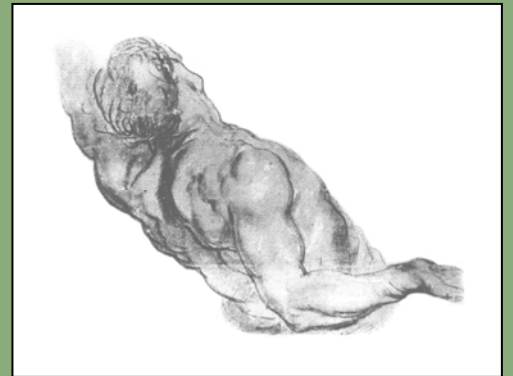


**the usa
body
psychotherapy
journal**



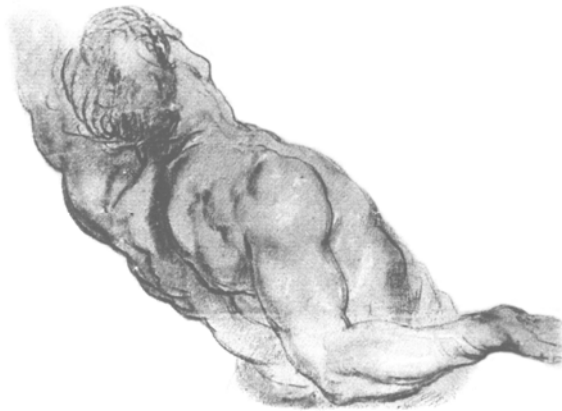
Back Issues and Subscriptions Available at
www.usabp.org

Volume 8 Number 2 2009

The Official Publication of
THE UNITED STATES ASSOCIATION FOR
BODY PSYCHOTHERAPY

Table of Contents

Editorial Jacqueline A. Carleton, Ph.D.	3
The Science of Body Psychotherapy: The Science of Body Psychotherapy Today Part 1. A Background History Courtenay Young	5
Mindfulness-Based Somatic Psychotherapy Ronald A. Alexander Ph.D. and Marjorie Rand Ph.D.	16
The Self Behind the Symptom: The Energies of Inner Selves and Body Symptoms Judith Hendin, Ph.D.	21
Part 1. The Adolescent Brain: A Decade of Research Deborah Harkin, Ph.D.	31
The Continuing Evolution of Touch in Psychotherapy Anastasia D. McRae, M.Div., MSW	40
Use of Eidetic Imagery in Exercise Motivation Katy Swafford, Ph.D.	47



©2009 USABP

USABP Mission Statement

The USABP believes that integration of the body and the 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 humani

Use of Eidetic Imagery in Exercise Motivation

Katy Swafford, Ph.D.

Abstract

Four volunteers participated in this pilot project to explore the application of Akhter Ahsen's Eidetic Imagery theory to motivation in exercise activity. An initial assessment was used to identify problems in the image process and to associate these with physical symptoms. Then, a workshop using images was conducted to increase body awareness and activate original breathing and movements. A follow-up interview was conducted to identify changes in image structure and outcome. Interviews were coded and summarized to identify negative image elements and exercise experience. Evaluation of the case studies shows negative image elements associated with negative exercise symptoms and changes following the intervention that include positive changes in image response and exercise activity. Applications for the use of Eidetic image analysis in future research are discussed.

Keywords

Eidetic – Imagery – Exercise – Motivation - Barriers

Introduction

One of the most important questions today is, “how do we maintain health and increase longevity in the face of plenty”? The United States is truly the “land of plenty”. We enjoy plenty of resources, plenty of knowledge, plenty of opportunity and yet, we are plagued by negative health markers such as obesity and a general lack of fitness. Traditionally, solutions to these problems have focused on diet and exercise programs, on plans and equipment. Revenues from the health club industry total 17.6 billion dollars while sales from fitness equipment alone surpass 4.7 billion. With a total of 22.3 billion dollars, fitness is one of the fastest growing industries in the country (Archer, 2007). Never has more been known about the biochemistry of diet and the mechanics of exercise; how energy production works, how to structure nutritional plans, the effect of fats, carbohydrates, and proteins. Still, with the bookshelves full of diet and exercise techniques, this country is more obese and less fit than ever. Why?

The problem seems to be concentrated in two areas; motivation, getting people to make use of the information available, or performance, getting over barriers once people decide they want to make a change. These areas suggest that we move the focus of the question away from improving equipment and programs and towards studying the internal workings of the individual. It would be helpful to better understand what affects motivation and what gets in the way of people doing what they know would be helpful to their health. The present study examines the use of a special type of image, the Eidetic Image, to understand factors that limit motivation and reduce the likelihood an individual will engage in activity.

The use of images rather than words as a vehicle for gaining information and making changes represents a significant change in understanding of symptoms and solutions. The early linear models use cause and effect for understanding and learning as a mechanism of change. Systems models have added an understanding of complexity in relationships by proposing circular causality, mutually caused interactions, and looks at the relationships between subjects rather than individuals themselves. The Eidetic model is a psychosomatic model, inextricably connecting mind and body. The Eidetic image includes the image and its body response in a specific structure that preserves the relation of mind to body which maintains a smooth flow of consciousness.

The Eidetic image is a strong, repeatable, vivid image that emerges spontaneously from the mind itself. While some types of images have been constructed to achieve a specific purpose or goal and others have been used for mental practice or mental simulation or the intention of the image, the Eidetic Image reveals the structure of the mind itself and the goal of the image process is to understand and change the structure of the mind. This difference addresses the external versus internal nature of this type of image.

In modern scientific terms, the eidetic image is a quantum event, holographic, subjective rather than objective, emerging on its own, and containing all the elements of life and change. This special type of image is directly associated with perception, the image originates in the mind and registers in the visual apparatus and is also registered in the body.

The Present Study

This pilot study explores the application of Eidetic Imagery to motivation for activity, and exercise. The purpose of the present study is to show how barriers to exercise can be identified in an individual's image structure and how Eidetic images can be used to release these barriers resulting in an observable change in image structure and in activity.

The need for this type of study will be described based on the problems with traditional approaches to motivation, especially the problem posed by will-power and volitional control of motivation. The theoretical underpinnings of Eidetic imagery will be discussed, particularly the ISM Model and its relation to symptoms, the diagnostic process coding the ISM model to identify problems in the mind, and image maneuvers such as filters and the hemispheric location of images. The use of mythological images is discussed as a method of releasing potentials of experience.

A qualitative approach is used for analysis in keeping with the data and the inquiry of the present study. Qualitative procedures are best used when "the focus of the research is on the process, implementations, or development of a program or its participants, the program emphasizes individualized outcomes, or detailed, in-depth information is needed about clients" (Mertens, 2005).

Need For This Type of Intervention

With the best intentions, many efforts to exercise go the way of forgotten New Year's resolutions. Far too many people "sign up" by buying gym memberships and then do not "show up" at the gym. Approximately 50% of people who begin an exercise program will drop out within six months (Berger, Pargman, & Weinberg, 2002). Individuals who do continue often do so intermittently, lapsing and returning over time (Sallis, et. al., 1990). Extrinsic and intrinsic factors contributing to these outcomes, such as external rewards of fear (what might happen if you don't) and punishment (pressure from significant others) have been examined using a model of self-determination (Deci & Ryan, 1985). Intrinsic motivations, with which the participant enjoys the activity for the sake of the activity, are associated with better outcomes (Deci & Ryan, 1995), a fact that presents an interesting question: What makes activity or exercise pleasant or unpleasant? Some studies have focused on the type of activity to answer this question, finding that sports may have higher intrinsic motivating factors than exercise, in which the exercises are focused on improving appearance, decreasing weight or managing stress (Kilpatrick, Hebert and Bartholemew, 2005). Intrinsic motivation may also be related to the stage of change a person is in; evidence suggests that early stages require more external motivators, and later stages move toward internal motivators (Ingledeew et al.1998). Self-determination and intrinsic motivation were found to be associated with adaptive patterns related to exercise (Thogersen-Nitoumani & Ntoumanis, 2006).

