

Report on the European Association for Body Psychotherapy Congress

by Gill Westland

The last time that I attended a European congress was in 1997, but I was tempted this year by the setting, the programme and an old friend planning to go and inviting me to join her. I travelled looking forward to it. How could anyone not have a good time staying in Greece at the Clubmed resort at Marathon, north of Athens, which was the original starting place of the Olympic games? Ten of us went from Britain and between us we had come originally from 7 different countries. This international flavour was typical of the conference and maybe says something about body psychotherapy.

The Greek organisation was somewhat flexible and fluid. Sometimes things didn't happen on the programme and others did, and generally people wandered in and out of presentations. All this took place in a warm-hearted and joyful way so that no-one seemed to mind too much and quickly got into the spirit of 'Greek organisation'.

My start to the congress was the pre-congress workshop with Al Pessó on "Holes in Roles," lasting one and half days. It was an excellent experience and meant that I knew a small group of people reasonably well before others arrived. More about Al Pessó later.

The conference officially opened in Athens in the Old Parliament on the Thursday evening with formal welcomes and a reception. The translation system didn't work very well for some reason and it all seemed more about part of playing Greek body psychotherapy politics. Nevertheless, I enjoyed seeing Athens by night and it conjured fond memories of being there in the 70's.

The programme of the congress

proper was a full one and I found more things that I would have liked to go to than was possible. I decided to take it as a smorgasbord, to follow my inclinations, to take time out to swim and to drink coffee on the terraces in the sun with others. On the Friday morning there was a choice of embodying workshops before breakfast. I chose Tai Chi with Vangelis Vidalis, which we did outside and I found that the gentle movements got me grounded and focussed for the day ahead.

After breakfast there was the first plenary session. Courteney Young, President of EABP gave the talk that he had given in September to UKCP Conference. On this occasion he had ample time and he gave a masterful presentation. He reminded us of Janet (1859-1947) who was a predecessor of Reich and really the first body psychotherapist. Freud's psycho-analysis developed from his work. Janet worked with massage, breathing and movement, and thought of analysis in terms of psychology and physiology. The current interest in trauma treatment has led to re-examining Janet's work because of his insights into working with trauma and his inclusion of body processes. Courteney went on to describe the different ways that the body is seen culturally. For example it is medicalised and objectified. He used powerpoint well and showed William Steig's illustrations from Reich's "Listen Little Man!" and others from Keleman's "Emotional Anatomy". He finished on an upbeat note with how body psychotherapy is becoming more central in the field of psychotherapy. This is because dualistic thinking is declining in science, and from neuroscience we

know now for sure that emotion is a whole body experience. And finally we are in a time of convergence and inclusivity across disciplines, which helps a psychotherapy, which crosses disciplines. It was a thought-provoking, entertaining and amusing presentation.

Next we were treated to a lecture by Professor Kerstin Uvnas-Moberg, Professor of Physiology in Stockholm. She spoke on "The role of oxytocin in anti-stress and well-being." She described science in a human way and her presentation was moving and the highlight of the conference. What she spoke about is particularly pertinent to our work. Her interest in oxytocin grew out of her being a mother and noticing changes in herself psychologically as well as physiologically, when breast-feeding.

Oxytocin is a hormone which is significant in childbirth and breast feeding. However, it is also active in other states in both men and women. Much has been researched about the stress response and the fight-flight reaction, probably because physiology is male dominated, but there has been comparatively little done on the oxytocin anti-stress response.

Oxytocin is an endogenous anxiolytic compound. In other words we produce oxytocin in ourselves and it has the effect of reducing anxiety and fear. It also decreases blood pressure, muscle tone and aggressive behaviour. It increases curiosity, it induces a sense of calm, fosters social interaction, gastro-intestinal movements and sensitivity to touch.

In rats, an injection of oxytocin decreases the temperature of the tail to conserve energy, but increases the

temperature in the front of the body. The oxytocin effect lasts for about one to one and a half hours, but five injections repeated over time leads to lasting effects. This oxytocin effect links with complementary therapies and our biodynamic massage work. It may offer an explanation for what we know empirically. That is that generally one session of biodynamic massage with a client coming with mild symptoms of stress will lower arousal and lead to feelings of well-being. However, often the effects of one session don't last long and usually people need about five or six sessions to feel some lasting benefits. It is likely that the longer term effects are a secondary process involving dopamine and noradrenalin.

The long term effects of oxytocin are decreased cortisol, anxiety and blood pressure and increased pain threshold, weight gain, wound healing, and vagal tone. (You will recall that the nerves of the parasympathetic system leave from the brain stem and converge in the vagus nerve and supply various organs including the gastrointestinal system). Learning is also facilitated with increased oxytocin. This latter point has implications for education.

