## Self SOCIETY

Reviews

**Contemporary Body Psychotherapy** Edited by Linda Hartley Routledge, 2008, £19.99, 254 pp.

Ever since I first encountered body psychotherapy – in 1975 I think – it has been described as being 'on the edge of a breakthrough'; that breakthrough being acceptance by the mainstream psychotherapy and possibly the medical establishment. Not that body psychotherapy isn't accepted at all. Far from it. Professional bodies such as AHPP have specific categories for body psychotherapy, but it just doesn't, in terms of the numbers of practitioners, seem to have taken off, especially in the public sector.

One conclusion I'm tempted to draw is that 'on the edge' is an appropriate place for body psychotherapy to be, where it can live in a perpetual state of revolution rather than being absorbed into an establishment where its principles would become rigidified and 'health and safety'd' into a pale imitation of the powerful psychotherapeutic approach that it actually is.

Contemporary Body Psychotherapy chronicles the history and theoretical breadth of the Chiron Centre, which has struggled (I use this word to recognise, rather than to denigrate, the commitment of those involved), since the early 1980s, to remain a lively and vibrant training organisation in the field. This stands in contrast to other Reichian organisations, such as a certain American college, which seem to believe that Reich's work was frozen in 1957 and that anyone who doesn't practice according to the principles which were laid down in that era is not worthy to use Reich's name, which they seem to have turned into some kind of trademark to describe their

I was particularly pleased to come across this account of the work of the Chiron Centre since, as someone who was involved in body psychotherapy for more than a decade (between 1975 and 1987), I was interested to see how contemporary psychotherapeutic thinking had been absorbed into the bodywork approach.

Contemporary Body Psychotherapy is edited by Linda Hartley, who is herself a trained and experienced body psychotherapist. Unusually, she doesn't merely 'top and tail' the book, but interpolates the various topics with an appropriate introductory section.

One of the characteristics of the Chiron Approach is diversity and this is evidenced in this book, containing, as it does, chapters on subjects ranging from EMDR to the political implications of body psychotherapy. The book is divided into two main parts, 'Development of Core Principles' and 'New Directions and Applications'. In his first chapter, 'The roots and development of the Chiron approach' Bernd Eiden traces both the personal history of the founding and development of the Chiron Centre and the development of body psychotherapy from the work of Wilhelm Reich. This chapter was worth reading for the insight into the development of body psychotherapy since the 1980s alone, but it also gives a clue as to the thinking which has been involved in the continuation of the Centre as a leading edge training institution. The contradictions around the use of touch are explored (they also feature in later chapters) without being resolved. I like that.

The next chapter, by Monika Schaible, gives a succinct introduction to Biodynamic Massage, followed by a description of how it was integrated into the Chiron approach. Gestalt therapy is often seen as a verbal exchange, perhaps with some use of different positions as in the empty chair technique. However, there can be a considerable amount of bodywork in Gestalt, particularly as regards the use of sensory awareness as a tool in applying the phenomenological method. It isn't, then, surprising to find a chapter on Gestalt body psychotherapy in this book.

The next four chapters are grouped under the overall heading of 'The Crucible' and explore the development of the core principles of the Chiron approach. Michael Soth's chapter, 'From humanistic holism via the "integrative project" towards integral-relational body psychotherapy' is a tour de force. It charts not only the development of the Chiron approach, but also the development of contemporary thinking and, most of all, the author's personal development. I appreciated not only the helpful diagrams, but also Michael Soth's ability to be up front with his own vulnerability.

Self-regulation was one of the controversial aspects of Reich's work and it is inevitable that, with the integration of some of the other models of therapy, most notably object relations, into the Chiron approach, some re-working of this principle would have to take place. In the next chapter, Roz Carroll gives an account of that re-working, drawing on the neuroscientific contributions of Allan Schore to the attachment theory perspective. I would rather have heard more about the struggle that letting go of, or at least modifying, one of Reich's cherished beliefs must have entailed at Chiron than Roz Carroll's carefully worded illustrations, but perhaps this is because the former would have spoken to the wounded healer in me.

