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A Tribute to David Boadella and
Energy & Character

Silvia Specht Boadella

David Boadella
Shape Postures and Postures of the Soul  
The Biosynthesis Concept of Motoric Fields  
David Boadella, D.Sc.hon, M.Ed., B.A.

Abstract  
This article is an exposition of the Biosynthesis concept of “motoric fields” (the word was first used by Rupert Sheldrake). The use of movement tendencies is central to Biosynthesis, particularly in the work with trauma. Movement is expression through the mesoderm. It underlies all our action patterns and external behaviour. Even eye contact and speech are forms of movement. In trauma the appropriate forms of action to deal with the threat are inhibited, or not possible. They remain frozen into the body as dormant tendencies, waiting to be re-evoked by the relevant therapeutic context.

Keywords  
Motoric fields - Neurobiology - Shape postures and postures of the soul

The outer shape of a person reflects his inner mood. Changing that shape can change his mood. This is the simplest insight that lies at the heart of somatic psychology: it was first formulated by Charles Darwin over a hundred years ago.

Some somatic therapies such as Rolfing try to change the body by stretching it into a new shape. The therapist works from outside resculpting the anatomy in line with his vision of the ideal body aligned with gravity in a state of minimal unbalance. Gymnastics and body-building courses offer series of exercises by means of which a person may seek to bully his body into a shape which better expressed his idea of how he wants to be. In classical ballet the dancer may learn to stress his body into shapes required by the choreographer: his movement flow is restricted to the requirements of the dance script. Some patterns of work or sport deform the body when carried on over a period of years: the frozen tennis elbow and housemaids knee, the cramp in a writers fingers, or the bowed down shape of a rice farmer, the body bent double and unable to straighten up, as seen in rural Japan.

Stanley Keleman showed us how our emotional anatomy is formed in response to the different insults to form which we may experience in the conditioning we receive from the scripts of character formation: stand up straight, be a man, put your best foot forwards, don't cry, or its no use, give in, helplessness brings sympathy, if you are weak at the knees no one will knock you down.

The outer scripts of work-schedules and exercise programmes, and the inner scripts of character-formation, have in common that they demand certain shapes from our bodies. The demand originates from outside even if it is deep inside our unconscious where it may exert its effects.

In contrast to these outer-directed movements and postures there is a quite different relation to shape created when movement flows from inner desire. Such movements are associated with spontaneity, play, improvisation, creativity, unchoreographed dance, or the gracefulness of a sportsman or athlete who is perfectly in tune both with his body, and the outer challenge. It is present in the rhythms of pleasurable work, where compulsion of the dullness of routinised labour have not forced the body into restrictive shapes.

Two nervous impulses pattern our movements: the first of these originate in the brain cortex and travels down what is known as the alpha nerve to give direct signals to the voluntary muscles to act. We can speak of the alpha system as the action system. The second nervous impulse originate in the brain stem and travels down what is known as the gamma nerve: through the muscle spindle it gives signals to the muscle to get into appropriate tonus: we can call this second system the readiness system.

The readiness system, mediated through the gamma nerves, is closely related to mood, and to intention. Without committing ourselves to voluntary action, our postural attitude we can communicate our inter attitude to and feeling about a situation. Ethologists study the intention movements of animals as a way of learning about their inner attitudes. A dog pricking up its ears has become interested in a new sound. A cat crouching nearer the ground is tensed for a spring to catch a mouse. We hear an unexpected sound in the night and we tense up ready to leap out of bed.

We can separate the movement attitude from the movement tendency. In the movement attitude we see a certain immobile shape which reflects an inhibited movement. Shoulders held high, have not been allowed to droop. The retracted pelvis is held back unable to swing. The head cocked on one side may forever avert a blow.

In the movement tendency on the other hand we can see the beginning of an action pattern. The shoulders suggest the hint of a shrug, the pelvis starts to flirt, the head shifts forward as a speaker prepares to open his mouth and announce his presence in a group of people.

The conditioned movements overlay the unconditioned movements, just as the conscious mind overlays the unconscious mind. Working with movement impulses and eliciting spontaneous changes of shape is thus a way of contacting the unconscious without words as a primary tool. This method is well understood in dance therapy, where communication takes place primarily muscle to muscle, and through this medium, from mind to mind.

