

# **Current Body Psychotherapy - an integral-relational approach for the 21st century?**

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## **The relevance of Body Psychotherapy for the rest of the field**

There are several developments in the field of counselling and psychotherapy which have occasioned this fresh look at Body Psychotherapy and its relevance for the profession as a whole, notably a) the integration of therapeutic approaches, b) the growth of the relational perspective across the whole therapeutic spectrum and c) the impact of neuroscience. In this article I indicate how these three developments have helped Body Psychotherapy move from a reliance on 19th and 20th century paradigms into a 21st century body/mind approach to psyche and psychology which puts the therapeutic relationship at the heart of the work.

## **The birth trauma of psychotherapy**

If we think of the late 19th century and its prevailing zeitgeist as the time of psychotherapy's birth, we can recognise how two fundamental pillars of our work are to this day informed and plagued by the paradigms of that era, i.e. our conception of ...

- the relationship between doctor and patient, and ...
- the relationship between mind and body.

In Freud's days, both relationships were imagined as dualistic and hierarchical, with top-down control being required to impose rational order and progressive change on an otherwise unruly, pathological and chaotic primitiveness. His dictum Where Id was, there Ego shall be encapsulates some of these assumptions 1.

Although the field of counselling and psychotherapy has been ambivalent about these culturally dominant paradigms from the beginning, with our practice relying on counter-cultural intuitions all along, we have never been quite able to extricate ourselves from the legacy of these 19th century assumptions. They constitute the birth trauma of modern psychotherapy and like a birth trauma - underlie the recurring difficulties of our profession, restricting its full potential.

## **The paradigm shift: central control complemented by self-organisation**

Neuroscience has been able to have such an inspiring impact on us in recent years precisely because that very same dualistic paradigm used to be at the foundations of their discipline as much as ours. However, some of modern neuroscience has managed to completely dismantle its central dogmas and pull the carpet from under its own feet, re-inventing itself in the process.

Modern genetics is apparently going through a similar process 2.

The paradigm shift in these and other - fields hinges around a basic question regarding organisation: how does a system any system: an atom, a cell, a human, a planet organise and regulate itself? How does the system stay adaptable and fluid ? How does it maintain stability?

Across the various disciplines, the essence of the shift is that a static, linear, hierarchical conception of central control<sup>3</sup> is being complemented by a dynamic, non-linear, de-centralised, self-organising view of systemic regulation.

One example from neuroscience, relevant to counselling: the fantasy of the brain as the central computer, managing the organism in top-down fashion, has been deconstructed as a hopelessly inadequate and misleading metaphor. Consequently, insight, understanding, reflection, language (the left-brain) can no longer be seen as the only or even the dominant factors for health or for change in the therapeutic relationship<sup>4</sup>.

### **The paradigm shift in counselling and psychotherapy: the wound enters the room**

The history of our field could be written as the way in which the wound refuses to be segregated into the client and into the mind, breaks down the dualistic fences and enters the consulting room. Where a dualistic psychology locates the problem in the clients mind, to be corrected by the doctors superior consciousness, a 21st century framework recognises the wound entering the here and now of the consulting room in a way which profoundly affects the body/mind of both client and therapist.

In terms of the relationship between doctor and patient, 19th century dualisms have been deconstructed throughout the counselling field for decades<sup>5</sup> , both by the humanistic movement and by the countertransference revolution in psychoanalysis<sup>6</sup>. Where a dualistic paradigm imagines the doctor as scientist-observer, apparently neutral and uncontaminated by the clients pathology, an increasingly established relational perspective now sees the counsellor as reliant on involvement and participation.

The body/mind dualism, however, continues to plague the whole field across the spectrum of approaches. We know that our mentalist, hierarchical, objectifying conception of the body/mind relationship does not work very well. Such a dualistic paradigm imagines insight and cognition of the rational mind as the main agent of change, whereas modern neuroscience now sees right-brain to right-brain communication in the attachment relationship as foundational for the therapeutic endeavour<sup>7</sup> .

However, our profession continues to rely on assumptions regarding the mind, the body and their relationship which have long been recognised as out-dated, misleading and insufficient. From within our existing framework we will remain incapable of applying to our everyday practice the insights which neuroscience affords us.

### **The tradition of Body Psychotherapy**

There is one therapeutic approach where the otherwise neglected and repressed body has been championed: the Body Psychotherapy tradition. Since the 1930s, Wilhelm Reich<sup>8</sup> and his followers have developed models, concepts and techniques which attend to the body, emphasise its role in therapy and work with it. A sophisticated developmental theory and typology<sup>9</sup> has been complemented by powerful techniques, based on radical assumptions about the body/mind, many of which are now being

confirmed by neuroscience. Over the last eight decades, Body Psychotherapy has accumulated a set of perceptive, theoretical and practical tools which are inherently holistic and are more congruent with a 21st century conception of body, mind, brain and consciousness.