The findings that positive internal experience during exercise, intrinsic motivation, and high self determination are associated with greater success in exercise are of particular interest to the present study because image process used in this study targets barriers to positive exercise experience at the level where the most effective motivation is thought to occur – inside the person.

The Problem of Will Power

Traditional motivational techniques to increase exercise are based on behavioral principles of rewarding the desired behavior. Reinforcers are identified and small steps toward the goal are rewarded to increase the likelihood that the desired behavior will occur. In this process, the goal is determined by measures external to the subject - charts, averages, other people's scores, distances, or weights. Demands are then made on the body to meet these incremental and eventual goals. Often, the body is tested till it fails to determine the starting point and is pushed to respond a little bit more each episode. To prevent injury, great attention is paid to form and body position so that undue stress is not put on joints or small muscles that are not able to keep up with the demand. These positions are difficult for the individual to maintain however so a mirror, special equipment or a trainer is often employed to monitor and prevent the inevitable lapse to the person's previous position - the maladaptive structure that has been developed over time. Unfortunately, the eventual result of this process is often decreased motivation, exhibited by resistance, (evidenced by forgetting, excuses, "not enough time" and "too busy"). At this point, efforts are usually focused on the use of "will power" by applying accountability, scheduling, buying accoutrements of exercise, classes, and trainers. All of these are external solutions, focused on the external symptom of motivation while inside, the resistance builds and underlying structures actually become more intense. Eventually, motivation flags and self esteem diminishes as the self collapses from repeated failures. For some this results in an aversive, almost phobic, and state.

It is quite seductive to believe that we can think or behave our way out of any problem that knowledge is enough, that if we just know enough, we can control everything or that if we do more and more it will become

real. The problem is, the more we try, the more we become involved in the illusion that the next book, or lesson or instruction will be the one - thinking becomes obsession and all these efforts become barriers to the real self.

In *Manhunt in the Desert*, Akhter Ahsen describes consequence of the divided mind, separating thinking and doing from being, with the resulting loss of an internal sense of knowing inherent in our original nature. He refers to the “humiliation of will.”

You made not one barrier
But a whole array of them,
Standing one behind the other,
And you were standing behind them all.
Your original nature,
Hidden, ignored tormented and punished
Behind these barriers (Manhunt p.61)

Theoretical Considerations

Akhter Ahsen, PhD has researched the image and its body connection for over 30 years. In fact, the unique feature of what he calls the Eidetic image is its connection to the body. His triple code model places the body squarely before thinking or meaning. In this model, meaning comes from internal experience, from direct experience or knowing, rather than thinking or learning. In fact, any meaning that comes solely from thinking or memory will always be incomplete and may even be wrong. The model is (I) Image or perception of what is happening, (S) Somatic Response; what emotion or physical response is caused by what is seen, and then (M) Meaning or how all this relates you to the world (Ahsen, 1977). In Ahsen’s model, there is no useful meaning without the body. The word Eidetic image was first associated with the Marberg School in Germany and was thought to be available mainly to children and to artists. Recently this type of image has been referred to in the limited aspect of photographic memory. Ahsen’s contribution is the recognition that the Eidetic quality of the image is available in every person and, although it may have been hidden away or undeveloped through an overemphasis on thinking, it can be released and imagination can again flow freely. In this way, the Eidetic image holds secrets of consciousness and, when concentrated on, surfaces previously lost or hidden potentials - replacing history with wholeness. (Ahsen, 2007 workshop)

The word Eidetic comes from the Greek word Eide, which means “to see form”. The Greeks called these images “gifts from the gods” and considered them to be primary in nature, occurring spontaneously in the mind. Because they come from within, these images accurately show a whole picture of the mind; they are actually holographic records of our experience. The nature of a hologram is that the whole is always available; all potentials are present and can be examined from many different views. In addition, holographic images are robust, they can be projected over and over again which means they can also be explored for additional information. Occurring in this way, the image operationalizes the mind into physical reality.

In practical use, these images hold all the secrets of mind, secrets that are available if we know how to look. When we first look at an image, we see the top layer, often with elements that we expect to see; this layer contains what we already know and doesn’t usually surprise us. However, there are also objects or events that we may not notice at first that will surprise us or make us curious. These objects or events are the gateways to new information something we wouldn’t have know to address, something that is not available to memory or thinking. They catch our attention and when we attend to these clues the hologram is stimulated, more and more of the drama that is consciousness unfolds. In this way the images serve as portals into the hologram of consciousness.

As the image serves as an entry to the whole of consciousness it also provides access to our physical being, into the body. Every image has a physical registration in the body. The form that the eye sees is carried through electro-chemical processes to the brain where it is conducted physically into the body as a physical response. So, whether the image comes from outside (like seeing a tree) or inside through imagination (like seeing an animal with the head of a rooster and the tail of a fox), the body registers what the mind sees. This is the hallmark of the ISM model.

ISM Model

The ISM model has a tripartite structure of Image (I), Somatic Response (S) and Meaning (M). When perception occurs in this order there is a natural flow of consciousness, potentials in the brain are activated and all

the instructions to the body are in sequence. The image that is seen and the body response that follows provide an accurate picture of reality for this person. When the sequence is stacked in an “I”, then “S”, then “M”, order, the connection is open and experience is processed smoothly allowing the mind to find its own natural solutions and maintains a flow of consciousness into the body and into the world. When this pattern is disrupted, however, the signaling systems are also disrupted or out of sequence and a “glitch” occurs. This glitch causes a recycling; repeating the effort to continue the flow, this obstruction or constriction eventually results in a breakdown and produces a symptom. For example, if the subject reports a somatic response first, followed by a meaning “I feel scared. (S) My Father was always angry (M)” the scared feeling is expected to continue and even escalate; the subject may go from one memory to another that has a similar feeling or meaning. By contrast, as a therapeutic maneuver, a request may be made for the image, “what do you see”? If the subject then describes the picture seen in the mind, followed by the feeling associated with the image, the ISM order is restored and a new connection is made in the mind which is expected to result in a new meaning for the event. It is important to note that when the order is out of sequence or something is missing, SM(I) in the above example, the mind is diverted away from the self and onto something external (characteristics of the Father in the above example) which takes the person away from themselves. It is this separation from self that irritates the mind and eventually creates a symptom.

The image is therefore both a diagnostic which shows the operating system of the mind and also a vehicle for change because it can be maneuvered to release the natural flow of consciousness. In fact, there is a natural press in the mind to maintain the natural order such that simply concentrating on the image and then the body response, back and forth, may be enough to connect the “I” and the “S” components in the proper order and cause a change. This will be seen in the results of this study, since no extra intervention was applied.

Symptoms

When memories, previous beliefs, or opinions intrude, they may obstruct the flow of consciousness and produce a symptom which is usually accompanied by a sense of heat in the experience of the person. Physically, this may be inflammation or psychically it may be irritation or agitation. Because any change in the image will change the body, various maneuvers can relieve the situation. Maneuvers such as changing the temperature of the image, oscillating a positive and negative image to loosen the fixed body response, emanating another self-image, to name only a few can be used to change the signal from the brain and regulate the response of the body.

