#### Introduction

# The Spectrum of Body Psychotherapy

Body psychotherapy is a significant current within psychotherapy. It is increasingly moving away from its once exotic back eddy existence on the distant shore to flow into the mainstream. Despite the skepticism to which it has previously been subjected, the psychotherapeutic field can no longer be imagined without it. Interest in the human body in psychotherapy is undeniable. The topics and main emphases of recent psychodynamic, psychoanalytical, or behavior therapy conferences reveal a notable trend: The human body, in addition to neuropsychology, is one of the focal themes. Two other indicators demonstrate the growing importance of body psychotherapy: its prevalence in the clinical treatment field (particularly in some European countries), and its increasing presence and firm establishment in academic literature. Though recognition by scientific and professional institutions is lagging behind, as is typical in integrating new developments, the interest in the re-integration of the human body into psychotherapy is increasing.

## **Mounting Significance of the Body**

An increase of knowledge has accelerated this change: For instance, exciting findings in neuropsychological research have virtually exploded over the past two decades. For example, they demonstrate that a contemporary understanding of what has classically been called conscious and unconscious is too shallow without reference to "somatic markers" (Damasio 2001) – namely the somatic dimensions of experience. Also, within the context of neuropsychological research, there are increasing indications that traumatic experiences extend deeply into the affective and autonomous nervous system, and are fixated by the limbic system. Thus, primarily cognitive and verbally oriented psychotherapy methods can hardly do justice to them. The deep-rooted and intense degree of "autonomy" exhibited by the participating neurovegetative excitatory processes (van der Kolk 1987), and the inability to transmit ideas by language that characterize traumatic processes (Scarry 1992) demand a more efficacious approach that recognizes and regulates the physical levels of affective and autonomous arousal.

Furthermore, the insights of current research on infants and attachment, as well as pre- and

perinatal psychology, challenge the classic axiomatic assumptions and dogmas of psychoanalysis. They emphasize instead the preverbal spheres of experience and their meaning for the fundamental structures and basic dispositions of the human psyche. What is called an object relationship in symbolic psychoanalytical terminology has its foundation in the early forms of the relationship experience. Daniel Stern calls this a "dance" whose medium is the body much more than language. In the future affect-motor schemas and physical micro-practices (Wehowsky, Downing in this book) will be imperative in a well-substantiated understanding of formative relationship experiences.

However, the increased interest in the body is primarily based on another fact. There has been a long, one-sided orientation of psychotherapy toward the ideal of rational enlightenment that neglects of the somatic dimension. The field of body psychotherapy is recognized as encompassing a wide-ranging, methodological-practical knowledge of how this overemphasis can be offset by subjectivity and experience. In this regard, body psychotherapy, in addition to approaches such as Gestalt therapy and psychodrama, belongs to a group of methods that intensify and activate experience. These methods rehabilitate the active aspects of individual therapy and transformation through an emphasis upon movement, action, expression, and experiment.

The recent expansion of methods that evoke experience reveals more than a historical relaxation of the strict setting of classic psychoanalysis. The latter is based upon a rather phobic understanding of acting out that has paralyzed the world of psychodynamic therapy for decades. The methods that actively engage experience open up a far-reaching and creative array of therapeutic interventions. They are receiving increased neuropsychological understanding and support (see contributions by Gottwald, Morgan, Petzold, and others in this book). Cognitive-behavioral therapy also has an orientation toward action and activation of experience. Its relationship to the body and affects has historically taken a much more mechanical approach. Until its recent experimentation with mindfulness and acceptance (Hayes, Follette, & Linehan, 2004) it has had to manage without the creative exploration of subjective experience and its dynamic depth dimension

#### A Hidden Tradition

There is a development in the history of modern psychotherapy that has been suppressed or utterly underestimated by mainstream research. The advance had a body-related basis that extended back to the beginnings of psychodynamic therapy, once it was no longer conceptualized as metaphysical. At the beginning of the 20th Century some courageous, mostly women, pioneers exemplified by the achievements of Elsa Gindler, initiated a tradition of body-pedagogic, body-therapeutic, and body-psychotherapeutic work. A century later the significance of this work is finally being grasped.

