

The History of Body Psychotherapy - An Overview

by Bernd Eiden

Body-oriented psychotherapy has become firmly established in the nineties as a distinct branch well within the main field of psychotherapy and is represented at United Kingdom Council for Psychotherapy (UKCP). The term 'Body Psychotherapy' was coined as the accepted label by the European Association of Body-Psychotherapy (EABP), which has been in existence for over 10 years. It exists as a specific therapeutic approach based on its own theoretical and meta-psychological position and a fairly wide range of techniques and interventions. Concepts and principles which originated within this tradition have been taken up into many other approaches, such as Gestalt, co-counselling, Process-Oriented Psychology, Psychosynthesis and in this sense body-oriented psychotherapy can also be an umbrella term to represent counsellors, psychotherapists, psychologists etc. who practice in a modality that engages the body to effect mental functioning. Many counsellors and psychotherapists from various backgrounds include some of the basic principles of Body Psychotherapy into their own way of working, as they consider awareness of the body as a vital ingredient in any attempt to do justice to the complexity of the therapeutic process. It exemplifies the ongoing trend in psychological treatment to synthesise different approaches into a holistic framework. This article addresses the need to develop an integrated and holistic approach to psychotherapy and counselling.

I would like to give the reader some understanding of the origins of Body Psychotherapy and its development over the last 70 years, a subject I have been teaching at the Chiron Centre for Body Psychotherapy over the last 15 years. In doing this I hope to demonstrate that Body Psychotherapy has an explicit theory of mind-body functioning and how this could be relevant to current counselling practice.

Although by definition most approaches involving the body have an holistic understanding and work towards some form of body/mind integration in the client, there are considerable differences in terms of technique, therapeutic stance and the role of the therapeutic relationship in the process. In terms of their relevance to counsellors, it is important to distinguish between various forms of body therapy treatments and Body Psychotherapy. The former group of practitioners, i.e. using some form of massage or physical exercises, work simply to improve physical well-being and see inner balance and psychological benefits as indirect results. Other approaches such as martial arts or cranio-sacral therapy go further and aim to involve the client more pro-actively in increasing inner awareness and healing the body-mind split.

Body Psychotherapy is distinct from these in that it always works from and with the client's subjective reality, which in our view inevitably includes an awareness of the different levels of body, emotion and mind which shape this reality. As emotional and psychological contact between client and therapist is considered the crucible of transformation, Body Psychotherapy is most opposed to body therapies in its conception of the therapeutic relationship. Although a holistic model of the client is common to all approaches involving the body, most body therapies need to rely on a quasi-medical 'expert' relationship to the patient whom they treat. Body Psychotherapy is not a technique or a treatment 'done' to the client. No particular technique is considered therapeutic in itself, but only as an integral part of a therapeutic relationship. Real change only happens through relationship with another human being, because the original damage and consequent formation of habitual patterns occurred in the dynamic with people in an individual's early environment. It is therefore the therapeutic relationship which is paramount. This implies an understanding of the dynamics of transference and countertransference and how to use these in the therapeutic relationship.

Body Psychotherapy focusses on psychic content and psychological process, in the context of inner and outer relationship and is therefore a form of psychotherapy. Because the inner relationship is significantly seen to comprise conscious and unconscious forces and energies, Body Psychotherapy understands itself more specifically as a psychodynamic depth psychology (1). The differences to other psychodynamic approaches are mainly on the level of meta-psychology (it's non-reductionist and non-dualistic) and technique (it's more interactive and technically eclectic).

Body Psychotherapy addresses the psychological implications and meaning of bodily expressions and in doing so works against a fundamental split between body and mind. This split is a manifestation of centuries of dualistic thinking and has given precedence to a medical 'objective' model over 'subjective' embodied experience. In the split, the mind is seen as in control, as if superior to body and nature. Since its origins, the field of psychotherapy has struggled with and against the split in a multitude of ways.

