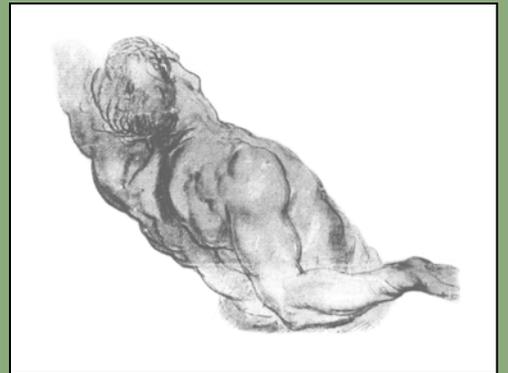


**the usa
body
psychotherapy
journal**

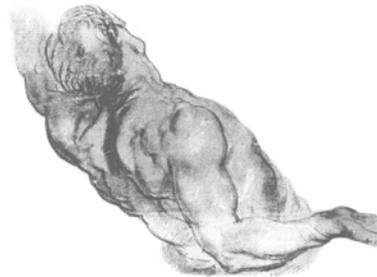


Volume 4 Number 2 2005

The Official Publication of
THE UNITED STATES ASSOCIATION FOR
BODY PSYCHOTHERAPY

Table of Contents

Editorial Jacqueline A. Carleton, Ph.D.	3
Letters to the Editor	5
Body Psychotherapy Research: An Introduction Alice K. Ladas, Ed.D.	8
Preliminary Results Concerning the Effectiveness of Body Psychotherapies in Outpatient Settings - A Multi-Center Study in Germany and Switzerland Margit Koemeda-Lutz, Martin Kaschke; Dirk Revenstorf; Thomas Scherrmann, Halko Weiss and Ulrich Soeder	10
Listening to the Body: Pragmatic Case Studies of Body-Centered Psychotherapy Amelia H. Kaplan, Psy. M., and Laurie F. Schwartz, M.Th., M.S.	23
Women in Bioenergetic Analysis Alice K. Ladas, Ed.D., Harold Ladas, Ph.D.	43
The Outcome of Body Psychotherapy John May, Ph.D.	59
Body Psychotherapy Modalities: Journal Articles and Online Sources Colleen Campbell Barshop, B.A.	71



©2005 USABP

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).

Body Psychotherapy Modalities Journal Articles and Online Sources

Colleen Campbell Barshop, B.A.

Abstract

This article is an alphabetized listing of the modalities within the body psychotherapy field which are currently practicing in the U.S. Each modality on the list includes the founder's name, an article quintessential in its description of the modality, and a summary of that article. The intention is to give the reader a summary of the history, theory, and process of each modality, when possible, and to be a resource for those who are interested in an overview of the body psychotherapy field.

Introduction

While the field of Body Psychotherapy has only formally been around for about sixty years it is a diverse field with many modalities. This collection of modalities is to be a resource for those who are interested in an overview of each of the modalities currently practicing and training in the United States.

This will include: one article that is a quintessential representation or explanation of each modality, from journals and online sources. This project required distinct boundaries because of the enormous amount of material that represented the various body psychotherapy modalities, such as journal articles, workshop handouts, websites, books, pamphlets, newsletters, magazines, compact disks, tapes, videos, etc. After looking through a range of mediums I concluded that it would be most useful to consider journal articles and articles posted online.

The procedure of finding modalities and building this list began in the library using electronic data bases such as CSA (which includes ATLA/ATLAS, ERIC, Medline, Philosopher's Index, PsycArticles, PsycInfo, Social Services Abstract, Sociological Abstracts), EBSCO, SpringerLink, and others. I ordered and read through the EABP annotated bibliography and utilized various lists from the USABP website. I realized then that there were many modalities that were doing work and training which were not within academia and so I began to employ various online search engines such as Google, Hotbot, Vivisimo, and Dogpile. I also spoke to individuals in the field and asked them to look over my growing list. In order to initially be as inclusive as possible I asked the USABP Newsletter to post my project in the December 2004 issue along with my contact information.

The question of what to include was challenging because there are healing modalities that in theory include the whole organism yet do not include the practice of psychotherapy. Additionally, there are body-based techniques that psychotherapists include or synthesize into their practices; yet these techniques alone, if practiced by a nonprofessional, are not body psychotherapy. Therefore this paper covers only body psychotherapy modalities as refined by the USABP (see <http://usabp.org/displaycom-mon.cfm?an=1&subarticlenbr=9>).

Once I had the name of a modality, I researched possible articles and then explored through the web for contact information. I interacted with each modality either personally or by contacting their main organization. Then I asked the organization or founding member either to suggest the article(s) that they felt were quintessential to their modality or sanction an article I chose. They also approved the annotations themselves. When the appropriate person could not be contacted you will see an asterisk next to the modality name. Modalities have not been included in this project for several reasons: the founders or their students could not be contacted, they did not have articles published or any material online, or their modality articles are only published in a language other than English. Because there is so much repetition and overlap of both theory and practice, another aspect of the process was meditatively clearing my mind and intending to read each article as though it was the first modality I was reading about. I had to maintain a fresh point of view with each modality.

The intention of this project has been to give the reader a summary of the history, theory, and process of each modality when possible from the article chosen. There are many articles, books, websites, and educational programs that support and describe each one of these modalities. One article alone is not enough. The best way to utilize this listing is to employ each article as a doorway into the modality it represents.

References

❖ Authentic Movement (Mary Starks Whitehouse)

Stromsted, T. (2001). Re-inhabiting the female body: Authentic movement as a gateway to transformation. *The Arts in Psychotherapy*, 28, 39-55.

Authentic Movement was developed by pioneer dance therapist Mary Starks Whitehouse as an integration of her studies at the C.G. Jung Institute in Zurich with her dance practice and training with German expressionist dancer Mary Wigman and myth-inspired dancer and choreographer, Martha Graham. In this article Stromsted describes her dissertation research on Authentic Movement and its transformative results for psychotherapy clients and group participants. Authentic Movement is a version of Jung's Active Imagination method embodied through movement. Marie Louise von Franz outlines Active Imagination in four steps: a) opening to the unconscious, b) giving it form, c) reaction by the ego, and d) living it. While Authentic Movement can be done in a group setting, at minimum it requires a mover/ client and a witness/ therapist. The mover does so with eyes closed to facilitate a connection and focus on the inner experience. This allows him/ her to engage in the inner experience, the inner impulse, listening to it respectfully and following it where it may lead. The witness observes the mover's experience while tracking her own somatic and imaginative processes. After the movement is finished the mover may wish to draw, write or work with clay to bring more form to the experience. This is followed by a discussion where the mover describes the experience and the witness "reflects on what she has seen and experienced, without judgment or interpretation, mindful of areas of potential projection." Benefits of Authentic Movement include an increased ability to be present, an experience of deeper layers of oneself, an opportunity for previously repressed aspects of the self to emerge, be acknowledged and transformed, and an experience of being whole—physically, psychologically, and spiritually.

For more information see <http://www.authenticmovement-bodysoul.com/>

❖ **Biodynamic Therapy (Gerda Boyesen)***

Southwell, C. *Biodynamic psychotherapy: Meeting the psyche in the body*. Retrieved June 1, 2005 from <http://www.positivehealth.com/permit/Articles/Bodywork/south66.htm>

Boyesen developed Biodynamic Psychotherapy as an integration of her own insights along with classical psychology, Reichian body-psychotherapy and active bodywork (Adel Bulow-Hansen). The philosophical structure involves oneness of body, mind and spirit and the work utilizes talking, movement, hands-on, meditative and sensory awareness. Upon entering a Biodynamic Psychotherapy room one notices the variety of possibilities that will inform therapy; there are chairs, a massage table, room to move within, and a mattress on the floor. The article discusses how clients may use these items for their therapeutic purposes. The core of this theory is the knowledge that each individual has a dynamic, unique potential; Boyesen calls this the primary personality. It is this part of us that pulls us toward the fulfillment of our capacities. On the other hand this primary personality is frequently suppressed by the secondary personality—the attributes created to survive and function in a given environment. Armor is a part of this secondary personality. Biodynamic Psychotherapy helps people get in touch with the essential, often oppressed part of themselves. This therapy is also infused with the feminine. The focus of this therapy is more on encouraging the primary personality than on dissolving the armor (although this too is part of it). The therapist works with the primary personality like a midwife—the process is one of "active expectancy: inviting and receptive." In addition, throughout this article are pictures and examples of a therapy session. This helps further conceptualize the work.

For more information see <http://www.biodynamicmassage.com/> and www.biodynamic.org

❖ **Bioenergetic Analysis (Alexander Lowen and John C. Pierrakos)**

Resneck-Sannes, H. (2005). Bioenergetics: Past, present, and future. *International Journal for Bioenergetic Analysis*, 15(1) 33-54.