The use of touch in therapy is also a controversial component of Reichian work, although Freud, in his early work with Breuer, used touch as a matter of course. What I like about Shoshi Asheri's sensitive exploration of this subject is that, even though she does

resolve the question by the use of the set of principles with which she ends the chapter, she does not pretend that the answer to the 'to touch or not to touch?' question is in any way easy and straightforward.

Carmen Joanne Ablack's chapter, 'The body-mind dynamics of working with diversity', which concludes part 1 of the book, offers a deeper perspective on the subject of diversity than some of the more 'politically correct' versions I come across. I suppose I would expect no less of someone who works at a body level and who validates not only her clients' but also her own felt sense of the experience of difference.

The neuroscientist in me really appreciated the next chapter by Kathrin Stauffer on the use of neuroscience in body psychotherapy. One of the key things my own venture into the life sciences (which, unlike Kathrin Stauffer, I made after I had trained as a body psychotherapist) taught me, was a healthy respect for the limitations of science and the importance of caution in interpreting the results. It is tempting to use neuroscience to counteract the cynicism of, for example, the medical profession's approach to psychotherapy, but this is dangerous and misleading. As Kathrin Stauffer puts it:

My thesis is fairly simple: as a psychotherapist, I regard neuroscientific information as an interpretation, and I would attempt to make use of it in the same way, and according to the same considerations, as any other interpretation.

'Working with psychosomatic distress', the title of the next chapter, raises familiar dilemmas for most body psychotherapists. On the one hand, most of us firmly believe in the connection between emotional distress and physical illness or symptoms, but, on the other, few of us would want to be seen to blame the client for the physical symptoms he or she is experiencing. I like the way Margaret Landale places an emphasis on containing the distress before opening up the more psychotherapeutic aspects of her clients condition.

Using body psychotherapy with a disabled client shouldn't be unusual or surprising, but, back in the 80s, it didn't feature as part of my training. It was good to read the exploration which Anne Marie Keary made of the subject in the chapter which follows. It is also challenging to be confronted with the issues which are raised in working with the disabled body using a body orientated approach.

The use of body psychotherapy with victims of trauma is well documented in Babette Rothschild's work and the application of EMDR to sufferers of Post Traumatic Stress Disorder is also familiar. What I missed in the chapter, by Morit Heitzler, was some indication of how the contradictions between the essentially humanistic approach of the Chiron Centre and the quasi-scientific approach of EMDR were addressed. I felt similarly about the next chapter by Tom Warnecke on 'The borderline relationship'. The chapter itself contained much useful information, but I was interested to hear how it did, or didn't perhaps, fit into the Chiron approach.

Jane Clark, in her chapter on working with abuse using body psychotherapy, does address some important contradictions for body psychotherapists in working with this client group. I like the whole idea of 'the abuser in the abused' as a way of making sense of the therapist-client dynamic and Jane Clark explores the possible pitfalls in working at depth with victims of abuse in a realistic and believable manner.

Whilst Reich is best known as one of the pioneers of body psychotherapy, it must also be remembered that he brought politics into the analytic world as well. It is therefore fitting that the book closes with a chapter entitled 'Body psychotherapy, social theory, Marxism and civil war'. In this chapter, John Waterston presents an interesting political perspective on the development of psychodynamic thought followed by an account of the possibilities and contradictions of using body psychotherapy in an ex-communist state, Yugoslavia. Although he makes no reference to the conflict that developed in this 'state' after the fall of Tito, this chapter is well worth reading.

I found *Contemporary Body Psychotherapy* a rewarding book to read, reminding me, as it did, of my own origins as a body psychotherapist and suggesting some directions I could have followed, but didn't, in my subsequent career. It will also be useful to anyone interested in body psychotherapy and interesting to anyone involved in psychotherapy training and development.

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Christianity and the Doctrine of Non-Dualism By A Monk of the West, translated by Alvin Moore Jr. and Marie M. Hansen, Sophia Perennis, 2004, £9.95, 148 pp.

As for ourself, we will say unequivocally that after more than forty years of intellectual reflection on this doctrine, having allowed it to impregnate us more and more profoundly, we have found nothing that has seemed incompatible with our full and complete faith in the Christian Revelation.