Freud had an ambiguous relationship to the split: he diagnosed its pathological consequences with an incisiveness unlike anything ever done before, but later he also declared it as a necessary aspect of civilisation, thus generalising it into a universal condition. He stated that the ego is first and foremost a 'body-ego' (certainly a statement integrating body and mind), and for a while assumed that some day psychoanalysis would be grounded in physiology and biology. His early conceptualisation of libido within a framework of homeostasis is much more aligned with biology and physics than with psychology, and there was a strong subversive impetus to liberate the body's energies. Early on Freud used a wide variety of techniques, including massage. Later in his life he seemed to veer more towards seeing the body as representing the dangerously dominant force of the instincts which has to be kept in check by the mind. Whether Freud transcended his early ideas because they were erroneous, or whether he retreated for other reasons, is still being debated to this day.

Reverberations of this are still obvious when adequate attention is not given to the body in the practice of psychotherapy and counselling. The mind itself has become the bridge to express the core of our self or psyche, and so has been the focus of traditional psychotherapy by working with its thoughts and beliefs.

Wilhelm Reich was the psychoanalyst who took up Freud's early ideas about the body and libido most consequentially and eventually became the most important pioneer of Body Psychotherapy. Other innovators like Groddeck and Ferenczi also experimented with more direct work with the body, whereas Adler, Jung and others contributed to the development of Body Psychotherapy through being concerned with the distribution of psychic energy within the body and the relationship between body and mind.

The culmination of his psychoanalytic ideas Reich presented in his 'Character Analysis' which he wrote from 1920 to 1933. Many of his ideas (about character, working with resistance and negative transference) have become widely accepted within psychoanalysis, but it was left to several Neo-Reichian and Bioenergetic schools to take up and develop his emphasis on direct work with the body, emotional release and sexuality. Reich extended his technique beyond the psychoanalytic method of interpretation to focus more systematically on the client's 'character' underlying the presenting symptoms. He proposed that the client's resistance to the process and to the therapist was based in mental and physical character attitudes.

Reich recognised that all neurotic symptoms also have a physiological and physical aspect and that the body is closely linked to the psychological process. Body and mind interact dynamically with each other and mirror each other. If the mind forms a conclusion, the body has a reaction. Tension in physical form is connected to a mental state and releasing it has a freeing effect on the mind.

Reich's concept of 'character armour' - habitual and chronic fixed relational positions - captures both the defensive and self-protective aspects of 'repression' which had long been a cornerstone of analytic theory. We repress and keep unconscious what we can't deal with, in order to protect

against (re-)experiencing pain. Habitual physical tensions serve a protective function, but also restrict us in experiencing pleasure, spontaneity and joy of life.

Reich observed the vegetative (or autonomic) nervous system during therapy and noticed that the body's sympathetic and parasympathetic responses corresponded to the interpretation and loosening of character resistances. It was significant for Reich that these vegetative processes were involuntary responses beyond the mind's control. They were sometimes accompanied by emotional release and could open the door to repressed trauma, images and memories. Such vegetative changes can be observed in the rhythm of breath, a change in skin colour or heat, in muscle spasm or twitches, in peristalsis activity, i.e. in any small involuntary movement and expression. In the long term these changes in vegetative fluidity and spontaneity can accumulate into visible shifts in the skeletal-muscular posture and the corresponding character attitudes. Changes on the physical level occur in tandem with changes on the personality level. Physical patterns are identical with psychological ones. Reich called his way of working with the body 'vegetotherapy', which he considered simply to be 'character-analysis in the realm of the body'.

In his later work Reich developed his concepts about sexual energy ('orgastic potency') further into what he called 'orgone energy' - this made him even more unpopular in psychoanalytic circles.

Reich argued that without addressing the underlying 'body armour', the therapeutic process is liable to remain bound by the linear world of mental understanding and insight. This can leave the client dissatisfied and at the mercy of patterns and physical-emotional states whose historical origin he now understands, but feels as trapped in as ever. The client's aliveness can remain locked on the neglected somatic level, with his internal conflicts conceptualised but not fully experienced. The conflicts between need, energy and desire on the one hand and fear, inhibition, reflection on the other can endlessly be re-cycled and re-enacted rather than actually felt. The body can help access the full intensity and potential of the conflict. This implies that the body is just as effective and necessary an arena for change as the mind.

