

Glyn Seaborn-Jones

Interviewed by
June Posey

I have the impression that you anticipate typical phases in your work, in Intensive Rhythm Therapy. Would you like to outline the process and typify phases?

In the beginning I interview and decide whether or not the person should be advised to start. I advise many against it. Those who cannot or are not prepared to spend at least two years available in London. In rare cases I take on people who are living in other countries on condition that they will fly over regularly. There are some people who have a belief in a miracle cure of three weeks, and no matter how much you tell them this is only the launching period - its only a matter of putting the therapy onto a deeper level, they will still be convinced of a three week miracle. So they will agree to the therapy and after the three week period they will say I'm cured or I'm disappointed. But this is ridiculous and I try to make it clear that if anyone is not prepared to commit himself for the two years then I don't want to start. I want to take responsibility for what happens. I don't want to go into some quick intervention which, whatever happens, is to my mind irresponsible. Usually there is a whole flood of insights during the three-week period because all the confusing influences which support repression are just taken away. They are confronted with themselves. Sometimes you get a very dramatic change, particularly with young people, just after the three-week period. There is an immense break-through. Sometimes it comes a bit later. The three-week isolation period or launching period now comes in the middle of the process. I have a certain number of individual sessions first, preparatory work to make absolutely sure about the relationship, to make sure I want to work with the client. So the general pattern is of individual sessions for six to twelve months; three week and then group and individual sessions for at least a year, and then gradual phasing out of professional therapy and the phasing in of Reciprocity; the establishing of relationships which will continue the work *without* professional therapy, which is a *very* important thing in my mind and something in which I think I am unique in this part of the therapy - to phase *out* the therapy - I feel now that this is absolutely essential, really important. Because if you think that the end of therapy is the end of the process which has been started by therapy, you either postpone it indefinitely, or you think 'my God! That is the end of that. I've got to go back to being blocked.' Both of these alternatives are disastrous, to my mind.

I get the impression that you do regard what you do just by the name alone, Intensive Rhythm Therapy, as Therapy?

I regard it as a form of therapy. What I consider to be therapy is a situation where a professional person undertakes responsibility, which means that he is going to over-ride his sudden desire to shoot off for two years in India or whatever he wants to do, because he has a professional undertaking to carry somebody through to a certain

point. I believe that the playing down of therapy is a very dangerous thing, especially in the Humanistic Psychology Movement, where I think it is so easy to take a big stick to the whole movement and say 'Is it responsible?' There are people picking up weekends here and there. They are getting a birth here and a little of this somewhere else, 'so and so will be coming back from America in the Autumn. I must book for that'. It takes a long time to establish my kind of trust. One of the main things I hear in the early stages of therapy is 'I don't know whether I can trust you'.

In what ways would you like to see people in the field of Humanistic Psychology taking more responsibility?

Well, there are various ways which I have learned painfully over a long period of time about taking responsibility. One, is one has to learn one should not take on too much. If anyone is really in demand and really knows his job, and can have big dramatic effects on people in a short space of time, there is a great temptation to give a lot of sessions, to give a lot of groups, to give training groups all over the place, and to make commitments which start building up resentment in the therapist which the therapist does not express. Now, the only way the therapist who does not express his resentment is going to get it out by dropping the baby on its head and saying 'I've had enough of you, you little brat!' Or at least admitting to himself that he really does have this impulse, and finding other ways of working on that.

Therapists have to work on themselves?

They have to work on themselves. And I have been working continuously - I've never stopped, not for one semester, not at all, which means that my efficiency is constantly being reduced. Because I'm going to be very inefficient for at least a week afterwards. Forget things. But I won't miss any appointments, except in very rare circumstances.

Do you think it is a necessary part of being a responsible therapist, to keep working on yourself?

I think it is. And also to be able to express resentment, because the worst thing I've ever seen in the Humanistic Psychology Movement is people giving out this love, love, love and then disappearing to escape from this awful screaming nursery, where these babies are, and the babies go on screaming, but the doctors run away.

How then do you think therapists should deal with this problem of frustration and resentment?

