In just over three months, Covid-19 has brought a radical transformation in our world as we knew it. Reality has taken us into a most terrifying science fiction movie. Life will be changing in a radical way after Coronavirus period. The time of emergency has maybe passed away, but we now have a time characterized by another place and another time, a time in which we psychotherapists are even more important in this period of an economic recovery full of confusion and uncertainty.

Many of us have experienced a new form of psychotherapy, we can call it a psychotherapy for the Coronavirus times. We can identify it as an “other” psychotherapy: mediated by a screen or a telephone, characterized by a new setting with two different virtual places, perhaps two non-places where people in their physicality disappear or are reduced to an image or a voice. Sometimes, I have thought about how much technology has helped us in this pandemic time, as technology has allowed us to offer support and continuity to our meaningful human contacts. This is particularly true for the therapeutic function, so important precisely at this time when we all need containment for our fears, our anxieties, our need to face the economic crisis. A phone call, a video call, or an online session can make all the difference.

Containing the anguish, the fear, and the anxiety of the last few months in response to an invisible enemy was not easy. Even more difficult is maintaining hope and planning for a vital future. It was also difficult to welcome and support those parts our interiority more vulnerable, threatened, exposed. The words “caution” and “acceptance” were key words in therapy sessions with my patients.

Now that we can breathe a little more, that the roads in Italy are getting busy again, we can reflect, once again and with even more commitment and sense of responsibility, on the function of psychotherapy, above all body psychotherapy – on its function of accessing the sense of reality, the limits and resources of each individual, and her/his potential to be an agent of change. This is particularly true now that the economic crisis begins to be felt, and everyone is called to restart together, as even the television advertisements tell us.

The function of body psychotherapy is essential in this phase; the ghosts of the pandemic can be overcome, above all, by anchoring ourselves in the body, that is, to our vitality, to the energy that never ceased to flow inside us, to our sensations, which cannot be confused with opinions.

During the last two months, we had to face new conditions and new challenges: online psychological counseling was the elective way to “meet” our patients. But it wasn’t always so easy. Due to cramped and necessarily shared spaces lacking privacy, many patients didn’t have a safe place in which to take advantage of therapy in their home. Others showed some resistance to adapt to the online mode and decided to wait for “better times” to again meet their therapist, as if they could recognize themselves only in the specific place of psychotherapy.

For some patients, online psychological support could become an experience of distance and unsus-
tainable abandonment. In patients with more compromised functioning, online contact could reinforce an experience of alienation or a lack of adherence to the reality principle. We must now be ready to welcome them back, if they are ready to return — not only to the physical space of our clinic, but above all to that peculiar space of intimacy that is the therapeutic relationship. So, now we can help them to return to “reality.” “Reality” starts from body sensations.

Now we wonder if online communication substituting for presence could become a new setting, even in normal time. In my opinion, it’s difficult to evaluate, as we know that some particular elements constitute the psychotherapy setting: the place and space of the cure, the relationship in person, the here and now, the contact, in general the communication between two bodies.

The setting is a scene where the patient’s past can be present; it’s the place of care, a microenvironment rich in internal and external objects, the place where the therapeutic relationship and the holding function are developed.

The therapist’s and patient’s bodies are present in the setting, most of the time with an unconscious and analog communication. Our body feels and transforms itself through encounter with another body in that particular space-time, and this produces a transformation in the other, and in the relationship. We can say that without an experience of transformation in the body, we can’t have a complete psychological transformation.

So, what happens to this transformation and vitality in a “virtual” setting? How can we be free to communicate if we are mediated and, in a certain sense, interrupted by the screen? I wonder how much space can be available for creativity and body sensations in online psychotherapy?

Is a full and vibrant meeting with the patient possible in remote therapy? These questions aren’t easy to answer now, but I think the risk is a psychotherapeutic relationship that isn’t sufficiently a body–to–body relationship. Maybe, in part. Of course, we can know the patient’s thoughts expressed verbally, and look at a part of her/his body, but this may not be enough.

It’s also important to consider the contact: a fundamental and indispensable element of the psychotherapeutic communication, even when, as in different therapeutic approaches, it does not include physical contact. All the senses are called to listen and dialogue; also silence, noises, smells, and looks are part of a deep communication, regression, opening. It’s an integral part of the work to access memories, emotions, insights. Online therapy can represent a narrowing of experience, rather than an evaluation and amplification of these indispensable and constitutive elements of the relationship.

I believe that the near future requires a wider approach: the virus aggravated loneliness and depression; it isolated and separated us from each other. Now, gradually, it’s possible to return to a different sociality. First, we as a professional community must respond by meeting again, person to person, becoming and offering an example to get out of isolation and fear.

We can help our patients transform the negative emotions of this period, such as suspicion, social estrangement, complaint of a more identifiable enemy, and conspiracy, where the “other” is identified as a potential carrier of disease and danger from which we must get away.

These emotions can be replaced by other internal dimensions, above all altruism and compassion, activating the areas of our resilience and the resources available for everyone. We can help our patients to do so with our multidimensional know–how: psychological, intellectual, emotional, and physical.

Luisa Barbato is a certified Reichian body psychotherapist and a Board member and supervisor for the Italian Society of Reichian Analysis (SIAR). She practices as a body psychotherapist in Rome in private and public institutions working with individuals and groups. She is the director of the Scientific Committee of the Italian Association of Body Psychotherapy (AIPC). She is an elected member of the Italian Board of Professional Association of Psychologists and is the chair of the Executive Committee of the Forum of European Accredited Body Psychotherapy Training Institutes. She teaches body psychotherapy in numerous Italian post-graduate schools of psychotherapy.
REFERENCES