Certainly, one cause for this delay was that for a long time the field of body-psychotherapy lacked effective, parallel concepts connected to discourse with mainline psychology. For example, Wilhelm Reich, who undoubtedly possessed the theoretical brilliance and competence to sustain controversial discourse, was offended by his exclusion from psychoanalysis, and dissociated himself from it. Instead, he developed a conceptual edifice that no longer sought mediation and dialogue with the increasingly established psychoanalysis. With the partial exception of Gestalt therapy, this choice to eschew psychodynamic dialogue and engagement strongly affected psychotherapeutic methods that included the body for many decades of the post-Reichian period.

An additional factor is that many of the body-centered pioneers focused primarily on the development of efficient and powerful methods oriented toward praxis, while placing less emphasis on the conceptual formulation and theoretical foundations of their work. Many had no interest at all in linking with the old categories and interpretive frameworks of psychoanalysis. A methodological principle manifested itself at the beginning of the 20th Century: For many of the pioneers of the "bodywork" culture that was not explicitly oriented toward psychotherapy, *body experience* was the focus. They simply were not inclined to disrupt or distort this emphasis through distancing interpretations or analytic patronizing.

The difficulties in forming theories were also based in part on the object itself. The early body-pedagogical and therapeutic approaches penetrated into a phenomenological area of experience and practical knowledge that could not be conceptualized by psychoanalytical

categories, or by the prevalent cultural and scientific-portrayals of the human body.

Ultimately, this experience-near knowledge could only be accessed through the path of self-awareness. The same was true for its healing successes and its processes of self-actualization. These methods recognized that it was bodily experience that made it possible to enter into the sensomotoric "ground" of restricted personal development and illness. Instead of researching the objective physiological aspects of suffering and well-being, illness and health, the focus was on the somatic organization of experience, including a person's way of relating to their conditions, and creating meaning from them.

Great physicians of the 19<sup>th</sup> Century, such as Carl Gustav Carus, who were influenced by romantic natural philosophy, set the stage for psychoanalysis with its theory of the unconscious: They were still capable of speaking about the body in a way that described it as an expression of subjectivity. Meaning and experience as aspects of subjectivity played a major role in their approach. However, this faculty of speech was later marginalized by the dominating position of modern natural science. With the exception of the *Lebensreform* (German: life reform) movement, it only survived in the fringe areas of anthropological (Beuytendijk, Plessner) or body-philosophical thought (Merleau-Ponty, Marcel). The subfields of 20th Century body-therapy movements, whichh were recurrently treated with condescending amusement, continued cultivating physical experience and a language of subjective somatic sensation. This way of speaking was, and perhaps remains, bound to clinical work with patients since it expresses the intuitive, creative, and context-dependent correlations unique to the body-mind. It does this in a first-person language that more closely resembles poetic speech than scientific propositions.

Within this context, it is also important to note that the practice of body psychotherapy is not structured through language and concepts alone. Honing awareness through feeling and sensing are essential components of its work modi (Marlock in this book). One of its special characteristics is that language often spontaneously follows sensing (Gendlin 1998), and that contextual meaning results from experiences of "living evidence" (Petzold 1977). Meaning normally is not brought to the subjective experience from the outside. Nor is it brought to a body that is understood as inert matter without consciousness.

## **Independence and Discourse**

In retrospect, it has been an historical advantage in some respects that the body-psychotherapy tradition developed apart from the official paths of the psychoanalytic-oriented discourses of an academically accepted theory of scientific psychotherapy. Since body psychotherapy never had to strictly adhere to the established dogmas and prohibitions of thought and exploration, it was free (especially since the 1960s) to unleash a notable creativity that may well be comparable to the inspiration that came from the early psychoanalytical movement at the beginning of the 20<sup>th</sup> Century. Important social trends such as feminism and the ecological movements that embodied similar values fostered the spread of body-psychotherapeutic thinking as well.

