supporting the client's growing awareness of and trust in his or her body-psyche processes as the locus of inner authority. In so doing, we help the client embody the ego and establish the inner authority which either had no chance to develop, or was lost, as the mother and family began to over-ride the primary needs and feelings of the infant or young child with ideas and ideals, i.e., mental constructs about how he or she should be. In order to survive and to feel loved, the child had to learn to control the instinctual impulses from within in order to adapt to the demands of internal feelings and sensations which would eventually separate him or her from the "here and now" experience of the unity of the body-psyche.

We now know that even in utero the fetus receives and reacts to many sensory stimuli, and during the first weeks after birth the neonate's experiences are primarily sensory. Through the sensations which stream through the organism the embryo or infant gains a sense of whether or not the environment is loving or hostile; of whether or not he or she is welcome in the world. As many of you know from your own personal experience, or from your clients, early woundedness stems from the sense of being unwanted even in utero, and/or unloved as an infant or child. It is in this earliest period of life that the stage is set for the separation between intellectual and sensory experiencing - the mind-body split which is so devastatingly pronounced in our Western culture. That we are seeing more of it in our clients today is not due to our being more aware of the signs which point to it, but to the fact that it is more prevalent because the mind-body split has been growing for centuries. With each succeeding generation, girls and women, became increasingly identified with the dominant masculine consciousness and further alienated from their instinctual feminine roots, from their senses and their inner authority. Having lost respect for their own bodies there was little chance they could love the bodies of their children - particularly their daughters whose bodies were and are so like their own. I am not interested in blaming, but in understanding how this state of alienation evolved and how we as body-psychotherapists can help to correct it. In this endeavor, the autonomic nervous system is our ally and restoring its functions to their rightful place in the organism is necessary.

The autonomic nervous system is particularly vulnerable in the psychophysical development process. This may be due to the fact that sensations from the visceral organs and the involuntary muscular system are often unclear and poorly organized, and the impulses from them often do not reach consciousness. When all parts of the organism are functioning harmoniously, there is no need for those sensations to come into consciousness.

However, when the closed cerebro-spinal system is dominant, it is necessary to awaken the conscious awareness of these sensations before the ego will be willing to accept the proposition that there are other factors at work in the organism that will enhance and enlarge its boundaries. Experience with many of our clients and students has shown that they seldom appreciate the importance of the autonomic nervous system and the many subtle ways in which both of its divisions - sympathetic and parasympathetic - have been overruled by the disembodied ego.

One of our most basic needs as human beings is for connection and relationship with others. As Jung pointed out many years ago, it is the

nervous system that for ages has been known as the 'sympathetic' ... (which) though functioning without sense organs ... maintains the balance of life and, through the mysterious paths of sympathetic excitation, not only gives us knowledge of the innermost life of other beings but also has an inner effect upon them. In this sense it is an extremely collective system, the operative basis of all participation mystique, ... (Jung, 1934. C.W. 9ii41).

In our zeal to be "scientific" we may have overlooked the importance of the phenomenon of the participation mystique. Our tendency has been to see projection, transference and counter-transference as psychic processes, seemingly forgetting that they have bodily components as well. I am raising the possibility that it is through the "mysterious paths of sympathetic excitation" that the organism inherently senses whether another individual or situation is potentially positive or negative. And furthermore, we as therapists might benefit from the working assumption that the positive or negative projections and transferences of the client reflect the client's unconscious bodily perceptions of our unconscious embodied responses to them which all of our mentalized "good intentions" toward them cannot hide. When the emanations from a more or less "alien other" are not "sympathetic" it is the same system which governs the flight or fight responses in the organism. As we know from our own personal experiences and from our clients, this relational response to others has been severely hampered by parental and societal injunctions against either responding to the overtures of "strangers" or expressing spontaneously the anger or fear we feel in their presence. We have also been taught to deny physical or psychological pain and to repress our reaction to it. All of these superimposed learnings have taught us to distrust and deny our internal feelings and responses. The way in which those injunctions were enforced and reinforced by the parents and society encouraged the child to enlist the aid of the cortex and the voluntary musculature in his or her battle against the expression of those instinctual responses. By the time adulthood has been reached, the impulses from within, and the awareness of their messages will have become so weakened that in all but the most extreme circumstances they will not reach conscious awareness in the moment.

The parasympathetic division, which operates principally during periods of rest to ensure the functioning of the restorative processes and the energy replenishment necessary to the organism, suffers also. When the egoic demands for social power and economic success result in overwork and continuous cortical activity, the natural energy resources of the organism, which are dependent upon rest and inactivity for replenishment, become depleted. Then, adrenaline must provide the fuel whereby the excessive egoic demands are fulfilled.

It is the autonomic nervous system which regulates the involuntary activities of the visceral organs to the heart, blood vessels, respiratory organs, alimentary canal, kidneys, bladder, reproductive organs, endocrine glands, etc. There are many intricate processes involved in the functions of these organs, and the movement and regulation of the fluids or secretions, which they produce, are dependent upon the proper functioning of, and the balance between, both the sympathetic and parasympathetic divisions. Even though the activities of the autonomic nervous system are involuntary, this system does not operate separately and independently of the central nervous system. Control is exercised over it by centers in the brain, in particular the cerebral cortex, the hypothalamus and the medulla oblongata. When the demands of the cerebralized ego are excessive, the control of the central nervous system over the autonomic constricts the fluid energy flow throughout the organism leading to stasis and dysfunction in various parts.

Re-establishing the balance between the two divisions of the autonomic nervous system as well as between the central, peripheral and autonomic nervous systems is basic to the harmony and vitality of the organism. It is the revitalization of the fluid energy flow within which will serve to dissolve the armoring and unite those parts of the body-psyche which have been isolated from awareness by the disembodied ego.

I have given time to the autonomic nervous system for two reasons. One comes from my concern with the over emphasis on "building ego" and "breaking down character-muscular armoring" which has characterized the body-psychotherapy movement. When those are the goals of the therapeutic endeavor, we tend to disregard and under evaluate the natural healing capacities within the client's body-psyche and work from the outside to bring about what can only be brought about from the inside by the client. Whereas if we recognize the importance of the autonomic nervous system to the energy-economy of the human organism, we will realize that restoring its full function in the organism is basic to any enduring change in the client's body-psyche. The second reason stems from my conviction that the autonomic nervous system and the feminine aspects of our beings are inseparably interconnected. They are not complementary; they are the two sides of the same body-psyche phenomena. What

is experienced as literal and material in organic functions is experienced as image and symbol in psychic functions, and whether we speak with our hands or voices we address both at the same time. Their functions and their fate are important to our wholeness as human beings regardless of our sex. However we may approach them, we find that both are hidden, mysterious and vulnerable; both have been repressed by the demands of the patriarchal ego; both require our awareness of their existence and attention to their needs before they can exert their positive influence in our lives; and both are available to all of us - men and women.

In attending to the autonomic nervous system and nurturing the endodermal flow we are nurturing the feminine dimensions in ourselves and in our clients, and, in essence, building Soul.

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#### Biography

**Katherine Brown** holds an M.A. in Psychology from Antioch College, San Francisco. She was with Malcolm Brown, Ph.D., her husband and professional colleague, the Co-Director of the European Institute of Organismic Psychotherapy from 1977 to 1994. She co-directed with Malcolm at the Institute's location in northern Italy long-term training groups and individual treatment/training sessions with European professionals from many different countries. As the present Co-Director of the USA Organismic Psychotherapy Training Institute, which is located in Atlanta, Georgia, she co-leads training programs in Germany, Italy, and Denmark seven months out of each year.

# Common Threads: Stories of Life After Trauma

Marcel A. Duclos, M.Th., M.Ed. and Connie Robillard, MA

## Abstract

In this article, a girl and a boy who grow up to become body-focused psychotherapists reveal the inner experience of their personal world. The common threads of trauma and recovery are woven into the ethics of self-care. The reader is first introduced to their adult voices, and is then led to reflect upon the implications of two of their respective childhood stories. Without the use of formal and clinical language, the article invites the reader to self-assess the implications of abuse and trauma in the conduct of body-psychotherapy.

## Keywords

Common threads - Stories of life after trauma

## The Weaving of Common Threads - The Authors Speak:

As therapists we look at clients from the outside. We note their movements, gestures, and stance. The body, the voice and breath are all-important pieces of the person. We listen and we observe as we are invited along on the client's unique journey. Over time the landscape of the inner world is revealed to us and to them.

We began work on a project about trauma's repetitive themes. Early on, we made a decision not to write about specific clients, other than to give tribute to their courage. The project became an ethical exercise and a practice in self-care. Much of this material came from our dreams and creativity and even more was stored in the body: noticed by way of sensory response to external stimuli, of static muscular contraction in spite of present safety, of manifest symptoms of anxiety, stress and depression. As we committed ourselves to the work, the images and words emerged from within each of us as creative energy unbinding fetters of old. We did the work that we ask of our clients. We documented dreams, journaled, painted pictures, monitored breath and musculature, and wrote poetry. From deep within us, words to express the inner stories of life after trauma seemed to flow and come together.

Between us we have over a half-century of experience as therapists who have worked in the field of trauma. During those years we also have been clients, supervisors, supervisees and educators. For more than a year, we observed our world from the inside and brought our findings into the open on paper. This is our inner world offered as phenomena from the soul. It is our belief that these writings have meaning beyond us as individuals because the common themes of life, trauma and healing speak to everybody. We bring our backgrounds in psychodynamic, relational, cognitive-behavioral, expressive, and somatic psychotherapy to our work with those who seek to create order out of the chaos of trauma. We also reveal and trace, in non-clinical language and imagery, the interplay of wounding and healing. In the first two brief vignettes, each introduced by a poem, we give witness to the common threads that weave in and out of the inner world of clients and therapists.

Who, among body psychotherapy practitioners, will not recognize, as intimately familiar in their own consultation room, the voice of the adult survivor of childhood abuse in *Unspoken Words to the Therapist* and the *Musings of the Therapist in Next Week*? This is the prime material of the case conference, the consultation, and clinical supervision.

Without naming the dynamics, the character defenses, the family structures and systems, the cognitive and behavioral patterns, and the somatic markers, the reader will discern the tides that move the inner oceans of client and therapist to the shores of both their worlds.

## The Girl's Adult Voice

### SECRETS

The breeze whispers secrets in my hair  
braiding darkness and light  
weaving joy with sorrow  
repeating patterns  
chaining moments  
securely knotting  
common threads  
into the fabric  
of life

## UNSPOKEN WORDS TO THE THERAPIST

It does not matter to me what college you graduated from, what grades you received or how many books you have read. Be on notice: your professors did not prepare you for this experience. I have no interest in where you have been, what you have done or who you know. Are you trustworthy? That matters. It does not matter to me if you are male, female, young or old. Are you able to listen and hear what I am saying? Are you able to hear the unspeakable? Are you able to hear what is not said? Are you able to bear witness to frozen, un-cried tears?

Can you find beauty in them as they melt and flood our space? Can you sit with me when I want to scream about the injustices in my life? Or will you cower and wilt into a corner? Do you have the stomach for horror? Are you able to believe the unbelievable? Or will your body shudder, turn in on itself and pull away? As I walk through the still-burning fires of my life, will you walk along side me? Or are you going to shrink back into cool safety and let me burn alone? My pain did not start yesterday. Therefore it is not going away tomorrow. Can you stay for the long haul or will you retreat and abandon me when it takes too long or the work gets too hard?

Once I dare to share my secrets, work respectfully and with kindness. After our hour together is over, remember that I take this pain home with me. Are you there for me between sessions or am I on my own, once the door shuts behind me? Even when I tell you I can do the work without you, do not believe it for a minute. Those are old defenses talking. You will become my lifeline and I will be too embarrassed to tell you. I will push you away and invite you too close. Do you have integrity? Eventually, I will love you. Can you handle it with grace or will you run to your place of psychological safety, hide behind a book on transference and quake in your shoes?