The symptoms presented by the subject and the subjects worry or concern regarding the symptom are not only a physical state, they have both the image and a meaning attached; although these may be partly dissociated and out of the subjects awareness. With the projection of the image and its connection to the body, the eidetic image has a natural progression that gives new information and unfolds new realities (Hochman 2007, p.6). Therefore the images, as projected and described by the subject, have relevance to the symptoms presented.

Diagnostic Process

Identifying the physical symptom in the associated structures of the subject’s mind requires examining the structures of the subject’s mind which is accomplished through the use of projected images. Since the inquiry is about the person rather than the resulting symptom, several mental tests and maneuvers were used to clearly show how the symptom is being produced in the mind. This process targets the symptom in the mind and allows the signal that is maintaining the symptom to be changed, releasing the symptom.

Eidetic Parents Test: The Eidetic Parents test containing 30 images of parental images in a variety of settings. Each item is expected to surface elements of the self that were developed in the original relationships with parents, it shows the nature of the emotional ties to the parents. “The images are literal of the parent-child, parent-parent involvement, and bring to consciousness the significant events, emotions and meanings of the person’s life pertinent to his current life situations (Ahsen, 1989).” Brief, but focused concentration on a sequence of images shows links between the images and brings into awareness the connections of image to symptoms. The images show current structures resulting from the subject’s relationship with each parent one parent with the other. In the present study, two of the thirty images were used to surface 1) the climate of the home environment and 2) effect of parental relationship on the client.

Parents as filters: Our early experiences filter our current experience, and since our parents are our first teachers and the people we interact with first in our lives, identifying the effect of these filters provides useful information about potential barriers to performance. When an image is projected “keeping Mother in mind” or “keeping Father in mind” it changes the projection in a particular way depending on the structuring effect of the filter. In the present study, parental filters were included in the interviews to surface potential effects of development on the exercise symptom identified.

Anticipation Response: Every perception includes a body response, for example if you see something you like, there is a feeling activated of pleasure, something you dislike is accompanied by a different, but distinct body response of displeasure. This is the hallmark of the ISM model. Further, seeing something in image generates a body response such that seeing an image of something that is going to happen activates the body in anticipation of the event. The body gets ready, or gears up for the anticipated event. In the present study, the anticipation response was used in the interviews to engage the body response on the topic of exercise.

Hemispherics: Images are associated locally in the brain such that the spaces projected on one side or the other may differ in attributes such as illumination or temperature. These images cannot be switched from left to right without causing some difficulty. This difficulty will be seen either in the visual perception of the image, or the somatic response to the image (Ahsen, 1972). EP2 of the Eidetic Parent's test provides information about this hemispheric locality, with parents seen in one hemispheric, and the interactive nature of the relationship captured in the image. In the second image of the EPT, the hemispheric location of parents is projected which surfaces information about the nature and strength of the subjects relationship with parents.

Image and Mythology

The nature of mind implies, as we have discussed, that solutions are present alongside problems at all times. It also implies that the greater reality is present at all times alongside individual or historical experience. At a very basic level, individual experience is not different from or separate from any other human being, in present time or over all the history of time. Recent developments in genetics have shown that our ancestors as well as what is going to happen to us, our future, is present at every moment in every cell. The entire universe exists literally "on the head of pin", or more accurately, in a structure that cannot be divided into parts or even be seen but exists as pure potential.

As personifications of universal truths, mythology connects a greater reality with personal experience. Some mythic stories are more poetic than others but all myths describe the human-spiritual condition. As is true other images described so far, the mythic images connect physically, bringing a higher self into the body to be experienced. In this study several mythological images are used to turn on the original signals, to reach beyond symptoms to access primordial potentials. For example, the "Smelling Ice" image used in the workshop phase of this study is included because it activates the diaphragm while letting external muscle structures rest. The image is part of the creation myth of the Viking mythology. Ymir was the first life, the first differentiation from the ice. Smelling ice is his first breath. This exercise, which begins with the mythological story of the beginning, the image of ice, and the experience of smelling ice, automatically engages first the mind and then the body. There is no resistance, no "trying" or "trying not" to use this or that muscle, no instruction about how to breathe. The image has the knowledge - the breath is there and the body is open.

The image of "Churning the Waters" is also a creation myth. This time the focus is activating movement in the body at the most basic level, experiencing movement come to life from within. The mythic image of the beginning of the world instructs the beginning of the world of the body. The mythical is physical.

Research Questions

To study the use of imagery process to explore the association of physical problems in exercise with psychical problems in images connected to exercise and to explore the effect of image maneuvers on images and exercise activity, this study asks the following questions:

1. Can an exercise symptom be associated with a projected image?
2. Will image maneuvers produce a change in experience that can be seen in changes in images projected and in exercise activity?

Propositions

The following propositions describe why particular changes in image or experience may be observed.

1. Consciousness has a corresponding effect in the mind and the body such that a negative symptom, such as lack of motivation to exercise, will be seen in a negative aspect of the image such as negative image or disruption of the ISM.

2. Once the problem in the image is identified, a maneuver can be applied to re-establish the original flow of consciousness.
3. When the problem in consciousness is released, the physical symptom will be relieved.

Link between Data and Propositions

1. Reported symptoms in exercise are expected to be associated with negative projected images or ISM structures that are out of order.
2. Maneuvers including the use of filters and hemispheric location of images are expected to help identify negative image responses and to increase awareness of impact of parental relationships on current activity performance. In addition, images experienced in the workshop are expected to increase awareness of original potentials for movement and pleasure in activity.
3. Changes in image structure (ISM) and body response to image are expected to be associated with changes in activity at follow-up

Units of Analysis

Analyses were performed by the researcher and assistant. Verbatim records were made during initial and follow-up interviews and were coded independently, then compared until consensus was achieved. Results of analysis were collected in separate tables for each of the subjects. A narrative was constructed from the table to describe the data presented in the table and provide connection to theory.

1. Symptom Pictures were evaluated for descriptions of physical and psychological symptoms worries or concerns. Self-report of symptoms were recorded using the subjects own words.
2. ISM order (ISM, IMS, SIM, SMI, MIS, MSI) – Case records were evaluated and coded as to sequence of image, somatic response, and meaning.
3. Positive/Negative association with each image was determined by negative quality of the image description or negative feeling associated with the image. Positive or negative quality to the meaning when presented was also noted.
4. Parental filters – image projected while keeping Mother or Father in mind – was evaluated for negative or positive quality of the image or somatic response to the image.
5. Symptom Connection – connection of symptom reported on symptom picture with a symptom observed in images projected in the EPT items were determined by observation, or inference. For example, use of same word or a clear association of a feeling with a problem described as a symptom, (feeling of disconnection, with wanting to belong).
6. Verbatim transcripts made, responses recorded in subjects own words.
7. Follow-up self report of changes in awareness and activity were evaluated in the same manner as initial interview.

Method

Subjects

Four volunteers were recruited who had experience working with eidetic images. This population was chosen to minimize the need to introduce imagery process in detail, making it possible to present the images in a 3-hour workshop. Future workshops will likely be done in a 6-hour format or with participants who have completed an extended intake which includes introduction to imagery.