The lack of a uniform, cohesive theory within the body-psychotherapy field seen in the coexistence of many different paradigms and interpretive frameworks is compensated by an unparalleled inventive variety of therapeutic practices. Despite all of the competition, there is a high degree of unspoken agreement among body psychotherapists on this matter. Eventually, corrections were made that toned down or eliminated distortions and one-sided overestimations of the efficacy of individual methods. This development tended to be self-regulating, based on the reflective, experimental, provisional nature of clinical practice, rather than the invocation of a rigid theoretical canon. No Vatican Council of the body-psychotherapy field was required.

One example of this shift was the de-emphasis on repeatedly forced emotional expression that characterized some of the approaches of the 1960s and 1970s that leaned toward the primal therapy method of emoting. The same applies to the mechanical and sometimes insensitive handling of generalizations and stereotypes from character theory. The practice of "body-reading," especially popular in the early days of body-psychotherapy, often served to bestow an aura of magic and pseudo-objectivity upon a particular therapeutic procedure.

## **Important Pioneers of the Second Generation**

During the second half of the 20th Century, in the context of its success within the human potential movement, body-psychotherapy increasingly engaged in discourse with the larger world of established psychotherapy. The following list of some of its important exponents is representative rather than inclusive. It names some of the pioneering achievements in developing theories about body psychotherapy that enabled dialogue with the larger mental health community:

Foremost is *Alexander Lowen* who, as the grand seigneur of bioenergetics, reconnected the Reichian strand with psychoanalytical theory and psychodynamic thought. Through his work, he overcame the hermetic and sectarian language barriers of the Reichian circles, as well as their often displayed disinterest in the psychodynamic elements of character-analytical work.

Great significance must also be attributed to the work of *Stanley Keleman*, who has been the most persistent in his efforts to outline a somatically-based theory regarding the influence of emotional experience on the structure of the body. Consequently, his work has achieved the status of a "classic."

In German speaking regions, at the very least, the lifework of *Helmuth Stolze* contributed greatly to the field. For the world of psychodynamic therapy Stolze was the first to explore the phenomenology of the body and its ability to symbolize. He played a decisive role in making body psychotherapy part of the treatment offered at many psychosomatic hospitals – a commendable German specialization.

Mention must also be made of the immense theoretical efforts of *Hilarion Petzold*. He worked toward a scientifically-based integration of various approaches and traditions that include Gestalt therapy as well as Ferenczi's legacy. A particularly great service was his rediscovery and formulation of body psychotherapy's philosophical foundations. In the future, this contribution will certainly prove to be indispensable for a comprehensive understanding of body psychotherapy.

Although this appreciation of pioneers must remain incomplete, two more names should still be mentioned. *Eugene Gendlin* made a crucial contribution by creating a conceptual context for an important phenomenon that all body psychotherapists are familiar with from practical experience. This is the irrefutable observation that there is a "knowing" of the body that includes its own intelligence and evidence, which is not accessible through analytical interpretation, but through sensing and feeling. Gendlin has developed a theoretical and practical conception of this *felt sense* phenomenon.

Finally, there is *David Boadella*. At a time when following the Reichian tradition was equated with a mixture of insanity, Communism, and sexual chaos he, together with a few other Reichian free spirits such as Alexander Neill and Paul Ritter, kept both the pedagogic and the psychotherapeutic strand of the Reichian legacy alive in England despite difficult circumstances. By founding and publishing *Energy and Character*, the most important forum for discourse for all schools of body psychotherapy, he provided an enormous service to the field for many decades. His own broad-based and clear-sighted contributions have prepared a solid foundation for body psychotherapy.