This article was originally a keynote address from the 2003 Bioenergetic Analysis Conference in Brazil. Resneck-Sannes begins by taking the reader through the history of her involvement with Bioenergetic Analysis, effectively mirroring the development of Bioenergetic Analysis theory and practice. In this way the rich historical evolution of this body psychotherapy, with the legacy of Reich and Lowen at its roots, becomes clear. The article reviews many aspects of Bioenergetic Analysis work. The author spends time with the concept of affect and emotional expression, explaining how by opening up somatic holding patterns a client can then be with his/her feelings. Resneck-Sannes uses neurobiology to discuss the mind/body interface in scientific detail including the concept that the body is the access point to the unconscious. The importance of: working with both the holding patterns reflected on the outside of the body and the inside of the person, the prominence of the client/therapist relationship to the healing of the client, and the significance of different types of touch, are all examined. Most helpful is that throughout the article Resneck-Sannes gives numerous real life examples that clearly illustrate each point and give the reader an unobstructed view into Bioenergetic Analysis.

For more information see <http://www.bioenergetic-therapy.com/>

❖ Biosynthesis (David Boadella)

Boadella, D. *Biosynthesis*. Retrieved June 1, 2005 from http://www.biosynthesis.org/html/e_concept.html

Biosynthesis is a holistic method that creates a bridge between natural science and human sciences, by connecting the realms of pre and perinatal psychology, somatic and depth psychotherapy and transpersonal psychology. Boadella has been inspired by the energetic theories of Reich, the prenatal and perinatal discoveries of Francis Mott and Frank Lake, Keleman's formative process and emotional anatomy, David Bohm's soma significance, Rupert Sheldrake's morphogenetic fields and the spiritual theory of Robert Moore. Biosynthesis is a client-centered psychotherapy that has a multidimensional approach: affecto-motoric work with muscle tone and movement, energetic work on external and internal breathing rhythms-systemic work on behavior in relationships, psycho-energetic work on the spectrum of holding and releasing emotions, psycho-dynamic work with speech to eliminate communication problems, transformative work on restrictive ideas and images that limit our visions, transpersonal

development by using somatic meditation to link up with the voice of the heart

Polarity is a central concept in Biosynthesis; what could help one person could damage another. The therapist has multiple polarities to choose from and makes decisions centered on what is helpful for this client in a particular time. The main polarities are: internal work or external work, rising or falling energy levels, active leading or receptive following, regressive or progressive orientation, verbal or nonverbal communication. Biosynthesis was created by David Boadella and has been researched and developed over the past 40 years by David Boadella, Silvia Specht Boadella and leading members of the International Training Faculty of Biosynthesis. In Brussels, 1998, Biosynthesis was the first body psychotherapy method to receive scientific recognition from the European Association for Psychotherapy (EAP).

For more information see: <http://www.biosynthesis.org/index.html>

❖ Body-Mind Centering (Bonnie Bainbridge Cohen)

Cohen, B. (2001). *About body-mind centering*. Retrieved June 1, 2005 from <http://bodymindcentering.com/About/>

Body-Mind Centering helps individuals transform their experience of their bodies through movement re-education and hands on repatterning. This work is an integration of different perspectives including anatomy, physiology, psychophysical principles, and developmental theory. This experiential learning is considered an exploration of embodiment where each person is both the student and the subject. While this is a body psychotherapy, Body-Mind Centering can be applied in many other areas as well.

For more information see <http://bodymindcentering.com/>

❖ Body-Mind Psychotherapy (BMP) (Susan Aposhyan)

Aposhyan, S. (2001). Interactive psychobiological regulation. *Currents: A Journal of the Body-Mind Centering Association*, winter/spring, 29-35.

Body-Mind Psychotherapy is a modality that highlights physiology and early motor development, with an additional focus on embodiment. This article outlines the concept of interactive psychobiological regulation (IPR) and gives the reader an understanding of this inherent part of BMP. IPR is a term coined by Allan Schore, and parallels the neurological aspect of the embodied relationship in which the BMP therapist trains. In the beginning of life the caregiver and infant have a flow of nonverbal communication that serves as an interactive psychobiological regulator for the infant. In other words, the extending and receding of stimulation from the mother to the child, facilitates the child's future ability to regulate itself. Aposhyan refers to Schore's work and effectively connects this concept to the manner in which a body psychotherapist relates to a client. She does this by listing six detailed ways that these two ideas intersect. The result is an embodied means of working with a client; a union between the relational and the somatic. The article concludes with a case illustration.

For more information see <http://www.bodymindpsychotherapy.com/index.html>

❖ **Bodynamic Analysis (Lisbeth Marcher)**

Renshaw, B. (n.d.) *Bodynamics analysis: A new somatic psychology*. Retrieved June 1, 2005, from <http://www.bodynamicusa.com/AboutBDYN.html#Bodynamic%20Analysis>

When you go to this address you must scroll down a bit to get to the article. Throughout there are links that further explain certain concepts. Lisbeth Marcher studied physical therapy and psychotherapy before creating Bodynamic Analysis. An important part of the theoretical framework includes a developmental model. Marcher created a map of the psychological/ emotional content and development by age, of each muscle in the body, covering seven stages of childhood development. Using this developmental map, Bodynamics practitioners determinate muscles in clients that are blocked (hyper) or have sacrificed (hypo) their actuation. Then they develop these areas and work to actualize the missing psychological/ cognitive/ emotional purpose they represent, thereby expanding clients' body awareness. This modality views relationship and mutual connection as the primary human drive. Some of the tools used within therapy include collecting a relationship and trauma history. A body map is sometimes created that reflects the areas that will later be the focus of treatment. Clients are taught to build resources that were previously lost or stunted in their development. From this perspective, there is a natural flow in life and if this is interrupted then problems or illness arise. In other words, if a person is held back in their ability to sincerely connect with others then they will not be fully healthy. The idea is that the more a client can develop their body awareness the more able they will be to establish deep connections to others.

For more information see <http://www.bodynamicusa.com/index.html>

❖ **Body Synergy® (Matthew & Ellen Cohen)**

Cohen, M., & Cohen, E. (2000). *Body psychotherapy: Learning the art of letting go*. Retrieved June 1, 2005 from <http://www.bodysynergyinstitute.com/bodytherapy.html>

Body Synergy® combines Deep Tissue Bodywork inspired by Rolfing®, Patterning®, and Continuum® with an integrated blend of psychotherapy. The therapy process is a dialogue between the therapist and client, utilizing the mind and the body, creating a healing partnership. Body Synergy® involves a psychophysical re-education which comes about as the client becomes cognizant of old holding patterns in their body and the parallel customary way they process emotions and move into behavior. In this way, clients are empowered by learning to let go, to heal and enliven themselves. A Body Synergy® session normally begins with the client talking about their presenting issues and eventually moving to the massage table where bodywork will blend with psychological exploration. This article has two cases involving clients with very different issues, giving the reader an idea of the range of this work. Body Synergy® is a way for clients to move from a “non-relational stance of isolation to a relational stance of being open to self and others.”

For more information see <http://www.bodysynergyinstitute.com/index.html>

❖ **Braddock Body Process (Carolyn J. Braddock)**

Braddock, C. (2004). *The braddock body process*. Retrieved June 1, 2005 from <http://www.braddock-body-process.com/services.html>

The Braddock Body Process has its foundation in the ancient art of Tai Ji and Qi Gong philosophy and movement. With this body psychotherapy, clients learn “tools,” to get in touch with the many “body voices,” which make up the distinctive patterns in the way a person breathes, moves and makes sound. Listening to these varied “body voices” helps to facilitate personal growth by integrating body, mind and spirit. Creative expression through music and body dialogue, and body-centered interventions are an essential part of the work. Braddock’s purpose is “being with people on a deeper level, using breath, sound and movement to incorporate the emotional, physical, and spiritual body.” The whole person is considered as shown in the focus on emotional, physical, and spiritual

trauma. Core personal concerns such as loss, life-threatening illness, addiction, sexuality and body image, relationships and career transitions are also a central part of the work.

For more information see <http://www.braddock-body-process.com/>

❖ Chiron (Bernd Eiden, Jochen Lude, and Rainer Pervoltz)

Carroll, R. (n.d.) *The Chiron approach*. Retrieved June 1, 2005, from <http://www.chiron.org/>

To get to this article go to the website, choose 'About Our Approach,' and then scroll down a bit. Immediately we learn that Chiron is eclectic; it integrates many different perspectives from body psychotherapy as well as from psychology and philosophy. Chiron emerged from the founders' creative integration of their own ideas and experiences along with influences including Biodynamic therapy, Core Energetics, Biosynthesis, Formative Psychology, Bioenergetic Analysis, Radix, Haikomi, Analytical Body Psychotherapy, Object Relations, and Somatic Trauma Therapy. This article itself is philosophically driven. It outlines Chiron's relationship with the physical body including the autonomic nervous system and the energetic body and their perspective on touch, breathing, movement, holism, integration, humanism, and the transpersonal. As therapists they take an active role in the therapeutic relationship and view the relation between client and therapist as an essential transformative element. Rather than a focus on techniques there is a focus on the therapeutic relationship. Another important aspect of this modality is the mind body split. People become unhealthy because of the struggle between the body and mind. In other words, as humans we have natural impulses that we at times repress, all the while not considering where these urges come from. When we can learn to get in touch with these impulses we can learn about ourselves and heal.