Instruments

1. Initial interview was conducted individually to obtain background information, symptom picture, basic developmental picture (EP1, EP2), and exercise/activity eidetic diagnostic. (Appendix E, F, G, H, I) (Approximately 1 hour)

2. 3-hour workshop was conducted with all participants attending. A sequence of images was introduced designed to increase body awareness and engage signals for the core of movement. Slow potentials image is primarily a physiological image used to bring awareness to basic body process and engage the mind in its original state. The Body Scan exercise was used to focus attention in the body, discriminating sensation and locating areas of flow or stuck sensation or image. The Smelling Ice image introduces mythology at an original level and was used to initiate abdominal breathing. The Churning image is also a mythological image of creation and was used to activate the original body responses for movement. (Appendix, A, B, C, D) (3 hours)

3. Individual Follow-up session was conducted to identify changes in awareness, and likelihood or experience of movement or exercise. A portion of the exercise/activity diagnostic was repeated during this interview (Appendix J) (1 hour)

Approximately 5 hours were spent by each subject over a one-month period. Initial Interviews and Individual Sessions were conducted by the primary researcher and an intern from St. Edward's University trained in the procedures. Initial interviews and follow-up sessions were conducted face-to face. The same interviewers reviewed the data when it was completed and reported results in tables and case descriptions.

Results

Gender	Age	Marital	Occupation	Hours in Eidetics
Male	37	Single	Graduate Student Business owner	> 50
female	30	Single	Office manager	0-20
female	48	Single	Writer	21-50
female	36	Single	Graduate student	>50

Table 1. Demographic information - Subjects ranged from age 30 to 48 years old; all are single with a variety of occupations and Eidetic experience ranging from only a few hours to more than 50 hours.

Subject	Exercise Anticipation Pre	Exercise Anticipation Post	Exercise at Pre-Test Self-Report	Exercise at Post-Test Self -Report
S1	Negative	Positive	Decrease in favorite exercise Pain present	Increased Body awareness More activity Decrease in pain
S2	Negative	Positive	Negative feeling Low energy	Increased Awareness Increase in Activity Greater pleasure
S3	Negative	Mixed	Tired Happy then confused	Greater awareness of blocks to exercise Targeted source of problem and impact on exercise Lighter, More energy
S4	Negative	Positive	Nervous Worry about consequences of	Greater awareness Positive memories Greater ability to relax

			exercise	Increased confidence
--	--	--	----------	----------------------

Subject 1: Case Report

Subject #1 is of normal weight and exercises somewhat regularly, however some degree of dissatisfaction in frequency or duration of exercise is reported. The subject identifies 16 physical symptoms, and psychological symptoms of stress and failure; with particular worry and concern expressed related to failure. The EPT items shows negative feeling of lack, expressed as “wanting to connect” with Father. These Eidetic symptoms of concern over failure and wanting to connect are also reflected in the Initial Exercise Diagnostic as follows.

Projected image data shows a negative anticipation response to the image of exercising although a positive response was given to the meaning. This suggests an effort (volitional control) to project a positive attitude even though the image connection is negative. Effect of Parental Filters on anticipation response further demonstrates this subject’s tendency to focus on others and to rely on meaning for motivation. First purposeful exercise was experienced difficult, a response to a lack in self, which demonstrates an attempted solution the identified symptoms of failure and wanting to connect. A positive image of exercise follows an ISM order and as would be predicted, produces positive feelings of exhilaration associated with a positive image. The additions of parental filters however, shift the subject’s attention away from self and onto others with feelings of concern, a negative feeling of being dragged down, and a focus on helping others to help self. The impact of parental filters is most notable for shifting focus to others and a negative impact of the Father filter.

At the follow-up, this subject demonstrated changes in every unit of analysis. ISM order changed with a notable decrease in meaning as the first or second element. This suggests that the subject was responding to image or to feeling, and that these two elements were connected with each other. This produced a positive impact on symptoms originally observed in the initial interview with a positive sense of connection associated with father as filter, and although the response to mother filter was still negative, the ISM order was restored, and the meaning is no longer deflecting the flow of the mind. This means the image has a greater potential for change. Important changes in symptoms emerged at follow-up related to the original symptoms of wanting connection and wanting to be accepted. Follow-up images show a release of these symptoms and a positive connection to enjoying exercise without caring what others think. This subject reports changes in actual experience of exercise, and greater awareness of self in everyday activities.

Subject #1 Analysis Table

(Parentheses indicate that particular tripartite code is missing. Or reviewers comments)

Data Source	ISM Order	+/- Imagery Association	Parental Filters	Symptom Connection
Symptom Picture				Stress, Fear, Failure (16 physical sx)
EP1	ISM	M + F -		Want to connect
EP2	ISM	M + F +		(Trying to control images)

Initial Interview				
Anticipation	IMS	- to image + to meaning		Nervous about making it happen Futile to do it once
Mother	IM(S)		Focus on her	(Disconnects from self)
Father	MSI	Surprised to see + image of Fa	Focus on him	(Motivation related to meaning)
First Experience	MS(I)	- to meaning		Difficult, alone a lot, Wanted to connect
Prior to First		Lack		Wasn't in best of shape Wanted to be accepted
Positive Experience	ISM	+ feelings exhilarated grounded		(Bipolar Opposite of Symptoms)
Mother	IMS		- feeling of Concern	Concern for her Help others to help self
Father	MS(I)		- feeling response	Drags me down

Data source	ISM order			(Changed related to symptom)
Follow Up				
Anticipation	ISM	+ inspired		Corrected neg. image association
Mother	SMI	- harder, shorter steps		Connected to self, experienced negativity of mother filter
Father	SIM	+ easier, together		Corrected intervening meaning + Feeling of connection to Father
Positive Experience	ISM	+ don't care what other people think		+ Feeling of self acceptance (not pleasing someone else)
New Awareness				Better sense of each movement having a series of actions, who the controller is, or where the centers of movement are. I am more aware I can reflect on movement while I'm doing anything Start with awareness of sensation and then awareness of movement
Effect on Awareness				I feel both the power and the resistance I more acutely feel the resistance I see the impact of parental images
Changes in Activity				Huge potential for helping people It feels better to exercise.

Subject #2 Case Report

Subject #2 is of normal weight and identifies some difficulty exercising and a significant decrease in a favorite type of activity which is distressing to the subject. This subject began the project reporting 16 physical symptoms, difficulty exercising and a general negativity with particular worries or concerns over jaw pain and low energy. Developmental images bring forward negative somatic responses, with direct connection to symptom of jaw pain.

Projected image data describes a person with significant developmental impact seen as negative images and negative somatic associated even when the ISM structure is in expected order. Disruption in the ISM order is particularly noticeable when the subjected was asked to use parental filters related to a positive exercise experience. This was accompanied by a negative somatic response. The subject began to exercise to fill a lack in self, trying to fit in and be part of something. There is a positive association with meaning which demonstrates positive thinking and motivation by an external goal (president's fitness test) but the underlying structure is revealed by the effect of parental filters that surface underlying feelings of helplessness and being "tripped up". This turns out to have connections in many areas of this subjects' life; a feeling of motivation, a good effort, only to be tripped up.

Follow-up data reveal increased positive body awareness, and increased activation of the body. In the week following the workshop, the subject engaged in a favorite activity which had long been avoided because of negative associations. The subject reported greater pleasure in the activity, with good feedback from peers. Even with this initial positive response, however, negative feelings of confusion and began to re-appear. Subject reports several intervening events that made it difficult to maintain focus on images, another example of a positive experience that was "tripped up" after a good start.