In Biosynthesis the therapist is interested both to follow and support spontaneous movements: and to induce and elicit them by leading a part of the body in a certain direction, where it is invited, not required, to follow.
Thus the therapist seeks to speak to and listen to the gamma tone of the muscle, its state of readiness. He seeks to make contact with the soul of the muscle. The soul of the muscle is related anatomically to the muscle spindle, which determines its inner state of tonus. The spindle receives fibres from the vegetative nervous system which regulates the flow of emotional energies in the body. Thus even anatomically the spindle directly reflects the mood of a person.

In trying to formulate the patterns of shape flow experienced in the somatic postural work of biosynthesis, we developed the concept of motoric fields, which is described below. The concept builds on earlier concepts of tonus fields, and action fields, developed out of research into the body schema, and on Jean Piaget's concept of "sensorimotor" schemas.

MOTORIC FIELDS

The German embryologist Erich Blechschmidt developed the concept of embryo-dynamic fields to describe the different force fields that act on embryonic tissue when the body is forming during morphogenesis. Blechschmidt described eight such fields of force, which he illustrates using the pictorial metaphor of little pin men, pushing, pulling, and twisting the tissues into shape.

These pin men illustrations bring to mind the dance of interaction between helper and helped in a biosynthesis session, and we have evolved Blechschmidt's concept into a descriptive schema for representing many of the major movement sequences that are important both developmentally and formatively in the life of each of us.

By developmentally I mean that the main motoric fields, alone or in combination, are involved in every developmental step, from free-floating in the womb, through birth and suckling, to crawling, standing, grasping and all later skills.

In the work of George Downing, in infant research at the Salpetriere Hospital in Paris, what I call motoric fields are called by him "affecto-motoric schemas". They are biologically given patterns of responsiveness which are activated in the process of a well-attuned upbringing. The patterns can be deformed in a process of adaptation, but the original affecto-motoric schemas remain dormant, as it were hibernating, until appropriate conditions occur at a later time in life.

By formatively, I mean that the same motoric fields are needed to rebalance our muscle tone whenever we are emotionally stressed. The body has deep inner wisdom in knowing how to unwind its tensions. In functional osteopathy "unwinding" is the term given to a technical procedure in which the osteopath tries to follow the natural movement tendency of a person when he suspends his will to move from the alpha system, and listens to the inner voice of the muscle in the gamma system. Moshe Feldenkrais, who was strongly influenced by the English movement teacher, Mathias Alexander, called his method "functional integration". Although he worked primarily without accessing deeply buried emotions, for reasons discussed below, some of the ways a Feldenkrais practitioner induces movement have a resemblance to the way a therapist works in biosynthesis. Feldenkrais strongly influenced Stanley Keleman, to whom the first book on Biosynthesis, Lifestreams is dedicated because of what he taught about subtlety in reading and responding to slight gestures and impulses from the readiness system in the muscle.

Eight of the motoric fields are paired in four sets of two. The ninth motoric field is unpaired for reasons that will be made clear later. In describing each field I will try to give an idea of its importance and kinaesthetic character conditioning, and the effectiveness of working with it in therapy.

The Flexion Field

The focus in the womb increasingly moves into a flexion field of the whole body in the last stages of pregnancy. As I described in Lifestreams the fetal position recoils in states of regression and represents a wish to retreat from the world into a more womb like state of security. Many adults use this as a preferred position during sleep.

The flexion fields in the legs can represent a protective defence for the abdomen. The yoga posture in which a person crouches low on flexed legs with the head on the ground is called the posture of the child. The flexion field of the hand is well known in the grasp reflex of the infant, which is strong enough to support the entire weight of the child after birth. The flexion field of the arms is a self-nourishing position where the child cuddles himself or a beloved toy, at times of loneliness or insecurity.

In emotional expression a person may flex in a huddled up position in times of cold, or when he needs to collect his energies rather than to expend them. Stanley Keleman calls this the position of "self-collecting". It can also have a self-preservative and self protective function, as in the falling position in Judo.

In strong fear the legs may be flexed to the chest, the arms pulled in across the chest, and the belly wall pulled tightly towards the back of the spine. I call this the fetal fear reflex, as its earliest occurrence seems to the
flexion of the fetus a way from negative messages traveling down the umbilical cord. The origin and content of this umbilical fear are dealt with in *Lifestreams*.

The flexion of the head onto the chest is on the one hand, the position of Rodin's thinker, on the other hand it is often found in people in states of hopelessness or depression.

When a person is characterologically identified with depression or hopelessness or with strong fear or anxieties, this motoric field occurs frequently. On the other hand when a person is denying fear or is braced against collapse, or refusing to show need it can be predominantly avoided.

