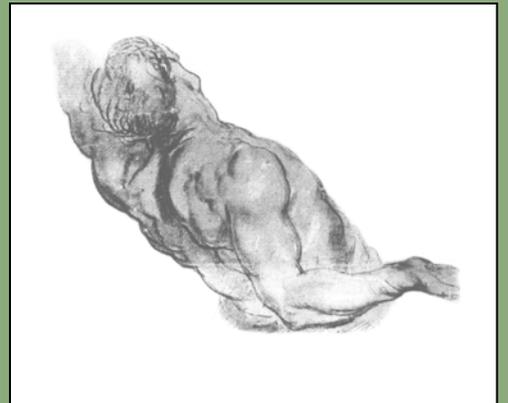


**the usa
body
psychotherapy**



The Official Publication of

Volume 6 Number 2 2007

Table of Contents

Editorial Jacqueline Carleton, Ph.D.	2
Common Factors in Body Oriented Psychotherapy Fernando Ortiz Lachica, M.S.	4
Recovering the “Reasons of the Body” in Psychotherapy Antonio Pribaz and Mauro Pini	9
Toward Mind-Body Integration: The Organismic Psychotherapy of Malcolm Brown Mauro Pina and Antonio Pribaz	12
A Somatic Approach to Recovering from Sexual Abuse Judith Blackstone, Ph.D.	15
Subtle Touch, Calatonia and other Somatic Interventions with Children and Adolescents Maria Irene Crespo Gonçalves, Psy Maria Amélia Pereira, B.A. Ed. Anita J. Ribeiro, MS, LMHC Ana Maria G. Rios, Psy	20
The Somatics of Touch Lisbeth Marcher Erik Jarlmaes Kirstine Münster Ria van Dijke	29
Touch In Therapy and The Standard of Care in Psychotherapy and Counseling: Bringing Clarity to Illusive Relationships Ofer Zur, Ph.D.	37



©2007 USABP

USABP Mission Statement

The USABP believes that integration of the body and the mind is essential to effective psychotherapy, and to that end its mission is to develop and advance the art, science, and practice of body psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity.

Recovering the “Reasons of the Body” in Psychotherapy

Antonio Pribaz and Mauro Pini

Abstract

The paper briefly discusses the main historical and theoretical reasons for the distrustful attitude of many verbally oriented psychotherapies (especially classical psychoanalysis) toward the use of body methods, and the consequent disagreements (and often mutual discredit) with the body-oriented psychotherapies. Passing beyond any presumed incompatibility, the article suggests adopting an integrated approach based on an organismic perspective in order to transcend the (misleading) mind-body dichotomy.

Key words

Body Work – Psychotherapy – Psychoanalysis - Mind-body - Setting

In an ongoing debate within the complex and varied universe of the psychotherapies, it is often observed that verbally-oriented approaches and those centered on body work run on tracks that are parallel but not touching. This situation recalls the early theoretical formulations of psychology in the late 1800s; an example is seen in Wilhelm Wundt's statement concerning the principle of *psychophysical parallelism*, according to which the mental and physical processes of the human organism run parallel: the former do not cause the latter nor vice versa, but with every change in the first, a specific change also occurs in the second. It is essential to discover a language connecting the two perspectives, indispensable for avoiding self-referentialism and the ensuing risk of remaining in a sterile position that hampers further development.

The task of the therapist who uses body methods is to find points of connection between these separate, distinct worlds; this is a careful study aiming to provide some historical context for the psychoanalytic establishment's decision to exclude *a priori* the method of (non-erotic) body contact from the therapeutic setting (see: Pini, 2001). The basic misunderstanding of Freudian pansexualism, which improperly superimposed sexual desire on the need for physical contact (a position refuted by the attachment theory of John Bowlby and subject to debate following the crisis of Freudian metapsychology; see Klein, 1976; Holt, 1994) led to prejudice and the risk of “throwing out the baby with the bathwater”.

However, it must be recognized that in the beginning psychoanalysis was mainly occupied with creating a model that would not expose its flanks to the violent attacks it often provoked, since it already presented too many aspects that were clearly in opposition to the cultural climate of the time. Over a century after Freud took his first pioneering steps into the world of the psyche, we feel less timorous regarding the frontiers of psychotherapy. While maintaining a cautious attitude, we can allow ourselves to explore these territories with an attitude of intelligent curiosity based on significant experimental and clinical evidence (Smith, Clance, Imes, 1998).

The therapist who uses body work does so from choice, guided by the knowledge of the advantages and assessments of the risks, an attitude quite different from that of avoidance due to fear or prejudice. In recent years there has been considerable interest in subjects dealing with aspects of the physical: from Lowen's now-classic Language of the Body (1958) a consistent number of other publications have followed in the footsteps of the founder of bioenergetic analysis, and the earlier ones of Reich (1945). To mention several: The Body Reveals by Kurtz and Prester (1976), Bodymind by Dychtwald (1977), Dreambody by Mindell (1982), Theatres of the Body by Mc Dougall (1989), the works of Kepner (1987), those of Smith, Clance, Imes (1998) and many others.