A Monk of the West

This semi-anonymous work was written by 'A Monk of the West' (Alphonse Levée), a French Cistercian monk who, at the young age of twenty, found a copy of fellow countryman René Guénon's *Orient et Occident (East and West)* in a second-hand book stall while he was posted in Asia. This event had a tremendous impact that endured for the rest of his life and was instrumental in his decision to take up

the monastic vocation. It was in the discovery of this work by perennialist author René Guénon that 'A Monk of the West' found an integral metaphysical doctrine that was universal in its principles, known in the West as the *philosophia perennis* - perennial philosophy. The metaphysical 'doctrine of non-dualism' (advaita-vâda) is not exclusive to Hinduism (sanâtana dharma) alone but is also present in Buddhism, Taoism, Judaism, Christianity and Islam. It is in this universal light that Christianity and the Doctrine of Non-Dualism was articulated.

Though this book on 'Christian Vedanta' is modest in its length, it is dense in its scope and reflection. The book begins with a thorough and insightful Preface by the late perennialist Alvin Moore, Jr. (1923-2005). The work consists of eight chapters and a Forward: 'Philosophical Monism and Non-Dualism', 'I am Brahma', 'In All Things Like Unto Men', 'Without Me You Can Do Nothing', 'Who am I?', 'I am not the Christ', 'East and West' and the Conclusion.

In the first chapter the author makes important distinctions that are often confused in our current era: non-dualism is neither pantheism nor monism - the soul is not the Self or again the Self (Atma) is not the human soul (jivâtmâ). In the following chapter the author makes it clear that the human individual as an empirical 'ego' or 'I' is not a finality unto itself. It is not until a re-integration (samskarana) with what is Transcendent (supra-individual) that true identity can exist, for there is no true identity save in God, because God alone is Identity. The author continues to clarify this idea in chapter five - 'Who am I?' - when he quotes from a traditional Hindu aphorism, the I is mâyâ and the not-I is Brahman. Without this total dis-identification from the 'ego' or 'I', writes the author in chapter six, it is impossible for the re-integration with the Self (Âtmâ) to occur, let alone the identification with the Supreme Identity (Tawhîd) or the Supreme Self (Paramâtmâ). In the same chapter the author clarifies the modern misunderstanding of reincarnation, In reality, the reincarnationist illusion has its root in a confusion of the psychic and the spiritual. This perspective is in accordance with Adi Úankarâchârya's dictum, 'In truth, there is no other transmigrant but the Lord', categorically denying the possibility of the human individual reincarnating per se.

In closing I would like to note that there is great merit in this work as a support in facilitating once again the expression of non-dualism (advaita) within the Christian milieu, as this doctrine once did in the West. This book could also broaden the current understanding and outlook of the Christian tradition which has become more and more eclipsed in the present era due to modernity and post-modernity's indefinite trend toward 'progress' and secularization that radically contrasts from earlier epochs that were firmly rooted in the sacred. Such a perspective is polarized either to discredit the Christian tradition altogether believing that it has somehow failed the sapiential masses or to provoke fundamentalism asserting a pseudo-monopoly on truth itself - blinded by the assumption that the only authentic religion is

Christianity, *ipso facto* negating the possibility of all other spiritual traditions as 'paths that lead to the same summit'. Beyond such polarities the reader will be pleased to find that this book fosters religious pluralism, tolerance, inquiry and dialogue from a non-reductionistic point of view and yet simultaneously acknowledges the 'transcendent unity of religions.'

Samuel Bendeck Sotillos

Cognitive Behaviour Therapy: A Practical Guide to Helping People Take Control By Danny C.K. Lam Routledge, 2008, £19.99, 234 pp.

At the present time, when CBT is the psychological therapy of choice, some would say the only psychological therapy, recommended by NICE; when every training institution with an eye to the main chance is offering a CBT course; and when even the most solidly psychodynamic organisations such as WPF and the Tavistock seem to be leaping precipitately aboard the band-wagon, one can be forgiven, as a Humanistic practitioner, for becoming somewhat cynical. However, in these 'interesting' times, to quote the ancient Chinese curse, a practitioner trying to make a living is apt to find him or herself with some strange bedfellows. I was certainly aware of this as I read *Cognitive Behavioural Therapy* by Danny C.K. Lam.