Reich's work with the body, character armour and resistance attracted many followers. In Norway and USA Reich worked with many professionals who integrated his teaching into their own work. An international movement of Body Psychotherapy developed with many variations of emphasis, all either stemming directly from Reich's work, adding substance to it or at least owing a great deal to it. To name a few: physician A. Lowen created Bioenergetics (1975), psychiatrist J. Pierrakos developed Core Energetics (1987) and psychoanalyst Ola Raknes in Norway practised Reich's vegetotherapy (1970), which his student, psychologist Gerda Boyesen, transformed into Biodynamic Psychology. Raknes also influenced David Boadella who founded Biosynthesis. Jack Rosenberg established Gestalt-Body Psychotherapy and Ron Kurtz the Hakomi method.

The approach of the Chiron Centre for Body Psychotherapy is based on this rich foundation of both the European and the American traditions. It is beyond the scope of this article to characterise in detail each of these approaches. Instead I would like to focus on how some of the concepts mentioned above, common to most Body Psychotherapy approaches, have been developed and adapted in the nineties. Over recent years, a lot more research has been done in neurology and other neighbouring disciplines and in general in the field of Body Psychotherapy. The research committee of EABP is currently establishing a database collecting all the literature and resources on Body Psychotherapy.

All schools of Body Psychotherapy conceptualise the self as embodied, i.e. experienced in and through the body. In their various ways they address unconscious patterns held within the body. The client's emotional experience is attended to by using bodily interventions, like touch, sensory awareness, breathing, movement and other active approaches as well as talking to evoke the client's awareness of the fullness and complexity of their experience. In this way spontaneous processes and cognitive reflection are both given therapeutic air space, an important condition for the integration of conscious and unconscious aspects of the psyche.

The two-way interaction between psychic and physical expression is fundamental to all approaches of Body Psychotherapy. As mentioned before, this is different from other forms of psychotherapy, which work with verbal interventions only, and it also differs from body practices, which use body work, movement or hands-on manipulation without attention to psychological techniques.

Body Psychotherapists work with the assumption that human beings are energetic beings, i.e. energetic processes are fundamental to all human functioning. These link the various levels of body, emotion and mind into an intricate, interdependent whole. The energetic shape and organisation, the 'how' of the client's presence is as important as 'what' is expressed. The Body Psychotherapist attempts to access the inner experience behind the outward presentation by including body language, use of voice, spontaneous movements, etc. Involuntary movements are linked to the autonomic nervous system and occur spontaneously in interaction with others, for instance the holding of the breath. The therapist may address these unconscious bodily events or may observe them and decide not to mention them in order to avoid drawing attention too quickly to the mental level. However, a subtle shift on the bodily level may be equivalent to an insight on the mental level. Body Psychotherapy does not always consider conscious insight as the main contributing factor to the process of change.

Physical touch may or may not be part of the communication between client and therapist, and there are some Body Psychotherapists who do not use touch as part of their way of working. The main dangers around touch are avoidance of hostility through collusive gratification and re-enactment of abuse through invasive techniques. In order to be able to distinguish, therefore, when touch is appropriate and when not, the therapist needs a differentiated perception of energetic contact and a consistent theoretical rationale (2). This necessarily includes an holistic grasp of unconscious relationship dynamics and a perception of transference and countertransference as anchored in the body.

Traditionally work with the body has been considered as indicated especially with more defensive and tough clients, where talking alone does not penetrate the rigidity. But there is some evidence of a growing popularity of bodywork in the treatment of traumatised clients (3). Body awareness, even touch or gentle breathing work, when used mindfully, can give the client a greater sense of safety and embodiment. As the body is the container of all our internal experiences, it can function as an anchor in states of dissociation and shock as well as being experienced as the apparent origin of panic and terror.

Defensive posture and physical contractions - which are established to protect from further injury - are always accompanied to some degree by numbing of feeling or disconnection from physical sensation. A body approach is particularly effective in re-awakening feelings in numbed areas of the body by bringing awareness to places that have been abandoned.

