

## BOOK REVIEW

### The Routledge International Handbook of Embodied Perspectives in Psychotherapy

Edited by Helen Payne, Sabine Koch and Jennifer Tantia, with Thomas Fuchs  
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By Adam Bambury

*“In contrast to other languages there exist two different German words for body: while ‘Körper’ means the ‘objectively’ measurable body (‘the body I have’), the older word ‘Leib’, nowadays rarely used in everyday German language, but still common in metaphors, defines the ‘subjective’ entity of the body (‘the body I am’).” (p. 266)*

The above distinction seems an appropriate way to introduce this comprehensive new volume, which connects interdisciplinary scientific research into embodiment with embodied perspectives from a wide range of international practitioners in body psychotherapy (BP) and dance movement psychotherapy (DMP).

It arrives at a good time. Embodiment is a buzzword in diverse fields of enquiry. BP and DMP have long traditions of exploring its therapeutic implications, and their insights could usefully cross-fertilize with those of researchers who may not even be aware of the specialized expertise that has evolved in these fields.

Additionally, although aspects of BP have gained more respectability in recent years, it still suffers from somewhat of an image problem when interfacing with the mainstream.

This book’s introduction mentions “the difficulty that body psychotherapists/somatic psychotherapists have in gaining lawful recognition as a profession” (p 9), while Wikipedia still categorises BP as “alternative and pseudo-medicine,” which it defines as “a practice that aims to achieve the healing effects of medicine, but which lacks biological plausibility and is untested or untestable.”

This book can in one sense be seen as a riposte to this view, highlighting the rich tradition of research and practice in the embodied therapies and joining them with the wider field of embodiment, which is described in the introduction as “a genuinely interdisciplinary theoretical and empirical approach that provides a new perspective on the person as a bodily, living, feeling, thinking organism” (p. 3). In short, subjective accounts of the bodies we are meet with objective descriptions of the bodies we have.

Can this meeting be achieved to the mutual benefit, and not diminishment, of all? The editors have made this a real possibility through the wide variety of perspectives and approaches they have included. Their envisioned audience of “theoreticians, health practitioners, academics, clinicians, students and all others with an interest in psychotherapy and the embodied mind” will, if they have the time to delve into its nearly 450 pages, get a well-rounded view of this field of inquiry in theory and practice.

The book is split into three sections, with 2 and 3 focusing on aspects of DMP and BP respectively. Section 1, “Overview of Concepts,” takes a different approach, aiming to present “an overview on embodied therapies and place them in present

phenomenological and clinical discourses” (p. 15). This grappling with the essential aspects underpinning both BP and DMP and relating them to a wider research context makes for some interesting, if at times hard to connect with, chapters that represent steps in an ongoing and useful dialogue.

One chapter, by Johannes Michalak, Naomi Lyons, and Thomas Heidenreich, looks at whether embodiment research provides evidence for basic assumptions from DMP and BP. Taking depression as its focus, it includes some striking studies that seem to support three statements: body and mind are intertwined in depression, there is reduced body awareness in depression, and negative feelings towards one’s own body are present in depression.

To take one example, a person’s manner of walking has been shown to correlate with, and indicate, whether or not they are depressed. Not only that, but adopting what has been discerned to be a depressed walk (“reduced gait velocity, stride length, increased standing phase and gait cycle duration”) was shown to change the memory characteristics of participants in a study to being more like those of depressed individuals (i.e. recalling less positive material about themselves) (p. 55).

It is also of note that this book brings together BP and DMP in one volume, eliciting further dialogue between these fields as well as embodiment more widely. Jennifer Tantia offers a clear and engaging chapter outlining the basic premises of BP and DMP, sharing their similarities (such as them both being part of “the emerging paradigm shift toward inclusion of nonverbal awareness as part of psychotherapeutic healing” (p. 69), but also their differences. A distinction is drawn between BP being about “having a body”, with DMP focusing more on “moving your body.”

This is a useful distinction, so long as it isn’t taken too rigidly. While there is often an emphasis on the reporting of inner awareness in BP—Tantia mentions attending to this awareness, as typified by Focusing creator Eugene Gendlin’s “felt sense,” as a “bedrock” of BP practice (p. 70)—and DMP obviously has an emphasis on expression through movement, in practice this division can be more blurred.

Tantia acknowledges that the different trainings and focuses of BP and DMP practitioners can yield specialties in different areas of clinical practice (such as the sophisticated DMP system of Laban movement analysis). Yet she ultimately suggests we might see them both as two aspects of a single “continuum of healing” that moves from awareness of what is happening in the body, to desire for expression, to the action of expression.