It is striking that even authors from very different schools find themselves sharing an interest in the physical dimension, and thus consider the body to be a protagonist in their field of inquiry and in clinical intervention, as if it were a lost object which is suddenly recovered. The psychoanalytic sphere also provides scope for the need to bestow dignity on bodily events, frequently denied or considered to be epiphenomena of the psyche. Thus it is important to consider the body not only symbolically but also concretely, as in L'esperienza del corpo by Favaretti Camposampiero et al. (1998). In this book the authors explored a double utilization of the bodily phenomenon: a) the possibility of achieving an integrated sense of the Self by working toward recognizing, gathering and assembling the input of the sensory-perceptive experience with the emotions and feelings and b) the possibility of using body work to better understand the way in which patient as well as therapist participates in the construction of the therapeutic setting.

We must not forget that within the framework of the psychodynamic model, there has been interest in the body ever since the classic contributions of Ferenczi (1930, 1953) and Reich (1942, 1945), and we are also able to retrace a marked interest in that sense, though in a somewhat different way, in the subsequent works of Ogden, Bleger and Milner.

More specifically, Ogden (1989, 1991) focused on aspects of the analyst's physical countertransference. Bleger (1967) showed that when important progress occurs in the psychotherapeutic process, bodily experiences in both the patient and analyst can emerge; Milner (1969, 1987) presents an example of how the analyst can become aware of his/her own physical sensations.

Milner, a psychoanalyst with experience in art and painting, studied the non-verbal phenomena involved in painting in order to expand her direct internal sensorial knowledge. Describing sensations felt in the act of painting, the author recounts

her sense of surprise and amazement upon entering into a state of total bodily awareness every time she attempted to extend her own field of attention. Contact with a totality of bodily sensations led to a different perceptual quality, with respect to her external as well as internal experiences.

Exploring the subject of aesthetic experience, Milner stressed that it is extremely limiting to emulate psychoanalysts who bestow a merely pathological connotation on these states, considering them autoerotic or narcissistic. In this case, narcissism is a positive component that is not concentrated specifically in the sexual organs, nor does it represent a refusal of the external world, but by involving the body in its entirety becomes instead a sort of “added value”, permitting it to feel in a new and vital way.

This perspective confers dignity and value on states and sensations that had long been considered in an overly limited way by a certain type of psychoanalysis. It almost seems to echo the spirit and the letter of early Freud, who defined the ego as the “bodily entity” and used physical contact to promote patients’ free association. Milner emphasizes that by approaching an object, the artist expresses a direct, rather than a symbolic, sensorial awareness of the condition of being alive in a body. She recounts how this type of new bodily experience became increasingly present in her analytical work. It does not have to do with the classic state of “free-flowing attention”, since it is not something exclusive to the sphere of thought or mental activity, but rather implies immersing oneself in a diffuse bodily awareness. In this state the analyst discovers that ideas and “correct interpretations” that she had initially sought only in the sphere of thought, could instead arise spontaneously from this state of intimate connection with one’s own bodily experience.

It emerges that there are two different ways of perceiving the other; with the “head” and with the “body” (Ennis Brown, 1988). Brown (1990) distinguishes between psychic and organismic levels of listening, underlining the importance of integrating these two methods. The aim is to overcome an attitude crystallized in the dissociation between “observing mind” and “reacting body”, the only way to experience a truly empathetic relationship with the other.

Moreover, in a point of view that considers the therapeutic relationship to be a *bi-personal field* (Gill, 1994), patient and therapist establish a relational setting in which the psycho-corporeal experiences of one have direct and immediate repercussions on the experience of the other. For this reason it is particularly important that the therapist place himself in a position of *attention* rather than *intention*, with respect to the other. In a view that sees the body as a *revealer of processes*, the recovery of the psychosomatic unit occurs by learning to consider the body as a truthbearer. Thus we approach the idea of the body as *great reason*, of such significance in Nietzsche’s vitalistic empiricism that he considers it a starting point for the organization of human knowledge; this concept remains important and is more relevant than ever today, to the point that it practically constitutes the *leit motif* of our considerations.

This further clarifies the origin of the demand for a different language for body-oriented psychotherapies. The goal is to create channels of communication not only with professionals who use body work but also those whose main frames of reference are models of verbal psychotherapy, do not wish to consider the body only as a “heavy opacity” and a “mute limit”, but rather as a precious opportunity for exploration. Thus the body becomes a place where a sense of personal identity melts away and continuity of being takes root (Schilder, 1935).