Professor Moberg told us that oxytocin facilitates attachment not just between mothers and infants, but also between males and females. It could be called the love hormone. The mothers of new-born babies with increased oxytocin levels touch their infants more and this creates a circuit where touching is established and reinforced. The baby is also active in the process as nudging the mother's breast activates the oxytocin. The anxieties of both are decreased and there are increased feelings of warmth and calm. Attachment gets established and patterned. These infants then develop into calmer adults. This behaviour is not genetic, but comes out of the early attachment process. Epidurals and caesarean sections, which are so

routine now in Britain, block these biological systems. Sometimes birth is unavoidably stressful, but the stress response needs to be reduced for restorative growing.

Skin to skin contact between mother and infant is critical and where this happens the baby calms and the feet become warmer. Touching by stroking on the front and the back are also different. The front of the body is more sensitive to increasing oxytocin, decreasing blood pressure and cortisol levels. Probably the front of the body is more about relating and the back more about defensive reactions. Where the babies are clothed, the oxytocin physiology takes longer.

The oxytocin response can be activated by prayer, meditation, relaxation and eye contact. However, touch is the quickest way to activate it. In this there is parallel communication and relating going on – I touch and am touched. Who is touching and when is significant. Non-noxious stimuli that release oxytocin are sucking, touch, stimulation of the vagal nerve, gastro-intestinal movement, odours, pheromones, and certain light and sound frequencies. Calm animals also affect others, possibly because of the pheromones they send out.

Professor Moberg talked of the massage research of Professor Tiffany Field at the Touch Institute in Miami where, across a range of illnesses researched, massage leads to reduced cortisol and blood pressure levels. The massage involved stroking, but holding can be as effective. Field has found that stroking the back can be more activating and increase blood pressure and stroking the front decreases blood pressure. Lying on the front also increases blood pressure. I wondered at this point what sort of stroking was used and how our range of biodynamic methods would compare here. Would we get the same results, if we researched our methods?

Professor Moberg also mentioned Field's research which has shown that the massager also benefits. As massage is mutual in its effects the oxytocin levels of the massager are increased as well as those of the person receiving the massage. The touch is part of the communication, but it also involves voice, look, and attitude (what we would call presence). From years of teaching biodynamic massage I have found this to be true – often a student feeling under par will be more integrated and feel stronger after being therapist. Professor Moberg's talk left me thinking about touch in body psychotherapy once more and the potency of it. On my return I bought her book, which I would recommend.

After this I went to a panel presentation on "Touch in Body Psychotherapy." As a format I found it frustrating. Participants only had time for short headline presentations, the open discussion lacked depth and there was little new in it. The panel represented the spectrum of the usual positions. That is those that do and those that don't touch, concerns about transference, referring elsewhere for touching etc. In the floor discussion no-one defined the paradigm that they were talking in, so touch was a tool and intervention for some, for others touch was about relationship, presence and communication. Some spoke of touch as a metaphor and thought that eye contact was as good as skin to skin contact etc. Some talked in terms of physiology and it all felt muddled as relational questions got physiological responses.

On the Saturday there was a round table on "Diagnosis in Body Psychotherapy." I found this similarly falling short, although it highlighted the spectrum again of those who diagnose meticulously and those who don't do any.

Then lunch, followed by a main lecture by Al Pesso on his most recent work "Holes in Roles." I



ABOVE: Al Pesso

have also included information here which was presented in the pre-congress workshop to give a fuller picture. He sat to speak, talked without notes, and managed to hold us in his presence. Pesso is known in continental Europe and the USA, but is only beginning to get known in the UK. He was originally a dancer and choreographer and worked to help dancers put emotion into the dancing. From 1961 he moved to doing therapeutic work and got invited to work in psychiatric hospitals.

He spoke at first of his philosophy of life. He reminded us first that psychotherapy is not about technique, but about making a good life. For him the push to life is work; the survival of oneself, and the other (this is connected with love); and the push to completeness, which is part of justice. Justice in this sense means something like universal spiritual ordering.

He identified three basic relationships: connection to core, connection to other and connection

to 'God'. This is part of the organising principle of the universe. He also spoke of three sorts of movement. The reflexive motor system relates to gravity and standing up; the motor system relates to the world as it is and involves voluntary and ego movement; and emotional movement, which arises from the felt sense and the limbic system. This third movement is related to the id and to feeling our personal fear, love etc. It requires a response to complete itself; it is not just expression and needs context. Emotion is basically about interaction and has motor shape. Fear, for example, needs safety, and love needs an object for satisfaction and completion. Where this has been frustrated in a person's history Pesso used to give a counter shape in therapeutic work to meet the one being expressed. But he found over time that this was not enough and now invents ideal figures, which were missing in the original scenario. He saw that the problem was not about getting things out (i.e.

catharsis), but getting a new memory into the body.