To express it and not to permit themselves to work in such a way that they are going to build up resentment. I've worked out how many people I'm able to see in a week without really growing to hate them. Or thinking 'Oh God! I don't want to take a group this evening.' I was taking three groups a week, and a whole load of sessions, plus the Intensive Period, plus weekends, plus a training group in Paris, and so on, and it was crazy! And I didn't fully realise. I thought: some people do an eight hour day,

some people do a ten hour day, what's the matter with me? But its not that kind of work. Its an involvement which means that all sorts of things may be re-stimulated, you may feel that you have to hold back your feelings because the person is in a very delicate place. It is only recently that I have become aware of the damage I was doing to myself, particularly in exposing myself as you have to do, to immense hatred, it doesn't matter that it's transferred from parents, you still get screamed at. And a therapist is like a plant. It doesn't matter who is screaming for whatever reason - the plant withers.

Do you express your resentment to your clients, or do you keep it and dump it somewhere else?

Both. I mean, last night I had a group which were very very blocked and were getting very near to expressing something and then using tricks to hold it back and drive people up the wall. Then I said 'I've picked up so much tension this evening I'm just going to let some of it out' and I got on the mattress and kicked and screamed and howled and schocked some of them, because this particular group hadn't seen quite such a demonstration before. And then I got up and said 'You've got a wonderful technique for driving people up the wall, you're driving me up the wall', and let it all out. And someone afterwards said 'I'm very glad you expressed *my* resentment. I was absolutely at boiling point.'

How far back do you think the foetus is conscious?

Well, according to my experience - I have always hesitated to talk about this - I have definitely had an experience which I can only explain as the experience of a spermatozoon swimming through some fluid and coming up against a soft resistance and pushing right into it with the head first relaxing and then the shoulders and then right through the body and eventually only the feet swimming. And then the feet going quiet. And I was in. And it was bliss and it was one of the most blissful experiences of my life. Well, that really sounds very far-fetched because when I thought about it, I objected: I'm not a spermatozoon, I'm the result of the fusion of a spermatazoon with an ovum'. And so you have the problem about what 'I' means. But ther's no doubt about the experience, whatever the explanation, and no doubt that the whole womb life is psychologically recorded, including all the shocks that may happen in the womb. But the only experience of womb life that I have had before the trauma of birth were completly blissful - absolute perfect peace. No problem, no effort, nothing at all. And no awareness of anything lacking or missing. And certainly no sense of being imprisoned, because you have no experience of what it is like not to be enfolded. There is nothing that one's adult mind might associate with, and find to be uncomfortable or distressing. There is no distress at all. And that is why I have this feeling that perhaps the whole of our conscious lives on this planet are a kind of anti-climax after the good months in the womb. I think that what is sometimes referred to as a death wish is not really a death wish at all - it's a womb wish! This is the core of the theory I am now working on.

I'm hoping to shift the emphasis now from re-living the birth trauma to re-living the birth experience, from re-living Pain (Janov) to re-living bliss. In other words, if people realise vividly enough that its possible to re-capture not only the pain of birth, but also the bliss of pre-birth here will be an experience where people can gather strength for the pain of re-birth. They had all that strength from the good womb experience to face this trauma in the first place.

What implications has this for abortion?

I find abortion a very difficult subject. Very difficult indeed. I feel so strongly for the misery of an unwanted child that I find it very hard to condemn a two- or three-month-old foetus to unwanted life. So in some cases I would certainly not be against abortion. Its very difficult to say what child is wanted and what is not. People have such immense capacity for deceiving themselves, they don't know what they want. A married couple can say 'Oh God! I can't have a baby now: the marriage is on the rocks! We are talking about divorce.' And nobody's going to say whether this is going to precipitate a divorce and precipitate the misery of an unwanted child, or whether its going to be a binding factor and the people can break through into a more realistic conception of the whole relationship. Who is going to look into a crystal ball and say which of these is going to happen? So there are so many questions there that I cannot come out with a simple answer 'Yes, I'm against it,' 'No, I'm not against it', in such and such a category of cases. A large proportion of births are 'accidents', and the difficult judgement is to distinguish between benign and malign accidents.

What do you feel the implications of your work are for the actual child-birth and for child-rearing?

