Somatic Psychology: A Movement towards body centered Psychotherapy

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Based on the empirically supported premise that the body, mind and spirit are interconnected, the American Dance Therapy Association defines dance/movement therapy as the psychotherapeutic use of movement to further the emotional, cognitive, physical and social integration of the individual.
Dance/movement therapy is:

- Focused on movement behavior as it emerges in the therapeutic relationship.
- Expressive, communicative, and adaptive behaviors are all considered for group and individual treatment.
- Body movement, as the core component of dance, simultaneously provides the means of assessment and the mode of intervention for dance/movement therapy.
- Is practiced in mental health, rehabilitation, medical, educational and forensic settings.
- Is effective for individuals with developmental, medical, social, physical and psychological impairments.
- Is used with people of all ages, races and ethnic backgrounds in individual, couples, family and group therapy formats.
Disordered Eating: Movement Away From the Body;

Dance Movement Therapy: Movement Towards the Body

A Manual About Reclaiming the Body For Women with Eating, Food, or Body Image Issues.
This manual looks at how dance movement therapy assists disordered eating individuals in reclaiming their disowned physical selves. The exercises in the manual are examples of dance movement therapy techniques for the use of people struggling with eating and/or body issues.

This manual focuses on the strengths and healing capabilities within individuals who struggle with food and body image issues. It looks at how we are disconnected from our body, and how body centered techniques can reconnect us with our body. By reconnecting with our body we can confront issues surrounding food and eating; creating a healthier, stronger, and more realistic relationship to ourselves.

In addition to the exercises provided, there is also information about how developmental issues and the family system relate to disordered eating.
Goals:

- Bring awareness to the body
- Connect body and mind
- Work with individuals as a whole person
- Have additional enhanced interventions.
- Shift dysfunction in the body
- Let go of unhealthy patterns
Body Memory: Where do you feel that in your body?

- Everyone has a Body and Body memory
- The Body is key to the therapeutic process as it is a guide and tool to recovery
- The Body has a wealth of knowledge.
Getting started: Experiential

1) Bringing Awareness to the Body: How do we do this? Focus on a sensation. Where do you feel certain emotions in the body?

2) Breath Work: Breathing fully, using out breath to move forward, using our breath to tolerate pain or uncomfortable feelings in the body
Dr. Spock: From infancy our experiences are reflected by others. As infants we could not choose how people related to us and our bodies. Decisions about eating schedules, the environment we lived in, and how others responded to us, were for the most part made by our caregivers.

We intrinsically know what we need but this can shift as we develop. Sometimes we need support returning to our intrinsic selves.
Video of CNN Turks
Modern Dans
(Baby modern dance.)
As a clinician you are noticing and witnessing gestures, breath, and movement patterns.
Developing A Clear Sense of Self:

- Relationships with others are affected by the patterns formed during early development as well, in that we have a difficult time trusting our ability to self-soothe. The abilities to self-soothe involve validating your own experiences and accepting yourself even when others may not. Dr. David Schnarch in his book *Passionate Marriage* uses the term “differentiation” as the key to self-validation. Differentiation includes being able to develop a clear sense of self while in relationship to significant others. For example, modulating one’s own anxiety, not becoming infected with others’ anxiety, and being able to tolerate pain (as well as joy) for growth, (Schnarch, 1997).
Experientials

- Contact fusion and isolation
- Importance of Touch Starts with individual
- Personal Bubble
Karen: Dyad #1

- Karen is a 54 year old single female diagnosed with 296.40 - BIPOLAR I DISORDER, MOST RECENT/CURRENT EPISODE and 309.81 Prolonged PTSD, 307.50 Eating Dis Unspecified.
Jessica: Dyad #2

- Jessica is a 34 year old 303.90 - OTH UNSPEC ALCOHOL DEPENDENCE, UNSPEC DRINKING BEHAVIOR, 311 - DEPRESSIVE DISORDER, OTHER, and 307.1 - ANOREXIA NERVOSA
A movement away from the body

- Depression: Abandonment of the Self
- Disassociation from the Body
- Substance Use
- Disordered Eating
On a movement level, characteristics are indicative of a lack of sense of center, lack of flow, and a distorted sense of time, space, and weight. Stark (1985) in an article by Holly Burn says, “Anorectics indicate the conspicuous lack of a fully developed range of efforts, with bound flow, passive use of weight, and urgent time being the predominant qualities.” (Burn, 1987 p. 58)

Looking at each one of these characteristics is helpful in noticing how those of us who struggle with disordered eating are similar in our own bodies. Lack of flow, is the same as saying that movements are bound and controlled. The body is not allowed to move or express fully and spontaneously. Movements which correlate to space, weight, and time for anorexics can include: minimal or no ability to reach or receive (space), lack of gestures to one’s own body (space), little or light use of weight effort, decrease in presentation of grounding, difficulty in being vertical, minimal eye contact, minimal or no transitions present (time), minimal presentation of boundaries (space), urgency in use of time effort...(Rieder, 1994 p.115) Overall, movements seem to be tight, bound, pulled in, and controlled.
Body and movement correlation’s of bulimia can include: strong eye contact, decrease in spontaneity, decrease in expressive movement, indirect use of space, sustained movement, sporadic stop and go movements, torso lacks full movement, and bound tension flow in face and jaw..., (Rieder, 1994 p. 117).

Lacking in a sense of center is associated with feelings of not having anywhere in the body as a point of reference. When we have a sense of center, we can locate ourselves in our body, and we can turn to the body as something that is stable and grounded.
A Movement Towards the Body

- Bringing all the parts of ourselves together; seeing the interconnectedness of who we are, that we are a whole being, and that there is cohesiveness in our body. It is also about recognizing and moving with those parts of ourselves that are not strictly about our outward appearance, but also our internal selves such as our emotions, creativity, and passion.
Brainstorm and Sharing ideas on how to integrate body centered approaches in therapeutic work.
Benefits of Expressive Therapies:

- Being in the Present Moment-Not Re-traumatizing
- Shifts experiences on a cellular level
- Re-patterning of the brain and body system
- Releases what is being held in the Body, opening space for health
- Allows for Expression and taps in to a wealth of self knowledge/person insight
- Accesses unconscious material
Individual versus group sessions using body centered approaches
Each Week:

- There will be a beginning, middle, and end.
- Group agreements
- Hold the container/Space = Metaphor for Self
- Breath Work is the Key!!!
- Allowing creative process to unfold naturally
Relating to your body from a place of love

- Your experience in your body, whatever it may be, is your own individual truth.

- Explore and discover from moment to moment through writing, art, music, drama....but remember “your body is always with you. It is home.” CZ
Questions???