In the first case the use of the field by the therapist will intensify the character tendency, and therefore can help to make it conscious. It can also relieve the person of the effort in his own flexor tendency if the therapist "takes it over" for him.

In the second case the flexion field will be counter to the character tendency. It will frequently be the denied need which underlies the expressed attitude in the posture. Inducing the flexor attitude can be a way to elicit the hidden fear or collapse.

How does a therapist work to induce the flexion field? It can be used lying on the back or side, sitting, or kneeling, or standing. When lying the legs are slowly and gently invited into a more bent position. In standing they are encouraged to yield more at the knees, inviting a tendency to sink towards the floor. The head can be helped to move towards the breastbone, the arms to dose over the chest in an easy relaxed movement. This is helpful primarily for people who deny fear, to give up their denial and to get to know what is avoided.

A well functioning man who was a successful research scientist came to therapy with problems of rigidity and a tendency to overwork. There was also some tension in his personal relationship due to his anxiety to be too much under the influence of a woman. He had excessive extensor tonus in the back and arms. While lying on his back with the arms flexed and lightly held at the wrists by the therapist, he got in touch with deep fear contractions which he later connected to terrors associated with the risk of being bombed during the war, during the time his mother was pregnant with him. Working through the motoric patterns both, of the fear response, and of his superimposed denial of it, changed his unconscious anxiety to be overwhelmed by the feelings of a woman, allowed his back to soften, and for him to greatly improve his love relationship, as well as to find a more pleasurable and unemotional job.

The Extension Field

In extension the body moves into the opposite of flexion. The spine arches backwards, the legs elongate, the arms widen, and more away from the body, the head lifts away from the chest.

After nine months in the womb birth itself is the first great extension. Some doctors or nurses had the practice of holding the new born by the heels, hanging downwards, a severe extension field imposed by the birth attendant.

The earliest walking movements occur before the child is strong enough to stand, the legs simply stretch out to their full length, practising the movements that will be later used in locomotion. Kicking is one form of extension. The child moves with its arms into space to explore what kind of world lies outside the womb.

Therapists working with clients who are under strong emotional pressure, but who resist giving in for example to an expression of rage, may extend the spine so much it forms a position that is known clinically as "opisthotonus". The pre-Freudians, in the days of Charcot, called it "arc de cercle", and noticed its occurrence in hysterical acting out. The body is supported only on the head and the heels. It is an extreme form of bracing back, but it also repeats the extensor arch of birth. Significantly the breath may also be held.

If the breath is freed and the body allowed to move in this position, it becomes a powerful way to express extremely powerful feelings of rage or distress. Alexander Lowen developed the use of strong extension over his bioenergetic chair, but we are talking here of the natural arching of the spine as a way of expressing its mobility and elasticity.

We can distinguish three different expressions of the motor fields of the arms: one I call stretching: this involves a strong extension into space, with a sense of freedom and power.

The movements of yawning have some of these qualities, and yawning is a very good example of the extension field, in which the body experiences stretch reflexes that deepen breathing.

The second extension is found in reaching: here a person reaches the arms out for human contact to be held or to embrace. The emotional feeling relates to giving and taking, and is totally different from the felt sense of stretching.

We can recognise a third form of extension in the arms which I call opening. It is a delicate and sensitive exploration of the space beyond the heart, in which a person comes into contact with fine streamings in the arms and fingers, and becomes aware of the energy field (the so called aura) extending beyond the body.

To induce the extension field the therapist may put his hand in the lumbar curve or the curve of the neck, or support the undersides of the arms in moving out and away from the body, or encourage widening and lengthening impulses that are the natural stretch responses to move out of any attitudes of chronic flexion that may be present.
A woman dealing with very early fear and rage from the first year of life had developed a character expression which she and others recognised as like a madonna: quiet, gentle, understanding, and rational. But she experienced some difficulty in feeling at home in her body, with the powerful feelings repressed since early infancy. In one particular therapeutic session, she began to stretch out very strong into a forward direction, but with this came a powerful destructive feeling against her mother. The rage impulses were also very frightening to her, and there was a strong movement of flexion in the spine to try to pull these back and deny them. I knew she was ready to face and re-own the power of her early rage, which was a key to regaining the full vitality and feeling more grounded in her own body. So I supported her back into the extension and the full power of her rage could come forward. Needless to say this was a safe and ego-integrated expression, which occurred when ripe, and in the context of ongoing therapeutic development, and had nothing to do with acting out.