Acknowledgement of these contributions suggests an important motif for the creation of this book. The currently increasing interest in body psychotherapy, or parts of its methodology, occasionally produces viewpoints and theoretical comments that show a lack of consciousness for the historical depth and praxeological breadth of the field. Occasionally, people behave as if they have just invented the wheel of therapeutic work with the body. In contrast, this book strives to pay tribute to the tradition of body psychotherapy and its methodological wealth. For this reason, wherever possible many of its most significant pioneers have been invited to speak in their own voices. Their stamina, inspiration, and visionary power have guided body psychotherapy through difficult times. Among other things, this volume is a product of their special historical merit.

## **Heterogeneity and Spectrum**

Body psychotherapy's noteworthy pioneers have left many variations of the work. The heterogeneity that marks the field of body therapy leads us to draw attention to the following contradiction: Actually, there is no such thing as body psychotherapy per se. We cannot speak of a field that is unified in theory and practice. Instead, the situation is characterized by a coexistence of divergent positions and basic assumptions that are sometimes difficult to reconcile. On both the meta-theoretical and the methodological level of praxis, the individual procedures and schools of body psychotherapy are far removed from each other, not unlike the distance between Behavioral, Psychoanalytic, Family, Gestalt, Rogerian, Narrative and other schools of therapy.

Even though the dialogue between the different approaches on theoretical foundations has been quite inadequate up to now, we see the historically-based praxeological diversity of body-psychotherapy as valuable in itself. Consequently, it has not been our intent through the creation of this book to establish one particular unifying and binding perspective; namely, that of the editors. On the contrary, we have tried to do justice to the wide spectrum of the field through the selection of diverse authors who do not diminish the colorful diversity, even though this may be less appealing to followers of therapeutic monocultures tinged with hegemonic concerns. Instead, we prefer to think that a "great assembly" of vastly differing authors, representing divergent dialects of body psychotherapy, will initiate beneficial, farreaching discourses, dialogues, mutual points of contact, as well as respectful disputes.

At the same time, we did not want a book that would primarily serve the individual schools as a forum of self-portrayal. We based our selection of authors, as they represent specific schools of body psychotherapy, mainly on the following criterion: Which theoretical or methodical emphases of these particular approaches have made special contributions, and appear to be particularly suited to speak for the whole field?

Obviously, this situation is sometimes more than a little confusing for those on the outside. There are historical and content-related reasons for this. For a long time, the individual schools of body psychotherapy were centered on a founding father or mother. This inevitably

led to a highly differentiated field, and sometimes to a sectarian elevation of particular perspectives and methods. Around the edges of body psychotherapy, we also find the tendency to pour *very* old wine into new skins through founding schools around individual people that are not absolutely necessary. This was a phenomenon that was more understandable in earlier times. Now it is partly due to marketplace considerations. And, some of these schools tend to avoid professional discourse.

Over time, however, the large inner core of body psychotherapy has consolidated. It spans the spectrum of smaller and more recent schools as well as larger ones with longer traditions. Some schools maintain an independent status such as *Integrative Leibtherapie* (Integrative Body Therapy) and *Psycho-Organic Analysis* and/or they are organizationally represented and united in the two large societies of the *European Association of Body Psychotherapy* (EABP) and the *United States Association of Body Psychotherapy* (USABP). As far as possible, we have attempted to invite representatives of most schools and directions to participate in this book. Furthermore, a large number of colleagues no longer see themselves as bound to one approach but as body psychotherapists in the comprehensive sense. The lively discourses and debates among the different schools that characterize the conferences on body psychotherapy clearly demonstrate this trend.

It is important to remember – and critics often lose sight of this – that the situation of body psychotherapy is essentially no different than that within psychoanalysis itself. Here as well, we can no longer speak of psychoanalysis per se. Instead, as the psychoanalyst Wolfgang Mertens has described it, there is a "sometimes peaceful, sometimes quarrelsome coexistence of various theories and schools" (Mertens 1997, 15). The differences with body psychotherapy can be found in history. While psychoanalysis, after it had rid itself of some of early dissidents, developed from a relatively uniform point and gradually became more differentiated over time, the tradition of body psychotherapy has tended to move in the opposite direction. The history of cognitive-behavioral therapy also has developed from a central idea, a theory of learning, and slowly built its conceptual structure from there. On the other hand, body psychotherapy has had various starting points and traditional lines that have often subdivided and become more diversified over time, such as the post-Reichian strand.