Future: the initial benefit with a subsequent loss of benefit when the subject stopped focus on the images highlights the need to continue work with the images to maintain benefit until the structure is internalized. For example for Subject 3, the barrier of being "tripped up" needs to be addressed before the positive benefits of internal activation can be maintained.

Developmental issues that are identified in the imagery need to be addressed to support changes.

Once the pathways are open they are available but they need to be maintained open until the new experience is "absorbed".

Subject #2 Analysis Table

(Parentheses indicate that particular tripartite code is missing or comment by researcher)

Data Source	ISM Order	+/- Imagery Association	Parental Filters	Symptom Connection
Symptom Picture				16 physical symptoms difficulty exercising, negativity, jaw pain, low energy
EP1	ISM	M - F -		M: Frustrated, ignored, confused F: Ignored, confused
EP2	ISM	M - F- Inversion		Irritation, jaw pressure
Initial Interview				
Anticipation	ISM	- somatic response		Trepidation, tiredness, anxiety
Mother	ISM	- image assoc	M -	Image: Fell off the bench
Father	SIM		F +	
First Experience		Lack		Not good enough Determined and Strong assoc with meaning
Prior to First				Wanted to fit in Wanted to be part of something
Positive Experience	M(IS)	+ association to meaning		President's fitness test. Determined and strong
Mother	MS(I)	- feeling with memory		Helpless feeling
Father	SIM	- association with image and feeling		Confused (EP1) Tripped and fell

Data source	ISM order			Change related to symptom
Follow Up				
Anticipation	ISM	- somatic response		Pit in stomach, tired, sad
Mother	ISM		M + M - meaning	Energizing, motivated, but still pit (Initial excitement, then - negative memory)
Father	SIM		F -	Sluggish, losing confidence
Positive Experience	ISM	+ assoc. to Image		Feel centered and confident But still a little negative feeling in stomach
New Awareness				Positive body focus, positive body experience. Being "tripped up" has great significance in many areas of subjects life.
Effect on Awareness				Increased body awareness during workshop Increased feeling in right leg, with desire to move , a general feeling of balance and strength
Changes in Activity				Initiated a favorite activity, received + feedback, felt good Began to feel obstruction after a couple of weeks, even though things

				were going well.
--	--	--	--	------------------

Subject #3 Case Report

This subject is of normal weight reports no significant difficulties historically with exercise in general but does report a decrease in activity associated with illness and death of the subject’s father. In the current data, there is negative somatic association with exercise anticipation, a positive effect of Mother image as filter, and an initial positive effect of Father as filter. This however, was short lived because it triggered a negative memory of father’s illness, and sadness over his death which changed the image to a negative picture and produced a negative feeling.

To remove this obstruction, a second session was scheduled with this subject to work with the negative image. The method selected was a process called emanation in which a second self is brought forward in consciousness.

The second self image was still focused on father, not wanting to leave him behind, the third self image was teaching father, to strengthen him (subject noted heaviness in eye area, “not sadness, just heavy” which is seen as a change in perception related to the image). In the fourth self image, the subject actually saw the image of her dad swimming with strong legs, diving in from the starting block and relaying back and fourth, she reported a god feeling of competitive energy associated with the image (ISM structure is restored and intrusion of memory is relieved) (this was also accompanied by increased sensation around the eyes)

At follow up this subject reported positive ISM order, with positive somatic response, positive Mother and Father filters, and no intrusions of memory. Activity has increased, and experience of activity “feels different in some way” which is a good feeling.

Because the negative effect of the memory was so strong, this subject does not report much increased body awareness resulting from the workshop, and reports that her body is still out of her awareness and feel kind of “numb”.

Subject #3 Analysis Table

(Parenthesis indicates that particular tripartite code is missing.)

Data Source	ISM Order	+/- Imagery Association	Parental Filters	Symptom Connection
Symptom Picture				
EP1				
EP2				
Initial Interview				
Anticipation	ISM	-somatic assoc.		Tired
Mother	S(IM)		M +	Pleasant, lighter,
Father	SM(I)	+ assoc with Father - assoc with memory		Happy, then confused because of a negative memory of father
First Experience				Has “always” worked out
Prior/after First Exercise				(Reduced working out because of a physical injury and becoming caretaker for father)
Positive Experience	ISM	Feel energized		
Mother	ISM		M +	Happy feeling, alive
Father	IMS	Stops image	F –memory	(Memory intervenes)

Data source	ISM order			Change related to symptom
Follow Up				
Anticipation	ISM	+ image assoc.		A feeling of lightness, Lighter than before
Mother			M +	More energy, together
Father			F +	Proud of myself, alone but proud of myself, it’s a good feeling

				I like my body more, feel stronger
Positive Experience	IM(S)			(Focuses on happiness of others Doesn't register physically)
New Awareness				Lingering idea of exercise, planning ahead weekly Reminds me to take care of self
Changes in Activity				Increased from 0 to 10 minutes now to 35 minutes a day walking/running No ankle pain. Feels more alive, feels different in some way

Subject #4 Case Report

This subject is moderately overweight, and has significant difficulty exercising due to symptoms of fibromyalgia, including muscle pain and fatigue. Thirteen physical symptoms were identified with worries and concern centered primarily on ability to exercise and potential consequences of exercise. Developmental images show usual ISM order with positive feeling response to father image and negative feeling associated with image of Mother. EP2 reveals a hemispheric inversion of parental images accompanied by a change in breathing pattern and a feeling of shortness of breath. This data suggests some physical tension patterns that affect breathing patterns associated with early interactions.

Projected image data from the initial interview shows the expected ISM order in the projection, but a negative somatic response of nervousness and anxiety related to uncertainty about trusting body response. Father image as filter projected a negative response that includes "can't keep up" and "disappointment". This makes the experience of exercise more difficult and decreases pleasure in activity. The negative impact of father filter is also evident in decreasing pleasure with a positive exercise image.

Follow-up data again shows positive associations resulting from an expected ISM order. The negative father filter continues, but appears not to have impaired the positive effects of image progression that occurs when the mind is focused on the image first, then the naturally occurring body response leading to new meaning.

This particular case study is particularly notable for ISM order. Every image was reported in the expected ISM order which means that the mind can proceed smoothly to become aware of obstructions and can find solutions. This allows a spontaneous image progression to occur with an opening and flow from one image to the next. New images and associated memories come to mind in this process. Physical obstructions came first into awareness, with a significant increase in awareness of the location and the effect of the holding pattern in the pelvic area. As this was released, the subject reported a sensation of oxygen flowing into muscles and a feeling of relaxation and pleasure in activity. Some negative response happened directly connected to the Father filter, but the subject was able to refocus and connect with the image.