I do not want to sign on with a "head" person. I choose to work with a whole person, a person who is in touch with the feelings of body, mind and spirit. That is the type of guide I will need as I attempt to reconnect with myself. I do not want perfection. If you have cracks, wounds and tears inside you, maybe it will be easier for you to understand mine.

Think carefully before signing on for this trek. It is a long, rough road. We may have to handcraft tools in the valleys, rejoice together on the slopes. We may or may not reach the mountaintop. There are lessons that we will learn together. Can you humble yourself enough to admit your mistakes? Are you able to be the student as well as the teacher?

Are you able to learn and grow with me, or are you a "done deal?" This journey is not for the faint of heart. It takes strength, courage, commitment, resolution, ingenuity, and creativity; and, yes, it takes love. Do you have it?

### The Boy's Adult Voice

#### ON YOUR MARK

how little in life  
is planned  
and yet  
in the end  
the story  
appears

#### NEXT WEEK

"Same time next week?"

"Yes. I will be here," she whispers, wiping tears, gathering tissues together and emptying them into the basket by the door.

"Are you ok," I ask?

"Yes," she answers attempting a smile. Her eyes, swollen and red, barely meet mine as she reaches for the doorknob.

"Drive slowly. Please?"

Without acknowledging my words she closes the door behind her. I hear her steps fading down the stairs. The outside door bangs shut. Tonight she has had the courage to talk about the sexual torture that she experienced as a four-year-old. This is not the first time that she reveals her story of atrocious abuse. She speaks it. She writes it. She draws it. And the pain cries out from her body. In her dreams, she relives the horror. She screams at shadows that barely move within her mind. Her life is full of places where the man who hurt her still holds her in his grip. She struggles to breathe; panics in the dark; fears being alone and avoids

interactions with strangers. This is the reality of living with the aftermath of abuse, which until now has simmered away like a teakettle on a stove.

I purposely sit in the rocking chair where she sat. I feel my head touch its back. I slip off my shoes and loosen my tie. I take a deep cleansing breath and experience my own weariness. It has been a very long day.

'Oh, God, such a hard session.' I feel myself wince.

Was I any help to her tonight? She still hurts after all these years. I am amazed at the shelf life of terror. She carries within her frozen images in the form of pictures, sounds, and smells that are as fresh as yesterday. She thinks she is crazy, but it is the body's reaction to trauma that she experiences. My eyes feel tired as if they want to shut with a tiredness that weighs down my mind and body.

Thoughts of my four-year-old daughter come to me in a daydream: the bedtime story she loved so much, Little Red Riding Hood. I told it to her hundreds of times. I knew all of the lines. I acted out the sound of the wolf, just to hear her laugh. I see her red hair sparkling on the pillow: the halo of an angel. I can't miss the smell of crisp sheets, the innocence of her pink room, her giggles and ploys to keep me with her longer. I hear her voice echo, bringing me back in time to her fourth birthday, long ago. It was I who had the privilege of tucking her into bed that night.

"Daddy, where was I before I was born?"

What is it that my daughter remembers that I have forgotten? How might I respond that would match her wisdom? She looks up at me, certain that her father knows the answer she holds behind her deep blue eyes.

"You were in the mind of God."

She smiles knowingly, "Yes, God, Daddy."

I kiss her forehead. "Good night four-year-old."

She snuggles into her blankets holding her favorite panda bear, her eyes half closed.

What a messenger of truth, I smile to myself as I head for the door.

She lifts her head. "Leave the light on Daddy."

"Yes, I will. Sweet dreams."

I leave the light on in the hall. I leave the door ajar. I want to be sure that she can see the sliver of light that reaches to the head of her bed.

Comfort. It belongs to grown-ups to comfort the children. Children do not belong to us. We belong to them.

In the distance, the sound of a train whistle brings me back to the present. My mind returns to the business of the therapy office and to the client who is driving home, alone, in the dark, early this winter evening. How could anyone, let alone a relative, so hurt a child? Where inside a man does he find pleasurable the repeated sexual torture of a child? My teeth and fists clench. I feel and give vent to the anger that this patient has not yet been able to express. I do so with utmost consciousness.

Enough energy returns and I move to my desk to finish the paperwork, promising myself an end to this day. If I just get this done, I can go home. I write the note and close the file. I shut off each lamp, bundle myself into my coat and lock the office door behind me. Snow is falling, silently making a patchwork blanket of the parking lot. It spreads beneath my feet as I walk. A quick sweep of my arm clears the windshield. I drive home with the radio turned up loud enough to drown out the day's residual thoughts. I crack my window open and enjoy the cold air blowing on my face. I surprise myself by noticing that I look forward to a cup of hot Ovaltine before I go to sleep. I find my own four-year-old yearning for comfort.

## Reflection

Sadly, abuse occurs in families and affects them into the next generations. Abuse perpetuates itself in secrecy and by untruths. Abuse is the fertile ground of false beliefs about self and others. It generates the chaos of a black hole, sucking the family's energy like a vampire. It is a tyrant that demands unwavering compliance of its subject. It is a jailer that chokes its prisoner into voiceless submission. It is a terrorist whose only identity is the domination of the other under the guise of some righteous privilege.

Years after the events, the residuals remain to be faced and metabolized, often into the adult years as portrayed above.

## From the Children's World

In the following stories we witness the abusive experience, first, from the pre-school girl's, and then from the middle school boy's inner world. We observe their confusion and pain as they attempt to make meaning and survive in a violated body.

## The Girl

## THE RABBIT BARN

"Time for supper. Time for supper, where are you? Get in here!"

Time to go. Oh, no, it is time to go...

Mud clings to my hair. Wet, heavy, clumps hit my back as I walk slowly home. I feel the shivers in every step. One foot behind the other, I take tiny steps. I feel the tears cleaning the mud from my face as I try not to cry. Everything is dripping: my hair, my eyes, my nose. I wipe my face on my arm and pull my tears back inside me. My feet don't make any sound as I climb the steps to open the door without one bit of noise. "Be very quiet," I whisper. The dog wags her tail and leads me into the room.

People are sitting all around the table. Chowder for supper, hot soupy chowder. I choose a seat close to the door. I climb up the side of the chair. My feet dangle over the edge. I stretch them out until my toes touch the dog. I wiggle down to feel her head - sliding under the table to be with her. My dog is better than soup. Her fur feels good and I like the way she smells. Dogs are better than people.

"Sit up and eat. Get up off the floor. What is the matter with you?"

Ma is mad. Tears come into my eyes. I don't want soup. I want my dog. I want to be down here with my dog and not up there with the people and the soup. I wipe my face on my dress so no one will see me cry. I feel my arm being pulled up by my mother and my bottom hits the chair seat hard. I check to see that my toes still touch my dog's head and wipe at the new tears.

I see my uncle's hand, big and heavy, lifting a soup spoon up and out of sight. He's here, he's here, don't look at him. His big hand lifting the soup spoon up and down is all I can see. I promise myself not to look at his face.

He is looking at me and he won't stop!

A lump, as big as a rock, comes into my throat. I can't breathe. I have got to get outside. Sliding down from the chair, I hear my feet hit the floor. I can't feel my feet walk to the door. Outside, the air is cool as I run up the stairs to the rabbit barn to be alone. In the dark, the floor creaks. I hear footsteps and I know he is already here.

"Do not scream," he whispers, "Do not make a sound or a move, you hear me?"

I am cold and shivering. I have no space to move. My body is being held down too tight. I shake my head "yes", just a tiny bit. I want him to know that I am being good.

"Please don't hurt me. I want my Mama." I say it nicely, so that maybe he will hear me and stop. He doesn't hear me. I wonder if I even said it. I shake from the cold and cannot stop. My teeth rattle with all my bones. I try to hold my body still and be good. When I feel so cold, it is hard to do. I try to be still. I move my knees up so my feet are flat on the floor, to try to stop my knees from shaking. It is the wrong thing to do and he slaps me on the leg and pushes my knees down with his body. He takes my face in one hand, squeezes it hard. He whispers loud like he is mad: "Stop it, you hear me?" He puts his face too close to mine. I feel the slime from the barn floor under my body. I smell his breath and I gag.

My body is going to throw up and I can't stop it from happening. He slaps me again and this time I can't remember feeling sick. The unlit light overhead sways back and forth. I hear it move in the dark. I feel like I am going to die. Pain rips through my body and roars in my ears. It takes away the smells, the swaying light and the sounds of him. I turn my head to find air, to look for someone to help me.

I see the rabbit cage. The rabbit's eyes glow in the dark. I look into the eyes of the big gray rabbit; find the center of her eye. Everything is black and moving backwards like I am in a tunnel. I fly away to a darkness that I know, a darkness where I don't feel anything.

Limp and dirty I wake up under the table with my dog. Someone must have brought me here. I am too tired to move. I just want to sleep. I pull my dress down over my feet to keep warm, curl up in a ball and drift away.

## The Boy

## BICYCLE

"Trouble with your bike?" Bailey's voice asks. Bailey, a six-foot two hundred pound hulk, stands behind me. We both stare at the broken bike.

"Yea. The chain is caught," I answer, embarrassed that, at nine years old, I am not able to fix it by myself.

"Looks like this bike went through a war," Bailey says, still staring down at the bike.

"It belonged to Jimmy. I bought it for ten bucks. Going to use it for my paper route."

Bailey walks up toward the porch and gives the bike a critical eye. The whole street knows he enlisted in the Marines the day after graduation from high school. I remember hearing a neighbor who fought in WW II say that he would make a nasty soldier. Silently, I agree with the neighbor. I once saw Bailey beat his dog until the dog

threw up. Peter and I saw it through the trees in the woods at the edge of the field near Bailey's house. I wanted to throw up right along with the dog.

"Bring it over to my garage after lunch and I'll fix it for you," Bailey says, interrupting my thoughts.

I remember running away with Peter, as fast as we could, that afternoon. I felt so bad for the dog but we were too scared to show ourselves to a fellow who liked to shoot birds, squirrels and rabbits in the woods by the river, then throw them away and brag about it. Old Mr. Peterson, who lives next door, says no one had the right to shoot an animal if they did not intend to eat it.

"Did you hear what I said, kid?" Bailey asks as he walks away.

"Yea, I heard you," I reply, my thoughts safely tucked inside.

"Great. See you after lunch."

"OK."

I lean my bike against the fence. My two kid brothers are in the back yard feeding clover flowers to my two gray bunnies. I am proud of the cage that I built by myself. Both Mr. Peterson and my father said I did a good job with the second hand stuff I used.

"Come in for lunch, boys," Mom calls out the kitchen window. The afternoon ritual is always the same during the summer: naps for mother and the little boys and free time for me without the bothersome tag-a-longs.

The bike is heavy. The rear wheel is stuck in place. I push and lift the bike down the driveway, across the street, and then hold it back as it slides on the sand by the side of the road all the way to Bailey's house and to the garage around the back, underneath the house. I stop for a minute. I can't see very well what's in the garage, because the door is in the shadow.

"So you came, kid," I hear Bailey say from somewhere in the garage. "Bring your bike in. Leave it by the work bench and come on back here first."

I can see the top of Bailey's head. He is sitting in a canvas lawn chair like the one my Aunt Celeste likes the best on the shade side of the farmhouse. It seems strange to me that the chair is not facing out to look at the fields, the woods and the river on such a bright sunny day.

"Get over here if you want me to fix your bike. I don't have all day."

As I step to the side of the chair, a hand flies out at me and grabs me by the shoulder and slams me to my knees.

"Suck this and I'll fix your bike."

