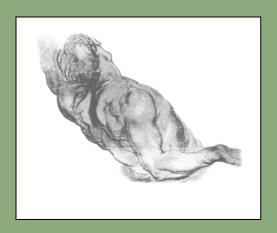
the usa body psychotherapy



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Common Factors in Body Oriented Psychotherapy

Fernando Ortiz Lachica, M.Psych.

Abstract

This paper addresses the causes of diversity in body psychotherapy, the relationship between body psychotherapy and the common factors operating in every form of psychotherapy as proposed by Lambert, and the perceived common beliefs, concepts and techniques in different modalities of body psychotherapy as explained by 13 therapists of 8 different countries in an informal survey.

Keywords

Body Psychotherapy - Common Factors - Diversity

Diversity

When I first learned about body oriented psychotherapy back in 1973, it was practically synonymous with Bioenergetics. However, in their practice, many therapists were already experimenting with a great variety of techniques from all kinds of sources outside the Reichian tradition. That was the case with my first trainer, Dr. Héctor Kuri whom I met in 1979. He had been in training with Lowen and Pierrakos when they were still working together, but he was also experienced in Yoga, and incorporated Sufi dancing, Kum Nie and many techniques that he had learned form Bagwann Sree Rajneesh into his practice and training. Nevertheless, his students thought they were learning Bioenergetics.

As I came to know more about the field, and particularly after attending the First Congress of Body Oriented Psychotherapy, organized by the International Scientific Committee, in Oaxtepec, Mexico, I was amazed by the number and variety of approaches being offered. For a few years, I had an ever growing list of therapies and psychotherapies in my computer that I eventually included in a book (Ortiz, 1999). It soon became clear that it was not a homogeneous list. Some of the entries were distinct psychotherapies comprising a coherent theory of personality, change and/or growth and a method for working with individuals or even groups, while others were specific techniques, blown up out of proportion. Most practitioners did not make any distinction between therapy and psychotherapy, or between method and technique, and the whole field had fuzzy boundaries with various forms of physiotherapies, massage, and shamanistic practices such as sacred dance, rhythmic sounds, breathing regulation, meditation and even drugs,1 healing and many kinds of alternative or complementary medicine, particularly those concerned with energy, to name but the most outstanding disciplines. Although the Congress was held in 1987, it still had a flavor of the 60's and early 70's. If one could describe the general atmosphere in the Oaxtepec conference with a single phrase, it would be "anything goes".

The motto of the Fourth International Congress of Body Psychotherapy, which took place in Boston in 1996, invited us to build bridges and celebrate diversity. Good phrase because, indeed, one of the characteristics of the field is diversity and one of the tasks is precisely building bridges between the different schools of body psychotherapy, and between body psychotherapy itself and other "mainstream" approaches. At that time, the European Association for Body Psychotherapy had been in existence (it was founded in 1988) and meetings were held leading to the foundation of the United Sates Association for Body Psychotherapy. Through the efforts of both associations and individuals in Europe the U. S, and beyond, body psychotherapy has found, or is finding a place among mainstream approaches. As for celebrating diversity, everyone can testify that the number of modalities keeps growing (Young, 2005a, Young, 2005c), and this is not necessarily cause for celebration. Anyone can start a school, invent a name for his or her "new" method or technique and make a synthesis of theories to try to explain the work. Some of these new approaches may really be a breakthrough in the theory and practice of body psychotherapy while many others simply offer new names for concepts and procedures that have been around for a long time. Nevertheless, the allure of specific modalities of body psychotherapy is such that generic training programs are significantly fewer than "brand name" programs in the U. S. A. (MacMillan, A., personal communication)². People seem to prefer to identify themselves with a particular school than to say, simply that they are body psychotherapists. The followers of different approaches are not always on good terms with each other, and many of them do not tolerate any form of heterodoxy in their ranks, as Young (2005d: 11) so aptly outlined:

The various modalities within body psychotherapy have, to date, been hardly recognizing, let alone communicating with, one another. When practitioners trained in one particular method develop their work in that

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¹ Joseph Campbell (1985/1962) stated that every culture developed its own Yoga, meaning particular forms and combination of those practices.

² In Mexico, as far as I know, most training programs are generic, either because founders of schools are not willing to open a franchise of an international school and thus subject themselves to rulings and royalties, or because some of them teach a combination of concepts, methods and techniques that come from different schools and have not yet decided to claim that they have created a new modality with a brand name.

method they are accused of "diluting" the therapy, of being "impure" or betraying the work of the founder. There is the "arrogance" of the converted, those who do not question the wonderful therapy they have discovered and then trained in.