The Traction Field

The traction field is found primarily in the arms. The grasp reflex evolves into traction when the child learns to lift objects against gravity, and to pull himself up to standing by gripping a chair, or a table. Also in holding onto a treasured object which someone wishes to take away. The game of tug of war is pure traction field.

We can distinguish the passive and active traction field. In the passive form the person grips with the arms against the pull from the other. He is elongated by the other's pull. Traction then combines with extension. Or he actively pulls the other towards him against resistance: then traction combines with flexion.

The emotional feeling of active traction is: I want you, give it to me. Clinging, holding tight, and hanging one to what is ones own are key themes. For a person who is grasping and manipulative in his basic orientation to the world, the traction field is in character. But for a person whose need to hold on are underdeveloped or denied, it is important to develop contact with the need to pull.

When the traction field is used therapeutically it has a number of effects: it is particularly important in situations of helplessness and collapse, where a person has last contact with the power of his or her back as an axis of support for the satisfaction of basic needs. Sometimes it can be used standing between two people linking their hands and leaning backwards. The person to be helped is asked to walk backwards slow pulling their resistant partner forwards. It is a tug of war in which the helper yields and gives up ground gradually.

I used this traction form with a collapsed woman who had given up her rights in a couple relationship, and was tending to resignation and depression. The pulling experience began as a rather mechanical exercise proposed by me, but then developed to a climax of engagement, when she contacted the buried power of her right to self assertion.

This galvanised her out of depression. The change from the mechanical exercise to the dynamic expression corresponded to the mobilisation of the gamma-tone in the muscles for pulling.

For others the experience of the traction field in the arms when lying reactivates feelings of longing and allows the motoric satisfaction of holding on and being held. A man in a therapy group once defined longing as “sadness without arms”.

The Opposition Field

The opposition field is the opposite of the traction field. Where the latter is expressed in pulling, the former is developed in pushing.

The earliest opposition field is associated with the head of the fetus as it pushes against the pelvic floor, bouncing on it according to Sheila Kitzinger, as if on a trampoline.

When the extension movements of the legs contact the resistant surface of the ground, the baby pushes against gravity in order to stand. Before than, lying prone on his belly, his hands push the floor away so as to support the head as the infant surveys the world in the position before crawling begins.

The opposition field, as its name suggests, has to do with the right to say no, and to make boundaries. It implies the right to defend one's personal space and to hold off intruders or invaders.

For the angry psychopathic kind of person who fears manipulation at every turn, this quality of pushing away what is not wanted is highly developed. Every touch may seem an invasion which needs to be pushed abruptly away. For such a person the opposition field will be in character, and other fields will be more helpful in therapeutic work. But for people who learned to give up their boundaries and surrender to invasion without protest, the opposition field is essential to practice and develop. This includes people easily flooded by anxiety, as well as people who were smothered by over protective mothers as children.

There are many ways of developing this field. Standing back to back and leaning against the supporting partner, then walking slowly against the resistance at first backwards, and then forwards, develops the opposition field in the back. Standing face to face with outstretched arms, palm to palm with one's partner, clearly demarcates the boundary between the two personal spaces. The field can also be used very effectively while lying on one's back with one's feet resting against the thighs of the helper.
In acute anxiety a person can be helped by sitting with their legs flexed and their back to the helper, whose hands are also available to press outwards against. This simultaneously mobilises the boundaries in back, arms and legs, and can bring a person out of overwhelming anxiety very quickly and reliably. The Opposition field provides strong containment also for people whose assertion needs to experience limits.

It is important that the resistant force from the therapist or partner is neither too weak nor too strong. If too strong the opposing force begins to invade and becomes intrusive, and the protection to the boundary is lost. If too weak, then the sense of containment and limit is no longer there. A person's experience is then: the world is not strong enough to handle the power of my feelings.

Because what we call earth contact is very strong in this field it is particularly helpful in working with prepsychotic or borderline people whose boundaries are fragile and need strengthening. Particular patterns of coordination with the breathing are necessary and these will be described later under the ninth motor field.

The Rotation Field

The child rotates normally during birth. Special muscles called "rotators" lie along the length of the spine. The action of walking with its alternate swinging from left to right is a kind of rorotary pulsation, as Stanley Keleman has emphasised.

The legs are equipped with muscles for inversion and eversion, the arms with pronators and supinators, in both cases for inward and outward rotation.