At eye level, it is so big it reminds me of Uncle Frank's brown horse. When I was little, I was afraid of that horse but I used to look when the horse peed. He had such a big penis.

"Never saw anything like this before, did ya," he says pushing my chin down on his leg.

"Let go of me," I say, my words muffled behind clenched teeth, hardly able to breathe.

I feel like a little animal frozen in place by the stare of a serpent glistening before my eyes.

"I can't wait much longer," Bailey growls, running his fingers up and down this thing as big as my wrist. I can see what looks like hand lotion dripping from the one eyed monster.

"Put it in your mouth. Now."

"I don't want to." Fingers dig deeper into my shoulders and press my face down in the unbuttoned lap.

"Lick it."

"No! Let go of me." I say, tasting the salty tears at the corners of my mouth. I manage to free my arms and struggle to

push away: one hand on Bailey's hip and the other blindly around the throbbing pole leaning against my forehead.

"Rub it up and down or I'll break your arm."

"No! Let go of me," I shout through my sobs.

Without warning, my hand and face are wet. Something else mingles with my tears. For an instant everything stops and then Bailey slumps in the chair and lets go of me. As if slapped in the face, I jump up and make for the open garage door.

"You tell anybody and guess what I'll do to your sister," Bailey yells after me.

Running at full speed, I jump the three-foot-high stone wall at the edge of the lawn. I don't know if I am making any sound crying my eyes out as I make it straight down the field, through the wood and to the river. I hate the smell and the mess in my hair, on my cheeks and on my hand. I can't get to the river fast enough. The sun is now over the treetops on the hill across the river. I take the long way back to my house by the hiking trail behind Mr. Patten's big house, all the way to the old train tracks, alongside Dad's garden in my back yard. I know I've been at the river for a while; but I can't seem to remember how long. On this hot summer day, I walk feeling the sun on my back. I'm not shivering anymore. I hold my wet tee shirt in my hand. It's a mess because I soaked it in the murky river water to wash my face and hands. I know Mom has been calling for me. She will want to know why it took me so long to get my bike fixed. I know I kept my hand on it much longer because ... because I thought of the brown horse and ... and ... it felt like electricity was going right through me.

From the garden gate, I can see my bike in the driveway by my mother's flower garden.

"Where have you been and why did you leave your bike out front?" Mom asks out the kitchen window. She is as predictable as the chimes of grandma's clock on the quarter hour. "I've been worried. It's almost four-thirty."

"I went to the river to look for frogs for the street race on Saturday. I'm sorry I didn't wait to ask you."

"You disobeyed me. You know you are not to go to the river alone. Put away your bike. Then come in and go to your room until I call you for supper."

I'm glad to go to my room. I don't want to talk to anybody. I'm angry that he fixed my bike. I never want to see Bailey again. I don't want anybody to know what happened. Tomorrow is Saturday, the day to go to confession. How can I possibly tell Father Robert that I committed an impure touch like that? I knew Bailey was bad. I went to his house because I wanted to ride that stupid bike. I hate that bike. I'm never going to ride it again. I'm going to wreck it. I never want to touch it again. I want to tell Dad what happened, but Bailey is too big and too mean. He'll beat up Dad. Dad can't move his left arm because of his bursitis thing. That's not fair. And, besides, Bailey said he would hurt Tess. I hope Bailey gets killed in the war.

I kick the bedroom door shut, jump on my bed and pound the comforter with my fists.

"I don't care," I shout in the pillow.

"I heard you slam that door," Mom says from the bottom of the stairs. "And what do you mean you don't care? I heard that. You are a bad example to your younger brothers. Open the door and keep it open."

I open the door.

"OK Mom," I sigh out loud.

Back on my bed, staring at the ceiling, I think, "I can never tell her. I can never tell anyone. ...except God. God knows everything. God knows everything even before it happens. Then, why did He let it happen?"

## Reflection

Abuse, under all of its guises, is a demon intent on killing the individual and the creative life. As an expression of hate, it inflicts the wounds of trauma. Love, as a healing antidote, sutures the wounds and soothes the scars. Years after the traumatic events, the residuals of trauma continue to live within the body, stored and active in the hardwiring, reaching the far regions of the organism's boundaries, affecting thought, feeling and actions in everyday life. Body psychotherapy, in all of its incarnations, when practiced in the service of love, invites a fuller expression of the true self in psychosomatic fashion: revealing secrets, exposing pain, purging false beliefs, and daring self-directed creativity, thawing the frozen flesh, building flexible strength and paving the royal road to the whole story of the person.

As body psychotherapists, we know that it is inside the client's refined story, stored in and revealed by the body, that we are able to touch the pain in ways that return a measure of peace to the whole person. Without entry into the inner world, the client continues to repeat the patterns created by the effects of trauma and abuse. The gate to the inner story is at the intersection where the client and the therapist engage their creative selves, for the purpose of healing mind, body and spirit.

The gate is the full therapeutic engagement of the body, according to one's modality, with the body of the other who goes by the name of client, or patient, or consumer, who is actively committed to the quest of the incarnated Self.

This article contains excerpts from the forthcoming book, Common Threads: Stories of Life After Trauma, to be published by XLibris.

## Biography

**Connie Robillard, MA, NCC, CCMHC**, is a nationally certified clinical mental health counselor and a licensed psychotherapist. She has taught at New Hampshire Technical Institute in Nashua, NH. She has worked as a counselor for local social service agencies in NH. Connie is in private practice in Londonderry, NH.

**Marcel A. Duclos, M.Th., M.Ed.**, is a nationally certified clinical mental health counselor and a licensed alcohol and drug counselor and supervisor who has been in private practice for twenty-five years. He is a certified Core Energetic therapist. He has taught and lectured in the United States and abroad. He is in private practice in Concord, NH.

The authors can be reached at [www.thebookcommonthreads.com](http://www.thebookcommonthreads.com).

# Recent Body-Centered Publications Based on the Psychology of C. G. Jung

Aline LaPierre, Psy.D.

## ABSTRACT

This review presents nine body-centered Jungian-based publications addressing four important themes that are in the foreground of body symbolism: 1) the body in archetypal symbolism, 2) the body as intuitive sacred ground, 3) the body as repository for unarticulated feelings, and 4) illness as metaphorical source of insight motivating the individuation journey. Books are reviewed to succinctly expose their core ideas and relevant Jungian concepts are explained so that the reader who is unfamiliar with Jungian approaches can become more conversant in Jungian theory.

## Keywords

Body symbolism - Jungian - Recent body-centered publications based on the psychology of Carl Jung

*The body-centered Jungian books presented in this review were chosen from a list compiled by the helpful staff at the bookstore of the C.G. Jung Institute in Los Angeles. Many Jungian body-centered books were written in the 1980s, a very few in the 1990s, with a revival of activity in the past 5 years. This review, though not exhaustive, focuses on recent publications of the past 5 years but includes three important books from the 1990s which offer timeless archetypal images.*

From a Jungian somatic perspective, the dream is an important window into the body. It is widely used to access *body symbolism*, a term noting the process of translating into an image something physiological or pathological taking place in the body. Since the early body-centered classics of Jungian literature such as Marion Woodman's *The Owl Was a Baker's Daughter* (1980), *Addiction to Perfection* (1982), *The Pregnant Virgin* (1985), Albert Khreinheder's *Body and Soul* (1985), Eugene Gendlin's *Let Your Body Interpret Your Dreams* (1986), Arnold Mindell's *Working with the Dreaming Body* (1985) which lay the foundation to body symbolism, body-centered themes have matured. This review addresses four important themes that have come to the foreground: 1) the body in archetypal symbolism, 2) the body as intuitive sacred ground, 3) the body as repository for unarticulated feelings, and 4) illness as a metaphorical source of insight motivating the individuation journey.

## THE BODY IN ARCHETYPAL SYMBOLISM

*...I wished to see  
the way in which our human effigy  
suited the circle and found place in it—  
and my own wings were far too weak for that.  
—Dante*

**The Body: An Encyclopedia of Archetypal Symbolism**, by George R. Elder, Boston & London: Shambhala, 1996

**The Phallus: Sacred Symbol of Male Creative Power**, by Alain Daniélou, Rochester: Inner Traditions, 1995

**The Yoni: Sacred Symbol of Female Creative Power**, by Rufus C. Camphausen, Rochester: Inner Traditions, 1996

In order to distinguish his work from Freud's *psychoanalysis*, C. G. Jung called his psychological theory *analytical psychology*. It might be more aptly described as *archetypal psychology* because the fundamental concept of analytical psychology is that of the *archetype*. In brief, an archetype can be defined as a universal pattern of perception, a kind of psychic mold evolving from and shaping personal and collective experience. Jung had observed the cohesion of human experience and from his observations postulated the existence of a *collective unconscious* which reflects the expression the mind's connectedness to other minds and to matter and, as such, falls outside of ego-consciousness. Archetypes, which are common to all human beings regardless of

culture, religion, or historical time, are the expression of this collective unconscious. *Archetype* and *collective unconscious* are two inseparable core concepts of analytical psychology.

Because Jung had a broad knowledge of mythology, anthropology, religious systems, and ancient art, he noticed that the symbols and figures that appeared in his patients' dreams were identical to the symbols and figures that appeared and reappeared in the myths and religions of the world, regardless of place and time. The Archive for Research in Archetypal Symbolism (ARAS) was founded in 1930 to gather archetypal symbolic images that illustrate the truth of Jung's observations. It was intended to support the topics under discussion by the Eranos Society, a gathering of historians of religion, art, and comparative mythology over which Jung presided. The ARAS collection has since grown to include over 13,000 archetypal images and the Jungian institutes in New York, Los Angeles, and Chicago own collections.

*The Body: An Encyclopedia of Archetypal Symbolism* was developed from the resources of the ARAS collection and is the product of years of research and thoughtful encounter by the curators and researchers of the archive. Throughout the history of humankind's search for meaning, sacred art has used the physical image of the human body to express the mystery behind the energy of life, to speak symbolically about spirit, and to assert the conjunction of human and divine essences. *The Body* presents 100 large-format color images of carvings, paintings, and sculptures that reveal the many psychological meanings of our physical self and feed our modern sensitivity with numinous images born of the collective soul. These visions of the body are not only symbols of the deepest contents of the human psyche, but also transcend the cultural and the theological through their timeless, transpersonal quality. The chosen works represent time periods that extend from prehistory, when humanity was first beginning to express itself in images, to the recent past, and they range in location from the caves of France to the temples of East Asia.

Jung likened the content of the collective unconscious to the organs of the body. He wrote that archetypes were, and still are, living forces in the psyche that demand to be taken seriously. When they are neglected, they behave "exactly like neglected or maltreated physical organs or organic functional systems" (p. xii). The beautiful images in this volume seek to honor these psychic "organs." The volume begins with a chapter on the primordial body, as seen in the Venus of Laussel, and moves through the different aspects of the body: bone, skin, head and hair, eye, ear, hand and arm, respiratory and digestive system, heart and blood, sex organ, foot and leg. It ends with the transformed body, exploring such themes as the shaman's mask, the gold coffin "body" of Tutankhamen, and the resurrection of Christ. Within each chapter, themes are presented in four-page units, and each theme receives of a full-page color work of art that captures the archetypal image, an essay that places the art in its cultural context, an archetypal commentary that positions the image in its worldwide pattern and explains its psychological meaning, and a brief bibliography. A thorough index makes manifest the complex web of connections that exists between the body and the archetypal psyche. The editor expresses gratitude for the contributions of many scholars and specialists in the fields of archeology, anthropology, art, and religious history that comprise the research backbone of the book, assuring readers that the text represents the best and latest information.

The stated intent of *The Body* is reflected in William Blake's words: "Man has no Body distinct from his Soul; for that called Body is a portion of Soul discerned by the five Senses...." This significant sourcebook of body wisdom presents a conscious reflection on the reunion of body and psyche in the belief that an image held in the mind brings healing to the body.

