Embodied Intersubjectivity in the Clinic

Keynote: Prof. Shaun Gallagher
With Birgit Heuer, Jean Knox, Susie Orbach, Werner Prall, Nick Totton
Chair: Michael Soth

Intersubjective Embodiment with an emphasis on intermodal communication, spontaneity and the reflective capacities of the bodymind.

The notions of 'embodiment' and 'intersubjectivity' are surrounded by confusion and polarised assumptions: 'embodiment' acquires its polarised meaning in contrast to 'thinking' and the 'talking therapies'; 'intersubjectivity' is conceived of in opposition to 'one-person psychology' and the Cartesian 'myth of the isolated mind'. However, in their polarised meanings, these supposedly helpful and paradigm-shifting notions become too one-dimensional, rigid and unhelpful, creating as many conceptual traps and problems as they are meant to solve.

It may take a philosopher (rather than a therapist) to help us sort out these tangles and historically loaded concepts, and strip them down to terms that are phenomenologically useful, so they can do the work they are meant to do, and so we can work with them.

We are inviting Shaun Gallagher, a philosopher who is known for his thinking and writing about both 'embodiment' and 'intersubjectivity', and who does so from a phenomenological perspective. And we are bringing together a panel of therapists, writers and thinkers who have been exploring and pondering these issues for many years; and who have a track record of contributing significant ideas and impulses to our development in these areas: Susie Orbach, Nick Totton, Birgit Heuer, Werner Prall, Jean Knox.

Be prepared for some mind-expanding, body-opening, creative-controversial discussions which should shed some light on these cutting-edge questions which underpin our practice.

Professor Gallagher writes this about the day:
Embodied approaches to cognition, including enactive and extended models of cognition, have been having a large impact on research in cognitive science, generating a number of different debates. They have also motivated new models of social cognition, and the topic of intersubjectivity has now become a central one in several of these disciplines, including cognitive neuroscience. Embodied cognition approaches to intersubjectivity also hold some implications for clinical practice. I’ll outline those implications by looking at practices in 5 different clinics — applications ranging from psychiatry to neurological physio-therapy, and practices that include Body Psychotherapy and enhanced use of therapeutic software and virtual environments.

Shaun Gallagher is the Lillian and Morrie Moss Professor of Excellence in Philosophy at the University of Memphis. He secondary appointments is at the University of Hertfordshire (UK) and the University of Wollongong (AU); he’s Honorary Professor of Philosophy at the University of Copenhagen (Denmark), at Durham University (UK), and Honorary Professor of Health Sciences at Tromsø University (Norway). He’s held visiting positions at the Cognition and Brain Science MRC Unit at the University of Cambridge, the Ecole Normale Supérieure in Lyon, the Centre de Recherche en Epistémologie Appliquée (CREA), Paris, and Humboldt University, Berlin. He is currently a Humboldt Foundation Anneliese Maier Research Fellow (2012-17), and is PI on grants to conduct research on intersubjectivity and institutions (Marie Curie Foundation 2011-15) and the aesthetic and spiritual experiences of astronauts during space travel (Templeton Foundation 2011-13). His publications include Phenomenology (Palgrave Macmillan 2012); The Phenomenological Mind (with Dan Zahavi, Routledge, 2008; second edition 2012), Brainstorming (Imprint Academic, 2008); How the Body Shapes the Mind (Oxford, 2005); and as editor, the Oxford Handbook of the Self (Oxford, 2011). He’s editor-in-chief of the journal Phenomenology and the Cognitive Sciences.

Comments from the panelists:

Susie Orbach: My work on the body over the last several decades has led me to consider the question of: How we get a Body. My clinical experiences have led me to pose the question in the same manner that we have asked: How we get a Mind.
How we get a mind underpins many psychological theories from all schools and in this discourse the body, despite being described as a psyche-somatic unity is nevertheless presented and theorized as a bit player in the drama of the mind. It is frequently characterised as being the repository for conflicts that can’t be borne and thus have to be expressed through hysterical symptoms, breathing patterns and so on.

The widespread dysmorphias which come to clinical practice including a range of eating, not eating issues, body disciplines, cutting, hair pulling out and skin picking have led me to investigate the origin of body distress in the process of acquiring a body. The body, I argue, is not given, any more than the mind is given. The body is made in relationship to the intimate bodies in its world. The individual makes her or his body in dialogue with and through internalising what kind of body is possible.

