Terms and language particular to Body Psychotherapy

The purpose of this page is to start to help to define our "Common Ground" and more precisely the use of terms and language particular to Body-Psychotherapy. Some of the terms will have slightly different usages by different modalities within Body-Psychotherapy. This is to be expected. However we wish to explore these different usages - and that can happen here.

Please read the topic headings that are on this page and then send in your own particular definition or usage for that topic, if it is different. These will get added to the page. Over time we will build up a set of definitions upon which, if we do not agree exactly, we can at least accept the differences between us.

The idea for this page came out of the Body Psychotherapy FORUM.

Armouring

Areas of the body where the psychological defenses have become "embodied" over time and usually with repetition of traumas and there is a resultant restriction in the natural physiological flows of energy, nerve impulses, fluids, etc. There may be increased musculature, a thickening of structure, less mobility, a deadening of tissue, or extra sub-cutenous fat. Where energy has been deprived to a particular area, there can be decreased musculature, a thinning of structures, etc. Physical interventions in these areas (often using some sort of physical pressure, as in Character-Analytic Vegetotherapy or Biodynamic Massage) can elicit the strong and long-held emotions associated with the original trauma and defense mechanisms against the pain.

Theory suggests that with a working through of the under-lying emotions, the armouring will soften and eventually disappear. Wilhelm Reich's theory of Character Structure used the concept of armouring whereby different traumas at different times in the person's development created armouring which differed in various areas of the body to give an overall different character structure. Amongst others, Stanley Keleman has continued this concept further in his well illustrated book: Emotional Anatomy.

Body Energy

Body energy exists as a reality. It has been known about for thousands of years and has been called variously "Ki" or "Chi"; "Prana", "Streamings", etc. and its flows have been mapped variously within Auradeva, Acupuncture, Vegetotherapy etc. There are different types of flows; some more ephemeral and which even extend outside the physical body (as in the aura & chakra system); some connected with various points in the body (i.e. the meridians and points of acupunture); and some more basic and associated with the functioning of physiological organs (e.g. Gerda Boyesen's concept of 'emotional digestion'). Some of these types of energy can be measured: e.g. galvanic skin responses, etc.

For the results of a survey (in German) about the use of the term "Energy", please click <u>here</u>. English Description of Survey: We interviewed 17 body-psychotherapists from different schools about what the term "energy" means to them. The reason to do this is the often unclear use of this word and also that we think it is a very important term for us. The results were rather difficult. There is no common concept of the term "energy". It is used to explain everything and nothing. Our suggestion is to reduce it to a 'smaller' term, in that it is useful for the practical work but not as a concept to explain to the world.

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Relationship between Structure & Flow Body Reading - what aspects do we observe? The Interconnection of Psychological & Bodily Dynamics

Therapist /Client Relationships

In Body-Psychotherapy, as for many different types of psychotherapy, the therapist-client relationship is central and exceptionally important. There is a tendency to refer to the recipient of therapy as the 'client' (rather than the 'patient'). There are a number of presumptions or assertions or even rules about the therapist-client relationship which are basic to the EABP Ethical Code and which are also asserted in the EAP Ethical Guidelines

The Ethics of Touch

Touch can be used to maintain social & power hierarchies; who can initiate touch is socially significant. Touch can be used to heal, as in the "laying on of hands", or in particular body therapies (e.g. Shiatsu, Rolfing, massage, etc.). Deprivation of physical contact (touch), especially in early life, can create antisocial behaviours and retarded development (viz. Bowlby & Harlow), and there is evidence that this need continues throughout life.

Touch is central to identity, language, contact & social interactions: 'Proprioceptive' feelings (in contact with or in touch with one's self) help define ourselves.; many aspects of language are based in touch; we know where we are through touch; we stay 'in touch' with other people.

Touch is incredibly powerful, and is therefore also open to abuse. There needs to be a high level of consciousness - from both the therapist and the client - about the reasons for and justification of every single interaction involving touch, or lack of touch. The :ethics of touch" is particularly contentious at present with increasing emphasis (especially in America) on the licensing of practitioners who can legitimately touch and the risks of possible litigation. There are even attempts to define where and how one can touch. For an extensive article on the Ethics of Touch, click <u>here</u>.

Self-Regulation Within the Body

The body is an exceptionally intricate organism that largely 'self-regulates': it sleeps when it is tired, it eats when it is hungry and drinks when thirsty, protects itself when threatened, and usually maintains itself in a form of natural homeostasis. Unfortunately, in humans, over time, we can learn bad habits, abuse the body, overuse our bodies, poison our systems with drugs, alcohol or junk food, and stress ourselves out completely. Then we have to be allowed to, or helped to, find our way back towards a better way of 'being'; ideally a more self-regulated way (again). Body-Psychotherapy takes this as a major goal in therapy.

The Seat of Emotions Grounding Mainstreams and Modalities

A mainstream psychotherapy - as it is becoming defined within the European Association of Psychotherapy - is one that covers one of a number of different types or modalities of psychotherapy within a particular area of psychotherapy e.g. Psychodynamic; Systemic (including Family Psychotherapy); Behavioural; Humanistic; Body Psychotherapy; Transpersonal; Hypnotherapy and Imaginal Psychotherapy. Some "mainstream" classifications also include - Integrative psychotherapy; Expressive psychotherapy; etc.

Within these "mainstreams" there are many different "modalities" - different types of psychotherapy within this field: e.g. within psychodynamic, there is Freudian, Alderian, Jungian, Kleinian etc. (though within the UKCP, Jungian claims to be outside this mainstream and has a section of it's own); within the Humanistic mainstream, traditionally are found Client-Centred (Rogerian), Gestalt, Transactional Analysis and often some of the transpersonal psychotherapies (like Psychosynthesis), but sometimes this is seen as a separate "mainstream"; within Body psychotherapy, there are traditionally the Reichian, neo-Reichian, Biodynamic, Bioenergetic, Biosynthesis, Bodynamic, Hakomi etc. Distinctions here can also be between what is meant by a "Body psychotherapy" and whatis meant by a "Body therapy". Traditionally "Body therapies" include things like Feldenkrais, Alexander Technique, Rolfing, Hellerwork, Biodynamic massage, etc., which may be psychotherapeutic, but the training does not include a strong psychotherapy component and ithese therapies do not usually see themselves within the general field of psychotherapy.

However it is both politically and culturally significant that whilst a modality can often place itself clearly within a mainstream, there are problems that nearly always arise when it is 'put' within a mainstream.

Within each of these modalities there are often different schools and variations: e.g. within Biodynamic, there are many different schools in various countries, all of which vary somewhat. Petruska Clarkson listed 25 variants of integrative psychtherapy at a speech for the EAP General Assembly in Rome in 1997. This can cause a modality to sometimes claim that it is a mainstream.

The situation is complicated further by some discrepencies between countries - e.g. Existential Psychotherapy has recently been 'elevated' in the UKCP from within the Humanistic & Integrative Psychotherapy Section (mainstream) to a section of its own, but usually is seen as a modality within the Humanistic mainstream incorporating things like logotherapy, daseinanalyse, etc.

There is an excellent paper written by David Boadella (as Chairman of the Scientific Validation Committee) for the European Association of Psychotherapy (ETSC 99.22) which starts to answer this question and from which some of the above is drawn.

More about Body Psychotherapy

- Terms and language particular to Body-Psychotherapy
- Definition of the work of a Body-Psychotherapist
- <u>What is Body-Psychotherapy? A European perspective</u> (PDF)
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