*The Phallus*, and its companion book, *The Yoni*, are two other books featuring archetypal imagery and art that stood out for inclusion in this review. Both explore sexuality as expressed in the collective unconscious and take us into the heart of the masculine and feminine archetypes. They illustrate how sexuality, though embedded in the body, reaches far beyond the biological into the sacred.

Alain Daniélou, a distinguished contemporary orientalist is considered the foremost authority on the art and spirituality of India and the classical world. His book, *The Phallus*, celebrates the expression of masculine fertility and sexual desire in Eastern and Western religious traditions. Following an overview of the symbolism of creative forces, Daniélou surveys a wide range of art, myths, and customs to show how the phallus (a term that refers to the erect penis) is and has been an archetypal symbol of creative energy central in the worship of virtually every religion and culture in the world. Only in our Western world have taboos arisen that hamper the recognition of this most fundamental symbol that illustrates "the process by which the Supreme Being procreates the Universe." This book delivers an important message in its argument that our impoverished imagination needs to reconnect with the sacred symbolic role of the phallus. Contempt, degradation, and debasement of the phallus lead to a tragic outcome, for "the man who scorns the very symbol of the life principle abandons his kind to the powers of death" (p. 1).

The cult of the phallus as source of life and symbol of virility and power can be traced back to about 8000 B.C., in the Neolithic era. Before then, representations of the feminine goddess and her magical yoni had been elevated to divine status. With the discovery of the link between childbearing and paternity, the archetypal symbolism of the phallus as representative of the world's creator, divine eros, organ of bliss, giver of the semen which carries the essence of life, replaced the worship of the vulva. Phallic worship spread to all the civilizations of

Mesopotamia, the Middle East, Egypt, India, as well as to Thrace, Italy, and the entire pre-Celtic world, including what is now Ireland.

*The Phallus* is immensely rich in a symbolic sexual imagery that places humanity in respectful interdependence with all life forms. It is the phallic gods of the archaic shamanistic religions, who, as “Lords of the Animals,” taught the interdependence of human, animal, and divine. As the text leads us through the history of phallic worship, we are repeatedly faced with the unfolding of a moral code that obeys the rule of natural law, teaches respect for nature, and transcends social convention. The representation of male fertility took such forms as the menhirs or standing stones of prehistoric Europe, the Mahalinga and Svayambhu of India, and the ancient Greek Omphalos. The phallic God developed many faces as each culture created its own images of sexuality: the Greek Pan, Hermes, and Priapus, the Indian deity Shiva, and throughout Europe, representations of phallic men engaged in activities such as hunting, fighting, sorcery, or ball-games.

It is written in Indian literature that space is the lingam and earth is its yoni. Lest we misunderstand sexuality as simply erotic, Daniélou unveils the archetypically driven religious impulse underlying sexuality in relationship. Thus, the phallus is worshipped in the sanctuary of the yoni, for it is only “surrounded by the yoni that God can manifest and the universe appear.” From this spiritual sexual understanding emerged the sacred reverence for openings in the earth which led to the prehistoric cave paintings and the many underground shrines, caverns, and grottos within which were practiced rituals that assured procreative fertility and prosperous harvests.

Illustrated throughout with photographs and line drawings of the finest examples of phallic art, *The Phallus* unveils with uninhibited celebration what has been hidden and covered, and in a carefully researched scholarly presentation, reveals the initiatory rites that brought men into communion with the creative forces of life.

Upon receiving a copy of *The Yoni*, and noticing on the back cover a photograph of its author, face immersed in a white orchid, I felt a visceral surge of mistrust for this unknown man seemingly trespassing in my feminine domain. The biography accompanying this photo reveals that Rufus Camphausen has studied the religious and sociosexual mores of other cultures for more than 25 years. Skeptic at first, I was rewarded for my efforts at professional equanimity as the book’s beautiful sculptures, drawings, and photographs progressively pulled me in and fascination took over. Although *The Yoni*, as seen through the eyes of Camphausen, does not offer as scholarly a view as its companion book *The Phallus*, it is nonetheless a valuable contribution for women and men looking to incorporate the archetypal feminine into their psychological and spiritual lives. The book is not for everyone; those uncomfortable with the female body may find the close-up images of yonis challenging. However, the book can be vital to anyone needing to confront their cultural or personal conditioning and find reverence for the goddess as she lives in our women’s bodies.

As in *The Phallus*, the worship of creativity implicit in male and female genitals is shown to be the original starting point of most religions, cults, and sacred customs. It is not surprising, then, that in modern psychological times, this ontological beginning is reflected in Freud’s discovery that libido and psychosexual development are foundational to the development of personality. Archeological evidence shows that the worship of the yoni seen as embodiment of the Great Goddess dates back 30,000 years, by far preceding the worship of the phallus, whose ascendancy began 8,000 years ago. In the absence of any knowledge of the involvement of the phallus in conception and procreation, the magical power of the yoni, evidenced by its dilation to allow the birth of new life, took precedence.

Camphausen’s words about “a world pillaged and overrun by male-dominated hordes attempting to rid humanity of all vestiges of women’s power...” are familiar to women who worked to rehabilitate the practice of goddess worship through feminist art and spirituality in the 1970s and 1980s. Feminist artist Judy Chicago’s painting entitled “The Cunt as Temple, Tomb, Cave or Flower,” illustrates Camphausen’s argument that the yoni as symbol of the feminine, and more importantly as symbol of Woman, has in our culture been discredited as shameful and dirty. In a chapter entitled “The Ten Thousand Yonis of Mother Earth,” Camphausen opens our eyes to countless yoni-like natural shapes—craters, canyons, rocks, tombs, flowers, fruits, nuts, seeds, shells—stimulating our sensitivity to the ways earth surrounds us with the beauty of the feminine form.

Camphausen goes further in his efforts to rehabilitate the sacredness of the yoni. So that we not get seduced into thinking of the yoni in spiritual and symbolic terms only, a chapter called “The Yoni of Flesh and Blood” photographically illustrates and classifies the female genitals by type and temperament according to Japanese, Chinese, Indian, and Arabic cultures. *The Yoni* also introduces us to the world of Tantra, in which women and men are regarded as equal because both our sexual natures require intimate, consenting, noncoercive, nonpossessive, and mutually beneficial interdependence. Camphausen gives detailed accounts of many Tantric sacred rituals, practices, and Tibetan visualizations that, for political and religious reasons, were kept behind a veil of secrecy.

The word *symbol* comes from the Greek *symbolon*. A symbolon is an object that is cut in two and is intended to serve as a sign of recognition between two people. In a sense, the erect phallus, as creative force, and the receptive yoni, as source of all, each possesses half of the symbolon’s original oneness. From a Jungian perspective, out of these companion books which cast male and female sexual forces within the sacred context of their archetypal roots, emerges a multifaceted understanding of the *coniunctio*—Latin for union. For Jung, the

*coniunctio* stands as the guiding archetype of inward resolution and outward relatedness and thus is necessary for spiritual and psychological wholeness. *The Yoni* and *The Phallus* illustrate the mysterious symbolic intertwining of active-passive, conscious-unconscious, light-dark, and destructive-constructive forces that in the *coniunctio* seek to resolve the tension of their opposite energies in the search for wholeness.

#### THE BODY AS INTUITIVE SACRED GROUND

*Our body untended becomes identical to a garden abandoned to nature. —Paula M. Reeves*

**Women's Intuition: Unlocking the Wisdom of the Body**, by Paula M. Reeves, Berkeley: Conari Press, 1999.

According to Paula Reeves, intuition is the gift given to any woman who consciously connects to the wisdom of her feminine body. It does not descend upon her intellectually, but rather *emerges* as a primary language of embodied wisdom. The principle of *emergence*, along with the concepts of archetype and collective unconscious, is another key to the understanding of Jung's analytical psychology. Emergence is a term that describes how order and organization arise unexpectedly out of chaotic conditions. Intuition then, is "that sudden inexplicable insight that tells us we know something we had no idea we knew" (p. 3), a sharp perception that arises when "we leave the realm of logic and rationality and descend into the intuitive realm of matter" (p. 5). The author believes that many women suffer health problems because they mistrust their intuition in a misguided effort to avoid the stereotype of the woman who is more emotional than rational.

Reeves is a therapist with a long-standing Jungian orientation who has been a pioneer in the study of the biochemical relationship between the mind and body. She is the creator of a process called *Spontaneous Contemplative Movement* (SCM), which explores the spontaneous body movements that arise when attention is turned to observe the rhythm of breath. SCM offers a simple way of evoking our body-based intuition so that we can tap into the ongoing interactive relationship between consciousness and the unconscious and open ourselves to new orders of information evolving within the body's perpetual re-organization. The author writes: "It quickly becomes apparent that the body is an instrument of truth," an "artist of emotions," which allows us to "discover that conscious matter is a medium through which the unconscious expresses itself" (p. 54). With a foreword by Marion Woodman, author of *Addiction to Perfection*, and an afterword by Belleruth Naparstek, author of *Your Sixth Sense: Unlocking the Power of Your Intuition*, this inspirational guidebook belies its title by inviting *both* women and men to the depths of their "beloved body" as "embodied intuition," "sacred soil," "dark humus," and "dear animal."

Reeves, who learned to trust her intuition at an early age, noticed that "if the client was physically ill, the dream inevitably held some prescription for healing" (p. xiii); she began to explore the relationship between an image or a thought and spontaneous body movements. She uses numerous real-life SCM therapy sessions and presents 13 well-devised exercises to help us find a map of the body, guide us through the tenuous beginnings of the soul's relationship with matter, learn the language of soul talk, and catalyze our love for our bodies.

Body-centered therapists know that our bodies are constantly sending us signals, and that our task is to help our clients, who may have forgotten or never known how to read these signals, to remember or learn to hear and decipher the body's messages. *Women's Intuition* is a practical resource that is equally accessible to professional and public, useful to individuals, therapists, or clients wishing to recognize, trust, and interpret their body's messages before they become symptoms of distress or illness. An exceptional blend of psychological and physiological knowledge, combining clinical and poetic language, this book can serve as a starting point for enhancing the body's natural curative tendencies and appreciating the unique language of symptoms and the movements that lead to the healing wisdom within.

#### THE BODY AS REPOSITORY OF UNARTICULATED FEELINGS

*Not all communications use language. —Joyce McDougall*

**When the Body Speaks: The Archetypes in the Body**, by Mara Sidoli, London: Routledge, 2000

Mara Sidoli, a child and adult analyst with the London Society of Analytical Psychology, uses her considerable infant observation experience to demonstrate how archetypal imagery encountered in early life can permanently affect psychosomatic functioning. Sidoli discusses Jung's theory of the self as the central archetype and relates it to Michael Fordham's concepts of the "primary self." Jung viewed the self as the totality of the psyche, combining conscious with unconscious and containing both ego and instinctual archetypal drives.

Fordham, who sought to apply Jung's theory to early life, developed the concept of the primary self as a germinal state, a blueprint from which the child's ego and bodily growth undergo a process of "deintegration-reintegration."

With Jung and Fordham as her foundation, Sidoli presents a theory of affect regulation that is in alignment with Allan Schore's theory and the latest developments in affective neuroscience. Drawing from her years of clinical infant observation, she shows how psychosomatic disturbances originate in the early stages of life through unregulated affect. Using ample clinical material, Sidoli demonstrates how "psychosomatic disturbances are derived from early life stages when the infant's distress messages are not met at an emotional level, and therefore take the route of somatization"(p. 3). She views maternal care not only as essential for healthy psychic development but also as critical to the ability to self-soothe and self-regulate later in life. She finds that the tenacity of the defenses that arise in a child (such as splitting and denial) is in direct relation to the intensity of the unregulated, untransformed affect in need of containment.