However, for all its precious ideas and techniques, as one splinter in a fragmented field Body Psychotherapy has paid a high price for developing its specialist expertise - like every other approach it has its wounds and gifts. It has its areas of undifferentiated perception, its habitual assumptions, partialities and rigidities. These shadow aspects have not passed unnoticed, and have led to criticisms and also prejudices against it. Other approaches have rightly held back from importing some of the more biased, one-sided and objectifying body-oriented attitudes and practices.

Fortunately Body Psychotherapy - as other humanistic therapies like Gestalt and TA - has grown up from its fledgling heydays in the 1970s. Supported by the cross-fertilisation which occurred in the field through the formation of UKCP, Body Psychotherapists have confronted some of the wounds inherited through their own tradition, and have needed to learn from other approaches<sup>10</sup>. Over the last 20 years, the Chiron Centre for Body Psychotherapy in West London has been at the forefront of these struggles, developing a more integrative and relational perspective in the process. This has resulted in a whole new language and conceptualisation of the therapeutic relationship which re-integrates traditional body-oriented ideas with the mainstream of counselling and psychotherapy.

As these developments have not been written up and documented, they are not as widely known as they deserve. Moreover, a widespread confusion between bodywork (like massage, osteopathy, Alexander and many others) on the one hand and Body Psychotherapy has left many out-dated misperceptions which no longer apply to current theory and practice.

### **Body Psychotherapy's shadow aspects and inherited wounds**

Originally, Body Psychotherapy had to take a polarised position in the field, trying to reverse the cultural dominance of mind over body<sup>11</sup>. Body Psychotherapists were in the habit of seeing the mind as the problem and the body as the solution. Out of an underlying idealisation of the body, we tended to use the body as an avenue to break through the armour, to undercut the defences or to access primary impulses. Ironically, Body Psychotherapy, for all its championing of the body, had an inherent tendency to objectify the body. The more Body Psychotherapy was confused with and reduced to pure bodywork, the more it was seen to be treating the body rather than also relating to it, and from within it<sup>12</sup>. As a consequence, not much attention was given to the transference, let alone the countertransference, prompting the prejudice that Body Psychotherapy boils down to a set of body-oriented, often provocative techniques. If people know of its existence at all, in the public imagination it appears as a mixture of crackpot orgone boxes and wild, primal expression of raw emotion.

The kernel of truth is that traditionally Body Psychotherapy was characterised both by an emphasis on catharsis on the one hand, and a tendency towards gratification on the other, leading to a lack of containment and boundaries, and dangers of regression and re-traumatisation.

## **Chiron Body Psychotherapy: a relational model of the body/mind both intra-psychically and intersubjectively**

Whilst we appreciate traditional Body Psychotherapy for its incisive, holistic perception of the body/mind split in our culture, in our profession and primarily - in our clients<sup>13</sup>, we no longer believe that we can bring about a healing of that split as desirable as that may be simply through application of theory and technique. Such a medical model attitude we now recognise as relationally oblivious to the effects of the therapeutic stance we are taking<sup>14</sup>.

At Chiron we are interested both in the split or the disconnection between mind and body and their potential integration and wholeness. We are not habitually biased for or against duality or unity of body and mind, but work with the tension between the two, attending first and foremost to what is.

Rather than idealising the body and treating it as if it had the answer, we now ask:

- How does the mind relate to the body ?
- How does the body relate to the mind ?
- What is the existing relationship between body and mind which constitutes the systemic-holistic context for the psychological problem?
- And what other (past and current) relationships does this resemble, repeat or re-enact?

In recognising the subjective reality of an inner world, including conscious and unconscious processes, we share a modern psychoanalytic perspective of the self as contextual, fluid, open-ended. In recognising how this subjectivity interweaves and communicates with others, we work relationally, intersubjectively. But in addition, we pay attention to how both intrapsychic and interpersonal realities organise themselves across the whole body/mind spectrum as a particular and individual matrix between the poles of wholeness and fragmentation. What we call potential wholeness may be elusive, but it is not merely wishful thinking or an ideological programme - it is an experiential reality<sup>15</sup>. We want to be equally sensitive and available to the inexorable potential wholeness as well as the existing pain, damage, injury and fragmentation.

This, we feel, allows us now to do justice to the physical-energetic, the emotional and imaginal-symbolic as well as the relational aspects, each equally on their own terms and together as facets of the whole that is the therapeutic relationship. Although we are drawing eclectically from a wide variety of humanistic and psychoanalytic theories and techniques beyond traditional Body Psychotherapy, we think of our work now as integrative, in the sense that we are not just integrating contradictory theories, but working with the forces of integration and dis-integration in the therapeutic relationship, as paralleled on all levels of the body/mind in client and therapist.

Grasping the biological as emotional, psychological and mental has long been a feature of Body Psychotherapy, but we have now refined this into a model which is both learnable, applicable and accessible whilst doing justice to the inherent body/mind complexity of the therapeutic relationship. Our model builds on the essentially relational nature of psychotherapy, but goes beyond rather vague notions (like the quality of relationship) and formulates a holistic phenomenology of relating which puts the idea of parallel process and re-enactment at the heart of a holistic-relational

perspective.