Working with the body also signifies relating to the wholeness of the patient’s overall experience (and that of the therapist) in the here-and-now of the session, rather than limiting oneself to verbal communication; if the physical dimension is denied, there is a risk of involving the rational sphere alone, oriented more to controlling rather than to living. This perspective prompted *Organismic Psychotherapy* introduced by Malcolm Brown (1990); the use of body contact encourages one to focus on proprioceptive sensations and their relation to one’s affective experience; the perception of the “endodermic vegetative flux” expresses the process of re-unification (in the Self) of those parts that had lost any sort of connection between them.

Body contact makes it possible to experience perceiving oneself whole, which Brown (1990) defines as a diffuse condition of awareness characterized by the sensory-motor and emotional immediacy of the here-and-now and of being fully rooted in the experience of letting oneself go, moment by moment, in the sensation of the primary unity of our being. No longer fragmented into a thousand facets by the mind-body division, we embrace to the possibility of entering that underlying layer of experience belonging to a state of pre-verbal bodily unity, aim to (re-) discover of a beneficial harmony with the natural rhythms of the organism.

References

- Bleger J. (1967), *Simbiosis y ambigüedad, estudio psicoanalítico*, Editorial Paidós, Buenos Aires.
- Brown M. (1973), *The New Body Psychotherapies*, *Psychotherapy, research and practice*, 10, (2), 98 -116.
- Brown M. (1974), *Direct body contact and the dissolution of the False Self*, *Energy and Character*, 5 (1), England.
- Brown M. (1977), *The primordial and the creative unconscious*, *Energy and Character*, 8, (3), England.
- Brown M. (1979), *Beyond Janov: the healing touch*, *Journal of Humanistic Psychology*, 19, (2), 69 - 89.
- Brown M. (1990), *The healing touch. An Introduction to Organismic Psychotherapy*, Liferithm - Siegmars Gerken, Cal.
- Brown M. (1992), “The hazards of the patriarchal Super Ego in role of a Body Therapy” in *Body Psychotherapy: the art of contact*, Bernard Maul, Berlin.
- Dychtwald K. (1977), *Body-mind*, Jove, New York.
- Ennis Brown K. (1988), *The shadow and the body*, *Energy and Character*, 19, England.
- Favaretti Camposampiero F., Di Benedetto P., Cauzer M. (1998), *L’esperienza del corpo*, Dunod - Masson, Milano.
- Ferenczi S. (1930), *The principle of relaxation and neocatharsis*, *International Journal of Psychoanalysis*, 2, 428 – 443.
- Ferenczi S. (1953), *The Theory and technique of psychoanalysis*, Basic Books, New York.

- Gill M.M. (1994), *Psychoanalysis in Transition*, The Analytic Press Inc. Hillsdale, New Jersey, USA.
- Holt R. (1994), *Freud Reappraised. A Flesh look at Psychoanalytic Theory*, The Guilford Press, New York.
- Kepner J.I. (1987). *Body Process. Working with the body in psychotherapy*, Gardner Press, New York.
- Klein G.S. (1976), *Psychanalytic Theory. An exploration of essential*, International University Press, New York.
- Kurtz R., Prester H. (1976), *The body reveals*, Harper Collins, New York.
- Lowen A. (1958), *The language of the body*, Collier, New York.
- Mc Dougall J. (1989), *Theatres of the body: a psychoanalytic view of psychosomatic illness*, Norton, New York.
- Milner M. (1987), *The Suppressed Madness of Sane Men.*, Routledge, London.
- Milner M. (1969), *The hands of the living god: an account of psychoanalytic treatment*, The Hogarth Press, London.
- Mindell A. (1982), *Dreambody*, Sigo Press, Santa Monica.
- Ogden T. H. (1989), *The primitive edge of experience*, Jason Aronson inc., New Jersey.
- Ogden T. H. (1991), *Projective identification and psychotherapeutic technique*, Jason Aronson inc., New Jersey.
- Pini M. (2001), *(a cura di) Psicoterapia Corporeo-Organismica*, Franco Angeli, Milano.
- Reich W. (1942), *The function of the orgasm*, Simon & Schuster, New York.
- Reich W. (1945), *Character analysis*, Simon & Schuster, New York.
- Schilder P. (1935), *The image and appearance of the human body*, International Universities Press, New York.
- Smith E.W., Clance P.R., Imes S. (1998). *Touch in psychotherapy: Theory, research, and practice*, The Guilford Press, New York.