For more information see <http://www.chiron.org/>

❖ Core Energetics (John C. Pierrakos)

Wilner, K.B., (1999) *Core energetics: A therapy of bodily energy and consciousness*. Retrieved September 1, 2004, from <http://www.coreenergeticseast.org/>

Core Energetics looks at human beings from a holistic perspective, which is to say as physical, emotional, intellectual, and spiritual beings. Two major elements of Core Energetic theory are energy and consciousness. Energy flows through the five levels of being: body, emotion, mind, will, and spirit. When something is blocking energy from flowing, illness is the result. Action methods are used by Core Energetic therapists to release energy blockages. The techniques used are designed to help clients through the four stages of therapy: 1. the identification and confrontation of the mask, 2. the exposure and release of the lower self, 3. reunion with one's authentic self, 4. recognition of one's universal life task. One crucial aspect that sets this modality apart is the consideration of spirituality as part of the therapeutic system. Core Energetics also welcomes resistance which it utilizes as part of the therapy. This article describes and gives two case models of the basic and the advanced staccato breathing technique as taught during a therapy session. These examples give the reader a clear idea of how a session might precede. The reader also learns about the Core Energetic requirements for professional training.

For more information see www.coreenergeticseast.org

❖ Dance/ Movement Therapy (Marian Chace and Blanche Evan)

This is a field in and of itself and simultaneously, it is a body psychotherapy. Marion Chace began pioneering dance therapy with psychiatric in-patients and Blanche Evan created insight oriented dance therapy for the neurotic client. Mary Starks Whitehouse is also a pioneer in the movement therapy field; she is listed in this bibliography under Authentic Movement. Because of the vastness of this field (a bibliography of modalities within Dance/ Movement Therapy may be on the horizon) I have briefly annotated three articles that give an overview of different aspects of this therapy.

Pallaro, P. (1996). Self and body-self: Dance/movement therapy and the development of object relations. *The Arts in Psychotherapy*, 23(2), 113-119.

Dance/movement therapy and object relations have certain parallel assumptions and this article reviews these connections. In the process the reader not only gets to see how these two theories go well together but also learns about dance/movement therapy. See article for more information.

Schmais, C. (1985). Healing processes in group dance therapy. *American Journal of Dance Therapy*, 8, 17-36.

This article concisely reviews group therapy theory and then moves into group dance therapy, listing the eight healing processes within the therapy as: Synchrony, Expression, Rhythm, Vitalization, Integration, Cohesion, Education, and Symbolism. The article spends time with each of these elements and in this way we learn the theory behind dance therapy. See article for more information.

Tortora, S. (2004). Our moving bodies tell stories, which speak of our experience. *Zero to Three Journal*, 24(5), 4-12.

The title of this article is the essence of the work found within. The author shares her session with a single client (child) throughout the article to exemplify the powerful subtleties of nonverbal communication. She has created a particular set of tools for therapy called Ways of Seeing, which utilizes the principles of dance movement psychotherapy, authentic movement, and the Laban Movement Analysis (LMA). There are four principles of a session: 1) all activities in a session are there to give the child the opportunity to use their multi-sensory based, non-verbal movement to show who they are, 2) all nonverbal actions have the potential to be communicative, 3) nonverbal behaviors are the expression of self and can be used for meaningful communication, 4) the practitioner is always observing to understand what is being communicated by these nonverbal actions. See article for more information.

For more information see The American Dance Therapy Association at <http://www.adta.org/> and The Southern California Chapter of the American Dance Therapy Association at <http://www.sccadta.org/>

❖ **Eidetic Image Therapy (Akhter Ahsen)**

Ahsen, A. (1980). Eidetic therapy: The picture approach to psychosomatics. *Somatics*, Spring, 4-11.

Eidetic Image Therapy is an approach to body psychotherapy that uses a special type of mental image called eidetic (eye-det-ic). This is considered a body psychotherapy because while the work is centered around mental imagery the body is considered an integral aspect of the theory and of the internal process. Akhter Ahsen formulated Image psychology from a melding of psychology, sociology, literature, philosophy and mythology. Out of this work he developed Eidetic Image Therapy as a therapeutic tool for working with the whole being and restoring wholeness. This modality is founded on the idea that mental images are either mechanistic or holistic. Memory is made up in part of an image that interprets the original experience through a rigid structure made up of a point of view that stems from our psyche. In other words, the image that holds a memory is one that has been created by our unique perspective, this is a mechanistic image and it is not a fully accurate representation of what actually happened in the original moment. The holistic mental image is stored in the imaginative core of each person; it is the memory of wholeness. Another important part of the theoretical foundation of Eidetic Image Therapy is the ISM. This comes out of the idea that image is a tripartite phenomenon; mental imagery has three parts that make up its whole. There is the image as a pictorial detail (I), and it involves the body of the experiencer through a somatic expression (S), which in turn generates a meaning (M). This theory reflects that mental imagery is not a one dimensional image but something made up of these three aspects. This article has a collection of case studies throughout that help elucidate this process in a practical context. While the theory is sophisticated the application is straight forward and approachable. This process begins with an exploration of childhood eidetic images called the Eidetic Parents Test and then eventually moves into the client correcting the mechanistic images by connecting with the holistic, accurate images. In this way psychological, physical, and spiritual issues are transformed as inaccurate images (thought constructs) are corrected and made whole.

For more information see <http://www.eidetictraining.com/index.html> and <http://journalofmentalimagery.com/>

❖ **Eye Movement Desensitization and Reprocessing (EMDR) (Francine Shapiro)**

Shapiro, F. (2004) What is EMDR? Retrieved June 1, 2005, from <http://www.emdr.com/briefdes.htm>

Eye Movement Desensitization and Reprocessing (EMDR) is a methodology that was first discovered in 1989 by Dr. Francine Shapiro, which has since proved to be a highly effective treatment for trauma victims suffering Post Traumatic Stress Disorder (PTSD). EMDR integrates aspects of psychodynamic, cognitive behavioral, interpersonal, experiential, and body psychotherapies into structured protocols created to maximize treatment effects. I have included EMDR in this bibliography because it works with trauma which is a body/psyche issue and because the transformation, the desensitization, is occurring within the body and then consequently healing the psyche. (Talk therapy is not as effective with trauma because the language centers of the brain are off-line during the trauma and again off-line during the recollection of the event). EMDR is an information processing therapy and has eight phases. In the first phase the therapist takes the client's history, determines if EMDR is appropriate, and if so, then they both discuss potential targets for EMDR processing. The second phase involves accessing coping skills and resources to ascertain that the client is stable. In phase three through six a target memory is identified and processed using EMDR procedures. Phase seven is closure with instructions to keep a journal throughout the week and phase eight occurs at the beginning of the next session by going over the last session and anything that may have occurred since. Articles with research involving EMDR and specific psychological disorders, efficacy, and validity can also be found on this website.

For more information see <http://www.emdr.com/index.htm>

❖ Feminist Body Psychotherapy (Lauree E. Moss)

Moss, L. E., (1996). After the crash: My journey to become a lesbian feminist body psychotherapist. *Women and Therapy*, 18(2), 61-70.

Dr. Moss began in this field with trainings in Gestalt, Bioenergetic therapy, and Reichian work. Also significant, were her experiences with the homophobic and sexist philosophies that lay behind the therapy and training she received. Later she was influenced by Elsa Gindler as she formed FBP. This influence and other experiences showed her that there were more gentle ways of working with the body, more feminist ways, if you will. One of the helpful aspects of this article is that it places the emergence of body psychotherapy within a historical context. In fact, context seems to be an important part of Feminist Body Psychotherapy. The historical place that women are living in as well as the individual context of what it means to be a woman in this world and the possibility of wounding and how a therapist must consider context when choosing the path back to wholeness for their clients. Feminist Body Psychotherapy is one that supports a clients' full emergence into wholeness, whether this includes an identity that is homosexual or heterosexual.

For more information contact Dr. Moss at laureemossphd@aol.com

❖ Focusing Oriented/ Experiential Psychotherapy (Eugene Gendlin)

Hendricks, M. (2001). *Focusing oriented experiential psychotherapy*. Retrieved June 1, 2005 from http://www.focusing.org/research_basis.html#Introduction%20and%20Overview

Focusing-Oriented/ Experiential Psychotherapy developed from a collaboration in the 1950s at the University of Chicago between Carl Rogers, the founder of Client-Centered Psychotherapy and philosopher, Eugene Gendlin. Coming from the philosophical tradition of Dilthey, Dewey, Merleau-Ponty and McKeon, Gendlin originated a philosophy of the "Implicit" and put it into the service of the work Rogers was doing. The question that prompted him was, what is actually going on when empathic conditions are present? Eventually his theory involved a foundational shift from looking at content—what the client discusses—to the manner of process—how the client is relating to experience. One of the hypotheses that was tested at this time by Gendlin and Zimring was that clients who are more successful in therapy will show an increasing ability to refer directly to bodily felt experience. What they found was that clients who were in touch with their felt experience (Experiencing Level) early in therapy had a more optimistic predicted outcome. So failure outcomes could be predicted already from the beginning sessions. In response to this research and the outlined "problem" specific instructions were formulated to teach people how to connect with their felt experience, and this is now called Focusing.