Every aspect of early development, studied by psychoanalysts and psychologists, depends upon interpreting what occurs between a caregiver, usually a mother or female carer, in their interactions. How the baby is held, fed, cuddled, soothed, seen, missed, encouraged, discouraged, tickled, talked to and so on is deeply physical and yet these elements of the early origin of relationship are customarily evaluated for what they tell us about mind, about attachment, about internal object relations, about dissociative processes and so on. If we look at the meanings of these interactions in terms of the body qua body, it is possible to understand the forms of embodiment that then produce bodies which can range from secure to insecure, stable to unstable.

Each period of life involves the negotiation with bodily development and the way this is experienced and managed will depend on the senses of corporeality that the individual has absorbed and made their own. For a great many people today, an insecure body is an accomplishment through life. Without specific attention to it, the body will be experienced as provisional, unreliable, alien and dissociated.

Paying attention to the countertransference demands and bodily affects can be used to understand what is wanted in the therapy. Body security can be earned much like psychological security can be earned within specific therapeutic contexts but it requires training for therapists to pay attention to the forms of embodiment being expressed in the room. The body is an instrument to enable therapist’s to begin the process of helping themselves and their patients to understand their history of embodiment and engage with it to have a more stable outcome.

References:
Susie Orbach, Bodies, Profile (UK), Picador (USA) 2009
Susie Orbach & The BODI Group Members, The Acquisition of a Body; establishing a new paradigm and introducing a clinical tool to explore the intergenerational transmission of embodiment in Body-States: Interpersonal and relational perspectives on the treatment of eating disorders, ed. Jean Petrucelli, Routledge, New York 2015
Susie Orbach, Towards a gnosology of body development, in Trauma, Dissociation and Multiplicity: working on identity and selves, ed Valerie Sinason, Routledge, London and New York 2013
Susie Orbach, There is no such thing as a body, British Journal of Psychotherapy Vol 20, No1, Autumn 2003
Susie Orbach, Touch, British Journal of Psychotherapy Vol 20, No1, Autumn 2003

Nick Totton:
I am not in front of my body, I am in it or rather I am it... If we can still speak of interpretation in relation to the perception of one’s own body, we shall have to say that it interprets itself. (Merleau-Ponty, 1962, p. 150)

The embodied therapeutic relationship is frequently treated as an interesting and somewhat exotic optional extra, relatively marginal to the core themes of verbal therapy — an additional channel through which practitioners — perhaps only unusually sensitive ones, with all the ambiguous implications of ‘sensitive’ — can gain information about their clients’ psychological processes. Correspondingly, within body psychotherapy concepts like transference-countertransference and projection have been adopted and adapted from verbal therapy, and bolted on, often crudely, to our embodied practice.

I argue that we should think the other way around and recognise embodiment as the matrix of human relating. Our current theory of the therapeutic relationship needs to be remade from the ground up as a fully embodied account — not just of body psychotherapy, but of all psychotherapy. ‘Embodied countertransference’, for example, is not a special sub-category of a wider phenomenon; it is the thing itself. We might more usefully call countertransference which is not experienced in the practitioner’s body ‘disembodied countertransference’, and ask why and how it has become dissociated.

My suggestion, then, is that therapists experience a natural and inevitable desire to extricate themselves from most forms of embodied countertransference (sexual desire is sometimes an exception). It can make one feel uncomfortably out of control, and hence both vulnerable and irresponsible. This natural defensive reaction leads in many cases to the preconscious erasure of the most embodied aspects of therapeutic relationship, the abstraction and intellectualisation of these visceral experiences. This allows the therapist to stay apparently in command of the situation, but, just as when we resist full enactments, it limits the potential for transformative relational experience. ‘Embodied countertransference’ is nothing but a special case of embodied relating; if we refuse one, then we at least partially refuse the other and thus weaken our capacity to connect deeply with our clients.


Jean Knox: One crucial aspect of intersubjective embodied communication is the issue of agency. I will give a brief discussion of mirror neurons, in particular, the role of motor action chains in embodied simulation and the experience of agency. I will discuss the implications of this neuroscience research for the psychotherapy relationship, especially the patient’s need to have an impact on the therapist. I will briefly examine how this contributes to the ‘feeling with’ aspect of empathy and how it relates to perspective-taking - the ‘feeling for’ aspect of empathy.
Werner Prall: 'My Body'? - A Caveat

Let me begin by misappropriating, mangling even, a famous saying from Lao Tzu's Tao Te Ching: the body that can be spoken is not the true body. Meaning that, when we speak of the body, it is always the body of language, inserted into a network of symbolic signification, i.e. a body that is already alienated from the alive thing that lives us. If it wasn't so cumbersome I'd be tempted to always put 'the body' in quotation marks to emphasise that this is the body as far as we speak about it, the body which, by the time it is 'mine', is not, strictly speaking, body any more, not the animal side of us, as it were (nature also being sadly beyond us once we have become the cultured beings we human beings are). Lacan, in order to highlight this point, distinguishes between the unorganised organism the neonate and the body and the body as we tend to think of it. This is not 'only semantics' – it constitutes, in my mind, the heart of the problem of the body for us.