Biography

Mauro Pini (psychologist, psychotherapist), works in the Department of Addictions (National Health Service, Tuscany, Italy) and at the University of Pisa (Department of Philosophy, Teaching of General Psychology). He has published a number of research articles in national and international journals in the fields of personality, stress, addictive behaviors and adolescent risk taking. He has recently edited the following books: *Psicologia corporeo-organismica. Teoria e pratica clinica*, Franco Angeli, Milano, 2001; *Aspetti psicopatologici delle cefalee primarie: teoria, metodi, risultati della ricerca*, Franco Angeli, Milano, Italia, 2006; Calamari E., Pini M. (eds) (2007), *Kurt Goldstein. Il concetto di salute ed altri scritti*, Edizioni ETS, Pisa, Italy). He is also co-editor (with M.T. Pinardi and A.M. Bononcini) of the second Italian edition (revised and condensed) of Malcolm Brown's *The healing touch. An introduction to Organismic Psychotherapy* (Del Cerro Edizioni, Pisa, in press). Mau.pini@tiscali.it

Antonio Pribaz (psychologist, psychotherapist) lives and works in Trieste (Italy), both as private practitioner and counsellor for public agencies and services (particularly in the fields of anxiety and post-traumatic stress disorders). He is a current member of the Italian Association of Organismic Psychotherapy (Società Italiana di Psicoterapia Organismica, SIPO) and his representative papers are the following: “Simulazione e Carattere”, in AA.VV. “La Simulazione”, Proxima Scientific Press, Trieste, Italy 1998; “Psicoterapia Organismica: un approccio fondato sulla relazione”, in Pini M. (ed) “Psicoterapia corporeo-organismica. Teoria e pratica clinica.”, Franco Angeli, Milano, Italy, 2001). prant58@libero.it

Toward Mind-Body Integration: The Organismic Psychotherapy of Malcolm Brown

Mauro Pini and Antonio Pribaz

Abstract

The article introduces the main elements of Organismic Psychotherapy, an approach derived from the theories of Kurt Goldstein, who along with American psychologist Malcolm Brown devised many original applications in the field of body-oriented therapies. Organismic Psychotherapy can be categorized as a humanistic-body psychotherapy, since it attempts to integrate the main assumptions of humanistic psychology with psycho-corporeal techniques inspired by Reichian and Gestalt traditions in a single theoretical-methodological system.

Key words

Organismic Psychotherapy - Malcolm Brown - Character-muscular armoring, - Body contact - Self-actualization

Organismic Psychotherapy was conceived and developed by American psychologist Malcolm Brown PhD., who with his late wife Katherine Ennis directed the Organismic Psychotherapy Training Institute of Atlanta. This body-oriented therapy takes as its theoretical model the ideas of German neuropsychiatrist Kurt Goldstein (1939, 1940, 1954, 1959), from whom it derived its framework.

Brown's works (see: Brown, 1973, 1979, 1990) reflect various theoretical influences. Reichian tradition, humanistic psychology, Gestalt therapy, and the thought of novelist D. H. Lawrence all converge in an ambitious attempt at synthesis in Brown's book (1990) "*The Healing Touch. An Introduction to Organismic Psychotherapy*".

The author's concept of energy differs considerably from that of Wilhelm Reich. It was clearly influenced by the postulates of Kurt Goldstein, according to whom the organism has a constant amount of energy available, equally distributed in its parts. It seeks to return to this distribution when a stimulus alters its level of tension. Thus the organism's goal does not consist so much in the charging and discharging quantities of energy, as in Reich's well-known formula *tension-charge-discharge-relaxation* (Reich, 1942, 1945), as bringing the tension to an optimum level and distributing it uniformly throughout the system (equalization).

Another difference between Brown's organismic approach and Reichian tradition concerns the origin and function of character-muscular armoring. Brown maintains that this does not develop as a defensive framework against the sexual instinct, but can be traced to the joint repression by the False-Self (on the psychic level) and (on the organismic level) by the so-called closed cortico-cerebrospinal circuits (Brown, 1990, p. 313) of the True-Self's primary emotional needs, that consist in establishing a close and meaningful relationship with the caregiver. In the Author's terminology, the term closed cortico-cerebrospinal circuits includes cognitive activity isolated from the organismic whole, which inhibits the free flow of the system's vegetative energy and obstructs awareness of the Self's primary emotional needs, leading to the formation (and preservation) of character-muscular-armoring.

According to Brown, character-muscular-armoring expresses the sum of the defensive strategies adopted by an individual during the developmental process in order to alleviate the anxiety and psychic discomfort that occur when basic needs to relate to the attachment figure are not fulfilled. Thus the origin of its onset should be sought in the vicissitudes of object relations rather than in the pulsation-defense paradigm, as Reich believed.

The creation of character-muscular armoring, which Brown divides into three phases, produces a split between the organism and the mind-brain system, which can lead to psychopathologies and at the same time functions as a defensive barrier in interpersonal relations. In the final analysis, character-muscular armor represents an overall defensive strategy of the organism. The process of armoring and the resulting characteristic patterns of chronic muscular tension may originate in the failure of the primary attachment relationship. This failure leads to the loss of the organism's capacity for self-regulation; each part functions as an autonomous entity isolated from the others, the higher from the lower, the front from the back. The body's disharmony thus reflects the overall disharmony of the Self.