This article reviews eighty-nine studies involving Focusing. This exposes the reader to scientifically documented information that strengthens the theory behind this process. Then the article outlines the practice of Focusing. The fundamental measure of Focusing Oriented Psychotherapy is whether the client's experience is being carried forward in the moment in the interaction with the therapist. The interaction between the therapist and client should support the client's ability to contact the bodily felt sense of their experience. The article provides case examples

of sessions to elucidate the practice. Focusing Oriented Psychotherapy, while a therapy in and of itself can also be incorporated with other therapeutic models. The Focusing Institute provides Focusing training for clients and the general public through a worldwide network of certified teachers and maintains a Focusing partnership pool for people wanting to practice Focusing.

For more information see: <http://www.focusing.org/index.html>

❖ Formative Psychology (Stanley Keleman)

Keleman, S. (n.d.) *A new vision for somatic psychology: Stanley Keleman's formative approach*. Retrieved on June 1, 2005, from <http://www.centerpress.com/html/new.html>

The goal of Formative Psychology is to utilize daily life and voluntary muscular effort to learn how to form a personal somatic/emotional embodied adult to be present in the world and additionally, to have the tools to reorganize it as becomes essential in life situations. It is an evolutionary, developmental process that includes the "bodying practice," which is a five step system based on the ability to use voluntary muscular effort to influence the organism's basic expansion-contraction pulsatory organizing reflex. The first step is becoming aware of our present somatic-emotional stance. The next step is to intensify the muscular attitude or stance and in this way become aware of what our somatic reality is. Step three is to use voluntary muscular effort to disassemble the muscular pattern. Four is to pause to contain the pulsatory response, in other words to be able to reorganize the former muscular stance by differentiating it. And five is the practice of applying the reorganization to life situations over time. It is through this practice that the client regroups or shapes themselves from past somatic traumas. By finding solutions through the body, we begin to create a somatic identity.

For more information see <http://www.centerpress.com/index.html>

❖ Gentle Bio-Energetics (Dr. Eva Reich)

Overly, R. (2002). *Gentle bio-energetics theory for everyone*. Retrieved on June 1, 2005 from <http://gentlebio-energetics.com/>

To get to this article go to the website, choose "Teach Me," and then you will be led to an online tutorial system. There you will scroll down and click on "Life Energy: Module 1." There are eighteen different online programs each taking you through a learning on Gentle Bio-Energetics.

Gentle Bio-Energetics was created by Eva Reich, Wilhelm Reich's daughter and close co-worker. This body-psychotherapy is founded on the interaction of three essential components that structure our life patterns: life energy, trauma, and armor. Life energy is the animate, life-giving essence that pulsates, expands and contracts, charges and discharges, streams through the body, and flows beyond the surface of the skin. We experience this life energy when we experience emotions and sensations. Armor is reflected in all the conscious and unconscious patterns we bring into existence to guard ourselves from experiencing to the full extent the overwhelming emotions and sensations when trauma occurred. Trauma and armor are woven together; underneath all armor is the experience of trauma. According to Gentle Bio-Energetics armor is what interrupts the normal flow of energy. One of the goals of this therapy/healing is to get the life energy flowing freely and this is done by working with the whole being- physically, spiritually, emotionally, and mentally. This therapy is multi-functional in that it can be utilized as a first-aid immediately after experiencing a trauma, as a tool for uncovering and healing past trauma, and employed to prevent future trauma. Important to note is that this therapy is not done through forceful manipulation of the body but rather observation and gentle touch. By watching the way the life energy is currently flowing, the therapist can see where the armor is blocking the flow, and then discover the way the armor can be gently melted. Gentle Bio-Energetics is particularly effective in working with preverbal primal trauma.

For more information see: <http://gentlebio-energetics.com/>

❖ Gestalt Body Psychotherapy

Kepler, J. (2001). Gestalt approach to body oriented theory: An introduction. *Gestalt Review*, 4(4), 262-264.

Gestalt Therapy founded by Fritz Perls, Laura Perls, Ralph Hefferline, and Paul Goodman was not defined as a body psychotherapy although the body has always been included in Gestalt theory. Like most therapies, over the years this therapy has changed and some Gestalt practitioners have moved towards a more direct body emphasis. Kepner, who is on the professional staff at the Gestalt Institute of Cleveland, has been one of the contributors to this expansion. This article presents the work of three Gestalt Body Psychotherapists and includes the strengths and weaknesses regarding the Gestalt approach. Each practitioner has also established herself outside of the Gestalt framework: Ilana Rubenfeld, Ruella Frank, and Frances Baker. What the reader learns about Gestalt is that it is rooted in: an experimental and an experiential mode of working, an interest in experience, a syncretic capacity and holism, the integral nature of body, mind, and emotion, the validity of embodied modes of therapeutic contact, the importance of experience and awareness as opposed to the intellectual understanding in the change process, self-regulation and self-responsibility, and an understanding of the therapeutic encounter as a healing process. From Kepner's perspective the strength of Gestalt Body Psychotherapy is "its broad sweep and inclusiveness and that its methodology provides the practitioner with an inherently experimental mode in which every aspect of experience is fair game."

For more information see: <http://www.gestaltreview.com/> The Gestalt Review
<http://www.newyorkgestalt.org/index.html> The Original New York Gestalt Institute
<http://www.gestaltinstitute.com/> Gestalt Institute of San Francisco
<http://www.aagt.org/> The Association for the Advancement of Gestalt Therapy

❖ Hakomi (Ron Kurtz)

Barstow, C. (1985). An overview of the hakomi method of psychotherapy. *The Hakomi Forum*, 2, Winter, 8-17.

Ron Kurtz studied various forms on his way to formulating Hakomi and still this refined practice is very much its own modality. In this article we find a therapy session followed by notes of explanation that make it helpful for the beginner to understand what constitutes Hakomi therapy. Additionally at the end of the article is a visual display that further explains the therapy process. In this way we see different Hakomi techniques in action such as contact, tracking, crossing the mind/body interface, taking over, and supporting the body. We learn that there are 4 states of consciousness and that Hakomi therapy takes place within the state of mindfulness; that the 4 components of a "Sensitivity Cycle," outline the process of therapy and that the 8 major body types are a part of the character theory that assists the therapist in determining what the client's character strategy is and what it is they need in that moment. The therapist models and embodies attitudes of compassion, curiosity, openness, acceptance, trust, and patience and in this way encourages the client to feel safe and eventually learn how to embody these attitudes themselves. In Hakomi, therapy is not about repairing something broken. It is about studying the organization of one's experience, on the part of the therapist and the client. Transformation is said to occur in Hakomi when a client can organize in some aspect of life that their core organizing beliefs had previously organized out.

For more information see <http://www.hakomiinstitute.com>
 All issues of Hakomi forum can be found in full text at the above address.

❖ The Hendricks Method of Relationship and Body-Centered Transformation (Gay & Kathlyn Hendricks)

Hendricks, G., Hendricks, K. Guiding principles of our work. Retrieved on June 1, 2005, from http://www.hendricks.com/store/guiding_principals.asp?dept_id=14

This section of their website outlines ten guiding principles of the Hendricks Method of Relationship and Body-Centered Transformation. This modality includes experiential exercises designed to change the state of consciousness within which problems occur and assist discovery of a new state of consciousness where problems can resolve themselves. This training is designed to provide spiritual shifts of consciousness which can be felt in the body. Spirituality in this sense is not about cosmology or religious belief systems rather it is about the universal spiritual experience that all humans share. An example of this might look like a heart-centered awakening of love and compassion. In addition, this modality's ideas and practices have practical application for relationship transformation and are founded on scrupulous honesty, creativity and commitment to the relationship. People are encouraged to put their energy into taking responsibility for their part in the relationship rather than defending their role as the victim. There is a focus on giving and receiving appreciation rather than attempting to get others to appreciate us. Also between partners it is encouraged to notice the similarities rather than noticing

the differences, whether this is between different genders or same gender. Within the Hendricks Method, relationship problems can be resolved with five questions: What am I not facing? What truths have I not spoken? What have I been blaming others for that I need to own responsibility for creating? What choices do I need to make? What actions do I need to take?