The section on BP contains chapters from a number of names in the field and includes everything from the use of touch, to working with micromovements, to the embodiment of dreams. The first chapter is by Gill Westland. In it she offers an elegant overview of a strand of BP that emphasises the practice of awareness and centers around bringing forth the client’s latent potential and organic impulse to heal (p. 259).

It is both a useful introduction to BP for someone new to the field and a reminder, for this practitioner at least, of the different aspects of, and ways of speaking about, BP and what it can do. With its brief sections on training and its aftermath, this chapter emphasizes the importance of experiential learning that becomes “embedded in the psychotherapist and is often not known explicitly, but emerges [...] spontaneously, when the need arises” (p. 260). This is something that Westland argues “cannot be acquired through textbooks and interactive technology.” Considering the wide audience

the editors of this textbook aspire to, and the growing inclusion of aspects of embodiment into various disciplines, it seems a valuable thing to underline this important aspect of much BP training and the skills developed by BP practitioners.

Westland emphasises the importance of awareness being brought to bear on the relational dynamic occurring between therapist and client, as does Michael Soth in an intriguing chapter about his continuing research into “the relational turn in body psychotherapy.”

For Soth, “any habitual therapeutic stance, whether unconsciously taken for granted or deliberately chosen and ideologically rationalized, ends up either avoiding or exacerbating the experience of the client’s wounding in therapy” (p. 304). In a useful diagram he outlines eight different stances and habitual positions in the field of body psychotherapy that can be listed along a spectrum between two poles.

At one end is the “functionalist quasi-medical expert,” emphasising the therapist’s position as someone with authority providing some kind of treatment. At the other is the “phenomenological co-explorer” who strives for a therapeutic encounter of two equals authentically exploring a co-created space. Soth contends that each of the eight stances has “entirely valid and necessary dimensions” as well as “its respective shadow aspects and counter-therapeutic dangers” (p. 304). The point is to identify that we have a habitual stance in the first place, recognize these dimensions and aspects, and open to the possibility of actively shifting stance in response to the client’s ongoing process.

Readers may be familiar with both Westland’s and Soth’s work. Perhaps less familiar to readers outside of Germany is Functional Relaxation (FR), a “psychodynamic body psychotherapy method” founded by the German gymnastics teacher Marianne Fuchs (1908–2010) at the University Hospital of Heidelberg in the years after the Second World War (p. 266). As the name suggests, it emphasises relaxation as well as deep awareness of proprioceptive body states. There is a focus on breathing, with the emphasis on letting go via the outbreath, best accompanied by “a soft sound.” The method works to release “unconscious tension and blockades and find one’s own rhythm and a flexible inner balance” (p. 269).

As well as providing the statement used at the start of this book review, chapter authors Ursula Bartholomew and Ingrid Herholz describe the history of the approach, its relatively simple practical application, and the results of evidence-based research into its effects. Interestingly, FR has apparently evolved an accompanying language to describe body experience, one that includes “a wide range of pictorial terms and metaphors to make somatic experience accessible to conscious analysis” (p. 267).

I was pleased to see Rae Johnson as a chapter author. A “scholar/practitioner working at the intersection of somatics and social justice,” Johnson is concerned with highlighting the embodied experience of oppression, and the role of the body in reproducing and transforming oppressive social norms. She outlines three steps that body psychotherapists can take to bring themselves into fuller contact with the somatic experience of oppression, including engaging with their own privilege and examining unconscious biases with regard to diversity. These are things Johnson argues are not adequately engaged with, or indeed engaged with at all, in most body psychotherapy trainings: “In nearly all of the training I received it was assumed that simply being present in my own body and attentive to the body of my client would somehow transcend the differences in our social identities” (p. 353).

The inevitability of these themes being present in the therapeutic encounter to some degree is mentioned by Nick Totton, who states that “the social world and its power relations directly enter the therapy room, instantiated in the embodiment of both client and therapist” (p 285). Totton’s chapter outlines Embodied-Relational Therapy, created with the aim of integrating body-centered and verbal psychotherapeutic approaches in a way that accesses the fundamental connections between them. In what is a very body-oriented book, he cautions against therapists privileging the body, or the relationship, as the main or only channels of enquiry that they pay attention to, arguing that in a therapy session “fixation on specific aspects of experience risks missing what is most important” (p. 284).

Fixation or not, what strikes me most about reading this excellent book, apart from a feeling of excitement, is all the different ways of describing embodiment and practicing embodied therapies it contains. Like the proverbial blind men and the elephant, there is a sense the authors are discussing different parts of the same hidden thing, or the same part in different ways. Taken as a whole, it brings the elephant—a wondrous beast indeed—more fully into view.



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