Sidoli addresses the individual who has suffered early trauma without "the benefit of the maternal container who could make sense of the child's suffering by putting the situation into symbolic form, using thoughts and words" (p. 117). According to Jung, bodily experiences relating to instinctual discharges constitute the most deeply unconscious psychic elements. In a chapter titled "The Psychosoma and the Archetypal Field," Sidoli uses an excerpt from Daniel Stern's *Diary of a Baby* to illustrate how the overwhelming urgency of an infant's affect storms is entirely archetypal and needs modulation to move from a disjointed to a peaceful state. She shows how, at times of deintegration, maternal misattunement and emotional deprivation fail to bring meaning to the infant's world. In agreement with Joyce McDougall's writings in *Theaters of the Body*, Sidoli believes that without the symbolic form of thoughts and words provided by a secure maternal container, the overwhelming unnamed traumatic experiences become lodged in the body and its organs, expressing as psychosomatic symptoms. It appears that psychosomatic patients lack fantasies, showing that the link between the instinctual pole of experience and its mental representation was broken or never established. Thus the "proto-images" of the bodily elements have remained "buried or encapsulated in the unconscious bodily pole of the archetype" (p. 108). An attuned mother begins the work of differentiation by naming the experience of reality and separating it from the experience of the archetypal realm.

Sidoli's clinical approach with adult patients is to reach beyond the symptom to the infant self in order to bring the child into a related dyad in which the therapist humanizes the archetypal experience "so that the patient [can] develop a symbolic attitude, thus conquering psychic distress disguised as physical illness" (p. 118). Like a mother, the therapist seeks to name what has previously been nameless in order to translate the message of the body thereby allowing the patient to make sense of a symptom by finding its hidden meaning. Sidoli warns that in such work, the attractive power of the archetype is similar to the gravitational force of the universe. A therapist working in this arena must be prepared for the powerful countertransference pulls of the extreme all-or-none quality present when an archetype is at work. The energetic, affective attraction of the archetypes require knowledge, caution, and respect. In the wake of the current explosion of research in neuroaffective development, this book is a welcome, accessible voice that is both technically important and eminently readable.

#### ILLNESS AS METAPHORICAL SOURCE OF INSIGHT

*...what ancient and obdurate oaks are uprooted in us by the act of sickness... –Virginia Woolf*

**The Alchemy of Illness**, by *Kat Duff*, New York: Bell Tower, 1993

**The Jewel in the Wound**, by *Rose-Emily Rothenberg*, Wilmette: Chiron Publications, 2001

**Attacked by Poison Ivy**, by *Ann Belford Ulanov*, York Beach: Nicolas-Hays, 2001

**Mothering, Breast Cancer and Selfhood**, by *Lynette Walker*, Victoria: Trafford, 2002

These four books present autobiographical narratives written by courageous and wise women who have engaged the shadow of their own illness with transformative self-examination. They each find hopeful insight within the suffering, the solitude, and the mortality which their body symptoms bring them to face. Kat Duff, Rose-Emily Rothenberg, Ann Belford Ulanov, and Lynette Walker unravel the enmeshment of intrapsychic, interpersonal, and archetypal worlds by weaving a tapestry that honors the complex challenge of illness as a stage in the individuation journey, showing how our body symptoms and physical illness can help us to discover our personal mythology. They speak to us, therapists who are ourselves susceptible to illness, as well as to our patients, by offering mirrors for serious self-reflection and an invitation to embrace and own the shadow at work in our bodies.

In her poetic account of the nature of illness, Kat Duff sheds a gentle and insightful light on the familiar (to those who are ill) experience of being ill with chronic fatigue and immune dysfunction syndrome (CFIDS). Duff spent 2 years in bed, during which time she pursued "the meaning and purposes of illness." Bringing together insights from psychology, religion, anthropology, shamanism, and philosophy, she delves into many cultures to

track the universality of illness and its curious contradictions, such as the sense of freedom that emerges in its midst.

Her own healing, achieved through "tedious, tenuous and life-giving labor," is a model of hope for those with CFIDS who have endlessly struggled to understand why the person they have become no longer "works" in the world out there. Duff knows the false hope of those afflicted with fibromyalgia who pray that "perhaps it was just for one time and it won't happen again." She writes of "trying to get as much done as possible" on days when the illness is in remission, fully aware that a payment will be due for overdoing. She also writes of refusing to admit what is happening, and as "it" progresses, of finally just allowing "it" to have its way and sinking into the void of chronic illness. Duff points out that there is some comfort in illness. Chronic illness allows us to stop, be quiet, and reflect on life, our inner self, and the beauty of nature, which we may not have bothered to do, had we been able to keep going at breakneck pace.

Duff's illness has a turning point that comes to her in a dream. In this dream, a guide takes her to see a film about a young girl who is sold for prostitution. The dream is painful, but the guide insists that she watch the film a second time. The dream goes further the second time as it shows the young prostitute appearing on stage and gathering small objects—broken bottles, gum wrappers, snail shells—which she places on an altar. It is then that Duff realizes that "even the ugly, degraded affairs of our lives can be made into offerings, turned into something so holy as to be fit to feed the gods" (p. 140). She awoke from this dream a different person, able to understand and acknowledge that things "are what they are, in their totality." She had found the gift of acceptance and equanimity.

Under Duff's pen, the mystery of human pain takes on a numinous quality. In a chapter entitled "The Dark Heart of Healing," she tells the story of the Nahuatl peoples who believe that we "have to create a deified heart by finding a firm and enduring center within ourselves from which to lead our lives, so that our hearts will shine through our faces, and our features will become reliable reflections of ourselves" (p. 136). This operation is painful, which is why, the author tells us, "the heart is always represented as wounded, and why the drops of blood issuing from it are so significant."

"Illness is a familiar yet foreign landscape," she writes, "It remains a wilderness . . . despite its continuing presence in our lives" (p. xiii). This book gives anyone with a chronic illness permission to be ill without having to constantly feel obliged to make excuses to those who do not understand. It is a beautiful book to read if you are yourself unwell, or if you want to understand someone close to you who is.

*The Jewel in the Wound*, honored as a finalist in the Health/Medicine/Nutrition category of the 2002 Independent Publisher Book Awards, is the account of the author's unremitting search to understand her disfiguring scars caused by an autonomous keloidal skin disorder which began in childhood. True to Jungian tradition, the author, an analyst herself, uses dreams, active imagination, and art in her search to access the archetypal dimensions of her symptoms and explore how her body expresses the needs of her psyche. The poignancy of Rothenberg's suffering leads to the revelation of her desire for connection to a mother who died when she was 6 days old. She notices that new keloids inevitably follow new beginnings; rites of passage, such as college, marriage, and childbirth, carry for her the unconscious imprint of the terrible loss that accompanied her own beginning. She comes to understand that she lives within the archetype of the orphan, the expression of her fate as a motherless child.

The turning point in Rothenberg's healing struggle comes when she discovers, and becomes fascinated by, scarification rituals. This discovery gives her a hint of something larger than her personal pain, and in the hope of redeeming her suffering, she embarks on a journey to Africa to study scarification rites. In Africa, she interviews several shamans who help unveil the symbolic and spiritual meaning behind scarification. Performed in initiation ceremonies that celebrate transformation, rebirth, and the continuity of life, scarification wounding is not only a healing technique, but more importantly, it is a way to impress new consciousness upon the psyche. The pain and permanence of the initiatory marks imposed upon the skin opens the recipient to personal transformation and tells the community of that person's psychic status. Rothenberg learns that physical scars become the witness of our growth and carry within them, as remembrances of our psychological woundings, the source of continued healing and enlightenment.

The power of Rothenberg's journey is that it spans a lifetime and leads from the darkness of suffering to the grace of consciousness. In her journey, she comes to believe that to integrate the deeper layers of the psyche, the intensity of the forces that create the symptom must be matched by the intensity of the exploration in the body. It is only after she has understood their metaphysical, spiritual, and symbolic meaning that the scars become flowers in her eyes and that she fully grasps the privilege of their presence.

There is more meaning to *Attacked by Poison Ivy* than meets the eye. Jungian analyst Ann Ulanov's latest book springs from a question asked by an analyst curious about the author's repetitive bouts of poison ivy. "Himself an analyst," she writes, "he wondered if I had ever asked myself what my attacks of poison ivy meant. His question struck me like a wooden mallet on my forehead. I was stunned"(p. 4). The startling realization that the question of the psychological and spiritual meaning of this annual, excruciating physical suffering had never risen to her consciousness, even after years of personal analysis, begins this insightful account of the author's decade-long journey to uncover the origin and meaning of 50 years of suffering from chronic poison ivy allergy.

The author's premise is straightforward: The psyche often uses the body—in her case, through repetitive poison ivy outbreaks—to communicate dissociated emotional experiences that transcend ego awareness. Standing on the shoulders of such luminaries as Jung, Winnicott, and Bion, Ulanov pieces together a poignant narrative of familial and personal neglect. Her growing awareness of kinship with poison ivy as a plant that "blooms in neglect, that is never cared for except to exterminate it," renders bare her process of discovering and integrating the dissociated, "unmirrored" experiences of her life. Ulanov offers herself as an example of how healing can occur when that which is negated and denied is finally acknowledged, named, and integrated into our conscious history. For her, the "unthinkable thought," a term coined by Bion, is the chronic, deep sadness that permeated her family life as a child. Her healing was a process of rescuing into thought and feeling "what I did not know I had known, but what had known me....what was entombed in repetitive suffering"—and, she adds, "the body is right in the center of it" (p. 11). She brings into consciousness the body's ability to absorb unspoken content from its living environment, how the body takes in what the conscious mind is unable to manage, contains and metabolizes it, and offers it back in a tolerable way so that it can be integrated into conscious knowing.

Ulanov begins her journey by tying together two events: the worst attack of poison ivy she ever suffered at age 10 and a serious attack of poison ivy at age 50. These two events were the primary signals from her body that something being denied needed to be acknowledged and expressed. *Attacked by Poison Ivy* is a call to enter into conversation with the deeper parts of ourselves, "the mute parts, the left-out parts,"—those parts which, like poison ivy, are untended and rejected. Ulanov illustrates how, as an adult, she visited upon herself the same benign neglect that she experienced as a child. She admits that even though aware of poison ivy's drastic effects on her body, she did not always take the necessary precautions to avoid encountering it.

The lesson of poison ivy is far reaching. The skin represents the body's containment and protection; thus, disorders of the skin can point to our inability to contain or understand the holding/containment we have received. Ulanov weaves into her narrative an understanding of bathing as a ritual of purity that returned her to the warm, bath-like fluid containment of the mother's womb. She integrates the Indian chakra system with various ancient traditions about snakes and the meaning of the shedding of skin.

Importantly, Ulanov emphasizes the significance of *being witnessed* in developing the ability to witness oneself. She relates how Barry, her late husband, brought a sense of "realness" to her suffering when she saw him powerfully moved by her pain. It was Barry's ability to witness her physical pain that opened her ability to explore the underlying emotional pain manifesting in the weeping skin created by the poison ivy. Becoming witness to her own and her family's pain, she realized that her Self could then witness *her*. Ulanov has since had only one major attack of poison ivy, which happened shortly after the death of her husband. She attributes the attack to her grief over losing the containment and nurture which their relationship provided. Minor outbreaks continue to come only when she is wrestling with expressing the sadness of her unmet dependency needs.

In this book, we learn that body language is more than pre-symbolic as some believe. Ulanov is adamant; the body is not "pre-" anything. It is eloquently itself and body-symbolism is better than words in that it is broad enough to capture the spirit as well as the physical facts.