This trend towards diversity may be explained by three sets of interrelated causes:

First, Reich trained therapists in five different countries: Germany, Denmark, Sweden, Norway and the U. S. between 1930 and the late 1940's. During those years, his way of doing psychotherapy changed, and undoubtedly his approach varied with the different patients. As he did not write a manual of technique when he practiced character analytic vegetotherapy and psychiatric orgonomy, or founded a stable training program, his students and patients were left with the particular experience of their own therapy and apprenticeship which was necessarily partial. Thus, it was from a partial view of Reich's work that some of his pupils started new modalities (X. Serrano, 2001, personal communication).

Secondly, for many years, even experts found it hard to keep up to date with the new developments in the field. Many practitioners never published material explaining their work, or else it was not easily accessible. The work of authors publishing in languages other than English, or in small publishing houses was read by relatively few people. That may have been the reason why some founders of "new schools" acted on *bona fide* ignorance, unaware of the fact that someone else was doing, or had done similar things. Even in the English speaking world, many founders of new methods were isolated. Ilana Rubenfeld (1997), for example, was an orchestra conductor when a spasm took her to a teacher of the Alexander Technique. Eventually she made a synthesis of that method, Feldenkrais' and Gestalt Therapy. For a long time, she worked alone: "For the twenty-five years before (1988), I felt like an isolated voice in the bodymind wilderness. Few people understood what I was doing and I had no colleagues to share with."

When the founders of "new approaches" did publish books or journals about their work, many tended to restrict their references to their own work, ignoring or debasing other modalities. Fortunately, the number of publications that do not refer to a single modality and go beyond the jargon of a particular school is growing. In the last few years, attempts are being made to make the material accessible, such as the CD ROM, compiled by the European Association of Body Psychotherapy, Jacqueline A. Carleton, editor of USABPJ, who writes a column in the USABP Newsletter reviewing new books and CD,s sent to to her, or the long awaited Handbook of Body Psychotherapy (already published in German as Handbuch der Körperpsychotherapie: 2005: Hogrefe).

Of course, reading a book about a specific modality of body psychotherapy does not necessarily give an idea of what psychotherapists actually do, and, although the workshops given at conferences may offer a taste of the procedures used by a particular school, the smorgasbord of workshops and demonstrations offered in congresses is usually different from the menu of everyday practice. So, even with the best of intentions, it is hard to keep up with the literature as it is impossible to go to all the training programs or even workshops in every modality.

And third, the other set of reasons has to do with the personal needs of the founders and their disciples. First of all, starting a "new school", or belonging to it, has its own, inherent reward, such as prestige, satisfaction of narcissistic needs or identity. Besides, many founders of "new schools" and their followers make a living by marketing a perceived difference between others work and their own (Caldwell, personal communication, 1999). In some cases, the schools are, in fact, sects and some sort of implicit "pledge of allegiance" must be made to remain ever faithful to their creed, and that includes ignoring or downplaying other modalities. That, I believe, is a general attitude in the field: each school underlines the characteristics that supposedly make it different from others, while overlooking the similarities. Freud (1930) wrote about "The narcissism of small differences" to describe the rivalry between similar ethnic groups or neighboring villages. Such narcissism leads to attitudes such as "My school is all of these, while yours is just that " (Young, 2005a) or to the discomfort experienced by the faithful when someone says that all of us are doing more or less the same thing (Caldwell, C. personal communication, 1999).

Both the similarities and the differences between the different modalities can be explained, at least partly, by their origin. Nobody invents a method out of the void. The history of most, if not all schools, includes a synthesis of diverse methods³ (see the chapters of Caldwell's *Getting in Touch*, written by creators of diverse modalities and also the excellent histories of body psychotherapy.: Goodrich –Dunn, B. & Greene, E., 2002., Young, 2005b, 2005c, 2005d), but, at some time, the need to differentiate, to develop a distinct identity, leads to minimization of similarities and the stressing of differences small as these may be. Furthermore, many of the differences do not refer to what psychotherapists actually do, but to the specialized language they use to describe their work (Rispoli, 1997, personal communication, Caldwell, 1999, personal communication).

Summarizing: two different trends have coexisted in the field of body oriented psychotherapy in the last three or four decades. On the one hand, there has been a tendency for new schools or training programs to appear, each of them underlining the differences between their methods, theory and techniques and those employed by other schools, and on the other there has been a recent tendency to find common principles and share goals among different approaches to the work.