In clinical practice numerous indicators of this disconnection between brain and body can be observed. An example is the contradiction between the patient's verbal and non-verbal messages, at times expressed in a stereotypical smile of clearly defensive significance, which persists even when painful or traumatic subjects are brought up in the session. At other times, what the patient relates lacks any affective resonance, and this is reflected in a state of apathy or boredom on the part of the therapist, as frequently mentioned in the literature on the treatment of psychosomatic patients (Taylor, Bagby, Parker, 1997).

Brown adopts a multi-dimensional concept of the Self by introducing four psychodynamic polarities inspired by Lawrence's writings (1923, 1968) and closely linked to physical experience. They are defined, using terminology borrowed from European existentialist psychology, as Ontological Centers of Being: Agape-Eros and Hara, located in the front half of the body (upper and lower body respectively) and Logos and Phallic-Spiritual Warrior located in the posterior half of the body (upper and lower body respectively). The four Centers possess in equal measure both a meta-psychological aspect, as

regulators of the organism's energy dynamic, and a psychological aspect, as activators of meaning, archetypal images and models of subject-world interaction.

The introduction of the four Centers of Being expresses an attempt to anchor the structural bases of the Self in the embodied dimension of the physical; in Brown's terms, if isolated from the organismic totality, psychic activity assumes the features of a compulsive mind-brain system coinciding with the definition of closed cortico-cerebrospinal circuits. This disembodied mind-brain expresses psychic activity resulting from organismic fragmentation that inhibits the free flow of the system's energy, obstructing awareness of the self's primary emotional needs.

One of Organismic Psychotherapy's most significant contributions is the introduction of two different styles of non-erotic physical contact between therapist and patient: the nurturing touch and the catalytic touch (Brown, 1990). The first style describes body contact of a steady and continuous type, aimed at causing the patient to experience a situation in which the unsatisfied primary needs of relating and holding are gratified, inducing a state of muscular relaxation and stimulating awareness of the body and any associated emotional experiences. Catalytic contact, also used by neo-Reichian schools and in Lowen's bioenergetics (1958), consists in more structured body work, including pressure on certain chronically tense muscle groups and finalized in the dissolution of character-muscular armor by means of the neuro-vegetative arousal that stimulates emotional abreaction.

Nourishing contact is the most frequently employed tool in Organismic Psychotherapy compared to other body-oriented psychotherapies; if applied competently, respecting ethical and deontological principles (see: Smith, Clance, Imes, 1998), this could create what Winnicott (1975) defines as a "safe-holding environment", that is, an environment that can contain the emotions and the split-off parts of the patient. Parallels with Ferenczi's active technique (1930, 1953) are obvious, and (on the theoretical level) it can be compared with the attachment theory of the school of John Bowlby (see: Holmes, 1993; Cassidy, Shaver, 1999).

In an article published in the *Journal of Humanistic Psychology* (1979), Brown stresses that principles regulating the use of direct non-erotic physical contact are based on gratifying a need, as opposed to treatments prevalently based on the frustration of a need, as in classic psychoanalysis. In the same article, Brown discusses Maslow's hierarchical theory of need (1954) affirming that the effectiveness of body-oriented psychotherapies aimed at the progressive dissolution of a psychologically disturbed armor presupposes gratifying the need for security and affection, located respectively in the second and third steps of the motivational scale. According to Maslow, the experience of gratification is of fundamental importance; the organism's liberation from domination by needs belonging to a specific developmental phase allows one to follow a path of personal growth leading to self-actualization, the final phase in complete individual realization.

In the initial phase of treatment, body contact is oriented towards creating a therapeutic relationship, in which the patient achieves a suitable rhythm of interpersonal communication and perceives the therapist as a secure base (Bowlby, 1988; Holmes, 2001). The therapist proceeds to focus on the patient's defenses, expressed on a psychic as well as a physical level, intervening in the pattern of muscular tension typical of his personality structure. Brown holds that working with the body also means relating to the patient's overall experience of the here-and-now of the session. More precisely, it does not deal with attacking the patient's defenses in an antagonistic conception of the therapeutic relationship (Shafer, 1983), which could provoke a psychotic breakdown, but stimulates the patient's gradual awareness of his characteristic patterns of chronic muscular tension. Brown points out that it is important to gently "challenge" the system of defenses in a non-threatening way, without provoking a reaction of wariness. In body work, the organismically-oriented therapist must always remember that respect for the other's being and for what he/she is willing to display of himself (self-disclosure) is essential at all times.

Developing increased physical sensitivity is connected with the acquisition of affect regulation skills; during therapy this is achieved by bringing the patient's attention to those parts of the body rendered less sensitive by chronic muscular tension, and employing the cognitive processing of the emotions.