*Mothering, Breast Cancer and Selfhood* is a three-part memoir illuminating the author's introspective process of coming to terms with breast cancer, a mastectomy, and her gradual understanding of the long-term components underlying her illness. Her detailed personal psychological reconstruction speaks to all those who are searching for meaning in illness and adversity.

Part I documents Walker's first attempt to make sense of breast cancer by looking at the nature of her thoughts, dreams, and fantasies as she faced her diagnosis and the prospect of treatment. The author recounts how, amid her terror, anger, and sadness, journaling, active imagination, poetry, ceramics, and drawing made a positive difference. Part II examines the questions she asked herself: What was going on in her life in the months prior to the diagnosis that might have predisposed her to breast cancer? How was she living her life? Were there warning signs? She explores how she inadvertently participated in the disease process by way of compulsive attention to others and inadequate consideration of herself. She concludes that breast cancer is the metaphor for her self-defeating patterns of mothering, run madly out of control. Part III offers an intimate look into the influences active in her childhood that led to her cancer. It exposes the generational impact of women who have been, in one way or another, motherless. It reconstructs the author's childhood steeped in her parents' Jungian milieu, remembers her relationship with an overpowering but vulnerable mother who, although overbearing, still was missing.

What does it take to illuminate the disease of the soul? In her attempt to make sense of her cancer, Walker follows the metaphor to its source, which she finds to be in the nature of mothering and being mothered. Does the compulsion to "mother" the world and neglect oneself arise from excess or from deficiency? What are the implications of selflessness? How does selflessness arise? Through her own illness, Walker comes to recognize the life urge to differentiate from the biological mother and connect with the great, life-affirming Mother spirit.

## CONCLUSION

These inspiring books call us to further the exploration of the ways in which archetypal psychology can contribute to the field of somatic psychology. They demonstrate that deepening our understanding of Jungian analytical psychology has the potential to greatly enrich body-centered work.

The history of archetypal imagery is rich in metaphors for what endures in humanity beyond the short-lived cycle of our individual lives. Myths, passed down through the generations, keep the archetypal templates alive and exemplify the creation of consciousness within the overarching interplay of spirit and nature. Calling our attention to ancestral wisdom and to the juxtaposition of instinctual desires and spiritual strivings within our evolutionary heritage, the body symbolism found in dreams, art, and myths contains encoded instructions for how to mediate the union of soul and body. Jung's genius for the assimilation of unconscious content into consciousness is found in his ability to host the imaginal and in his use of active imagination for the amplification of symbolic material. This is an approach which naturally supports the body's unfolding evolution. Considering Jung's work in the light of the current developments in affective neuroscience, we see that the focus of his analytical psychology encourages right brain, non-linear creative functions.

As body-centered psychotherapists, the core of our healing work lies in hosting psyche and soma together so that they may, in concert, find a unified emergent organization. Jungian theory is anchored in the field of complex systems, guided by the principles of emergence and synchronicity which describe and put in application key processes of self-organization and self-regulation. Elucidating the mysterious ways by which order emerges out of chaos, or light out of shadow, Jungian theory can help us attune to larger gestalts which puncture the closed-system equilibrium of rigidly held neurological patterns as they work in tandem with defended belief systems. As body-psychotherapists, we support emergent somatic change when we hold in attention seemingly unrelated impulses while they build new, more complex neurological connections. The relational quality of our sustained presence with the bodily self elicits a new order of organization that works implicitly to dismantle closed-system impasses.

There is much to explore in these directions, and I am curious to know our somatic community's thoughts on the connections between the somatic and the archetypal. Those so inspired are invited to send us their experiences and intuitions on the subject.

#### Biography

**Dr. Aline LaPierre** is a graduate of Pacifica Graduate Institute in Santa Barbara, and a somatically-trained licensed psychotherapist in private practice in Los Angeles. She is a core faculty member in the Somatic Psychology program at Santa Barbara Graduate Institute and a Clinical Associate at the recently merged Los Angeles Psychoanalytic and Southern California Psychoanalytic Institutes. For eight years, she was art director for *Psychological Perspectives*, the journal published by the C. G. Jung Institute of Los Angeles. She can be reached at [alaine@cellularbalance.com](mailto:alaine@cellularbalance.com).

# In Evan's Case: Reflections on the Different Bodies of Psychotherapy

Scott Baum, Ph.D.

## Abstract

This article provides case material as a way of exploring two related themes. The first is the use of a theoretical and technical model in psychotherapy which embraces and builds on a somatopsychic viewpoint. The second focuses on the dynamics of father son relatedness in individual men and as a social force. The article remains mainly rooted in the work of this particular therapeutic outlook, but also attempts to draw conclusions relevant to the field in general. The dynamics which infuse the therapy of this particular man are seen as reflections of his relationship with his father. Those dynamics are also examined for their relevance to social forces which are part of the formation of the structures which contain and shape the interpersonal relationships which give expression to those same dynamics in the world.

## Keywords

Evan's case - Interpersonal relationships - Social force - Somatopsychic

Evan is a youthful middle-aged man, living a somewhat unusual lifestyle, who first came to see me about five years ago. One of the most striking things he said to me early on was something said to him by a therapist he consulted briefly before coming to me. She said to him at one point that he never seemed to feel anything. When he told me that, I heard in my own fantasy the faint echoes of exasperation and impatience, as though it was maddening to her that he was like that. Besides my unappealing tendency to self-congratulation and to comparison with her on this score, I also did not share her experience (as conveyed by Evan) that he was not feeling anything. His communications felt very meaningful to me. I was touched and affected by him and them. I was following an experiential path when he talked, something was happening in me and between us. Which is not to say that Evan's defensiveness and intellectualizing style have not been a part of living with him, both in individual, and in group sessions.

In viewing this aspect of my experience with Evan, I am reminded of another client whose therapy with me was cut short when he moved out of town. With him I felt as he talked, and we rarely did anything but talk—occasionally, some active body-focused interventions—that I was in a deep contact with a very meaningful, and for me often very moving process. In the world of active and body-oriented psychotherapy there is some overt, and quite a bit of latent mistrust of this kind of experience. The absence of strongly experienced and strongly expressed feeling casts doubt on the authenticity and depth of the process within the client, or between the client and the therapist. Yet my feelings with Evan and with the other client were in my body, tangible sensations. Was I being fooled somehow by Evan's defensive organization, or by my need or wish to ascribe to his communication meaning which was not there? Or am I simply limited in my ability to plumb the depths of true, deeply felt experience?

The way I will frame the larger question for this paper is: which body are we working with when, as psychotherapists, we do body-work? Evan's case offers a number of perspectives on this question. The question is a serious one for bioenergetic therapists, of which I am one, because there are strong attitudes in the community of bioenergetic therapists, as there are comparable attitudes about other principles, in groups with other views, about what constitutes authentic and proper body-work, and body-oriented psychotherapy. One can, in an effort to shore-up one's security, see these attitudes as a nuisance, something to be brushed aside as one strides confidently forward to do the work one believes in. But for many of us, myself included, that would be a self-deluding defensive maneuver sure to backfire in some way in our work. Much more is going on here, and is at stake, than an adolescent-like struggle to be like the grown-ups and be able to carry oneself with assuredness as an equal to them. I think that Evan's case, in its revelations about the role of fathers in squelching and trampling on their children's unfolding selves, speaks directly and forcefully to the dynamics informing the development and expression of these critical attitudes, and illuminates their destructive effects.

## Evan's Three Lives

Evan lives two fairly discrete lives. As I am writing this, however, I realize that it is more accurate to say he lives three lives. He is a professional working in his field in a somewhat peripheral very low-key way, although by all accounts very competently. In the rest of his life, which forms by far the majority of it, he is a seeker, a student, pursuing various disciplines in philosophy, martial arts, and music. He is looking for "balance" and "harmony," and he expends extraordinary amounts of time and energy in various practices designed to teach and train himself in the development of those sought-after qualities.

Now I realize he lives a third life, which has the coherence of the other two. This is the life that actually prompted him to seek psychotherapy. In it he engages in relationships with women who have elements of dominance and submission. When he first came to see me he had just read of a book that suggested that such relational patterns may have their origins in deeply held, often unconscious, fantasies. He wondered if that was true for him, and he was looking for a way to explore that question. It is not surprising to me that this third life stayed somewhat hidden from view. It has only sporadically been at the center of our work. Recently, for the first time, Evan's relational life in the present has come more clearly into view. But this more hidden aspect still remains a largely undifferentiated nub of feelings and dynamics and attitudes.

These three lives hardly touch each other. There is some diffusion at the boundary between Evan's personal life and professional life. He dresses and grooms himself somewhat unconventionally for his work, and people know he marches to a different drummer, but few in his professional world know how different. The third life may be known only to the women involved, and to him and me. Much about Evan is concealed, for in his earliest days he had to learn to cover and hide whole parts of himself in order to limit his exposure to the unrestrained, pervasive, brutally delivered criticisms of his father.

Although the third life has occasionally surfaced in our work, until recently it has not occupied a central place. The change found expression when Evan said in a group session that he had come to the conclusion that intimacy was actually a thing in itself, a real thing. He envisioned the domain of intimate contact as a room, one in which he did not reside, but to which he could now see a door, and which he was determined to make an effort to enter. This statement drew a heartfelt response from a woman in the group, who told him she thought this was truly a momentous decision. After seeing and feeling Evan thwart the group's sometimes prodigious efforts to join, confront, and be with him, it seemed to her this commitment was a substantial change in Evan's life.

There is a paradox at the center of Evan's life. He pursues avidly, at great expense of time and energy and to the exclusion of other pursuits, a set of practices and disciplines that he hopes will bring him into greater harmony with the forces of the universe. It is understandable to him that the medium for the development of this harmony is his own person, somatic, psychic, and spiritual. The painful reality is that he is not intimate with himself, and so the practices he engages in are an externally determined technology, which if followed carefully and diligently enough, should yield the outcome desired and predicted by those who teach and espouse the principles underlying the practice. In fact, it is an ever-receding horizon, in which expended effort brings him to new ideas and skills, but no closer to himself.

Frequently during our work Evan would question whether the search for harmony could be advanced by psychotherapy in general, and by my approach in particular. It is only very recently that Evan has come to the conclusion that understanding the historical roots of his present behavior and reactions might be useful to him. Previously, he often spoke openly about a surgery-like process that would remove from him the unwanted parts, even though he was not exactly sure what those parts were, or exactly why they were unwanted or undesirable. When he talked this way, I was often reminded of Stanley Keleman's description, in a workshop, of a dialogue with someone in which he asked whether the person would amputate his left arm if something was wrong with it. He went on to note how this way of relating to oneself is to behave as though parts of oneself are garbage to be discarded. My insistence in following this line with Evan confounded him because of my unwillingness to fulfill the role of authority who would instruct him in the way to perfect himself. My preference has been to pay attention to things and try to apprehend their meaning. It has not been easy for him to come to terms with my dogged refusal to become a master, but he has increasingly expressed an appreciation for my position and its underlying existential base.

### In the Family System

Evan's father, also a professional in the same line as Evan, was an abrasive, critical, dismissive man, who had no compunction about venting himself on any and all around him. Evan did not react aggressively and overtly to this treatment until early adulthood, when he essentially fought his father to a standstill. Before that he preferred to lay low and conceal himself as much as possible from his father's view. This could not have been easy. Home movies made of Evan from early childhood through to early adulthood show a strong, attractive child growing steadily into a strong erect young man. Perhaps significantly, in the one scene of Evan playing sports, he is seen in early adolescence playing basketball with his mother, who is obviously enjoying this activity with her son.