Relationship consists of present consciousness and memory. Drawing on Damasio he told us that if there is no memory we don't see or know what we are seeing. When we see someone in the present we are also recalling other seeing from the past. Memories consist of motor responses, feelings and thoughts. The visual cortices hold the visual memory. Seeing and memory are inextricably linked. In present consciousness seeing and doing are also linked - I see, I do. When I see it awakens an act of doing and continuing to live as the core pushes to survive. There is a motor memory of doing from childhood and this 'see-do' process becomes automatic. The feeling of see-do enhances the experience and the emotional response gives a felt-sense of 'I'. Finally, thought gives meaning to what we see, do and feel. When we see, we make a visual map of what has been seen and thoughts come from this. The visual representation is followed by an auditory one. We then see with the mind's eye. Word awakens what is in the mind's eye. There is both a visual and motor response. So we move with the real body as well as and the mind's body. (The 'as if' brain in the body of Damasio). For example, if we think about swimming, we can feel as if we are swimming and notice subtle body movements. So when we use language it awakens internal seeing and doing without us knowing it. Language does not make seeing and doing conscious.

The present is driven by two sorts of memory. One is personal and autobiographical, the other genetic. This genetic memory links with various life tasks, which the genetic database knows how to do when the time comes. The tasks need to be completed at the right age developmentally in the relationship with carers. When this happens it creates closure and a sense of pleasure.

Basic tasks include:

- 1 To find a sense of place in the world This means literally in the uterus to feel wanted and in place. Later it is to be in my mother's life and her gaze. When the child lives in the mother's gaze she remembers previous times of gazing and the child knows she is in the mother's mind's eye. The child can then be at home in her own body. Finding place is both literal and symbolic. (See also Daniel Stern). All this can give a sense of being at home in the world.
- 2 To be nurtured, supported and protected literally and psychologically.
- 3 To have limits on the capacity to create and destroy. Where boundaries have been breached or not established, as in trauma, the forces of sexuality and aggression are released in an unboundaried way.
- 4 The integration of polarities – left and right hemisphere, male and female to make unity. Where this doesn't happen it will be projected.
- 5 The development of consciousness. This involves seeing oneself being and making meaning out of existence. This development comes with language. It also involves developing a 'pilot' or observing ego, which owns all of it.
- 6 The fulfilment of personal uniqueness and potentiality. This involves finding one's life task or calling and it bearing fruit.

Pesso continued by talking of clients having three sorts of problems. Some have deficits where not enough was coming in leading to needs not being satisfied. Secondly there is the problem of abuse where there was too much unwanted input going in. Deficits and trauma relate, so a traumatic event can be 'eaten'. The abused

and unloved person can learn to get attention with abuse, and so provoke it to get attention as a perverse form of love. The third group are clients where too much goes out too soon. In other words the interest in the other is wakened too early. For example when a child is four years and mother is crying and she tells the child about her father dying when she was four years, the child builds a picture of this scenario and unconsciously becomes the father to the mother. There is a shift from the child taking care of herself to taking care of the other. The child does this out of compassion. It is difficult to give to these clients and this can be seen as resistance. The client can become arrogant in 'looking after mother' and attack other authorities. Pesso believes that the 'Holes in Roles' which these clients have need to be filled before other deficits can be satisfied. When a hole is filled it looks and feels as if a weight is lifting off the shoulders of the person and there is a cascade affect throughout the body.

Therapeutically Pesso works with the client to fill the holes in roles. He emphasises tracking of micro-shifts in the face as it automatically indicates feeling. The client starts with talking about the present, but with a 'tapestry of threads of memory'. The language conveys the context for the feelings. The pilot and affect both need to be there. The next step is for Pesso to set up a witness. The witness notices affect and context and verbalises it. This helps the client to be more conscious of what they are feeling. With the right word the person will feel seen and there will be closure. (This reminded me of a client where it mattered enormously how I described her feeling – sadness was not sorrow. When we found the right word together there was a palpable shift in her energy).

There are three screens. These are the real eye, the mind's eye and body's eye.

The therapeutic process involves tracking in the here and now. The body signals with a bodily symptom that a mind's eye event is activated.



ABOVE: The group who participated in Pesso's workshop.

This mind's eye event is a 'moveable theatre of the stage in time and space'. Part of the process is to put the inner theatre of the mind into the room. At this point roles are chosen. For example if the client sees the mother, the mother is chosen and someone takes this role. However, in contrast to psychodrama or gestalt the role does not involve any improvisation 'to keep it clean'. The person taking the role only says what the client tells them to say and waits to be placed by the client. This role taking is also not about regression. There needs to be dual awareness. The feeling state of the child might be present, but with the pilot running the show.