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³ Although the founders of new schools often fail to acknowledge this fact and seldom justify the need for differentiate from other schools on a scientific basis.

The common factors.

Body psychotherapy must be understood in the broader milieu of Psychotherapy. There, rivalries between different schools have been part of the scene for decades. As with body psychotherapy the major types of psychotherapy (such as, family therapy, psychoanalysis, cognitive – behavioral, etc.) insisted in ignoring each other, or else tried to objectively prove that their method worked better than others. The rivalries between different modalities of body psychotherapy may be a necessary developmental stage, as it probably was the case with the major schools (Norcross, 1999, in Hubble et. al. 1999), but our field should learn a few things from the conclusions derived from those battles. After countless studies two general conclusions have been reached (Assay, T. & Lambert, M. J., in Hubble et. al. 1999):

- 1. Psychotherapy is effective.
- 2. There is little evidence to indicate differences in effectiveness among the various schools of therapy.

These conclusions led to research on the common factors that could explain success in psychotherapy, for if all of the schools were beneficial, the variables behind the success rates should not be looked for in what made the schools different but in what they had in common. In 1992, Lambert (in Hubble et. al., 1999: 8), proposed four therapeutic factors:

Client/ Extratherapeutic factors: The circumstances in the client's life that aid his recovery. These factors explain 40 % of the improvement of patients.

Relationship factors: These are variables such as warmth, empathy and acceptance, to name but a few, that are independent of the therapists' theoretical orientation and account for 30 % of the benefits of psychotherapy.

Placebo/hope: In every treatment, including psychotherapy and alternative medicine, people are given hope that they can be helped. That, in itself, accounts for 15% of the variance in client change.

Although technique and theoretical model have received a lot of attention by most trainers and researchers, they explain just 15 % of the improvement. In other words, the factors that distinguish the various major types of psychotherapy from one another do not seem to be as important as the founders of the different schools believed.

For many practitioners and consultants, models and techniques are precisely what define each modality of body psychotherapy. Too much time and energy are invested in teaching, learning and writing about specific models and techniques. Again, mastering techniques may be a necessary developmental stage (Kurtz, 1990)⁴. And, as I said earlier, specialized languages have been developed in order to teach the craft. Yet, if we liberate the procedures from the specific vocabularies of the various methods, we find that they are not that many, nor that different (Gendlin, E. 1999: 246).

Common ground.

Some time ago I read that people could be classified into "lumpers" and "splitters". The former tend to lump objects into broad categories, finding similarities between things, while the latter prefer to look at differences and place objects in many different classes. Writing about this, I am reminded of nineteenth and early twentieth century naturalists who described more than seventy (!?) different species of Big Brown and Grizzly Bears in North America (Hall, 1981). Brown Bears vary in size, appearance, color of hair, habitats, food preferences and even personality, so biologists had a point in differentiating them, but the similarities between different individuals and populations (and we could add genetic evidence) convinced scientists that all the brown bears (Ursus arctos) are a single species.. In the case of body psychotherapy, there is no doubt that many modalities will continue to emerge, and of course they need to be described not only by the adherents but by third parties (i. e. researchers, reviewers or professional organizations) so that the substantial differences between them can be known and distinguished from mere "brand names", both by experts and laypersons. The other task has to do with common factors. On one hand, we must study the specific ways in which the common factors operating in all forms of psychotherapy work in body psychotherapy and on the other hand, we must define the traits that make all of these schools variations of a single species. We should underline that, after all, the factors that make body psychotherapy differ from other, approaches account for only 15% of the outcome of a therapeutic process, so the differences between the existent modalities may mean less than we, as adherents, would like.

A necessary step towards finding a common ground in body psychotherapy is to develop a common language, one that both practitioners and consultants could understand and share, a language with as little jargon as possible,

An informal survey.

⁴ In my experience as a trainee and trainer, students crave for technique and diagnostic abilities in the first stages of their training.

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Looking for common factors in body oriented psychotherapy; I sent the following e-mail (in Spanish and English) to 30 professionals of 12 different countries:

Dear Colleagues:

In the upcoming congress in Sao Paulo, I am presenting a paper on the common factors operating in body oriented psychotherapy. By that I mean the principles, concepts and techniques (if any) that body oriented psychotherapists have in common, regardless of their particular school or training. I would specifically request a list of principles, concepts and techniques employed by the therapists you know. Please do not think it has to be a long list. Just write whatever comes to your mind in less than 5 minutes. I suggest a list of no more than 10 common elements. Thank you for your cooperation.