Evan's descriptions of his mother were, until the last year or two, focused almost entirely on his experience of her as "overprotective." He saw and spoke with her often, but always recounted his contact with the complaint that she hounded him with her worry. He wondered if she was simply living out her cultural identity as a "typical Jewish mother," or whether there was more to it. One breakthrough came when he talked about an illness that had befallen his mother and his efforts to counsel her about possible treatments. He realized that he felt hurt and angry that she seemed so unreceptive to his advice because he felt that she had no faith in him and his ability to know things and make good judgments about them.

The other breakthrough in his understanding of his relationship with his mother came when he was talking about how he would react to her death, which considering her age must be regarded as approaching. In the midst of his complaints about her, and his chafing at her over protectiveness, it suddenly became clear that he loves her, deeply, and she him. Suddenly, the mother of his childhood came into focus. This was the woman I saw in the movies, a very attractive, lively mother very actively engaged with her son, and from all the available evidence loving him very much, although unable to stand between him and her overbearing, critical husband. Something must be said for her strength even in that however. In late middle-age, with her children grown, she left her husband, and, after a while, took up with a widower, a man whom she had nearly married in her youth. According to Evan, they spent seven very pleasurable years together. It has been interesting in recent sessions to look, for the first time, at the patterns in Evan's mother's life, as they unfolded and affected Evan. What was no more than a photographic negative of her has begun to develop into a fully realized picture.

To some extent Evan was able to hide from his father because his older sister, the eldest of the three siblings, presented such a large target. In the movies she can be seen as an irrepressibly energetic child, commanding attention by the force of her presence and behavior. Evan spoke mostly of the conflict with this sister, of her abrasiveness and dismissiveness. It came as a shock when in speaking of her recently he said that he missed the closeness they had had for so long. They formerly talked often and deeply about many things, but this had broken down substantially over the past few years, in part, from Evan's side because of his sister's treatment of their mother. Evan felt he understood his sister's anger and resentment at their mother. After all, his mother had not only not protected his sister from their father's withering contempt and hostility, but, as she also confided to Evan, she could not abide the rawness and force of her daughter's energy. At the child's birth she despaired that such an unpretty, unpetite, unruly child could be her baby. But Evan still found his sister's frank, rough, loud anger at his mother, partly driven by her feeling that he was preferred by her, to be abusive and needlessly harsh and humiliating. Until recently, Evan simply recoiled from his sister's competitive and superior attitude. He is now considering her behavior in the light of his understanding of his father's effect on him, and he has begun reaching out to her.

Evan's younger sister has made few appearances in his therapy. She seems to have been a more timid, softer, and unassuming person than either he or his older sister. However, one notable sequence of events occurred with her and her family. It is worth describing those events here because of the light they shed on Evan and on the family patterns and systems which came to bear on him and formed him. Evan informed me one day that his nephew had been hospitalized on a psychiatric unit after he had struck his father during an altercation. As Evan described the relationship between father and son, the father was always very harsh and critical with this son, although he has been very enamored of his other son who is an excellent athlete and matches his father's interest in, and enthusiasm for sports. Evan told me he identified strongly with his nephew in the hospital, that he was the person most like him in the family. His nephew is a sensitive young man interested in music and meditation. Once again I discovered a hitherto unknown strong emotional connection in Evan's life.

The young man was diagnosed as having a brain disorder called schizophrenia and placed on heavy doses of medication. His mother was told that he would most likely have to take these medicines for the rest of his life. The facts of his conflictual relationship with his father, and that his parents had been unable to insist that he leave home and start a life on his own despite their resentment of his seeming indolence, were not explored. Evan's nephew occupied a central place in our therapy for awhile, in large part because I could not contain myself and initiated a number of conversations about alternative ways of understanding what happened with him and alternative treatment possibilities. Although Evan found this both interesting and useful, his sister remained adamant in sticking to the views and recommendations of the psychiatrists she had consulted. She herself has been in psychotherapy for many years. Evan made a number of contacts with his nephew during this time, who told him that Evan was the only one he felt spoke the same language as he. But soon no further mention of the nephew came up. The nephew was discharged home, and his parents set him up in an apartment. I believe he entered a rehabilitation or partial hospitalization program. It was as if he had dropped of Evan's radar screen. Just recently (at the time of this writing) Evan mentioned as an aside to something else, with no further comment, that his sister had left her husband.

### Evan in Group

This kind of on-again, off-again quality is also evident in Evan's behavior. Many times in group Evan would engage the group in an extensive discussion about something. People would actively enter the process with him calling his attention to things and striving to make themselves heard by him, hoping he would see himself through the lens of their feedback and perception of him. The first times this happened people came to it with optimism and hopefulness. However, each time it would end with Evan somehow not understanding what people were saying or how to comprehend it, asking for more information and more clarification when he had not even taken in what had been said, with much effort and feeling, already. Mostly Evan was befuddled by what happened and

could not understand nor empathize with the annoyance and frustration of group members. Only in a few instances did the dynamic underpinning of his defensive operations show through. That happened when Evan described incidents in which others did not display what he deemed the appropriate deference to him. Another breakthrough awareness came when Evan realized that he was not an innocent victim of manipulative, high-handed, arrogant taxi drivers, but rather that he actively awaited and pursued the confrontations through which he could vent his indignation and outrage. He was, in fact, a "player" in these and other similar interactions.

On the other hand, Evan once revealed to the group his participation in a practice which, because of the substances used in it, caused a strong reaction in a number of the members. Although the members of the group were people who usually strive to be progressive in their outlook and tolerant of difference, there was a sudden upsurge of critical condemnatory talk. None of the feedback or reaction took account of Evans considerable experience and grounding in such practices, and certainly did not reveal any respect for or acknowledgment of his vast background of study and experience in these areas. To Evan it seemed the group had behaved like his father, blindly and cavalierly expressing prejudice and ignorance, and like his mother, showing no recognition of the maturity or faith in his judgment. Evan simply folded-up on himself and that part of him disappeared like an island swallowed by the sea. He did not become angry or resentful. We only talked about it a couple of years later when I felt it was timely to bring up my observations of what happened in that group. I raised it in the context of his burgeoning awareness of the profound effects on him of his father's treatment of him and his puzzlement that he "remembers" so little of the actual early childhood experiences with his father. Here was an example of how he dealt with outrageous treatment when he was vulnerable. He withdrew his energy from the field of the contact, like a pseudopod, back somewhere into his center or core, and he did not even register what caused him to do so. He had been there for a moment and then gone, without the event leaving a trace in his awareness.

### Evan's Body

The same quality of absence and presence is a part of Evan's somatic reality and presentation. Evan is a nearly classical example of a person with a rigid character organization. He stands tall and erect, his contact is plain and straightforward and somewhat reserved. In a very narrow sense he is very well grounded. He makes good contact with the earth and the environment around him, but he constantly acts on that contact by interpreting what is happening in terms of the fragility of his ego. Thus there is frequently a paranoid tone to his perceptions of others and what they mean to be saying to him. And he uses his eyes that way: he looks out through them, not seeming to let much flow in. As a child he made a tic-like movement with his eyes and face. It gave him a certain kind of relief to do it. His father would deride him for doing it and tell him to stop. When he repeated the gesture in the group it made him seem softer and more childlike. His chest is expanded, voluminous, and strong, but it is difficult for him to breathe all the way to full expansion, to that point where the inside is as full as it can get and there is release into the full breath. It is as if breathing that fully would bring his inner reality too close to the surface.

Evan's back is straight and he appears, and is, quite strong. But he has a weakness in his lower back that he has to favor. This weakness seems to me a reflection of the fact that Evan's sexuality and aggression have not joined. He could not risk frank aggression, his father would have crushed him even more; he could not love his mother openly, tenderly, and aggressively, neither she nor his father could have stood that; and he could not simply identify with his mother and give up his masculine thrust in its culturally sanctioned form, his father would have withered him with ridicule, and his mother did not want it from him. She wanted him to be strong, although the triangle of he, his mother, and his father must have stimulated considerable anxiety in all of them, and more envy and competitiveness in his father. His mother could not teach him to surrender and could only reveal the depth and force of her passion for him in her over protectiveness. He could not meet and feel safe in her powerful loving, he could only feel he was submitting to her and risking smothering. He could not turn to his father for a hand to hold him above the water of the emotional flow if it were too much. So he built an inner container to hold everything in and back, and out, if it is already outside.

The container is formed in part by the layers of voluntary muscle near the surface of his body. He was lying on the bed breathing in one session and noting his difficulty in taking a full inspiration. It was as if his ribcage were frozen in mid-inhalation. Noticing that led him to talk about how it is impossible to live in fear and humiliation, and how he had rigidified to hold up under the assault and at the same time make himself still so that he would disappear and not be so obvious a target. I worked a little bit on the scalene muscles in his neck, and especially where they enter behind the clavicle and fan out. His muscles were like stone, and with no give in them whatsoever. I can imagine him now as I think about that; in my fantasy I see him in full flush of rage, the cords of muscle in his neck taut, his jaw jutting. But he seems a long way yet from any such expression, if it is actually an accurate image.

## The Language of Music

Since he has stayed largely unaware of his vulnerability, Evan has remained fairly impervious to feedback about his behavior which would cause him to notice the underlying feelings actuating his behavior. This isolation from the flow of inner, visceral, and emotional reality became starkly revealed in Evan's musical life. I knew for quite some time that Evan played and studied a number of instruments, and that he had briefly tried his hand at playing in public on a small scale. At one point in therapy when he was talking about his difficulty containing and expressing his emotion, I suggested he consider bringing an instrument into a session, an idea which he embraced. When he played, I was dumb struck. He played guitar, and first played a light lively piece, and then a blues tune. The music conveyed feelings powerfully, movingly, and with nuance and sophistication. It was as though he had begun speaking another language mellifluously and with feeling that I could instantly understand. I was astounded by the unexpected facility and skill at the expression of emotion. He was surprised and gratified by my response.

After that I suggested he consider bringing an instrument and playing in the group, which he eventually did. He played and sang a song that he had composed on the death of his father. He seemed not as free in his emotional expression in the group, which may be related to his discomfort and anxiety about playing before an audience. Perhaps most significantly, he has not brought an instrument to a session since then. This seems meaningful in the light of his ability to convey emotion in that medium which otherwise eludes him.

## Embracing the Fear of Death

This may well reflect Evan's constant effort to assert control over his emotional life. This effort showed up very explicitly in his recent discussions about death. Evan recently had an experience which brought him into contact with a deep panic in him which he associated with fears of suffocation and death. As a result of that and other experiences he decided to prepare himself for his own death in such a way that when the time of it came he would not be panic-stricken, taken by surprise by his fear or dread. He was going to do this by banishing his fear, reaching a state of calm equanimity in the face of his demise. The intensity of his drive and pressure to master his fear was palpable. The issue for him was the dread of being humbled, made vulnerable, and feeling humiliated by the presence of his fear. It was that which he intended to avoid. It was again a surprise and revelation for him when it was suggested that embracing his fear might constitute a more real response to its presence in him. This idea of embracing what is, as distinct from what is not, always takes Evan somewhat aback, and yet brings him some relief. Despite his interest and knowledge of Eastern philosophies and viewpoints, his character organization invariably brings him back to a model of life in which one masters and controls people and things from the top down.

## A Different Theoretical Model For Body-Psychotherapy

Evan is like an egg. He has a hard, durable, but relatively inflexible outer shell, made up by the surface of his body, and the striate musculature. He has some more fluidity in the middle layer; one can see it in the grace and flow of his movements as a martial artist. And he has an inner core of feeling and passion—a yolk, self-contained and segregated from the other layers, although contiguous with them. Evan has resolved his oedipal conflict in the classical sense, he is very much like his father under the veneer of his alternative lifestyle, and relates to the yolk part of him very much as his father would. It is something to be kept under control and treated with contempt. Incidentally, Evan's father was an artist also, though he worked in a different medium.