Subject #4 Case Analysis

(Parenthesis indicate that particular tripartite code is missing or comment by researcher)

Data Source	ISM Order	+/- Imagery Association	Parental Filters	Symptom Connection Clients own words Or (comment by researcher)
Symptom Picture				Worry about ability to exercise and negative consequences from exercise. 13 physical complaints
EP1	ISM	F + M -		Fa. Comfortable, assured
EP2	ISM	F- M-		(inversion) feeling of shortness of breath
Initial Interview				
Anticipation	ISM	- association to image		Nervous about getting fatigued Cant trust my body, anxiety, nervousness, upper thigh to chest
Mother			M+	Decrease in symptom of tightness Release, oxygen flowing
Father			F-	Tightening in right leg,

				Nervous feeling, breathing shorter Worse than last image, breathing noticeably more effort Can't keep up with him, feeling of disappointment
First Experience	ISM (child) ISM (adult)			Gymnastics (age 13) Excited, no fear, likes to jump Free and strong, especially lower portion of body (age 27) Just got a bike, afraid of being hit by car, but once on it feels natural no fear. Body was starved for it. Lower body feels good and strong
Prior to First				Pregnant, depressed, felt good until had accident, healthier than ever till automobile accident Accident; pain hurt everywhere, tired and didn't know why, my body was a mess,
Positive Experience	ISM			Cycling, able to ride off her anger had lots of endurance, O2 flowing
Mother			M+	Smiles, joy, proud of her Feeling of camaraderie, doing it for her, wonderful, body feels relaxed
Father		No image	F -	Cycling stopped, can't see image, an abrupt halt, doesn't want to ride anymore, shut down

Data source	ISM order			Change related to symptom
Follow Up				
Anticipation	ISM	+		Feel very relaxed in hip area excited
Mother			M +	(positive memories emerge)
Father			F -	Not relaxing, its hurried
Positive Experience	ISM	+		Feel oxygen all over my body, it relaxes my muscles
New Awareness				Aware of blocked feeling in pelvic area How much I felt overwhelmed and shut down Not looking back any more (orientation to future)
Effect on Awareness				Awareness helped know what to release, Remembered positive experiences with exercise activity Significant release in hip/pelvic area Legs and abdomen more active
Changes in Activity				Increased from a few blocks to 1 mile X3 per week Eating is less No muscle pain Use images if I start to get messages of fatigue and everything relaxes

Discussion

Any investigation using such a complex phenomenon as an image presents significant challenges. It is far easier to reduce the variables sufficiently to establish control over the data and achieve statistical confidence in the result. This control however is an illusion because the human mind is complex and change occurs in unpredictable ways. In addition, the complex system of a human being is being changed, which is never a one-to-one relationship between an intervention and an outcome. The intervening variable is the person who is making the change. It is therefore necessary to study the person rather than the intervention, to determine what the person brings to the situation and how the intervention presented affects that individual. The present study used several methods to learn about the subject's involved and the structure and sources of obstacles which limit pleasure or likelihood of exercise activity. To do this several propositions were developed based on the theory of Eidetic Images including the ISM structure of the image, anticipation response, impact of parents as filters, and hemispheric position of images. Based on the psychosomatic connection of mental and physical events, we expected to see a negative symptom, such as difficulty exercising, associated with a negative mental structure as projected in an image. Various image tests applied were expected to locate or "target" this connection. An intervention of a workshop was then used to re-establish original experience and increase self awareness followed by a follow-up interview to explore changes. Changes in image structure and experience were expected to be associated with changes in likelihood and experience of exercise.

The propositions of this study were largely supported with every subject making changes in the expected areas, identifying blocks or barriers to activity in their images and reporting changes in type, level or experience of activity after imagery intervention. Notably, barriers to exercise had little if anything to do with exercise itself. In fact, barriers that were surfaced by the image, whether evidenced by a negative feeling association with the image or a disruption in the ISM structure, were intensely personal and either developmentally or trauma based. It appears that personal experience and the structure it creates, greatly affects desire and ability to engage in activity.

The precise association of image and body response allowed subjects to see exactly what was responsible for their experience, making subjects first aware of barriers to exercise and then opening to new experience. Negative associations with exercise were shown to occur more frequently when first exercise "on purpose" was due to a lack. The negative self image seemed to bring into play a negative experience of self even when external results were positive. Thinking, memory, and focus on meaning were associated with negative somatic responses and repetitions of memory which leaves the subject "looking back". One subject particularly noted a change in orientation toward the future as a significant change.

Focus on internal experience was associated with more positive self-experience. Focus on others moved experience associated with the image away from self and reduced self-awareness. When focus on image and then somatic experience did bring a negative association, this image was more available to change, and the image progression that will relieve the symptom did occur.

As expected, changes in ISM structure were associated with more positive images or more clear insight regarding what in particular is enhancing or blocking experience. Positive change comes from freedom of mind to flow from image to image, with somatic response flowing and changing, and therefore meaning evolving and changing, resulting in new understanding. The two factors from previous literature of positive experience, fun, or pleasure, and internal motivation were both evident in this study.

The ability to target internal barriers to positive activity experience is of special importance in terms of what was learned from this study because seeing specific problems in the image will allow interventions to be directed exactly to the place where they will do the most good. In this case, the workshop was used as an intervention, but it should be noted that the image maneuvers used as tests in this study, for example, parental filters, may also have an impact by providing insight and increasing self-awareness.

The somatic connection to the image demonstrated by the ISM is also a key to success in motivation. This study demonstrates the negative result from associating positive feeling with thinking (meaning) when the projected image is negative. Re-ordering the ISM was associated with positive change in exercise behavior.

The ability to identify and relieve internal barriers and to build internal resources by recovering the original joy and pleasure in movement offers a whole new method of increasing motivation and performance. Focused deep within the individual, the Eidetic Image releases natural desire.

The present study was useful in discriminating in a general way the relationship between image structure as represented by the ISM and identified symptoms. It also provided the opportunity to explore using the anticipation response to understand how a person organizes themselves in preparation for an activity as well as coding responses using filters and positive and negative qualities of an image.

Limitations of the Study

This study showed individual changes but it is not possible to generalize from such a small number of cases. There was great variability even among four participants and while there was movement for all, the

particular changes took very different forms. Since all of the participants in the present study had some experience with Eidetic imagery, it is not known how someone with little or no experience working in this manner would react. It is also possible that people with a high need for exercise, for example heart patients, people with diabetes might encounter different or additional barriers because of fear for their health. Further, participants in this study were of essentially normal weight, and had a general positive orientation toward exercise. It is not known from this study how the application would have affected people with significant weight problems or people who were resistant to the idea of exercise.

Indications for Further Study

The use of Eidetic Images as a method for exploring and changing motivation to exercise has exciting potential and further study in this area is certainly warranted. The precise ability to identify the ISM structure of a projected image as well as the positive and negative qualities of that image offers a tool for scientific observations. Expanding the system of coding image responses will allow a much broader use of the imagery method in scientific inquiry, allowing comparison of changes among individuals while accommodating the variability of individual process.

In terms of the present study, a larger sample group will be useful particularly with a wider range of demographics; age, marital status and occupation and levels of fitness. In addition, use of the application with various target groups, for example obesity, heart disease, diabetes, or cancer will provide useful information about specific barriers for these groups.

More extensive development of symptom information and the concerns about each of these will help to determine focus for next interventions as well as allow for unanticipated benefits; things that change which were not the focus of concern in the beginning. Working with individuals using the Eidetic Method, it is common that once the “glitch” or stuck place in consciousness is relieved, changes occur over an extremely wide range of symptoms. Often clients report changes that could not have been predicted from the original symptoms reported.

Working with obstructions in the image as with subject 3 in this study to release stuck processes in consciousness should be explored in terms of their ability to remove the obstacles to exercise. More information about process obtained during the workshop would have been helpful to more precisely determine what accounted for the body awareness that was reported. For example, written reports by subjects taken immediately after the image exercise, stating what they saw in the image and what they felt during the image would establish a direct link between image and change in experience at that moment. The intake process itself was certainly useful but subjects also made references to particular exercises so it was not possible to determine how their awareness unfolded. Examining the sequence of images presented would provide useful information.