It's all pretty well summed up in *The Continuum Concept*, which is the title of the book by Jean Liedloff, the anthropologist who studied a tribe where the mother maintains physical contact with the baby for the first 9 months, just without any interruption. They sleep together, they do everything together. The baby clings to the mother on her back or on her front. There is no loss of contact. Surprisingly quickly from our point of view, but not when you consider most animals, the child seems to be infinitely more independent than any child brought up in our culture. They can be left at the top of high pits, in dangerous situations. They don't fall in; they don't bruise themselves; they don't fall off things. They have got so much security in the initial phases, of holding and contact and they themselves make the choice towards independence. It's not made for them. Really the basic principle to sum up all my experience of child-birth and child-rearing is that the parents should stop deciding and the baby should do the deciding. If the baby wants to stay in contact, it should stay in contact. But you have to read the message. You have to hear what the baby's saying.

So you feel that the most important thing for a young baby is contact?

It's not as simple as that. Contact when the contact phase is really in force. It can be phased out. But it's being sensitive to what the baby really needs and letting the baby

make the decision. Now quite obviously this is going to conflict with what the baby wants to do if the mother wants to get back to work after three months or if you have a whole system like the Russian system where the mother gets so much time off from work in order to have a baby. You're not going to be able to listen to the baby. So it's not a simple solution which can be adopted by everybody in our present cultures, because our cultures are against it, But we can see quite clearly what is desirable. But it depends really what the culture's all about, and what the philosophy of the culture is. Because if you have non-competitive children which you are likely to have in the kind of environment which gives them what they want, when they want it, then they are going to feel like failures in our culture. They aren't going to get enough O-levels, and A-levels and degrees and jobs and success and all the rest of it. They are going to be failures - or they are going to *consider* themselves failures if they are in a tiny minority with the girls all saying 'I want that success bloke'. He can't make love properly but he has got a wonderful job and he's keen and he's going to be top of his profession.

The next question follows straight on from that. What about the social and political implications of your work? As far as you are concerned, do you just stop with the individual and his growth, or do you see wider implications towards changes in society?

I think one of the greatest problems in this context is the tension between tradition and innovation. Perhaps the most innovative cultures are least traditional. The place that comes immediately to mind is California. Everything is being tried and there's a very exciting community. Now tradition gives a certain stability, just as links with ancestors give stability, and links with parents give a very very serious emotional instability, whatever they've done, hHowever bad they were. can you maintain contact with them? can you establish a new relationship with them? - this is something that comes into the later phase of therapy. When you've expressed your anger and your hatred, can you then go and see your parents, once a month, or once a week, and create a completely different relationship with them? If not, the therapy has not fully succeeded.

What about your work, though, in relation to changing society, in going against tradition?

Well, every individual who has got in touch with his own feeling is going to make changes of some kind. I'm not going to dictate what kind of changes those are. Sometime it means a period of being a drop-out, or giving up, for example, like one of my patients who had university degrees and was qualified to do animal experimentation work and she went into the laboratory looked at the caged dogs, and said 'No I'm not going to do it. I'm going to become a road sweeper', which is what she did. She went out of the laboratory and became a roadsweeper. Now that is a temporary phase because you will almost certainly find something in society which offends your sensibility less than torturing animals and for medical or scientific research. There is no doubt that when people don't feel an enormous compulsion, they find the possibilities much greater. There are a lot of ways of surviving in this

society without becoming a robot.

You are speaking of the individual. I was wondering whether you would like to see changes, because of your work for instance, changes in the way people are educated, changes in the way businesses are organised?

If you spent exactly the same amount of money as you are spending now on the National Health Service and you were going in the opposite direction, you would provide all the facilities for people to release themselves in such a way as to remain sane: even sometimes carrying on their present jobs. They would have an outlet, and the doctors would know what kind of outlet they needed, whether it was talking or screaming or whatever it was, with much less spent than is being now. You could have an extremely good National Health Service! And probably an even less efficient country, because efficiency means the work ethic, compulsive routine and neurotic ambition.

You really believe that?

It has to be a grass roots movement. People saying 'I'm really prepared to go and spend money rather than go and get free treatment because the free treatment is all wrong.' Well, this must make people feel uncomfortable if they are offering something free and people are turning up their noses at it and going somewhere else and paying. They must see there is something wrong somewhere.

You really feel your work has got a direct contribution to make, to physical health?

Definitely yes. The main contribution is as a pilot project. If I tell patients to drop drugs altogether, to refuse to allow their brains to be dulled, excited, shocked with near-lethal electric currents or cut about in operations, and if there is no disaster, and these people learn to express all their feelings without hurting anybody, and they get better and healthier, then I am demonstrating on a small scale what can be done on a larger scale.