### **Body Psychotherapy can help integrate person-centred and psychodynamic perspectives**

Originating from within psychoanalysis, but having developed a predominantly humanistic outlook over the decades of its further development, Body Psychotherapy in its current relational form can help integrate the person-centred and psychodynamic branches of counselling.

The work at Chiron - as the name deriving from the Greek mythological figure suggests - has always been based on the idea of the wounded healer and has been informed by an embodied notion of both empathy and congruence, both internally and interpersonally. This implies a refusal to use the therapeutic role as a shield to hide behind and an understanding of the core conditions as body/mind processes, subjectively rooted in a felt sense and communicated mainly non-verbally as well as through words. Person-centred practitioners can readily integrate the concepts and techniques of Body Psychotherapy, as they resonate with their own underlying values, attitudes and principles.

But Body Psychotherapy has also developed a holistic understanding of psychodynamic perspectives, recognising transference and countertransference as body/mind processes, too. Formulating these unconscious dynamics as embodied and rooted in the spontaneous processes occurring in the therapeutic relationship opens out a whole new way of perceiving the here and now interaction between client and therapist. This, in turn, affects our view of therapeutic responses and interventions, obviating the need for some of the restrictions of traditional psychodynamic technique.

In this way, the essential ideas of both person-centred and psychodynamic approaches can be anchored in the phenomenological detail of shared body/mind experience. Especially through the medium of roleplays, many of us have found in mixed workshops with participants from both paradigms that our experiential starting point is shared: we have the same perception of significant moments; we just make sense of them differently through the lens of our theoretical backgrounds. Body Psychotherapy has the sensibility and the tools to help us attend to that common experiential ground, and can therefore provide a bridge between person-centred and psychodynamic theories and ways of working which deepens and benefits both. 16

### **Conclusion**

Body Psychotherapy, having over the last 20 years worked through some of its own wounds as a tradition and its inherent set of habitual and rigid assumptions, can provide some valuable holistic pointers to the rest of the field which is struggling with (and against) an over-reliance on insight, language, reflection and mental understanding.

An integral-relational approach to Body Psychotherapy can offer practitioners from other orientations the most essential, useful and productive aspects of that approach without the traditional baggage. It can help counselling digest and apply the insights of modern neuroscience without succumbing to scientific objectification, thus maintaining the integrity of our discipline with its attention to human contact, subjective and intersubjective realities and the inner world of feeling and imagination.

## Footnotes

- 1 especially if we extend this, as Body Psychotherapy used to do, into an oversimplistic identification of Ego with mind and Id with body
- 2 Keller, E F (2000) *The Century of the Gene*, Harvard: Harvard University Press
- 3 which is still recognised as true, but only very partially so
- 4 Damasio, A.R. (1994) *Descartes' Error*. New York: Putnam, or (2000) *The Feeling of What Happens: Body, Emotion and the Making of Consciousness*: Vintage
- 5 Greenberg, J. & Mitchell, S. (1983) *Object Relations in Psychoanalytic Theory*. Cambridge, Mass.: Harvard University Press
- 6 Soth, M (2005) *Embodied Countertransference*, in Totton, N (ed.) *New Dimensions in Body Psychotherapy*. Maidenhead: OUP
- 7 Schore, A. (1994) *Affect Regulation and the Origin of the Self*. Hillsdale NJ: Lawrence Erlbaum.
- 8 Totton, N. (2003) *Body Psychotherapy: An Introduction*. Maidenhead: Open University Press; Reich, W. (1972 [1945]) *Character Analysis* . New York: Touchstone
- 9 Johnson, S. (1994) *Character Styles*. New York: W.W. Norton.
- 10 Soth, M. (2000) *The integrated body/mind's view on Body/Mind Integration*, AChP Newsletter 2000, No 17 (p.11-15); No 19 (p6-12), also at [www.soth.co.uk](http://www.soth.co.uk)
- 11 a stance illustrated by Fritz Perls statement: lose your head and come to your senses.
- 12 Soth, M. (1999) *Relating to and with the Objectified Body, Self & Society*, 27(1), p. 32 - 38
- 13 and, obviously, in ourselves
- 14 Soth, M. (2004) *What therapeutic hope for a subjective mind in an objectified body?* - Presentation at UKCP Conference 'About A Body' Sept. 2004
- 15 Winnicott referred to the possibility of the psyche indwelling in the soma and how vulnerable such potential wholeness is to developmental injury.
- 16 To be more specific: rather than thinking of congruence as a static, constant property of the counsellors position (which was never Rogers idea, anyway), by paying attention to its body/mind detail moment-to-moment we recognise it as a dynamic quality: our felt sense of congruence actually comes and goes, and is sensitive and responsive to the pressures in the relationship. If there a process of losing and re-gaining a congruent presence (rather than the counsellor hanging onto and feeling obliged to deliver it), this opens the door to the idea that the counsellors temporary loss of a sense of congruence may have unconscious significance. Thus, through attending to congruence as a body/mind process, we immediately get much closer to a psychodynamic conception.