After existing for long periods of time, sometimes even in ignorance of each other, they have only begun to approach each other during the past two decades in the context of both organizational and discursive dialog.

We would be pleased if this book became a useful contribution to the process of mutual connection and collaboration. In part, this also accounts for the structure that we have chosen. We have organized contributions around main issues and important questions that concern everyone in the field, rather than schools and individual specialties.

## Body Therapy and Body *Psychotherapy*

Within this context, there is another characteristic of body psychotherapy that requires clarification and differentiation. As shown in the section on the history of body psychotherapy, therapeutic work with the body had its essential origin in a European avant-garde-movement at the beginning 20th Century known as *Lebensreform* (life reform). Within this movement, as well as in its immediate cultural context, the relationship to the body was seen as a central motif for a new relationship of human beings with themselves. This urgently proclaimed new relationship to the self and the body manifested itself in issues of dietetics and sexuality, and also in an exploding culture of pedagogical, therapeutic, and artistic bodywork that extended from gymnastic approaches to forms of modern expressive dance (see Geuter and Marlock in this book).

This new culture of working on and with the body had a decisive influence on the social understanding of subjectivity and health in the 20<sup>th</sup> Century, particularly during its second half. From it, currents have developed such as the German approaches of "Functional Relaxation" and "Concentrative Movement Therapy," as well as the Reichian, Gestalt, and portions of the dance-therapy movement that can be clearly defined as psychotherapeutic.

In addition, there has been the development of many body-pedagogical and body-therapeutic procedures such as the Feldenkrais Method, the Alexander Technique, and Sensory Awareness, as well as breath therapy and breath pedagogics. There is no doubt that these methods can have an enormously beneficial and healing effect on the human psyche. They

have also had a decisive influence on body psychotherapy and enriched it in many areas (an outstanding overview of the body-therapeutic traditions in the wake of Gindler can be found in Johnson 1995). And yet, they cannot be considered body psychotherapy in the narrower sense because they either do not address and include psychological aspects at all, or just do so on occasion rather than in a systematic manner. The same applies to the tradition of massage work, the majority of which should be seen as body-therapeutic and not as body-psychotherapeutic.

Of course, there are overlapping areas and people who cross the boundaries, often moving about in the transitional regions of the two territories in a very creative way. This is why we have also asked some of them, such as Don Johnson, Markus Fusser, and Ilana Rubenfeld, for their contributions. From their perspectives, they can illuminate some of the topics that are relevant for the entire field.

#### **The Common Ground**

Despite all the heterogeneity, there is a clear common ground for body-psychotherapy methods that sets them apart from other main currents in psychotherapy. What unites them is a holistic perspective in which the somatic dimension is considered as inseparable from the psychological dimensions of the human experience. In their concept of the body that originates from philosophical sources and expresses a somatic existence permeated by soul, body and mind are integrated. The *embodiment* of human subjectivity can be considered a fundamental axiom of body psychotherapy. We could, in Merleau-Ponty's words, speak of the somatic "*in situation*" of the human being in the world. According to him, the human experience of the world is transmitted somatically, just as the human self develops from body experience or from a distinct body consciousness, however that is conceived.

Formative experiences influence not only psychological structure but also leave their traces in the somatic processes of self-organization, whether we describe this as character structures (Reich 1970), affect-motor schema (Downing 1996), or entanglements (from Uexküll et al. 1994). Consequently, body psychotherapy endeavors to move back and forth between the somatic and psychological poles of therapeutic exploration attempting to integrate them.

Sometimes the therapeutic process moves from the pole of the psychological to an intensified somatic experience, and sometimes the sensing and feeling of the body develops into clear insights regarding psychological realities.