For more information see <http://www.hendricks.com/store/default.asp>

❖ Integrative Body Psychotherapy (IBP) (Jack Rosenburg, Marjorie Rand, Beverly Kitaen Morse)

Rand, M.L., & Fewster, G. (1997) Self, boundaries and containment: An integrative body psychotherapy viewpoint. Retrieved on June 1, 2005, from <http://www.drrandbodymindtherapy.com/articles.html>

Integrative Body Psychotherapy utilizes a developmental model and values relatedness and autonomy through direct somatic participation and observation and body awareness. This is a modality that views awareness as the key to change. As far as history, IBP has been influenced by Gestalt therapy, Reichian therapy, Yoga, Object Relations theory, and Transpersonal Psychology. Integration of different methodologies serves to address all aspects of the client; in other words, it provides a way of working with each client as a whole. In this article there is a thorough list of the 12 basic assumptions of IBP, which includes the premise that body, mind, and spirit are in a symbiotic relationship and so must be worked with collectively. A detailed explanation of boundaries, development of the self, and containment within IBP, as well as a comparison between the containment model and the cathartic model, gives the reader a further understanding of the work that is being done here. Additionally, a transcript of an individual therapy session demonstrating boundary work and an example of a group boundary exercise show the experiential and didactic nature of this work. The article ends with a review of the factors necessary for therapy.

For more information see
<http://www.drrandbodymindtherapy.com/index.html>
and <http://www.ibponline.com/>

❖ Life Energy Process (Stephano Sabetti)

Sabetti, S. (2004). Life energy process. Retrieved June 1, 2005, from <http://instituteforlifeenergy.com/public/index1.html>

Life Energy Process (L.E.P.) has evolved from what was originally called Life Energy Therapy (L.E.T.) which Sabetti developed by integrating elements of numerous Western and Eastern therapies and philosophies. L.E.P. utilizes psycho-physical forms and techniques in order to support and aid the physical, mental and spiritual development of individuals and groups. The core concept of L.E.P. is that life energy is the foundation and forms every living being, this energy can be felt as physical vibrations. These may be in harmony, or take the form of disorders, which can appear as physical or mental illness. Therefore, each difficulty is to be viewed as a disturbance of energy flow. This energy viewpoint results in clarity, simplification and the chance to reach beyond the level of symptoms to the root of any disorder. L.E.P. is process oriented and takes into consideration the natural phenomenon of continuous change as the basis of life. When a person resists this change energetic disturbances can result. Often people hold on to these disturbances and are attached to the problems of the past as part of their neurotic identities. Sabetti encourages the client to stay in the present, become conscious and let the energy movement vibrate through. As blockages and disorders gradually vanish, the aim of the work is to individually explore who we essentially are. Thus, in time it becomes possible to surpass the limitations of the past and to recognize oneself more and more as part of a greater wholeness.

For more information <http://instituteforlifeenergy.com/public/index1.html>

❖ Lomi School (Robert K. Hall, Richard Strozzi-Heckler, Alyssa Hall and Catherine Flaxman)

Pope, T. (1999). Vehicle of life. *Lomi Somatics Forum*, 4(1).

The Lomi School is thirty-five years old and is known in the USA and Europe for its training of psychotherapists interested in developing skills in body-based and meditation-related therapies. Lomi counselors practice a body based approach to psychotherapy by concentrating on the whole person - body, mind and spirit. This article is

driven by a case study. In it the author assists a client in being mindful of whom she is in the therapeutic moment, and to inquire into the nature of her being and of her life. The Lomi techniques have developed over the years through an integration of ancient practices and modern techniques of focusing attention on the entire scope of being alive. This case study concentrates on guiding the client to witness (through mindfulness) and unravel her past conditioning. In this way she can then discover her essential self and move forward into her experience of who she really is.

For more information see <http://www.lomi.org/>

❖ The Moving cycle (Christine Caldwell)

Caldwell, C. (2004) Caring for the caregiver. *Psychotherapy Networker*, July/ August, 34-35.

The Moving Cycle has its influences in dance, bodywork, and contemplative psychology. As a modality, it is a natural healing process that has four stages: awareness, owning, appreciation, and action. This article describes an important aspect of the therapy, therapist self-care. There is "freestanding self-care", which involves the renewal process that we tend to outside of the therapy session. Then there is "embedded self-care" and this calls for action within the session, for example, being attentive to the client and to ourselves at the same time. This "oscillation of attention" is the central way to take care of ourselves, which is to say our body, our mind, our spirit, our psyche, our selves. Caldwell utilizes an actual session to exemplify this essential part of good body psychotherapy.

For more information see <http://www.naropa.edu/> where Caldwell is the founder and director of the Somatic Psychology Department.

❖ Organismic Psychotherapy (Katherine Ennis Brown and Malcolm Brown)

Goodrich-Dunn, B. & Greene, E. (2001). Voices: A history of body psychotherapy. *USA Body Psychotherapy Journal*, 1(1), 53-117.

While this article is a history of body psychotherapy it was chosen because, while the Browns are an important part of the body psychotherapy field, their work is mostly published in book form. My annotation is not of the entire article but rather covers the section on Malcolm Brown which briefly shares with us the path of Brown and how he came to develop Organismic Psychotherapy. Brown was primarily influenced by C.G. Jung, Abraham Maslow, Erich Neumann, Carl Rogers, D.H. Lawrence, neurologist Kurt Goldstein, and Wilhelm Reich and he went on to develop a modality that functions to re-activate the natural mental/spiritual polarities of the psyche and soul. His work includes techniques to rouse the energy flow and integrate with the main dynamic Being Centers of the embodied soul: (1) the Agape-Eros Being Center consists of the upper frontal portion of the body and mediates feelings of openness toward others, (2) the Hara Being Center, the abdominal portion of the body, permits self-love, (3) the Logos Being Center, the upper dorsal portion of the body, holds intuitive faculties, and (4) the Phallic-Spiritual Warrior Being Center, which consists of the lower back and the limbs, enables resoluteness (perseverance). Two other significant aspects of the Brown's work is the wide use of motionless, direct touch for the purpose of undermining armor and mobilizing exercises designed to challenge the armor.

For more information see <http://www.bodypsychotherapy.org/> and "[Healing Touch: An Introduction to Organismic Psychotherapy](#)" by Malcolm Brown.

❖ Orgonomy (Wilhelm Reich, M.D.)

Baker, E.F. (1977). Medical Orgonomy. *Journal of Orgonomy*, 11(2), 188-194.

Orgonomy was developed by Wilhelm Reich, M.D., as the scientific study of orgone energy (life energy). This article gives a clear history of how Reich's theories developed, including the central observation that if a person is capable or becomes capable of complete sexual release at the moment of orgasm they naturally regulate their energy metabolism and will remain free of neurosis. From this and other observations Reich arrived at a theory of

“sex economy” which rests upon the natural functions of charge and discharge of energy. Almost all people, because of the culture they grow up in, have energy blocks in various areas of the body and these are largely manifested as chronic muscle contractions. Medical orgone therapy, the mind-body treatment developed by Reich, is practiced only by physicians that are board certified in the specialty of psychiatry. It focuses both on removing physical armoring and addressing the individual’s specific character attitudes. This article gives a thorough and approachable explanation of the theory and method of treatment. It includes how armor is formed in infancy and childhood, how it becomes layered and distributed in the individual, and how the therapist proceeds in treatment. The ultimate goal is orgasmic potency and, while this is not always attained, many lasting benefits come about as armor is dissolved.

For more information see <http://orgonomy.org/index.html>
This article and others can be found at the above site.

❖ **Pesso Boyden System Psychomotor (PBSP) (Albert Pesso and Diane Boyden-Pesso)**

Pesso, A. (2000). Memory and consciousness: In the mind’s eye, in the mind’s body. Retrieved June 1, 2005, from <http://www.pbsp.com/dutchcon.htm>

This article scientifically explains the connection between memory and consciousness and how they intrinsically involve the body localizing this concept as central within body psychotherapy theory, while also giving a clear and condensed overview of the Pesso Boyden System Psychomotor modality. Our past experiences and the memories associated with them can lead to a body filled with emotion, these “charged body states” come before emotional expression but this emotionality is often unconsciously suppressed and so remains stuck in the body. The result of this can manifest anywhere along the continuum of disease. This modality creates a venue, an environment where the client can safely express these “body-bound emotions.” Everything we experience or have experienced in our lives is registered and stored in our brain and in our body. Brain research shows that our consciousness, our idea of who we are and what is going on around us, is for the most part based on and driven by memory. This explains why people who have grown up in an unsupportive environment tend to have a negative adult experience as well. In PBSP, clients reenact and then recreate a more positive, symbolic “as-if-past” conditioning. Thus clients are provided a way to reinterpret their consciousness, allowing them to create new, positive experiences and therefore a new way of viewing the world.

For more information see <http://www.pbsp.com/>

❖ **Prenatal and Perinatal Body Psychotherapy (Thomas Verny and David Chamberlain)**

Glenn, M. (2002). *The use of body-centered psychotherapy in working with prenatal and perinatal imprints within a group context*. Retrieved June 1, 2005 from http://www.sbgj.edu/cont_edu/glenn/SBGICEUGroupTherapy.pdf

Within Prenatal and Perinatal Psychology there is a large theoretical substratum that includes the developmental period before birth, birth, birth trauma and its healing. This particular article focuses on healing early imprints including attachment and birth trauma. All areas of Prenatal and Perinatal Psychology have aspects that incorporate somatic experience. In addition, some of the modalities in this bibliography utilize Prenatal and Perinatal Psychology theory and use their modality to work with birth trauma.