It is a grave flaw in bioenergetic theory (Lowen, 1958) that the only successful resolution of the conflict between fathers and sons is through the son's identification with the father's castrating intimidation of him. Evan gets frighteningly angry with people in positions he views as subordinate to him, if they are not properly deferent. But when he encountered a master teacher who was arrogant, high-handed, dismissive and contemptuous, he was full of forbearance, and rationalized behavior that to others of us in the group seemed outrageous. To posit that a successful resolution of his conflicts related to his father would be for Evan to be able to do it back harder to this teacher is to doom us to a never-ending cycle of intimidation and counter-intimidation.

Evan liked the idea of somatically based interventions. It accorded with his beliefs about the unity of mind, body, and spirit and it fit with his lifestyle of developing a discipline and following it. However, it became clear in time that the end point of the development coming out of following the discipline had to be foreordained. He had to know where he was going and whether that was the right place to be going in the way he was getting there. In a way unbeknownst to him, he seems to have internalized his mother's anxiety about the dangers that can befall a person wandering through life, and he was determined, as she was, to control those dangers. Somatic based interventions often are intended to destabilize existing defensive structures and patterns. To then expect those

interventions, as Evan needs to, to lead to predictable knowable outcomes, is to rob them of their vitality, of their ability to surprise and enlighten.

Evan's basic defensive style is incorporative. Either he takes things in whole and immediately controls them and their meaning and effect; or he rejects them completely, hardly tasting them. Behaviorally, his defensive maneuvers remind me of the scenes in science-fiction shows where the weapons officer on the bridge informs the captain of whatever vessel it is that the enemy has matched the frequency of the vessel's offensive or defensive systems and so rendered them ineffective. If Evan were offered an experiment in breathing, for example, it would disorganize him briefly, if at all, and he would immediately take over the experience, modulating his breathing to fit some pattern or teaching he knew about. His well-organized, muscular body, coupled with his extensive experience with processes designed to alter one's consciousness, enables him quickly to take the new input from the experiment and configure it to fit his already known ways of looking at things. Every so often, a somatic intervention will have a strong effect before Evan's ability to absorb the energetic impact takes over. Working on his back muscles until he can take a deep full breath touched him deeply. So too did telling him the scalene muscles on the side of his neck and entering beneath his clavicle were like rock. He asked what I thought that held tension was related to, and I told him I thought it reflected a profound rage, outrage, really. In my mind's eye I saw someone bellowing at someone else, the muscles of his neck engorged, filled with charge. This image, and the experience of tension going deep into the middle layer muscles of his body, also seemed to affect Evan.

It is the interpersonal contact with me, or members of the group, or his report of such a contact outside the therapy, that seems most likely to unbalance Evan's finely-tuned defensive organizations. His willingness to expose himself to the indomitable experience that there are other realities in the world is what most rattles his character structure. It is not that Evan never feels anything. It is that he categorizes, explains, controls, and intellectualizes what he feels before it becomes more than a whisper in his consciousness. His ability to amplify that whisper is limited by the efficacy of his defensive organization. But if he allows others to shout and gesticulate until he takes notice, and then he pays attention to them, he is open to the disturbing possibility that something is going on beyond his ken. He is increasingly open about his commitment to experience and honor the perceptions of others, and the meaning they might hold for him.

How do we offer our clients organized like Evan a way to diffuse the yolk at the center into other layers of their body. It is not strictly a technical question. At its root it is a question of the philosophy and aim of the therapy. The development of ideas of the intersubjectivity of the therapeutic process (Stolorow, Brandchaft, & Atwood, 1987), and suggestions from feminist theoreticians (Wright, 1995), indicate that beyond the technical here are questions about the structure and value-belief matrix in the therapy, questions whose answers must also affect the way bioenergetic therapy is conducted. These approaches to psychoanalytic psychotherapy emphasize the centrality of each person's organization and the formulation of her or his personality and reality. If the therapist can hold to it, this view has a profoundly democratizing effect on the therapy. To hold to it successfully requires the therapist to enter the experiential venue with the client, not as someone without expertise, but rather as an experienced therapist once put in referring to a therapy group she conducted, as the "most experienced patient in the group."

Really to know the other person's experience, rather than the therapist's formulation of it, no matter how sensitively arrived at, requires that the therapist be receptive to the information presented by the client. The therapist has to soften her or his body and character organization to do that. It is often an awkward, threatening process for the therapist. One of the great fallacies about bioenergetic work is that its task is to somehow enter the client's body and route out all the unwanted detritus of one's life, leaving one feeling clear, clean and refreshed. This view has all the humanity of drain cleaning. Nevertheless, for many years I found myself feeling the presence over my shoulder of a great arbiter of what constitutes correct bioenergetic work as I worked with clients. Invariably, I would come up short and feel the same drop in my stomach and the same helpless anxiety I feel when I try to confront my father's superior, overbearing, contemptuous assertions about his knowledge of the true reality.

Well, maybe it is all my transference projections, but I know many bioenergetic therapists who have the same experience. They do not all have my father. But they do all have a father. Is there something intrinsic to the nature of fathering in our environment that leads to such powerful self-critical, self-denigrating attitudes and their compensatory narcissistic defenses of grandiosity, omniscience, and contempt for others? Using Evan's situation as an example, the answer is likely to be yes. A fathering like Evan's, which is imbued with competitive, superior attitudes, is most common. It is what I think Freud saw which caused him to arrive at the formulation about the resolution of oedipal conflict. And, indeed, the resolution of that conflict through identification with the intimidating, threatening father is an initiation into the society. The society we live in is founded and rests upon the same set of values inherent in this kind of father-son relationship.

Evan is horrified by the extent of his identification with his father. He hears the critical harsh tones of his father's voice in his voice. He feels the suppressed competitiveness in him that reflects his father's vicious striving to dominate all around him. But when he is confronted with the embodiment of his father, this time in a teacher who asserts his right to treat students harshly and with derision, he submits willingly, thinking that this man has

great knowledge or skill, or something that entitles him to behave as he does. Evan's muscles stay locked, his outrage silenced, his sensorium dulled by a merging with the authority. A merging based, at least partly, on a deep hungry longing for a man who will father him, a generative loving fathering which puts Evan ahead of the narcissistic drive to supremacy of the father.

A bioenergetic therapist I know defends the suppression of new ideas and visions of the way bioenergetic therapy might work by saying that to embrace those new ideas is to dilute bioenergetics and to leave it indistinguishable from other approaches. This argument always "took me out," to use Evan's language, meaning that I could not mount an effective argument against it and felt tongue-tied and defeated. My wife (who is also my colleague) pointed out to me how this way of presenting a position is a reflection of the same dynamics I am discussing here. The need to make oneself distinct and better is Evans father (and, of course, Evan) talking. It has left Evan well-organized and alone, unable to surrender to his love or need, unable to recognize his small place in the scheme of things, a scheme we can barely glimpse, if there is even one to see. A similar thrust in bioenergetics has left some of us looking over our shoulders, worrying that Dad is watching and clucking his tongue. Instead of feeling supported and appreciated we hide a place of fear and criticism deep inside which can vitiate our best work.

Although I do not experience this intrusive critical presence nearly as much as I used to, an incident occurred recently which brought it all back again full-force. A new client entered the psychotherapy group I lead. After five sessions during an extremely trying time for the group he decided to leave. Although at first he presented his reasons for leaving as a lack of match between himself and the group, and a dislike for my leadership style, it also slipped out near the end of his leave-taking that he was critical of the work, or lack of serious work, that other members were engaged in. In parting one of the things he said was that he wanted to be in a group that was run along bioenergetic principles. I thought I did run my group that way, but that is one place I still feel the oppressive judgment concerning the adequacy and frequency of active work.

The comments of the departing member went right inside me. In grappling with the tremendous guilt evoked in me, I came to understand a bit about the guilt he felt. He had an extremely brutal father, and acknowledged before leaving grave difficulties with authority figures, which he chose, perhaps wisely, not to work on with me. His anger and criticism of me represented, I believe, both his anger at his father and his guilt. He feels not OK in his father's eyes, and the guilt over that is devastating. My guilt is both a response to his projective identification, to which I make myself receptive and my guilt because I am seen as not OK. This is one of the more deleterious effects of the patriarchal system as we know it. It is based on the premise of making some people not OK, and controlling them through the set of judgments associated with that attitude.

The presence of critical, competitive father is an issue in Evans life and in mine. But it is also a cultural reality. So much of the world in which he and I live is infused with attitudes and emotions derived from relationships and bonds between sons and their destructive fathers. Boys start off in a contracted state, holding themselves against the devastating effects of continuous humiliation engendered by their weakness or need--their 'wimpyness'. They are expected to be deferent and submissive to the authorities who treat them that way, on pain of severe emotional and possibly physical punishment if they do not. At the very same time they are to take no guff from anyone, to show no fear in the face of intimidation from those outside the sphere of the patriarchally sanctioned authority. This is a maddening bind which leaves boys, and later men, spinning wildly, at least internally, between, adoring worshipful identification and submission on the one hand, and ferocious, often vicious, defiance of others on the other.

In this state, men have to be right. We don't ask for directions not because we are too stupid to know we are lost, but because we cannot bear the humiliation of the position of not knowing. The power of knowing assertion is tremendously forceful. When it is accompanied with the defensive need to be on top for fear of being reduced to a nobody it becomes irresistible. The gradient from uncertainty to certainty is such that certainty overflows and stabilizes uncertainty. But when the certainty is based on defensive considerations ("It will be alright", when it plainly won't be), certainty is a disaster. I have seen this at work in my relationship with my wife, one of the most competent people I know. She is, initially at least, swept away by my anxiety driven narcissistic assertions of knowing. It inhibits communication, consultation, and cooperation. The only way for a man to protect himself from domination is, at the very least, to harden his exterior, to become impermeable to external influence and to the promptings of internal states. Thus we have Evan then as a child, struggling to fight off his father's attempts to cow and subordinate him, and we have Evan now struggling to resist his inner yearning to surrender to himself.

Implicit in somatic work in psychotherapy, is the offer of listening and becoming receptive to one's deep, if barely felt body sensations. Amplifying those brings knowledge of one's vulnerability and frailness. The softening of one's body in order to become receptive is requisite for both client and therapist. That is hard to do. It is hard in dyadic relationships, it is hard in groups, and is hard in institutions especially those which assert a knowledge of a true and only way to understand or do things. This is a problem which has afflicted the field of psychotherapy also, and in bioenergetics, as well, despite the inherent contradiction with this very basic principle of responsivity to one's somatic process.

Psychotherapy is a revolutionary activity. It asserts, more now than ever, that meaning resides in the individual and her or his experience of reality. The fathering that helps in that is that of the father who recognizes that he is mortal, and limited in his ability to know and do all. This view of psychotherapy is inimical to one in which the true way is seen to reside in the body of one person and her or his followers. The truth that resides in the body is that when people know their somatic, psychic, and emotional experience, and control the expression of those parts of themselves, they become increasingly free. Evan is an example of the terribly painful conflict that results when a man yearns to be free but is ensnared in a web of love, longing, hate, and intimidation, with a father with whom he is profoundly identified. It is a father's duty to encourage and support and nurture the separation of a son and his emergence as an autonomous person. It is no less the duty of a therapist, a supervisor, or a leader.

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#### Biography

**Scott Baum, Ph.D., ABPP** is a clinical psychologist and bioenergetic therapist currently practicing in New York City. Responses to this article may be sent to Dr. Baum at 711 West End Avenue (1AN), New York, NY 10025.

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**CORRESPONDANCE ADDRESS**

Jacqueline A. Carleton, Ph.D.  
Editor  
USA Body Psychotherapy Journal  
115 East 92<sup>nd</sup>. Street #2A  
New York, NY 10128  
212.987.4969  
[jacarletonphd@gmail.com](mailto:jacarletonphd@gmail.com)