Likewise, within a body-psychotherapeutic context, the therapeutic relationship is considered under both psychological and somatic dimensions, independent of whether it is understood more from the psychoanalytical perspective of transference and counter-transference, or from a perspective that holds a more existential, dialogical interpretation. It is also independent of whether the therapist uses the possibilities of body contact or not.

Finally, we see one more fundamental factor within body psychotherapy in respect to its anthropological foundations. Consistent with its historical sources, body psychotherapy understands human existence as unfolding around a positive core. This differs from the neutral view that cognitive behavioral therapy maintains on this matter, and the rather misanthropic perspective of human nature held by classical psychoanalysis.

The fundamentally positive understanding of human nature was strengthened during the middle of the 20<sup>th</sup> Century by the works of Abraham Maslow and the spirit of Humanistic Psychotherapy.

In summary, we can say that the common foundations of body psychotherapy can be attributed to four assumptions:

- 1. It is necessary to consider the psychological and somatic dimensions of developmental experience as deeply interconnected. The human ability to differentiate and discriminate feigns dualities and separateness; yet, in realty, these dimensions always occur together as parts of a whole.
- 2. In this sense, formative experiences leave behind lasting structures on both the psychological and the somatic levels.
- 3. The psychological level can be accessed and changed through the somatic level, and vice versa.
- 4. There is a fundamental tendency to trust in the potential of "human nature" for growth
- knowing that "human nature" is a thorny concept given its history of ideological warfare and abuse.

#### **Polarities of the Field**

In order to facilitate orientation within the spectrum of the body-psychotherapeutic field, we would like to briefly describe some of the polarities that span and create its dynamics. This overview does not claim, however, to be a valid instrument for stereotyping the different methods. Schools frequently have an emphasis upon one or the other end of a polarity. Many assume a middle or synthesizing position, or attempt to work over the entire breadth of a span. The polarities depicted are mainly intended to shed preliminary light on differences between various approaches, as well as distinctions in terms of theoretical and methodical issues.

#### a) Treatment vs. Phenomenological Orientation/Learning:

Some of the methods, such as those of orthodox Reichians, classic Bioenergetics, or certain massage-oriented techniques are strongly anchored in a traditional medical understanding of therapy. They are oriented around classic concepts of pathology, diagnosis, intervention, and related terminology.

At the other end, many others (such as Focusing or the Hakomi Method) emphasize more strongly phenomenological, explorative, and investigative processes. The joint search of therapist and patient stand in the foreground, including the client's journey of expanding consciousness, self-regulation, and self-determination. As a result, such approaches do not start out with a diagnosis but with attention to some type of phenomenon (for example, a tense neck) that arouses the curiosity of the patient and the therapist. Investigative interventions, such as stressing or relieving the body part, are used to explore its function, the psychological correlates, and its meaning.

#### b) The Energetic Body vs. the Knowing Body:

A series of important methods in the field build upon Reich's energy model, such as the work of Lowen, Pierrakos, and some of the Scandinavian schools. They assume that there is an energy flow in the body that can be influenced through therapeutic interventions that determine the somatic-emotional state of a human being. These approaches pay attention to "blocked energy," such as an insufficient flow into the body periphery. With the help of a

comprehensive spectrum of techniques such as massage or releasing the motoric constituent of suppressed or repressed affects, the therapist can attempt to restore this flow. The energized, pulsating body that is free of chronic blockages and armoring is seen as physically and psychologically healthy. Some of these approaches retain the qualitative aspects of vitality contained in the energy concept without pursuing a quantifying scientific approach.

The other end of this polarity foregoes the energy models (for example: Petzold, Kurtz) and builds upon concepts of information theory. Its interest is focused upon "knowledge" acquired through experiences that might cause the body, as in this example, to block the energizing process of the periphery. From this perspective, the therapeutic process is understood in the following manner: "Knowledge" that the body-self acquired under unfavorable conditions, which ultimately turned out to be limiting and therefore psychotherapeutically relevant, must be uncovered, experienced, and worked through. Experiences that expand this "knowledge" and present the body with new information are an important foundation for therapeutic change.