Brown emphasizes the limits of the nomothetic approach in clinical psychology, and thus of the validity and utility of diagnostic categories (in particular regarding body-oriented psychotherapies of the Reichian-Lowenian type) along with the inadequacy of all pre-established techniques in dealing with the patient's subjectivity. According to Brown, adherence to rigid guidelines, although occasionally necessary in the initial phases of treatment in order to organize the non-homogeneous quantity of verbal and non-verbal information in the session, minimizes the importance of the relationship and in the final analysis finds its justification in the defensive needs of the therapist. Methods and procedures cannot be independent of the events of transference and counter-transference, since the therapeutic process is based precisely on these subjective dimensions (Bononcini, Pini, 2001).

Brown underlines the limits of body work methods of the cathartic type; if used to demolish the personality's defensive systems too abruptly, they can be extremely damaging. Therefore the therapist is obliged to respect and understand the functions of defense mechanisms and character-muscular-armor in the patient's psychic organization.

Organismic Psychotherapy does not provide a standardized series of exercises, and limits itself to describing several essential client-centered techniques, modelled on experiences emerging in the here-and-now dimension of the session. Nonetheless, Brown points out that the organismic psychotherapist's work should not be considered an arbitrary exercise based on mere improvisation and discourages any optimistic attitude regarding the duration of treatment. The dissolution of character-muscular armor requires a lengthy and complex labor of analysis and interpretation of resistances and their somatic equivalent, chronic muscular contractions. To achieve this, the therapist must possess an ample fund of knowledge and clinical experience (which he/she must, however, be ready to modify when confronted by each new personality), as well as a willingness to share the client's life experiences and offer constant empathic support.

In line with psychology's humanistic tradition, Organismic Psychotherapy aims to remove internal obstacles that impede the patient's process of self-actualization and a better integration of the personality. In Brown's perspective, self-actualization is a process of multidimensional development leading to the exploration of new emotional, behavioral and relational experiences; one emerges from a kind of "anesthesia" and stagnation to rediscover the ability to feel joy and pain. The individual opens up to a new awareness that permits modifying stereotypical behavioral patterns or dysfunctional relationship patterns based on defensive mechanisms adopted in the past and expressed at the physical level, in *character-muscular armor*. Restoring the path to self-actualization permits one to live fully in the present, plan realistically for the future, and retain full awareness of one's past.

References

- Bononcini, A.M., Pini, M. (2004), Transference and Countertransference in Organismic Psychotherapy, *Usa Body Psychotherapy Journal*, 3(2), 67-81.
- Bowlby, J. (1988), *A secure base. Clinical application of attachment theory*. London, Routledge.
- Brown, M. (1973), The New Body Psychotherapies, *Psychotherapy, Research and Practice*, 10(2), 98 -116.
- Brown, M. (1979), Beyond Janov: the healing touch, *Journal of Humanistic Psychology*, 19, (2), 69 - 89.
- Brown, M. (1990), *The healing touch. An Introduction to Organismic Psychotherapy*. LifeRhythm, Mendocino, CA, USA
- Cassidy, J. Shaver, P. (Eds.) (1999), *Handbook of attachment: Theory, research, and clinical applications*, New York: Guilford Press.
- Ferenczi, S. (1930), The principle of relaxation and neocatharsis, *International Journal of Psychoanalysis*, 2, 428– 443.
- Ferenczi, S. (1953), *The Theory and technique of psychoanalysis*, Basic Books, New York.
- Goldstein, K. (1939), *The Organism. A Holistic Approach to Biology Derived from Pathological Data in Man*, Zone Book, NY, 1995.
- Goldstein, K. (1940), *Human Nature in the Light of Psychopathology*, Cambridge, Harvard University Press, Massachusetts.
- Goldstein, K. (1954), The concept of health, disease and therapy. Basic ideas for an organismic psychotherapy, *American Journal of Psychotherapy*, 8, 745-764.
- Goldstein, K. (1959). Notes on the development of my concepts, *Journal of Individual Psychology*, 15, 5-14.
- Greenberg, J.R., Mitchell S.A. (1983), *Object relations in psychoanalytic theory*, Harvard University Press, Cambridge.
- Holmes, J. (1993), *John Bowlby and Attachment Theory*, London, Routledge.
- Holmes, J. (2001), *The Search for the Secure Base: Attachment Theory and Psychotherapy*. London: Brunner-Routledge.
- Lawrence, D.H. (1923), *Psychoanalysis and the unconscious*, Martin Seker, London.
- Lawrence, D.H. (1968), *D.H. Lawrence: complete works*, Heron Books, London.
- Lowen, A. (1958), *The language of the body*, Collier, New York.
- Maslow, A. (1968), *Toward a psychology of being*, Van Nostrand Reinhold, New York.
- Reich, W. (1942), *The function of the orgasm*, Simon & Schuster, New York.
- Reich, W. (1945), *Character analysis*, Simon & Schuster, New York.
- Smith, E.W., Clance P.R., Imes S. (1998), *Touch in psychotherapy: Theory, research, and practice*, The Guilford Press, New York.
- Taylor, G.J., Bagby, G.J., Parker, J.D.A. (1997), *Disorders of affect regulation. Alexithymia in medical and psychiatric illness*, Cambridge University Press.
- Winnicott, D.W. (1975), *Through Pediatrics to Psychoanalysis*, Basic Books, New York.