Rotatory movements explore the spaces to the sides of the main body-axis. Children enjoy spinning and turning. The bullfighter demonstrates the skill of rotation in avoiding the bull. The aikido practitioner makes the flow of spiral rotatory movement the centre point of his art.

Rotation can be used to explore unknown pathways, peripheral to the main path, as in the lateral thinking of Edward Bono. These side paths are helpful when we encourage compulsive linear people to turn aside for a while from their well-beaten forward moving tracks. But for people with hysterical tendencies, turning aside is a key feature of the character: the rotation field serves the defence, in squirming, scattering, and rolling aside or twisting away from direct confrontations.

When the therapist is using the rotation field, for those for whom it is suited, he will pick up "impulses to unilateral movement, and encourage asymmetry, helping a person to develop flexibility in turning and rolling. This can be very helpful in loosening the tightness in the lower spine for those with rigid backs, or he can take an arm and gently stretch it across the body in a slow pull that exerts a subtle torsion on the body: this is an active induction by the therapist of passive rotation in the client.

A woman had been afraid of strong movements: most of her life because of rheumatic fever in childhood, was encouraged, while standing, to gently rock in a slight movement from side to side. Gradually her arms spun out from the body and she developed a joyful crescendo of power as she span from side to side. She was learning the freedom of spiral wave-forms that the arms describe when the body oscillate freely around its axis.

A second woman who had rotated the arms inwards was struggling to release tension in the upper body. Only when she was helped to rotate her arms outwards 50 her palms faced forward, was she able to let go of her tendency to hold back, and to give in to the energetic life in her upper body.

The Canalisation Field

Whereas the rotation field turns aside from the centre line of the body, or of a limb, the canalisation field is highly linear and focussed. Actions flow out of the centre of the body directly like spokes from a 'wheel The child learns to direct his movements: to look straight at you, to point towards a desirable toy or piece of food. The canalisation field is related to purpose, its emotional quality is determined, and serious, committed and goal-oriented.

For over-purposeful people with obsessional tendencies, and a tunnel vision, this is a preferred field that keeps them in character. They are better helped by rotation or pulsation. But for people with low focus, underbounded and easily scattered, who find it hard to direct attention, and commit themselves to an action or a decision, the canalisation field can be extremely helpful.

The therapist encourages the client to explore directed movements that are incisive and highly focussed. It may be as subtle as asking for direct eye contact, instead of an averted gaze, or as total as the commitment packed behind a karate blow.

A man who was impulsively angry and who had twice reacted with psychotic episodes in "primal groups" was helped to develop his voluntary control by first visualising and then enacting three blows to a mattress with his fist. He was given extreme containment in the form of imagined movement proposed, first the containment implied in canalisation field -itself, secondly the containment in the form of imagined movement voluntarily executed and thirdly in the containment of three, and not more than three blows. In this way the man's inability to bound himself was reversed, and he became capable of managing himself in the group without further psychotic reactions that had troubled him in the past.
The Activation Field

Locomotion is travelling. It usually involves active movements of the arms and legs as in walking, swimming, running and jumping. Activation prepares the person to move somewhere with relative rapidity. The fetus practises swimming movements already in the womb, and can swim before he or she can crawl or stand. Once the infant has mastered the art of crawling, he becomes intensely active. Before that he rehearses activity patterns in the rapid kicking of legs, and beating of arms, in the activation field, the vitalisation is the key theme, not the particular plane or direction of movement. Some people lives are intensely overactive: rest is torture for them. For such people the activation field is in character: they are always on the go, and don’t know when to stop.

People with more depressive tendencies sit around inertly for hours, and cannot get started. Their metabolism is slowed down, speed is an alien attribute. For these people mobilising the activation field may be the key to loosening the grip of a depression. Running and dancing or jumping, are not easily compatible with a depressive frame of mind. But how to help a person with slowed down metabolism to go faster? One way is to ask him to make, as if in demonstration, any brief quick movement, or to give a surprising gesture, of to carry out a sudden action. Another way is to ask for a slow activity such as walking slowly on the spot, and to gradually help the rhythm of this to increase until quick walking. changes into slow running, which can suddenly escalate into a burst of energy in the legs which will surprise no one so much as the runner.

The father of a friend of mine came for help in a depressed state. I knew his depression was sustained by the inactivity in his whole body. He lay down on the mattress dutifully waiting for me to take his depression away. How could I use the activation field to help him? He was asked to remove his socks without using his hands. He began to wriggle and flip about with his feet, then to try to kick the socks off. The gamma system became ripe for kicking and soon whether the socks were off was of no more importance, but this dignified man was activating his entire body as he experienced the missing assertiveness that lay beneath his depressed state.