# c) Psychoanalytic Uncovering/Understanding vs. Functional Unfolding:

This polarity is fundamental for an understanding of the body-psychotherapy spectrum. The one pole has evolved because a large portion of body psychotherapy originated from the tradition of psychoanalytical thought. As a result of this influence, uncovering the unconscious background of current experience and symptomatology, as well as therapeutically working through the unconscious relationship dynamics, epitomizes an essential aspect of almost every body-psychotherapy method.

The body-psychotherapy methods that have developed from psychoanalysis frequently emphasize interpretation, insight, and the process of becoming conscious, which means understanding one's own psychodynamics or self-organization. For them, the organization of the body reflects the psychological inner world that can be uncovered through an analysis of the somatic experiences. The body is used to facilitate this process of uncovering and working through.

At the other pole, body psychotherapy has produced a level of work that we term "functional-unfolding." The therapeutic work at this end circles around the issue of how *somatic-psychological* functional systems, which are essential in the development and maintenance of a human being, can be focused and developed. Among others, these functional systems include respiration, muscle tone, equilibrium of the autonomic nervous system, physical mobility, and specific functions such as vision or sexual sensitivity and potency. At this pole, body psychotherapy concentrates on the development and unfolding of resources that consist of body-emotional functional systems including somatic micro- and macro-practices. Depending on the methods applied, the functional expansions that develop within such a therapeutic process can be based upon spontaneous restoration or practicing procedures.

## d) Emphasis on Nonverbal Processes vs. Emphasis on Dialogue:

In some phases of the therapeutic process, many methods dispense with verbal exchange or limit themselves to instructions (Dance Therapy, Vegetotherapy, etc.). In such moments, they are concerned with developing or rediscovering the sensation and expression of the body. The client lingers, senses, extends, stretches, etc. The emphasis is placed upon movement, self-expression or, as in Vegetotherapy, surrender to autonomous body processes. The body is encouraged to regain both its ability to experience and its full functionality. The assumption is, the psyche will also open up and free itself as a result.

In contrast, other methods place great value upon an intimate and continuous dialogue about the contents of the client's experiences (Pesso, Unitive Psychology, Analytical Body Psychotherapy, etc.). Even though all of the methods are unanimous in including at least moments of feeling and lingering into the therapeutic process, more value is placed upon the interweaving of somatic experience and symbolic representation. Bodily experience gives rise to meaning, which is coaxed forward through verbal exchange.

## e) Touching vs. Not Touching:

For a number of approaches, touching is indispensable (Biodynamics, Structural Work, etc.). Many of their techniques are dependent upon it. In Structural Work, which is based upon massage techniques, this is easy to grasp. In addition, touching can initiate somatic-emotional

processes that trigger and focus attention on important experiences. For instance, a therapist whose patient is in a deep regression may-find that the strongest and most effective intervention is holding the patient for a period of time to impart to his mind and body an experience of being held with supportive intimacy.

By comparison, touch may play a much smaller role in other approaches or it may, depending on therapeutic style or client symptoms, be dispensed with completely. Sensing, awareness, increasing sensibility, etc., is an adequate use of the somatic dimension for some therapists.

# f) Regression vs. Work in the Here-and-Now:

Because of its stronger affect orientation, body-related work can easily foster regressions. This is why some approaches (such as Casriel and Primal Therapy) employ this possibility to a high degree, and systematically attempt to use it. The therapeutic significance of regression is primarily seen as a way of enabling access to repressed and formative key experiences from earlier times. Within this context, the meaning of affect discharge or catharsis is given as much weight as the early scenarios frequently accessed in the session through the body to evoke corrective emotional experiences.