The theory and research behind birth trauma work demonstrates that early somatic experience produces the foundation upon which people live their lives. Problems with interpersonal and intrapersonal relations can be traced back to conception, gestation, birth and bonding. Prenatal and Perinatal Psychology utilizes dynamic and body-oriented interventions that can heal and re-pattern early trauma.

This article gives a brief history of Prenatal and Perinatal group process work along with a review of the different types of group modalities that do this work. The redeemable qualities of group work for birth trauma verses individual work and when this may not be the mode of choice is explained. The article then focuses on the structure of Prenatal and Perinatal group therapy and individual therapy creating a protocol for the work. This article reviews one of several ways of working with birth trauma based on Prenatal and Perinatal Psychological theory.

For more information see: <http://birthpsychology.com/> and <http://www.sbgj.edu/>
www.usabp.org

❖ Process Oriented Psychology (Dreambody) (Arnold and Amy Mindell)

Mindell, A. (n.d.) Some history, theory and practice: Beginning with the dreambody and including the quantum mind and healing. Retrieved June 1, 2005, from http://www.aamindell.net/processwork_frame.htm

POP or Process Work has its roots in physics, Jungian Psychology, and Taoism. This is a non-pathological, relational approach to learning about our selves and our experiences. Observation is a foundational aspect of this work; the therapist tracks the process of the client and supports the process as it unfolds. The dreambody is another essential piece of this work. There are several books by Mindell that describe this concept. One explanation is the dreambody is the “psychophysical process which is trying to dream itself, so to speak, into being.” The article also briefly explains the concept of quantum mind and gives an example of Process work that is experiential. The focus of this modality is on awareness, because it is through awareness that one can observe the path of psychological and physical processes that make clear the issues that people deal with personally and socially. Rather than having a fixed way of working with each individual, or an ideal image of what it is to be healthy, this modality is interested in assisting individuals in following their own process, the process that their dreambody is urging them toward.

For more information see <http://www.aamindell.net/index.htm>

❖ Psycho Organic Analysis (Paul Boyesen)*

Blamauer, R. (2003). Psycho-Organic Analysis. *International Journal of Psychotherapy*, 8(3), 223-226.

This method was originally an expansion of Biodynamic Psychology (Gerda Boyesen) that went on to become its own modality. As such Psycho Organic Analysis has roots in Reichian and Neoreichian body psychotherapies. Paul Boyesen also based his approach on the work of Freud and Jung. This article reviews the basic concepts of Psycho Organic Analysis. The modality is client-centered in the sense that there is a respect for the client's process. Psycho Organic Analysis works with the unconscious through dreams, imaginations, movements, actions, and spoken words; this exploration and what comes forward through the unconscious is to be inspiration for daily life. The transference and countertransference that arises is an indispensable part of the analysis. During the Psycho Organic Analysis there are two types of energy brought forth by the unconscious: when a client is dealing with the past there is *residual energy* and the other refers to the not yet lived potential of the person, the *consequential energy*. To invite the consequential energy is the primary goal of Psycho Organic Analysis. There is also the Psycho organic cycle, a phenomenological model, which is a differentiation of the Reichian formula, describing nine stages of a need that are advanced through on the way from its emergence to its fulfillment: need, accumulation, identity, force, capacity, concept, expression, feeling, and oronomy. In this way the practitioner can view the client's process on the level of psyche, organism and energy. Two other aspects of this theory that are significant are words and thoughts, and sense and sensation. Words and thoughts are important as they are embodied and so reflect the state of each persons being. Sense is related to the choices people make while sensation is the result of these choices; the unconscious is acknowledged when the client begins to examine the relation between sense and sensation. This modality is more commonly found within Europe, as a result most of the training centers are located there.

For more information see <http://www.eapoa.com/> and <http://www.iipoa.org/>

❖ Psycho-Physical Therapy (Bill Bowen)

Bowen, B. (n.d.) What is psycho-physical therapy? Retrieved on June 1, 2005 from http://psychophysicaltherapy.com/what_is_PPT.html

The founder of this modality had training in Hakomi, Biodynamic Analysis, Somatic Experiencing, and many other modalities, and worked with numerous people in the field before creating Psycho-Physical Therapy. As an integrative system, PPT considers awareness to be the ground that transformation is built upon. This article has a list of principles that gives a well defined understanding of what makes up this modality. The therapist holds: that each part of the person (spirit, psyche, thinking mind, etc) are never separate from the whole being; that the body is the primary vehicle through which the therapeutic work is done; and that a balance must be maintained between

analysis and process. The container for the therapy is the therapeutic relationship itself and so the therapist must model wholeness and integration. As far as therapeutic goals, the work is centered on the clients clarifying their goals throughout the process and building their inner resources to meet these goals. PPT is a therapeutic method that actively integrates approaches of both psychotherapy and body therapy in one simultaneous process.

For more information see <http://psychophysicaltherapy.com/>

❖ Radix (Charles R. Kelley)

McKenzie, N. (1999) Our eyes: Windows of the soul, shields from the world, integrators of life. *Radix Reader*, 2.

Like many body psychotherapy modalities, Charles Kelly founded Radix upon the humanistic psychology model. In this way, Radix views each person as being on a continuing spectrum of personal growth, rather than using the illness model of diagnosis. Radix also assumes mind-body unity and utilizes an integrated process-oriented approach that includes working with the body (somatic), feelings (affective), and thought (cognitive). Radix is a process that releases one's capacity for feeling and vitalness both intra- and inter-personally and it is especially useful for disengaging emotional blocks. Kelley was influenced by Reich and Bates vision work; the life force and muscular armoring are two theories that were articulated by Reich and have a place in Radix work though with significant shifts in emphasis. The word Radix refers to the life force, which is the foundation of all thinking, feeling, and behavior. Radix practitioners are taught to observe, track and work with the flow of this life force in cases where it results in muscular armor (the traditional Reichian perspective) and also in softer structures where often there is an absence of armor or in severe cases of trauma, embodiment. Bates influence is evident in the special importance placed on the functioning of the ocular segment. The main goal of Radix Education is to facilitate the clients in becoming fully in contact with themselves and be in connection with others and the world around them while having the choice of experiencing their feelings and aliveness. The basic theoretical concept of Radix is pulsation, the rhythmic contraction and expansion of all living things. Two experiential examples of pulsation are the beating of our heart and the ebb and flow of our respiration. Often people have acquired pulsating patterns that restrict the full expression of their life force whether this being in quiet contemplative activities or more rigorous expression. This article gives a thorough description of how a practitioner may work with a client to determine their pulsation and other concepts of Radix Education. An important facet of Radix is that their trainings do not teach techniques, rather they teach concepts and process. From there the practitioner can invent all kinds of techniques to support and develop the client's process.

For more information see: <http://www.radix.org/>

❖ Rubenfeld Synergy Method (Ilana Rubenfeld)*

Rubenfeld, I. (1990-1991). Ushering in a century of integration. *Somatics*, 8(1), 59-63.

In this article Rubenfeld stresses the importance and relevance of integrated work (as opposed to the trend of specialized focus). Then she succinctly takes the reader through her own process of learning and working with different modalities and why and how she created her own paradigm. With a background in Feldenkrais, Alexander Technique, and Gestalt, Rubenfeld went on to create a system that is among other things: process oriented, holistic, respectful of the uniqueness of the individual, a communication between the therapist and client through touch, about self-care of the therapist as a part of the client-care, and one that includes humor. She views the body as an interconnected part of the human whole. Rubenfeld's article also contains a case study/ example session that shows the four-stage metaprocess intrinsic to the method: awareness, experimentation, integration, and reentry. This composition is an effective explanation of the Rubenfeld Synergy method as well as a vision for the future.

For more information see <http://www.rubenfeldsynergy.com/>

❖ Self Regulation Therapy (Edward Josephs and Lynne Zettl)

Josephs, E. (2003). *Self regulation therapy*. Retrieved on June 1, 2005 from <http://www.cftre.com/srt.php>

Both Josephs and Zettl are trained as clinical psychologists. Josephs has also practiced as a neuropsychologist with training in EMDR, Somatic Experiencing, and CBT. He began developing Self Regulation Therapy while

working with brain injured clients and noticing the similarity between their symptoms and PTSD and after obtaining remarkable results working from a psychophysiological perspective. Zettl specializes in the treatment of Posttraumatic Stress Disorder (PTSD) and developmental dysregulation from a psychophysiological perspective; she has conducted research on the efficacy of this approach on police, paramedics and firefighters with PTSD and found it to be a highly effectively treatment. Self Regulation Therapy is a non-cathartic mind/body modality focused on decreasing excess activation in the nervous system. It is grounded in neurobiology and gives evidence of the quality of our innate ability to flexibly respond to new or threatening stimuli. Trauma can result in a shift in the nervous system that negatively affects one's capacity to be in relationship. Self Regulation Therapy alters the nervous system so it can integrate the trauma and bring balance back into the system. This is done in part by providing a safe, supportive environment for the client to complete the thwarted flight, fight, or freeze responses. Once balance is restored, clients can experience their lives more fully in all aspects. Self Regulation Therapy Practitioner trainings are conducted worldwide. Check out the website for information. The website also provides articles on current research regarding Self Regulation Therapy.