Biography

Mauro Pini (psychologist, psychotherapist), works in the Department of Addictions (National Health Service, Tuscany, Italy) and at the University of Pisa (Department of Philosophy, Teaching of General Psychology). He has published a number of research articles in national and international journals in the fields of personality, stress, addictive behaviors and adolescent risk taking. He has recently edited the following books: *Psicologia corporeo-organismica. Teoria e pratica clinica*, Franco Angeli, Milano, 2001; *Aspetti psicopatologici delle cefalee primarie: teoria, metodi, risultati della ricerca*, Franco Angeli, Milano, Italia, 2006; Calamari E., Pini M. (eds) (2007), *Kurt Goldstein. Il concetto di salute ed altri scritti*, Edizioni ETS, Pisa, Italy). He is also co-editor (with M.T. Pinardi and A.M. Bononcini) of the second Italian edition (revised and condensed) of Malcolm Brown's *The healing touch. An introduction to Organismic Psychotherapy* (Del Cerro Edizioni, Pisa, in press). mau.pini@tiscali.it

Antonio Pribaz (psychologist, psychotherapist) lives and works in Trieste (Italy), both as private practitioner and counsellor for public agencies and services (particularly in the fields of anxiety and post-traumatic stress disorders). He is a current member of the Italian Association of Organismic Psychotherapy (Società Italiana di Psicoterapia Organismica, SIPO) and his representative papers are the following: "Simulazione e Carattere", in AA.VV. "La Simulazione", Proxima Scientific Press, Trieste, Italy 1998; "Psicoterapia Organismica: un approccio fondato sulla relazione", in Pini M. (ed) "Psicoterapia corporeo-organismica. Teoria e pratica clinica.", Franco Angeli, Milano, Italy, 2001). prant58@libero.it

USA BODY PSYCHOTHERAPY JOURNAL

The Official Publication of
United States Association for Body Psychotherapy
Jacqueline A. Carleton, Ph.D., Editor (jacarletonphd@gmail.com)

USABP Mission Statement:

The USABP believes that integration of the body and mind is essential to effective psychotherapy, and to that end, it's mission is to develop and advance the art, science, and practice of body psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity.

USA Body Psychotherapy Journal Purpose:

This peer-reviewed journal seeks to support, promote, and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an interdisciplinary exchange with related fields of clinical practice and inquiry.

SUBSCRIPTION & BACK ISSUES

(all funds USD)
_____ \$65 (USD) Two year subscription
_____ \$35 (USD) One year subscription
_____ \$20 (USD) Single issue
_____ \$25 (USD) Keleman issue
2002 ___ Vol. 1, No. 1 ___ Vol. 5, No. 2
2003 ___ Vol. 2, No. 1 ___ Vol. 5, No. 2
2004 ___ Vol. 3, No. 1 ___ Vol. 5, No. 2
(Selver Issue)
2005 ___ Vol. 4, No. 1 ___ Vol. 5, No. 2
(Research Issue)
2006 ___ Vol. 5, No. 1 ___ Vol. 5, No. 2
(Boadella Issue)
2007 ___ Vol. 6, No. 1 ___ Vol. 6, No. 2
(Keleman Issue)
2008 ___ Vol. 7, No. 1 ___ Vol. 7, No. 2
(Lowen Issue) (Research Issue II)
2009 ___ Vol. 8, No. 1 ___ Vol. 8, No. 2
2010 ___ Vol. 9, No. 1 ___ Vol. 9, No. 2
(Research Issue III)

POSTAGE

Shipping to U.S. and Canada included

International Orders need to include the following postage fees.

SUBSCRIPTIONS

The following postage rates apply *per year*.

_____ \$18 Mexico, Western Europe

SUBSCRIBER INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____ Country _____

E-Mail _____ Telephone (daytime) _____

An email address is required for electronic notification. A non-AOL address is preferred.

Amount Enclosed _____ Check Discovery Visa MasterCard

Card Number _____ Exp. Date _____ Security Code _____

Signature _____

I would like information about becoming a member of USABP



The United States Association for BODY PSYCHOTHERAPY

7831 Woodmont, PMB 294

Bethesda, MD 20814

Phone: 202-466-1619 Fax: 832-717-7508

E-Mail: usabp@usabp.org

Abstracts and Indexes available at www.usabp.org

The USA Body
Psychotherapy Journal
The Official Publication of the
USABP

Editor

JACQUELINE A. CARLETON, PH.D.