Mostly the work is done in groups with enough people to take the roles, but it is possible to adapt the work and to use objects in one to one work. Clients in the group have 50 minute sessions and the idea is to make a 'good end' in the time. This would be finding a new memory. In the workshop, after someone's work we talked of our own experiences and not the person's work. Feedback was not given which can be injurious to the process. Any theoretical questions came after the sharing of feelings. My sense of experiencing the work was that the client was respected and protected, when working.

An example of the method is as follows:

The client talks and there is tracking of the present micro movements.

When there is 'disturbance' (the client is in process) the witness verbalises the feeling being expressed on the client's face e.g. discontent and says "I see discontent" i.e. naming the expression. This process is ongoing in the work and involves checking with the client continuously. This is important so that nothing is imposed on the client.

Next the client might make a protective gesture and so the client is asked to choose a protective figure from the group. Perhaps the

client calms and the person taking the role is asked to say "If I had been at your side you would feel calm." This is done with lots of spaciousness and warmth.

The process can also go into the past e.g. "If I had been in your past it would be safe for you to appear."

Roles can involve both the real and the ideal parent. The healing will be with the ideal parent as this connects with and awakens the innate template of what a mother is. This leads to perceptual changes as a different picture is created in the client's mind. Reality becomes different and the client gives out different signals.

I was sufficiently impressed with the depth of this work to want to experience more of it at some stage. It seemed to be working close to the ground of emergence, and it was possible to follow cognitively whilst watching the work in action.

On the Saturday there was a lecture by Bessel van der Kolk on "Trauma, Attachment and the Body." Much of what he spoke about was familiar from having heard Peter Levine talk and attending Babette Rothschild's training. Nevertheless it was interesting to hear again and to see Bessel van der Kolk live. I later attended his workshop presentation where he showed a video of Pat Ogden from Hakomi Somatics doing a one off session with a client presenting with trauma. He seemed to have attempted something rather difficult as it's not easy to talk about someone else's work and what they were intending.

The second main lecture was Michael Heller presenting "A Case Study illustrating what can be evaluated with Postural Dynamics System." He presented his thoughts on a case study by Beatrice Beebe (a colleague of Daniel Stern) using the Postural Dynamics System, which he has developed. I found this mode of looking at a case study from another modality (psycho-analysis) with a defined perspective, and dialoguing with the author of

the original case study a refreshing way of moving the profession forward.

The system has four postural dimensions. These are Displacement, Basic posture, Connecting posture and Surface posture.

- Displacement is a displacement of an anchoring point in space. An anchoring point is the parts of the body which are in contact with a support surface i.e. one that supports the body's weight such as a chair or the floor.
- Basic Posture is about the organisation of weight in the gravity field. Practically it is associated with situational issues such as deciding who sits where.
- Connecting Posture is concerned with postures for auto-regulation (Heller's preferred term for self-regulation).
- Surface Posture connects the base to the surface. It is concerned with gestures.

I was left feeling stimulated by this method of observation and its possibilities for dialogue with others and wanting to read the articles in my own time.

After a walk along the beach I went to a workshop by Richard Nathan on "Sparagmos, Organismic Psychotherapy." He spoke on bodily fragmentation and drew deliberately on Western mythology which presages the body psyche split culturally and the loss of primordiality. The Greeks called this process of splitting Sparagmos in the early Orphic Mysteries (800 BC). He also described his own process of literally being almost torn apart by a savage dog at the time of working with a psychotic mental patient. He also drew our attention to suicide bombings and the literal rending apart of bodies in current times. It was blood-thirsty, difficult material to be with, but Richard managed to give an enormous amount of information

and stimulated my interest to know more. (He recommended the book E.R. Dodds, *The Greeks and the Irrational*). It could have been a deeply depressing talk, as we touched on the profound suffering of the world, but something about the way he made himself vulnerable in his own struggle gave hope. He also reminded us that the primordial is always there i.e. the unity and wholeness is ever present and in surrendering to the apparent fragmentation we come to wholeness.

As you would expect from a body psychotherapy conference there was attention to embodiment, rhythm and pacing. Our bodily needs were well satisfied with sun, good food and rest. On the final evening there was dancing with a live band. We danced late into the early hours and I left the dance floor with the band still playing. Body psychotherapists really know how to move libidinally! I came home tired but with a glow inside and feeling well nourished. It was so easy to be with other body psychotherapists. It was a bit like meeting a whole lot of cousins who are now living scattered in different parts of the world coming for a family get together. Several weeks on, I can still feel the pleasurable impact of it and have been stimulated to read around themes from the presentations. I look forward to going to the next EABP conference in Scandinavia in 2006.



ABOVE: Richard Nathan (right), in conversation with a workshop participant