For Freud the body and the ego (the I) are closely related; we could say they come into existence only in tandem. As he writes famously in The Ego and the Id: 'The ego is first and foremost a bodily ego; it is not merely a surface entity, but is itself the projection of a surface' (1923, p26). If we think of the ego as located inside a psychic skin separating what is inside and outside, what is mine and not-mine, then there is also a point of identification of that body as 'me'.

But having already distinguished (as the founding moment of psychoanalysis, we might say) between the conscious and the unconscious mind, and later, between the ego and the id, now the ego's identification with the body – me in my body, my bodily me, the man in the mirror – leaves something out, if not behind. The ego is not only juxtaposed to the outside world and the other who confronts it, there is something of the body which itself has become other to it. Freud called this the drive, Lacan the Real of the body. One way of illustrating this is to point to trauma (as Freud has done in Beyond the Pleasure Principle): we can be overwhelmed by something originating in the body, our body can drive us mad, it can kill us! (And it will...)

Freud defines the drive as 'a measure of the demand made upon the mind for work' (1905, p168, added 1915); and the means with which we work over mentally what comes at us from the side of the body are primarily linguistic. Language, however, which I receive from the other (or the Other in Lacan) always precedes me. Thus it is in two senses really that I receive my body from the other. The other is always before me. Lacan illustrates this point by evoking the scene in which the small child first recognises itself in the mirror: this is me! The ego identifies with the image of the body it sees in front of itself. This image exceeds in integration the actual experience of the body and is set up as ideal, an ideal the identification with which is confirmed by the other: yes, my lovely (or not so lovely), this is you! This moment of identification is thus at the same time a moment of alienation. Self-recognition is always also mis-recognition ('méconnaissance').

Other psychoanalytic theorists stress that it is not only via language, and not only via the image that our bodies receive their shape from the other. Handling – e.g. feeding, washing, tickling, hugging, restraining etc etc, the whole complex never-ending 'dance' that is performed in the nursery world of the small child – forms the way its body comes into being whilst the desire of the (m)other is being inscribed on it. The child learns how the body is meant to enjoy and to express itself from others who are, of course, only partially conscious of their own desires (Laplanche). Using a striking image Lear writes about how parents are patrolling the boundaries of the erogenous zones of their offspring, setting limits to what can be expressed and what enjoyed (2005, p80). From Laplanche's perspective what is at stake here is not just the transmission of social norms, but the confrontation of the child with the 'enigmatic messages' of the parents' unconscious desire. The body-ego thus emerges between the organism and the other, or, to put the same thing differently, between the drive and body (Verhaeghe 2001).

We are conceived by the other who is always before us, we receive our being, and our body – and not just the physical body – from them. Whilst we are in this sense always already alienated from an original or true self we can only nostalgically dream of with hindsight, we better identify with this existence offered to us if we want to be a human (social) being at all. We can always put the details of this identification into question later in life - there is, thanks to Freud, psychoanalysis!

Finally: mind-body dualism or BodyMind unity? Neither, in my view. To reject Cartesian dualism, as I think we must, does not lead us (back?) onto the happy fields of unity. Whilst mind is a manifestation of the body, just as the body is a manifestation of mind, this does not mean there are divisions, not that these divisions can ever as in the hysteric conversion syndromes, eating disorders, body dysmorphia etc; but I think this division is better understood as one between 'body' and body, or - same thing - between aspects of the mind. Importantly, however, I think this division as structural; i.e. not only as an accident of personal history, but as constitutive of us 'embodied' human beings.

References:

Birgit Heuer: A dual training in body-psychotherapy and Jungian analysis informs my approach to body, which emphasises the experience of embodied being. The theme of the body has been included by the analytic approaches for some considerable time.

Importantly, though, this reception lacks specific experiential qualities engendered in body-psychotherapy. Thus, analytic reception features an emphasis on the body, often in terms of physical symptoms and how they might be understood, in other words the bodily dimension tends to be apprehended in terms of meanings. Whilst this can be both insightful and emancipatory, it does not encompass embodied being.

Being is a domain of experience, which, in my view, is implicitly valued in the body-psychotherapeutic clinic, yet does not register in the analytic approaches. In very simple terms, considering the body, does not mean we feel sufficiently embodied, or have recovered authentic capacity for bodily pleasure. I view a capacity for embodied experience as a special expertise of body-psychotherapy. The exception in the analytic tradition is Donald Winnicott, whose developmental theory conceptualises, how becoming embodied might be learned in infancy. However, this does not automatically render the experience of bodily being something that is valued clinically in analysis.