Another strong activation field involves the jump, reflex. It is possible to help someone discover, not a mechanical jump, but an organic rhythmic leaping which is nearly always associated with strong joy, and which requires a particular coordination of breathing with flexion and extension of the knee joints. The word hope in English has the same derivation as the word hop. So the depressed person is one who has not only lost contact with hoping, but who has also lost the feeling of hopping in his legs, knees, and ankles.

The Absorption Field

The infant lies quietly, absorbed by the movement of a leaf in the wind, or he rests at the breast in a state of semi-trance. He is geared to receive, to take in impressions, to still his outer activity, and maximise his inner awareness.

For some people resting and taking in has become a secondary style of living which is used to replace activity and initiative. For the passive-dependent person the absorption field is what is known best. One longs for such a person to begin to stir, to move out of rest into movement.

But for hyperactive people the opposite is true: one longs for them to take a rest, to take in, to slow down. The absorption field is the least dramatic of all the fields. One asks the person simply to do nothing, to allow, to take it easy, to experience the self as a source of being instead of as a centre of doing.

A hysterical woman who was always flooded by intense feelings and movements felt her body was as if pricked by dozens of knives. Everything was agitated and restless. She was asked what her image was if she stopped the activity. She replied that she expected to fail asleep. She was then asked to allow this risk to happen. When she lay down and all the activity stopped she did not fall asleep, but discovered she was not inwardly dead, but acutely awake. As she got into contact with her inner life, usually obscured by her outer activity, she developed the insight that all her life she had behaved like an actress in a film.

The Pulsation Field

The heart of the fetus begins beating 21 days after conception. The body has many pulsations. A key pulsation related to emotionality is the rhythm of breathing, which begins directly after birth. The circumstances of birth have a powerful influence on our habits of breathing. Inbreathing begins at birth, as outbreathing ends at death. Every inbreath forms a nourishment and a containment, and builds a charge. Every outbreath provides expression, release, and some level of letting go and discharge, strong or gentle.

Some people emphasise their inbreath more then their out breath: they are containers or withholders. Others emphasise the outbreath more, they are expressers, releasers or dischargers. The spectrum of contain and release is one of the most basic rhythms of our lives. There is a relationship between the pulsation of breathing and each of the preceding paried motor field, particularly the first four. If one alternates movements of flexion and extension, opening and closing in any joints of the body, with synchronisation in of the breath rhythm,
we have a process of coordination. This coordination is able in micro movements of the spine which take place in relaxed breathing, if a person is tense or sluggish this coordination may be interrupted.

If the therapist encourages or induces a rhythm of opening and closing, for example the legs or arms, in synchrony with the breath, there are two ways of creating this coordination: we can call this the containment stroke and the release stroke.

In the containment stroke we move out and breathe in, extending the arms or legs on the inspiration. In the release stroke we move out, and breathe out, extending the limbs on the expiration. The former builds boundaries and contains charge: it is helpful in states of fear or weakness. The second pattern is helpful in states of tension or blockage: it helps to open boundaries and expression, emotion and charge.

**Conclusion**

The motoric fields work with the soul of the muscle. They express patterns of latent intentionality. They form the bedrock of the affecto-motoric schemas so basic to development. They join movement to breathing, and movement to feeling, and can be used to construct a new body image reflecting the potentiality, for adaptive response to environmental stress, and for experiencing the joy of living. They are the heart of our non-verbal communication, our system of soma semantics, which we can disregard at our peril, for they account for around 80 percent of our signalling in all face to face relationships.

**References**


**Biography**

**David Boadella** (born 1931), B.A., M.Ed., D.Sc.hon, Psychotherapist SPV, UKCP and ECP. Studied education, literature and psychology. Trained in character-analytic vegetotherapy. Founder of Biosynthesis. He has spent many years in psychotherapeutic practice. He holds lectures worldwide, and is the author of numerous books and articles. He has been publishing the journal "Energy & Character" since 1970. In 1995 he was awarded an honorary doctorate from the "Open International University of Complementary Medicine". A selection of David Boadella's books: "Befreite Lebensenergie / Lifstream" (Kösel / Routledge), "Wilhelm Reich: The evolution of his work" (Arkana).
The United States Association for Body Psychotherapy

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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.

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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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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 inter-disciplinary exchange with related fields of clinical practice and inquiry.

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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.

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