At the other pole of the spectrum are approaches such as Gestalt Therapy, or methods that it has influenced, that emphasize more strongly work in the here-and-now. Similar to classic psychoanalysis, they tend to bring to consciousness those aspects of regression that serve the defense. Here, less emphasis is placed upon the importance of catharsis and the corrective experience. Instead, the focus is on therapeutic "chewing through" (Perls) and "growth."

Some methods and authors have attempted to create a differentiated synthesis of these polarities (Downing, Geissler, Marlock). The explicit trauma-therapy approaches of body psychotherapy (Levine, Odgen, Marcher) also take a differentiated and well-informed stance toward the polarities.

#### The Structure of the Book

In general, this book attempts to portray the most comprehensive overview of contemporary body psychotherapy currently available. However, a total picture cannot be given due to the complexity of the field outlined above. Furthermore, the field of body psychotherapy is spread out internationally with somatic communities to the east of the Atlantic in the Germanlanguage area and other parts of Europe, and to the west in the USA, South America, and the Pacific Rim. The reader will notice stylistic and methodical differences that result in part from cultural dispositions. For example, the way our North American contributors deal with theoretical concepts is generally more pragmatic than the approach of German and French colleagues whose orientation tends to embrace a greater epistemological rigor.

In view of the complexity and colorful diversity of body-psychotherapy, this book is primarily intended to explore its major distinguishing themes. Its history, meta-theory, characteristic individual theories, methodology, as well as applications and praxeology are treated successively in the various sections. This should offer the reader a wide-ranging impression. At the beginning of each section, we have included a brief introduction that is intended to provide an overview, and establish a connection between the articles.

These articles do not focus on schools or their exponents, but on the important content-related issues that characterize body psychotherapy. Obviously, redundancies and overlaps will occur in such a collective effort since many of the themes are closely interwoven or have related contexts. In the various introductions, the reader will frequently find references to other relevant authors who have made essential contributions to the topics discussed, and are appropriate for a deeper investigation of the issues.

We have already mentioned our efforts to have individual subjects treated by authors who command specific authority regarding their topic. This relationship is illuminated in each of the short biographical introductions to the articles. There, as well as in the prefaces to the various sections, the authors' special perspectives, the orientation of their school, and their own approach toward their topics is made explicit.

In most cases it was not possible to offer the authors (with the exception of some of our pioneers) the subjects in which they are currently or generally most interested. Instead, they were asked to devote themselves - in chorus with the others - to a topic that required a competent author.

The reader will notice that very heteronymous approaches were employed by writers, both in terms of content and language. The various standards for treating a subject indicate the extent of the differences between the schools, as well as the authors' backgrounds and orientations. The articles reveal a spectrum ranging from concrete, descriptive, and even poetic ways of depicting the material, to Reichian and analytical dialects, to strictly "scientific" and sober tones.

It is essential for us to make clear that this book is not intended to depict body psychotherapy in the form of a "how-to" manual. High quality therapeutic action always has two preconditions: A far-reaching understanding of what we are doing, including meta-theory and anthropology, combined with in-depth personal growth experiences related to how we work. Particularly because of the depth and dynamics of the emotional processes that to a special degree characterize body psychotherapy, as well as in relation to the subtlety of sensory perception and communication, intensive experience with our own bodies is indispensable. This requires extensive training and concrete guidance in relation to the practical challenges of the work.

#### **Body and Soma**

In closing, we would like to mention that the editors have decided to stay with the name of "body psychotherapy" in this book, in line with how it has asserted itself in the major international and national organizations. However, we must also acknowledge that this name is quite controversial. For many colleagues (such as H. Petzold, J. Weaver) the term "body" has a diminishing meaning that runs counter to our intentions. This is a criticism that is substantiated epistemologically. It points out that this term does not specifically reflect that the body has a soul, and thus adulterates the subjectivity of bodily experience by implying an exclusively external objective perspective. In the English speaking countries, the variant of

"somatic psychotherapy" is being discussed as a possible alternative. We recommend keeping this issue in mind, even though the term "body psychotherapy" is used throughout this volume.

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