Peer Review Board

SUSAN APOSHYAN, M.A.
DAVID BROWN, PH.D.
RUELLA FRANK, PH.D.
MARY J. GIUFFRA, PH.D.
BARBARA GOODRICH-DUNN
ELLIOT GREENE, M.A.
LAWRENCE HEDGES, PH.D.
JOEL ISAACS, PH.D.
GREG JOHANSON, PH.D.
BLAIR JUSTICE, PH.D.
RITA JUSTICE, PH.D.
ALICE LADAS, ED.D.
ALINE LAPIERRE, PSY.D.
LINDA MARKS, M.S.M.
JOHN MAY, PH.D.
PATRIZIA PALLARO, LCMFT, ADTR
MARJORIE RAND, PH.D.
LAUREL THOMPSON, M.P.S.

Proofreaders

ELIZABETH MCMILLAN
DASCHA JENSEN

Journal Interns

SARAH HASSAN
ALEXA HUBBARD
DASHA JENSEN
SHAZEDA KHAN
NISHA KOCHAR
SHAWN LEE
ELIZABETH MCMILLAN

Production Manager

ROBYN BURNS, M.A.

USABP BOARD OF DIRECTORS

VIRGINIA DENNEHY, PRESIDENT
PAUL BRIGGS, VICE PRESIDENT
LYNN TURNER, SECRETARY
JACQUELINE A. CARLETON, TREASURER
CHRISTINE CALDWELL
MARY J. GIUFFRA
KAREN JACOBSON
GREG JOHANSON
ALICE KAHN LADAS
KATHY SCHEG
KATY SWAFFORD
LAUREL THOMPSON

ADVERTISING INFORMATION

The USABP Journal accepts advertisements for books, conferences, training programs, etc. of possible interest to our members. Please contact usabp@usabp.org for more information.

VOLUME 6, NO. 2, 2007
Printed in the USA

CRITERIA FOR ACCEPTANCE

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?

PURPOSE

This peer-reviewed journal seeks to support, promote and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an interdisciplinary exchange with related fields of clinical practice and inquiry.

To ensure the confidentiality of any individuals who may be mentioned in case material, names and identifying information have been changed. It must be understood, however, that although articles must meet academic publishing guidelines, the accuracy or premises of articles printed does not necessarily represent the official beliefs of the USABP or its Board of Directors.

The USA Body Psychotherapy Journal (ISSN 1530-960X) is published semi-annually by the United States Association for Body Psychotherapy. Copyright (c) 2008 United States Association for Body Psychotherapy. All rights reserved. No part of this journal may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without written permission of the publisher.

Subscription inquires & changes of address should be sent to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814. For customer service, call 202-466-1619.

Subscription Rates: Single current issue \$20; \$35 yearly. Postage outside the US and Canada please inquire at usabp@usabp.org.

Postmaster: Send address change to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814.

SUBMISSION GUIDELINES AND SPECIFICATIONS

First consideration will be given to articles of original theory, qualitative and quantitative research, experiential data, case studies, as well as comparative analyses and literature reviews. Submission of an article to the *USA Body Psychotherapy Journal* represents certification on the part of the author that it has not been published or submitted for

publication elsewhere.

Initial submission should be e-mailed to jacarletonphd@gmail.com as an attachment in Microsoft Word.

Manuscript should be double-spaced in 10pt. type, with at least a one inch margin on all four sides-please include page numbers, otherwise manuscript should be free of other formatting.

Title, full authorship, **abstract of about 100 words and 3-5 key words precede the text.** Please include an endnote with author's degrees, training, mailing address, e-mail fax, acknowledgement of research support, etc.

Authors are responsible for preparing clearly written manuscripts free of errors in spelling, grammar, or punctuation. We recognize that the majority of contributors are not professional writers, nor do they function in a publish or perish mode. Furthermore, we are aware that the work of our profession is sometimes pragmatic, associative, intuitive, and difficult to structure. However, a professional journal such as we envision normally accepts only pieces that are fully edited. Therefore, we may occasionally suggest that writers find a reviewer to edit their work before it can be accepted. We will suggest names of possible editors if requested.

References: References within the text should include author's surname, publication date and page number.

Full attribution should be included in bibliography at end. *For books:* surname, first name, book title, place, publisher, date of publication. *For periodicals:* Surname, first name, title of article in quotes, name of publication, year, volume, and page numbers. Or, consult the latest edition of the Publication Manual of the American Psychological Association.

LETTERS TO THE EDITOR

The editors are eager to receive letters, particularly communications commenting on and debating works already published in the journal, but also suggestions and requests for additional features or departments. They may be sent to the email address below. A selection of those received will be published in the next volume of the journal.

CORRESPONDANCE ADDRESS

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