Along these lines, two of the subjects identified beginning an exercise program as a result of a “lack” within their self image. The use of an external process to fill this lack may have the unintended negative consequence of reinforcing the person’s inability to produce the desired effect themselves. By contrast, if the person’s innate desire were developed, such that exercise was the natural result of self expression, motivation might be a natural result. Use of the imagery process to accomplish this shift from external to internal motivation would be a significant contribution to the field of exercise motivation.

Specific barriers to exercise were targeted by the process in the present study and there was an initial change in awareness and exercise but it is not known what the long term effects of this brief intervention will be. A longer study to work with identified barriers, and to work with new problems should layers of obstructions come into awareness after the initial success would be useful in determining the long-term usefulness of these techniques.

Of additional interest were references to Oxygen. For instance, negative image of subject 4 with “breathing shorter and more difficult” and repeated references to feeling of “oxygen moving through body” associated with muscles relaxing with a greater experience of pleasure – needs further investigation of the effect of oxygen distribution past obstructions and the effect of image obstructions on experience and oxygen delivery in relieving symptoms. Ahsen’s recent work in the area of exercise physiology would be an interesting area of exploration, perhaps changes in exercise experience or performance related to increased oxygen delivery.

The area of motivation to exercise is of significant importance considering the growing attention to health and fitness in this country. Much is known about the benefits of exercise and the mechanics of exercise but successful motivation remains, to a large extent, a mystery. The internal workings of desire and activity as a natural expression of the self present fertile ground for expansion of exercise activity and because of the precise nature of the ISM structure and the psychosomatic connection within the image, the Eidetic Image offers a pertinent vehicle for further investigation.

APPENDIX

Appendix A - Akhter Ahsen, (in press)

Slow Potentials

There are slow, graded potentials in the body which have their own consciousness. These are in the form of electrical impulses and explosions that extend between the sense organs and the brain. Experience is in the form of a constant flow of potentials, like waves and tides going in and going out, as in a playful sea.

1. There are slow potentials in the brain that have their own consciousness.
2. There are low grade explosions and electrical sparks and energy.
3. These extend from the brain and go to the sense organs.
4. There's a constant flow of slow potentials like waves and tides going in and out.
5. The organs and the brain are like parts of a musical instrument.
6. Altogether they create the wonderful music of ebb and flow made of slow potentials.
7. Slow potentials are different from your thoughts and separate from your ego.
8. Be with these slow potentials and their cyclic and even changeful music
9. This is the core of your being.
10. This is true consciousness; a basic feeling of the pure consciousness of your body.

Appendix B

Body Scan

This exercise is designed to bring the mind into the body. Attention is focused on various qualities of the body, discriminating and localizing awareness of sensation.

1. Scan through their body, moving your attention to various parts of your body
2. Notice what comes into awareness first.
3. Become aware of your body in terms of its length, width, density, thickness, flexibility.
4. Notice areas that feel open or blocked, flowing or sluggish
5. Notice differences between left and right sides, or upper and lower portions of our body.
6. Notice specific areas that feel hot or cold.

Appendix C

Smelling Ice - Akhter Ahsen, (in press)

In Viking mythology, we know that Ymir was made of hoary-frost - ice. His children are called Frost Giants and they build everything for the lesser gods. Ymir was a human giant made of ice; the beginning of everything. Let us experience his first breath, the root of his power.

1. Relax. Just relax where you are sitting. Remove tensions from yourself and just relax.
2. Close your eyes and become still; no part of your body is moving, you are just there.
3. Imagine you are made of ice and there is ice all around you.
4. Hold your breathing still and keep yourself still
5. Now smell the ice. The smell comes to you. You do not have to breathe to smell it.
6. When you smell ice, at that moment your breathing is still.
7. Ice smell is the first breath.
8. The smell of ice starts a different type of breathing which begins to run in your body.
9. It is a deeper breath and it bypasses the usual superficial breath
10. This still breath has underlying connection with all the organs of your body.
11. This is the healing breath that removes illnesses and contortions from your body.
12. The ordinary, superficial breathing has illnesses and contortions in it.

13. Now breathe this still breath which is the smelling of ice
14. The smelling of ice is the first breath
15. What is this like?

Appendix D

Churning of the Waters

The Mythology

The imagery pushes the body back in time. This is a new creation of the body cycle. The mountain is called Mandara and was on the earth. This is the union of the mother on the earth. But they wanted to bring the mountain into the ocean and churn the ocean with it to create a new cycle; a new first cycle of creation. So, Anantanga (the endless serpent), uprooted the mountain and along with the gods put it in the middle of the ocean then put it on the back of the turtle. Indra (god of thunder and lightning) balanced it on the back of a turtle. Indra's (Indra means nerves) role is to balance the nerves by little storms of electricity (along the nerve and the synapses).

Sea waves (feminine mind) were making the mountain a little unstable. The feminine mind makes the male mind a little unstable by pushing it around like waves. The serpent, Vasuki, was asked to wrap itself around the mountain like a rope, gods on one side, demons on the other side, and they began to churn. So good and bad are involved in churning the body, gods and demons. Everything is there in the churning movement. The demons are not all evil. This churning has unpredictable and difficult phases and consequences, but promises to be good in the end.

The Metaphor

This is a metaphor of the body. See it at a distance from your body and it is a replica of your own ocean of your body being projected outward so you can see it. The mountain is on the back of the turtle, which is low in the water, and the gods and demons are churning the water. You are using left and right sides of the muscles of your body.

One side of the serpent is one side of the body and the other is the other side of the body...from the legs all the way up. As you do this action, see that the sea swells around the mountain.

Start at a distance. If you have to identify with it, you may choose to come closer. Be right there as the ocean if you feel like.

Now we come down to Vrtra, the dragon of drought whose negative behavior locks up waters in various places of the body such as the abdomen, neck, lower back. The water is released by Indra, and as a result, joins the ocean. The sap from the trees at the mountain is the symbol of sexual juices. There is more sense of release.

Akhter Ahsen, (in press)

Appendix E

Demographic Information

(1) Name: _____

(2) Date: _____

(3) Age: _____

(4) Gender: _____

(5) Marital Status: _____

(6) Occupation: _____

(7) How much Personal work have you done in Eidetics?

_____ 0-20hours _____ 21-50 hours _____ More than 50hours

Appendix F

Informed Consent

You have been asked to participate in a research project exploring the application of principles of Eidetic Imagery to exercise, movement, and activity. Participation will require approximately 5 hours of your time in a blended model of face-to-face, phone, email, or faxed communications that we hope will accommodate your schedule. The project will include an initial interview, one three-hour workshop with other participants, two write-ups that you do on your own, and two interviews following the workshop which will be scheduled at your convenience. The project will last for approximately one month beginning early in November, 2007.

All participants in this study are students currently in the Eidetic Training at the Eidetic Imagery Institute at Austin. Interviews and data evaluation will be conducted by an Intern from St. Edward's University, Ian Birdwell or Dr. Swafford.

The project includes written and experiential components. Information will be collected about general symptoms, basic developmental dynamics, and exercise history. During the workshop and interviews, Eidetic images and maneuvers will be used to examine mental and physical structures, and to relieve associated symptoms.

Participation in this project is expected to be personally informative and a benefit to the participants in terms of self-awareness and symptom relief. The risk of negative effect is remote but, should any problem arise, a referral will be made for additional work to remediate the difficulty.

You may withdraw from this study at any time without penalty, but because of the nature of the design, confidentiality is limited to other participants, who will not be informed of your withdrawal.

I have read the above and understand the nature and process of this study. I agree to participate in informational and experiential components of the project.