And there is also the influence on their friends and their children of all the individuals who do feel different and who are committed to continuing the process for the rest of their lives. Changes from the top, organizational changes, do not always change cultural attitudes.

Is there anything further you'd like to add?

I'd like to say something about the resemblances and differences between my work and the work of others who facilitate primal release.

David Boadella, who writings I like very much, has published three articles on my work in 'Engergy and Character': 'Intensive Rhythm Therapy', January 1975; 'Launching', January 1976; and 'The Flow, the Dam and the Locks', May 1977.

This last article shows pretty clearly where I agree and where I disagree with Janov. Janov's book, 'The Primal Scream' is a very readable best-seller which hits people between the eyes. They say 'That's me! I've got to do something about it.' His writings are so persuasive that many readers accept his views en bloc, uncritically.

I disagree with Janov when he condemns all therapies except his own. Psychoanalysis, Gestalt therapy, bioenergetics, psychodrama, meditation. . . are contemptuously dismissed. I owe a very considerable debt, personally, and theoretically, to all these approaches. If the dogma is thrown out, the insights of the Buddha, Freud, Reich, Rank, Melanie Klein, Winnicott, Kurt Lewin, Perls, Lowen, Moreno, Albert Pesso. . . are all compatible.

I've thrown out a lot of bath water, but I haven't thrown out any babies.

I disagree with Janov's neglect of the transference. When a person turns to another for help with his deepest needs, a transference relationship is inevitable. The transference is either recognised and resolved, or unrecognised and unresolved.

A lot of people are clinging to the false hope that they can get all the benefits of therapy without being dependent on anyone. My personal and clinical experience is that in order to release and connect certain psychobiological levels of the organism one needs to trust a guide. In order to trust, one needs an intimate and reliable relationship.

This becomes so important that there is an element of dependency in it. As the person becomes capable of liberating himself independently, because he has learned what his body needs, what his whole organism needs, a relationship without such intense transference, such as the Reciproport relationship, will replace professional therapy.

It's like the change from 'holding' the baby to 'supporting' the walking toddler.

The neglect or denial of the transference, which is sadly widespread in Humanistic Psychology, leads to another tendency which I reject: the use of a group, not for group interaction but for individual 'primalling' without resolving difficulties in relating to other people. In my view, intrapersonal and interpersonal evolution are perfectly compatible, and should be interwoven.

I disagree with the assumption that 'primalling' in groups makes individual therapy unnecessary. My view is that group and individual sessions are complementary, and different material is dealt with in the two situations.

I disagree with any form of primal therapy which tends to leave people in a 'primal rut'. One lock has been opened, perhaps the Anger Lock, and the dammed-up energy comes pouring out in the form of rage. 'I am now a Feeling Person; I am feeling angry, I demand that you feel angry back; I demand special conditions, special relationships appropriate to a Feeling Person.'

I feel equally uneasy about the denial and about the excessive prolongation of transference relationships, as in psychoanalysis. Reciprocity (reciprocal support) is, I think, the only satisfactory solution. The process of self-release, self-awareness and the building of good-enough relationships can continue indefinitely without paying anyone a fee.

So much for disagreements. I fully agree with Janov about the importance of establishing neural connections throughout the organism. I fully agree with him about the value of isolating the person for three weeks from family, friends, work, alcohol, tobacco and all other drugs, television, radio, reading, writing, the telephone, entertainment...

I agree that the flood of insights which follow reliving core experiences should replace interpretations by the therapists, but I would add two important reservations: interpretations of interpersonal behaviour can be extremely valuable, and questions which the therapist suggests that the person should ask himself play a crucial role in dissolving self-destructive beliefs and idea-systems.

I see the aim of any therapy which includes primal release and the reliving of core experiences (not only traumata) as this: to open up the locks (not holes in the dam) of exuberance, fear, joy, anger, laughter, grief; to enable the person to relive the bliss of good experiences; and to drain away the reservoir of Fear (the continuum of conscious and unconscious fear, which is explained in my book 'Treatment or Torture').

As irrational Fear dissolves, so 'problems' fade away.

NEXT MONTH

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The age of Aquarius - some thoughts on where the Growth Movement is heading by Peggy Thornborough.