For more information see <http://www.cftre.com/index.php>

❖ Sensorimotor Psychotherapy (Pat Ogden)

Ogden, P., & Minton, K. (2000). Sensorimotor psychotherapy: One method for processing traumatic memory. *Traumatology*, 6(3) article 3.

Sensorimotor Psychotherapy has been influenced by neuroscience, attachment theory, psychological theory, and Hakomi. This article explains that there are three levels of information processing, dependent upon one another for the maintenance of human functioning that can be worked with individually. SP is a comprehensive method that integrates these three levels, sensorimotor (body), cognitive, and emotional processing. It is up to the therapist, who uses mindful tracking to determine the most productive route during the therapy moment, although initially in SP the body is the primary entry point in processing trauma. This article provides a detailed neurological discussion that among other things explains "top down" and "bottom up" processing and how science supports working with the sensorimotor in the treatment of trauma. When a person experiences trauma the result is unassimilated sensorimotor reactions. Sensorimotor Psychotherapy is a way of facilitating the processing of these reactions, which in turn resolves the destructive effect these reactions had on cognitive and emotional experiences. The goal of SP is to nurture holistic processing by integrating the three levels of our being: cognitive, emotional, and sensorimotor. This article goes over the essentials of SP and gives a case example for further clarification.

For more information see
<http://www.sensorimotorpsychotherapy.org/index.html>
The above article can also be found at this website.

❖ Somatic Experiencing (Peter A. Levine)

Levine, P.A. (2003) What is somatic experiencing? Retrieved on June 1, 2004 from <http://www.traumahealing.com/intro.html>

Somatic Experiencing is a brief, realistic and natural approach to the resolution and healing of trauma. The concept behind this therapy came from the realization that animals in the wild rarely suffer trauma even though they more regularly face life-threatening situations. Humans as animals are equipped with the ability to deal with trauma but the cognitive part of our brains will often interfere, shutting down the natural bodily process of discharging this "survival energy." Symptoms of trauma are the result. SE encourages clients toward awareness of body sensation. In this way a person can "renegotiate" and heal the experience of trauma. Trauma is more often associated with extremely dangerous situations or close calls but humans can experience the symptoms of trauma after a commonplace incident that they somatically interpret as terrifying or inescapable. By reacquainting clients with their own natural ability to recover, they can then use their experiences with trauma and healing as a transformational journey.

For more information see <http://www.traumahealing.com/index.html>

❖ Somatic Reclaiming (Judyth O. Weaver)

Weaver, J.O. (1994). An explanation of the development of my somatic psychotherapeutic work. Retrieved June 1, 2005, from <http://www.judythweaver.com/explain.html>

Judyth O. Weaver is certified in Reichian therapy, Somatic Experiencing, massage, and pre- and perinatal therapy and is a teacher of T'ai Chi Ch'uan, Rosen Method and Sensory Awareness. This article takes the reader through her learning and working process, including her work and studies with Eva Reich, to the evolution of her own body psychotherapy. The reader witnesses the power and subtlety of her work through sessions with a particular client. There is also an example of a small piece of work that she did in a classroom. The point is made that it is paramount to meet clients where they are, to support them in the way they need support, rather than force a technique onto them. During a session a client may focus on their breath, touch is likely to be involved, and awareness is cultivated. Awareness leads to choice and this opens the possibility of change. Somatic Reclaiming is a natural, gentle process of resolving and releasing past conditioning and then reclaiming our innate goodness that was always there deep within.

For more information see <http://www.judythweaver.com/index.html>

❖ Somatic Trauma Therapy (Babette Rothschild)

Rothschild, B. *What is somatic trauma therapy*. Retrieved June 1, 2005 from <http://www.trauma.cc>

Babette Rothschild is a member of the International and European Societies for Traumatic Stress Studies, the Association of Traumatic Stress Specialists and the National Association of Social Workers. She has trained extensively in Transactional Analysis, Gestalt Therapy, Psychodrama, EMDR and Somatic Experiencing, and is a certified Bodydynamic Analyst and certified Radix Teacher. Somatic Trauma Therapy is an integration of these systems and it draws from a range of current theory and techniques for the understanding and treatment of trauma, including PTSD. Somatic Trauma Therapy covers all aspects of trauma's consequence on the mind, body and psyche, and its integrated structure allows the therapist to cater to each client's special needs. Although it is not essential to remember a traumatic event in full, or even at all, what is important is to gain mastery over and shrink symptoms, improve quality of life and to reestablish a good relationship to the self. To begin, Somatic Trauma Therapy guides one through the process of gaining control over symptoms and reestablishing a sense of safety. Later steps call for a restoration of emotional resources, physical reflexes and nervous system balance. If the traumatic event is remembered, there will be additional steps to assist one in making sense of what happened and to recognize it is over. Duration of Somatic Trauma Therapy can range from a few sessions to several years depending on: the nature of the trauma(s), age at the time of the trauma(s), if the trauma(s) is isolated, intertwined with other trauma(s) or continuous, and current resources and strengths.

For more information see <http://www.trauma.cc/>

❖ Somatotherapies (Richard Meyer)

Meyer, R. (n.d.) Somato-psychotherapy: A history and a concept. Retrieved September 1, 2004 from <http://www.eepssa.org/an/index.html>

This article gives a thorough history of the development of the somatotherapies, which include the three relational frameworks of somatanalysis: socio-somatanalysis, psycho-somatanalysis, and auto-somatanalysis. By observing these three systems or "positions in life" the therapist can more accurately determine psychopathology and how humans function. Within the history, we learn of how Dr. Richard Meyer, with some colleagues, founded the European School of Socio- and Somato- Analytical Psychotherapy. They provide training in their modality that is holanthropic, which is to say it includes the whole human being. They have developed this word because it simultaneously reflects scientific and traditional medicines, human sciences, cultures and the many facets of psychotherapy. While the article goes in depth to explain the specifics of their theory and work, and in this way shows how the somatotherapies are in contrast to other modalities in the field, it also is clear that there are niches in their holanthropic model for these other contributions.

For more information see <http://www.eepssa.org/an/index.html>

❖ **Strozzi Institute (Richard Strozzi-Heckler)**

Strozzi-Heckler, R. *The power of somatics*. Retrieved June 1, 2005 from <http://www.strozziinstitute.com/writings.htm>

Richard Strozzi-Heckler, Ph.D. is the co-founder and President of Strozzi Institute. Drawing from his studies in a body-oriented philosophy, martial arts, contemplative disciplines, somatics, and linguistics, Richard developed a discourse that is based in the unity of being and action. The practices at Strozzi Institute produce individuals and teams that are self-generating, self-healing, and self-educating. Strozzi Institute has individual and corporate programs for those who seek to embody their leadership potential. They also have a somatic coaching programs and leadership programs for teens.

This article focuses on Somatic Coaching™ and Embodied Learning™ and explains that learning is not simply about changing the way we think about something; to truly sustain change in our behavior we must “embody” new distinctions. One of the keys to embodiment is recurrent practice. Just as one would recurrently practice to improve a golf game or play the piano, the same is true in the cultivation of the Self. At Strozzi Institute a learning environment is created in which somatic practices are used to produce the embodiment of new skills and behaviors.

For more information see <http://www.strozziinstitute.com/>

❖ **Unergi (Ute Arnold)**

Arnold, U. (1999). What is a healer? *New Vision Magazine*, March.

The essence of Unergi work is to transmit through words, touch, and movement, a memory of “wholeness, of universal mind, of unlimited potential.” It is not based on a power structure or an attitude whereby the therapist has a plan to transform the client. Rather it is a mutual exploration that involves a metacommunication between the whole beings of both the healer and the client. With no agenda, the client is invited to change while the healer’s own presence, informed by her own personal healing journey, serves as a model both consciously and unconsciously. The client re-records her own history as she is supported, encouraged, and witnessed by the healer.

The name Unergi is an amalgam of the words unity and energy. Arnold developed this body psychotherapy by integrating the Alexander Technique, Feldenkrais Method, Gestalt Therapy, Art Therapy, and the healing forces of nature. This article also illustrates the modality by providing a case study.

For more information see: <http://www.unergi.com/intro.html>

Conclusion

It is important to keep in mind that one or two articles could never describe a life work, could never encapsulate all aspects of a body psychotherapy modality. My hope is that this article will inspire the reader to investigate further into these worthwhile healing modalities.