In the context of a doctoral thesis, I have researched intersubjectivity using textual analysis of clinical writing to apprehend underlying,
implicit views and conceptualisations of relationality. I use the term relational sensibilities in order to focus on felt interpersonal experience in the consulting-room. According to my research, relational sensibilities are determined by implicit conceptualisations of analyst and patient, which are learnt during training and tend to be induced, rather than articulated. However, they very much inform the feel of communication, particularly from therapist to patient, which is easily missed in focussing on ‘the’ therapeutic relationship.

Susie Orbach is a psychoanalyst, writer, activist and social commentator. Her interests include, the construction of femininity and gender, globalization & body image, emotional literacy and psychoanalysis & the public sphere. She co-founded The Women’s Therapy Centre in London in 1976 and The Women’s Therapy Centre Institute, New York in 1981. Her numerous books – which present new theory on women, on the body, on the relationship between couples - include Fat is a Feminist Issue, Hunger Strike, What Do Women Want (with Luise Eichenbaum), The Impossibility of Sex and her latest book Bodies. Last year Susie co-edited Fifty Shades of Feminism. Susie has been a consultant to the World Bank, the NHS and Unilever. She is a founder member of Psychotherapists and Counsellors for Social Responsibility, convenor of Endangered Bodies (www.london.endangeredbodies.org) the organisation campaigning against body hatred. She is an expert member of the steering group of the British government’s Campaign for Body Confidence. She is the co-author of commissioned papers on the body. She has a practice seeing individuals and couples.

Nick Totton: I am a therapist and trainer with 30 years experience. Originally a Reichian body therapist, my approach has become broad based and open to the spontaneous and unexpected; I have developed a therapeutic approach called Embodied-Relational Therapy, and now co-lead a training in ERT with four other practitioners. I have an MA in Psychoanalytic Studies, and have worked with Process-Oriented Psychology and trained as a craniosacral therapist. I am currently involved with ecopsychology and addressing climate change, and am exploring a more recently developed style of work called Wild Therapy. I have a grown up daughter. I have written and edited several books, including Body Psychotherapy: An Introduction; Psychotherapy and Politics; Press When Illuminated: New and Selected Poems; and most recently, Wild Therapy and Not A Tame Lion, both published by PCCS Books. See www.nicktotton.net. I live in Cornwall with my partner and grow vegetables.

Dr Jean Knox is a psychiatrist and a Jungian analyst with a relational and attachment-based approach. She is Associate Professor at the University of Exeter, for the Doctorate in Clinical Practice and the Professional Qualifying Training in Psychodynamic and Psychoanalytic Psychotherapy. She is a Training Analyst of the Society of Analytical Psychology, a Senior Member and Training Therapist of the British Association of Psychotherapists and former Editor-in -Chief of the Journal of Analytical Psychology. She has written and taught extensively on the relevance of attachment theory and developmental neuroscience to psychotherapy theory and practice. Her book Archetype, Attachment. Analysis: Jungian Psychology and the Emergent Mind was published in 2003. Her book ‘Self-Agency in Psychotherapy: Attachment, Autonomy and Intimacy’ was published in December 2010, in the WW Norton Interpersonal Neurobiology series.

Werner Prall PhD: Having come through the adventure of a training in neo-Reichian body psychotherapy with the Chiron Centre in the 1980s, my further studies and clinical experience took me in the direction of psychoanalysis, with an emphasis, to begin with, on the tradition of the British mainstream (i.e. object relations and Kleinian psychoanalysis) then via French variants back to, ultimately, Freud. My working life these days is divided between private clinical practice and supervision and teaching. I am a part-time Senior Lecturer in Psychoanalysis at Middlesex University, a member of the Training Committee at The Guild of Psychotherapists and a course tutor on the DCPsych in Counselling Psychology and Integrative Psychotherapy at Metanoia Institute. I am also on the Board of Govenors of The College of Psychoanalysts. My own interests in our field seem to cluster around the question of the viability of - shall we say - non-standard ways of being in the world, a question to which, I find, literature, philosophy and psychoanalysis provide interesting perspectives.

Birgit Heuer, Jungian Analyst of the BPF, previously trained in body-oriented psychotherapy. In private practice for the past thirty-four years. Served on the former BAP training committee and worked as clinical supervisor at Kingston University. Teaches on several Jungian-analytic trainings, at Birkbeck College, University of London, and at the Centre for Psychoanalytic Studies, University of Essex. Has published and lectured on the body in analysis, on the theme of forgiveness, on clinical paradigm and is about to submit a doctoral thesis on sanatology, a clinical theory of health and healing.