Name _____ Signature _____

Witness _____ Date: _____

Appendix G

Symptom Picture

Do you have difficulties or concerns in the following areas?
That relate to your body? Please check the areas.

Head	()	Heart	()	Thighs	()
Skull	()	Lungs	()	Calves	()
Scalp	()	Breasts	()	Feet	()
Hair	()	Abdomen	()	Arms	()
Temples	()	Stomach	()	Hands	()
Back of Head	()	Intestines	()	Fingers	()
Neck	()	Genitals	()	Fingernails	()

Cheeks	()	(testicles in Males;	Body Joints	()
Ears	()	uterus in females)	Body Muscles	()
Eyes	()	Menstruation	Skin	()
Nose	()	(in females)	General Energy	()
Jaws	()	Urethra	Breathing	()
Lips	()	Urination	Voice	()
Mouth	()	Bowel Movements	Hearing	()
Teeth	()	Rectum	Sight	()
Tongue	()	Sexuality	Sleep	()
Throat	()	Spine	Memory	()
Esophagus	()	Back	Feelings for other	
Larynx	()	Pelvic Area	people	()
Chest	()	Buttocks	Anything else of	
Shoulder	()	Legs	significance	()
Blades	()			

Emotional or Psychological symptoms:

Worries or concerns:

Akhter Ahsen: Eidetic Parent's test and Analysis

Appendix H

EP1: House Image

Picture your parents in the house where you lived most of the time with them, the house which gives you the feeling of a home. Where do you see them? What are they doing? How do you feel when you see these images? Are there any memories connected with this picture?

<p>Write here what is seen in the mind.</p>	
---	--

EP2: Left/Right Position of Parents

Now set aside this picture of the house and see your parents standing directly in front of you. Tell me, as you look at them, who is standing on your left and who is standing on your right? – Now try to switch their positions. – Do you experience any difficulty or discomfort when you do this? Try to switch their positions again. – Do you again experience any difficulty? Do you feel that these images are independent of your control?

--	--

<p>Write here what is seen in the mind</p>	
--	--

Akhter Ahsen, Eidetic Parent’s Test and Analysis

Appendix I

Exercise Interview

<p>EXERCISE ANTICIPATION</p> <p>1. See yourself getting ready to exercise</p> <p>2. See yourself thinking about exercise</p>	
<p>PARENTAL EXERCISE FILTERS</p> <p>3. See yourself exercising keeping Mother in mind.</p> <p>4. See yourself exercising keeping Father in mind.</p>	
<p>FIRST EXERCISE EXPERIENCE</p> <p>5. See an image of the first time you intentionally exercised “for a purpose” ,or as “a program”</p>	
<p>WHAT WAS HAPPENING PRIOR</p> <p>6. What was happening just before you first began an exercise program?</p>	
<p>POSITIVE MOVEMENT EXPERIENCE</p> <p>7. See a positive experience that involved movement or activity.</p>	
<p>POSITIVE MOVEMENT WITH PARENT FILTERS</p> <p>8. See yourself in the positive movement keeping Mother in mind.</p>	

<p>9. See yourself in the positive experience keeping Father in mind</p>	
---	--

Appendix J

Follow-up Interview

- I. Symptom report: what symptoms are you currently experiencing
- III. Changes in Awareness
 - A. What did you become aware of during the workshop?
 - B. What have you become aware of since the workshop?
- IV. Effect of changes in awareness.
 - A. How has any awareness from the workshop affected you?
 - B. Have there been any changes in exercise or activity (level, likelihood, experience of activity)
- V. Repeat Exercise Anticipation, Filters, and Positive Experience.
 - A. See yourself getting ready to exercise
 - B. Exercising keeping Mother in mind
 - C. See yourself exercising keeping Father in mind
 - D. See self in a positive exercise/activity experience

Comments:

References

- Ahsen, A. (1977). *Psyche: Self-analytic consciousness*. New York: Brandon House.
- Ahsen, A. (1972). *Eidetic parents test and analysis*. New York: Brandon House.
- Ahsen, A. (1989). *Eidetic Parents Test desk volume: Imagery techniques for analysis & treatment of developmental themes & symptoms*. New York: Brandon House.
- Ahsen, A. (1973). *Basic concepts in eidetic psychotherapy*. New York: Brandon House.
- Ahsen, A. (1999). *Hot and cold mental imagery: Mind over body encounters*. New York: Brandon House.
- Ahsen, A. (1992). *New surrealism: The liberation of images in consciousness*. New York: Brandon House.
- Ahsen, A. (1979). *Manhunt in the desert: The epic dimensions of man*. New York: Brandon House.
- Akhter A. (1993). *Imagery paradigm: Imaginative consciousness in the experimental and clinical setting*. New York: Brandon House.
- Berger, B. G., Pargman, D. & Weinberg, R. S. (2002). *Foundations of exercise psychology*. Morgantown, West Virginia: Fitness information and Technology.
- Deci, E. L. & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. New York: Plenum Press.
- Deci, E. L. & Ryan, R. M. (1995). Human autonomy: The basis of true self-esteem. In M.H. Kernis (Ed.), *Efficacy, agency, and self-esteem* (pp.31-49). New York: Plenum Press.
- Hochman, J. (2007). *Brief Image Therapy: Ahsen's 10-Session Model*. Brandon House: New York.
- Ingledeu, D. K., Markland, D., & Medley, A. R. (1998). Exercise motives and stages of change. *Journal of Health Psychology, 3*(4), 477-489.
- Kilpatrick, M., Hebert, E., & Bartholomew, J. (2005). College students' motivation for physical activity: Differentiating men's and women's motives for sport participation and exercise. *Journal of American College Health, 54*(2), 87-94.
- Osuji, T., Lovegreen, S., Elliott, M., & Brownson, R. C. (2006). Barriers to physical activity among women in the rural Midwest. *Women and Health, 44*(1), 41-55.
- Mertens, D. M. (2005). *Research and evaluation in education and psychology: integrating diversity with quantitative, qualitative, and mixed methods, 2nd Edition*. California: Sage Publications.
- Sallis, J. F., Hovell, M. F., Hofstetter, C. R., et.al. (1990). Lifetime history of relapse from exercise. *Addictive Behaviors, 15*(6), 573-579.
- Thogersen-Ntoumani, C. & Ntoumanis, N. (2006). The role of self-determined motivation in the understanding of exercise-related behaviors, cognitions and physical self-evaluations. *Journal of Sports Sciences, 24*(4), 393-404.

Biography

Katy Swafford, Ph.D. is a Psychologist in private practice and founder of the Eidetic Imagery Institute in Austin, Texas. She also teaches in the counseling program at St. Edward's University. With 30 years clinical experience in body oriented approaches, Dr. Swafford conducts research in applications of Eidetic Imagery. Contact information: Eidetic Imagery Institute, 3355 Bee Cave Road, 1-104, Austin, TX, 78746 katyswaffordphd@sbcglobal.net

The USA Body Psychotherapy Journal The Official Publication of the USABP

Editor

JACQUELINE A. CARLETON, PH.D.

Assistant Editor

SASHA DMOCHOWSKI

Production Manager

ROBYN BURNS, M.A.

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.

USABP BOARD OF DIRECTORS

VIRGINIA DENNEHY, PRESIDENT

PAUL BRIGGS, VICE PRESIDENT

LYNN TURNER, SECRETARY

JACQUELINE A. CARLETON, TREASURER

MARY J. GIUFFRA

GREG JOHANSON

ANN LADD

KATHY SCHEG

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.

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 interdisciplinary 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.

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, Times New Roman font, 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