I began this project with the personal goal of creating an overview of the field of body psychotherapy which turned into the intention of this project, to build a resource for others who desire a sense of where this field has gone and what it has become. From start to finish this project took me a year and within that year I have had contact with an amazing variety of competent and vital healers. It is hard to imagine what this dynamic field will do in another sixty years.

Biography

Colleen Campbell Barshop, BA, is currently pursuing her doctorate in Clinical Psychology at the Institute of Transpersonal Psychology. Her interests include body psychotherapy, studying under Virginia Dennehy, PhD., meditation, dreamwork, and integration. She has worked with adults and adolescents with Autism, within Hospice, and currently is focusing on the geriatric community.

USA BODY PSYCHOTHERAPY JOURNAL

The Official Publication of
United States Association for Body Psychotherapy
Jacqueline A. Carleton, Ph.D., Editor (jacarletonphd@gmail.com)

USABP Mission Statement:

The USABP believes that integration of the body and mind is essential to effective psychotherapy, and to that end, it's 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.

USA Body Psychotherapy Journal Purpose:

This peer-reviewed journal seeks to support, promote, and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an interdisciplinary exchange with related fields of clinical practice and inquiry.

SUBSCRIPTION & BACK ISSUES

(all funds USD)
_____ \$65 (USD) Two year subscription
_____ \$35 (USD) One year subscription
_____ \$20 (USD) Single issue
_____ \$25 (USD) Keleman issue
2002 _____ Vol. 1, No. 1 _____ Vol. 5, No. 2
2003 _____ Vol. 2, No. 1 _____ Vol. 5, No. 2
2004 _____ Vol. 3, No. 1 _____ Vol. 5, No. 2
(Selver Issue)
2005 _____ Vol. 4, No. 1 _____ Vol. 5, No. 2
(Research Issue)
2006 _____ Vol. 5, No. 1 _____ Vol. 5, No. 2
(Boadella Issue)
2007 _____ Vol. 6, No. 1 _____ Vol. 6, No. 2
(Keleman Issue)
2008 _____ Vol. 7, No. 1 _____ Vol. 7, No. 2
(Lowen Issue) (Research Issue II)
2009 _____ Vol. 8, No. 1 _____ Vol. 8, No. 2
2010 _____ Vol. 9, No. 1 _____ Vol. 9, No. 2
(Research Issue III)

<p style="text-align: center;">POSTAGE Shipping to U.S. and Canada included International Orders need to include the following postage fees.</p> <p style="text-align: center;">SUBSCRIPTIONS The following postage rates apply <i>per year</i>. _____ \$18 Mexico, Western Europe _____ \$27 Eastern Europe _____ \$40 China, Japan, Australia, Cent/South America</p> <p style="text-align: center;">SINGLE ISSUE The following postage rates apply to the first copy. Additional copies are \$3 shipping each. _____ \$9 Mexico, Western Europe _____ \$14 Eastern. Europe _____ \$20 China, Japan, Australia, Cent/South America</p>

SUBSCRIBER INFORMATION

Name _____
Address _____
City _____ State _____ Zip _____ Country _____
E-Mail _____ Telephone (daytime) _____
An email address is required for electronic notification. A non-AOL address is preferred.
Amount Enclosed _____ Check Discovery Visa MasterCard
Card Number _____ Exp. Date _____ Security Code _____
Signature _____

I would like information about becoming a member of USABP



Abstracts and Indexes available at www.usabp.org

<p style="text-align: center;">The United States Association for BODY PSYCHOTHERAPY</p> <p style="text-align: center;">8639 B 16th St. Ste. 119 Silver Spring, MD 20910 Phone: 202-466-1619 E-Mail: usabp@usabp.org Web: www.usabp.org</p>
--

The USA Body Psychotherapy Journal The Official Publication of the USABP

Editor

JACQUELINE A. CARLETON, PH.D.

Peer Review Board

SUSAN APOSHYAN, M.A.

DAVID BROWN, PH.D.

RUELLA FRANK, PH.D.

MARY J. GIUFFRA, PH.D.

BARBARA GOODRICH-DUNN

ELLIOT GREENE, M.A.

LAWRENCE HEDGES, PH.D.

JOEL ISAACS, PH.D.

GREG JOHANSON, PH.D.

BLAIR JUSTICE, PH.D.

RITA JUSTICE, PH.D.

ALICE LADAS, ED.D.

ALINE LAPIERRE, PSY.D.

LINDA MARKS, M.S.M.

JOHN MAY, PH.D.

PATRIZIA PALLARO, LCMFT, ADTR

MARJORIE RAND, PH.D.

LAUREL THOMPSON, M.P.S.

Editorial & Research Intern

SASHA DMOCHOWSKI

Production Manager

ROBYN BURNS, M.A.

USABP BOARD OF DIRECTORS

VIRGINIA DENNEHY, PRESIDENT

PAUL BRIGGS, VICE PRESIDENT

LYNN TURNER, SECRETARY

JACQUELINE A. CARLETON, TREASURER

CHRISTINE CALDWELL

MARY J. GIUFFRA

KAREN JACOBSON

GREG JOHANSON

ALICE KAHN LADAS

KATHY SCHEG

KATY SWAFFORD

LAUREL THOMPSON

ADVERTISING INFORMATION

The USABP Journal accepts advertisements for books, conferences, training programs, etc. of possible interest to our members.

Please contact usabp@usabp.org for more information.

VOLUME 4, NO. 2, 2005 Printed in the USA

CRITERIA FOR ACCEPTANCE

How does material in this manuscript inform the field and add to the body of knowledge? If it is a description of what we already know, is there some unique nugget or gem the reader can store away or hold onto? If it is a case study, is there a balance among the elements, i.e. back ground information, description of prescribed interventions and how they work, outcomes that add to our body of knowledge? If this is a reflective piece, does it tie together elements in the field to create a new perspective? Given that the field does not easily lend itself to controlled studies and statistics, if the manuscript submitted presents such, is the analysis forced or is it something other than it purports to be?

PURPOSE

This peer-reviewed journal seeks to support, promote and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an inter-disciplinary exchange with related fields of clinical practice and inquiry.

To ensure the confidentiality of any individuals who may be mentioned in case material, names and identifying information have been changed. It must be understood, however, that although articles must meet academic publishing guidelines, the accuracy or premises of articles printed does not necessarily represent the official beliefs of the USABP or its Board of Directors.

The USA Body Psychotherapy Journal (ISSN 1530-960X) is published semi-annually by the United States Association for Body Psychotherapy. Copyright (c) 2008 United States Association for Body Psychotherapy. All rights reserved. No part of this journal may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without written permission of the publisher.

Subscription inquires & changes of address should be sent to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814. For customer service, call 202-466-1619.

Subscription Rates: Single current issue \$20; \$35 yearly. Postage outside the US and Canada please inquire at usabp@usabp.org.

Postmaster: Send address change to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814.

SUBMISSION GUIDELINES AND SPECIFICATIONS

First consideration will be given to articles of original theory, qualitative and quantitative research, experiential data, case studies, as well as comparative analyses and literature reviews. Submission of an article to the *USA Body Psychotherapy Journal* represents certification on the part of the author that it has not been published or submitted for publication elsewhere.

Initial submission should be e-mailed to jacarletonphd@gmail.com as an attachment in Microsoft Word.

Manuscript should be double-spaced in 10pt. type, with at least a one inch margin on all four sides-please include page numbers, otherwise manuscript should be free of other formatting.

Title, full authorship, **abstract of about 100 words and 3-5 key words precede the text.** Please include an endnote with author's degrees, training, mailing address, e-mail fax, acknowledgement of research support, etc.

Authors are responsible for preparing clearly written manuscripts free of errors in spelling, grammar, or punctuation. We recognize that the majority of contributors are not professional writers, nor do they function in a publish or perish mode. Furthermore, we are aware that the work of our profession is sometimes pragmatic, associative, intuitive, and difficult to structure. However, a professional journal such as we envision normally accepts only pieces that are fully edited. Therefore, we may occasionally suggest that writers find a reviewer to edit their work before it can be accepted. We will suggest names of possible editors if requested.

References: References within the text should include author's surname, publication date and page number.

Full attribution should be included in bibliography at end. *For books:* surname, first name, book title, place, publisher, date of publication. *For periodicals:* Surname, first name, title of article in quotes, name of publication, year, volume, and page numbers. Or, consult the latest edition of the Publication Manual of the American Psychological Association.

LETTERS TO THE EDITOR

The editors are eager to receive letters, particularly communications commenting on and debating works already published in the journal, but also suggestions and requests for additional features or departments. They may be sent to the email address below. A selection of those received will be published in the next volume of the journal.

CORRESPONDANCE ADDRESS

Jacqueline A. Carleton, Ph.D.

Editor

USA Body Psychotherapy Journal

115 East 92nd. Street #2A

New York, NY 10128

212.987.4969

jacarletonphd@gmail.com