The healing potential of bodily methods such as touch or movement and its effect on the mind has not yet been recognised by science and the medical establishment. However, research in the field of psychoneurology and biology is now beginning to show the intricate intercommunication between the nervous, endocrine and immune systems and the neuropeptides and how in general the mind affects the body (4).

More research needs to be done to illustrate conversely how bodily processes affect the mind and emotional states. There is an increasing recognition in neuroscience that body signals underpin emotional awareness (5). These recent views help us to understand the relationship between thought, emotion and body and lend validity to established practices of Body Psychotherapy, e.g. that new sensory experiences can affect our habitual behavioural patterns.

The current zeitgeist in the nineties shows more openness to the role of the body in psychotherapy, but there is still a lot of fear and confusion. Some of the apprehensions around the body arise from the fear that bodily interventions are very provocative and can be experienced as invasive. Such worries are partly based on bodywork practices in the seventies, when the emphasis was on

catharsis and the quick breaking of defences.

We now recognise that bodywork which focuses only on catharsis and the release of tension is not necessarily successful in the long term. Tension and resistance have an important purpose, which has to be understood and integrated before it would be safe or productive to let go. A defence can be a resource and very important to maintain, at least temporarily. It is at this point that the therapist would employ 'talking through' to give the client a sense of choice and thereby ego control. The earlier bodywork emphasis on expression of feeling is now balanced by a greater understanding of the need for containment without which catharsis can develop into self-abuse. Since the 70's much subtler and more integrated ways of working have emerged which build on and extend those practices which many people still associate with 'bodywork'.

While some of these fears around Body Psychotherapy are therefore quite validly based in past practice, many of the preconceptions have more to do with people's relationship to their own body. They reflect our culture's ambiguous attitude to the body, which is a mixture of fear, fascination and narcissistic attachment. Individual and collective projections into the body are strongly split between the body as an idealised object on the one hand, and as a source of fear, pain and threat to the ego on the other.

But this conflicted collective background around the body is at the same time the reason why attention to the body becomes more and more unavoidable: the body suffers and becomes increasingly symptomatic. Much of the pain and suffering which bring people to counselling and therapy in the first place has to do with bodily symptoms such as physical stress and tension, hyperarousal, anxiety attacks, eating disorders, sexual difficulties, etc. The interest in the body has therefore grown in popularity with clients, who are looking to supplement verbal psychotherapy or demand an holistic approach to their problems. In exclusively verbal work, mainly oriented towards mental functioning, the body easily becomes the vehicle for everything that is unresolved and uncontained. This is why we can speak of mental and psychological conflicts becoming 'somatised'. In Western culture, the body lives a shadow existence, and its pain, dysfunctions and symptoms acquire emotional significance in relation to everything in the psyche that is repressed, un-lived, neglected. The field of counselling and psychotherapy can no longer afford to collude with this neglect of the body. The bodily perspective and method can greatly enrich and deepen the understanding of psychology and the practice of psychotherapy and counselling.

- (1) D.A. McNeely, *Touching - Body Therapy and Depth Psychology*. Inner City Books. Toronto, 1987
- (2) Bernd Eiden, *The Use of Touch in Psychotherapy*, *Self and Society*, Volume, 26 No 2, May 1998, Pages 3-8
- (3) Babette Rothschild, *Post Traumatic Stress Disorder*. *Swiss Journal of Social Work*, January 1998
- (4) Deane Juhan, *Job's Body - A Handbook for Bodywork*. Station Hill Press, New York, 1987
- (5) Antonio R. Damasio, *Descartes' Error: Emotion, Reason and the Human Brain*. Putnam, New York 1994

Recommended Reading:

David Boadella, *Wilhelm Reich: The Evolution of his Work*. Vision Press 1973

D.A. McNeely, *Touching - Body Therapy and Depth Psychology*. Inner City Books. Toronto, 1987

Wilhelm Reich, *Character Analysis*. 3rd edition, Orgone Institute Press, N York 1943

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