Fernando

All of the recipients were people I know, therapists with at least 5 years of practice and experience with more than one modality of body psychotherapy. Some of them forwarded the messages to other colleagues so the message eventually reached 40 professionals. The idea was to get simple answers, to find what came to the recipients' minds when they thought about what different modalities have in common, therefore, the request was quite open, comprising principles, concepts and techniques. Some of the surveyed were not sure of what I meant by principles or the difference between principles and concepts and said so in their answers. The vagueness of the request was deliberate, so that the recipients could answer whatever came to their minds, without much thought. The sample was, of course, not representative. The message was sent again after two weeks. After a month I got 12 answers, varying in length from 2 lines to three pages.

Two months later I sent another, more specific e-mail which was answered by three therapists:

- 1. In your view, what do most or all body oriented psychotherapists do, that sets them apart from other psychotherapists?
- 2. What, in your opinion, do most or all body oriented psychotherapists *believe* that distinguishes them from other psychotherapists?
- 3. What do you think most or all the different modalities or schools of body oriented psychotherapy have in common?

Although the sample was small and in no way representative, it did include some very well known therapists. Two of them are originators of modalities which are taught and practiced in several countries and six more are senior trainers with more than 16 years of experience in their own countries and abroad.

Finding common factors on which everyone agrees was not easy. There doesn't seem to be a single factor or defining trait on which everyone agrees, or else the importance that psychotherapists tend to assign to different techniques or concepts varies as we can see in Table 1.

It is not easy to summarize such a diverse sample of answers but nevertheless, a few facts are noteworthy:

- Even if all of the recipients were asked to write about what different body psychotherapies have in common, two of them answered about the specific principles and techniques of their own school. Although they know about other approaches, they would not speak about the similarities between their approach and other modalities.
- Six mentioned Reichian concepts, such as the character armor, or segments.
- Seven underlined mind/body unity.
- Six spoke about the body containing the history of the person, or of it being a way to access unconscious memories.
- Regarding techniques five persons mentioned some type of touch and/or massage, breathing and movement.
- Four mentioned energy.
- Seven spoke about the importance of the relationship, and three of them underlined the somatic aspect of the relationship, i.e. having bodily awareness of what was going on.

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But even if there is some agreement regarding theory and technique the most outstanding result is the lack of consensus. Luciano Rispoli, founder of the European School of Functional Psychotherapy said it simply: "Alter many, many years of European and international conferences, the things (that body therapies have in common) that come to my mind are not that many: Touch the patient's body, make the patient's body move, and use the therapist's body."

This survey should be considered a pilot project a starting point for future research. The sample was arbitrary and the questions were too open. It is possible that some therapists did not mention a belief or technique because they thought it was too obvious. For more reliable data, I would suggest closed questions. Further research should be made to find what body psychotherapy has in common with other major branches of psychotherapy, and on the ways in which the common factors behind the success of every form of psychotherapy are affected or enhanced by the specific procedures of body psychotherapy.

| patient/client moves | 6 |
|---------------------------------|---|
| therapist touch | 5 |
| Energy | 5 |
| Respiration | 4 |
| mind body unity | 7 |
| body conciosness | 4 |
| Reich | 2 |
| Patient, therapist relationship | 7 |
| armor, segments, | 3 |
| Body containing memory/history | 6 |

Table 1

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Biography

Fernando Ortiz Lachica recieved a Masters Degree in Clinical Psychology from Universidad Iberoamericana, in Mexico City. He studied Psychodrama and Bioenergetics and completed training programs in Core energetics, Functional Psychotherapy and Hakomi. He has led or participated in the training of therapists across Mexico, in Italy and Guatemala. He is full professor at Universidad Autonoma Metropolitana, in Mexico City, and is the author of *La*

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How does material in this manuscript inform the field and add to the body of knowledge? If it is a description of what we already know, is there some unique nugget or gem the reader can store away or hold onto? If it is a case study, is there a balance among the elements, i.e, back ground information, description of prescribed interventions and how they work, outcomes that add to our body of knowledge? If this is a reflective piece, does it tie together elements in the field to create a new perspective? Given that the field does not easily lend itself to controlled studies and statistics, if the manuscript submitted presents such, is the analysis forced or is it something other than it purports to be?

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Jacqueline A. Carleton, Ph.D.
Editor
USA Body Psychotherapy Journal
115 East 92nd. Street #2A
New York, NY 10128
212.987.4969
jacarletonphd@gmail.com