What I find attractive about Danny Lam's approach to psychological distress is his vehement opposition to the disease/genetic model. He also, perhaps because he doesn't embrace the notion of mental 'illness', doesn't regard the techniques of Cognitive Behavioural Therapy as a cure. This is CBT I can live with; and with which, as a trainer working within an NHS context, I arguably must.

The preface to *Cognitive Behavioural Therapy*, written by Paul Salkovskis, addresses one of the book's premises – the mixed blessing of diagnosis and labelling. Interestingly, Professor Salkovskis' preface reminds me of the 'line' developed in the last quarter of the 20<sup>th</sup> Century whereby mental illness was seen as equivalent to physical illness in order, it was said, to lessen the stigma attached to the former. He draws attention to the fact that such 'lines' were promulgated by drug companies in the form of mental health campaigns. They seem to be less visible these days!

In his first chapter, Danny Lam addresses the issue of stigma head on, starting with a brief account of the research which, disturbingly, suggests that public attitudes towards, and perceptions of, people with mental 'illness' are, if anything, getting worse. What he is most concerned with is the effect of this stigma on the client's self-perception and on the efficacy of any therapeutic work with that client. In other words, the client's self-diagnosis, which is usually internalised from the 'unproven idea of mental illness being a disease of the brain, genetic or caused by chemical imbalances in the brain' may at first be a relief from blame, but ultimately leads to passivity,

particularly in terms of whatever psychological therapy is offered to the client.

Danny Lam's second chapter looks at the biological and genetic explanations of mental illness and will be fairly familiar to most humanistic thinkers, citing, as it does, the role of drug companies, the health establishment and political institutions in disseminating such explanations of psychological distress. He also refers to the (unwitting) complicity of some of the mental health campaigning groups in supporting the biological/genetic stance. He accepts that the goal of such groups is to support individuals who are suffering from psychological distress and to shield them from accusations of being to blame for their own condition, being lazy, self-indulgent etc. However, he also points out the down-side of the biological/genetic stance, which is that it turns people suffering from psychological distress into **Victims**.

In most of the chapters of this book, Danny Lam focuses on the clinical significance of the chapter's topic. So, in this chapter, he highlights the effect of focussing on biological/genetic explanations of mental illness on clients' attitudes towards their treatment. Research suggests that this effect may be to induce pessimism in clients with respect to their treatment. Lam maintains a structured approach to his topic and each chapter has a section headed 'Cognitive behaviour approach to...' a section describing a particularly useful technique for dealing with, in this case, a client who believes that all of her problems are attributable to a 'diseased brain', and 'Notes for therapists about...'

Chapter 3 is headed 'Prejudice, discrimination and "mental illness". It's very useful because it identifies how a client's 'symptoms' can be exacerbated by society's response to them. Danny Lam identifies the efficacy of not only supporting clients in dealing with the inevitable setbacks which accompany prejudice and discrimination, but the role of the client's own self-perception in the extent to which prejudice and discrimination impact on him/her.

Part II of *Cognitive Behavioural Therapy* is entitled 'Therapist's Perspective' and its first chapter focuses on the attribution of 'emotional upset' to external causes and the definition of emotional health as the absence of upset. The second chapter of Part II looks at the components in cognitive behavioural therapy. This is familiar stuff to anyone who has read the basics of CBT, which, as I say, most of us have if we are involved in teaching integrative programmes. Other familiar techniques of cognitive behavioural therapy are explored in subsequent chapters, all of which are potentially useful to any practitioner, especially those undertaking short-term work in the public sector. It has to be said though, that the techniques are explained in a very practical format and will be useful to those who wish to incorporate them into an existing repertoire of techniques.

Chapter 10 of the book deals with the interface between CBT and drug therapy. This is interesting because although, as I've said, Danny Lam is opposed to the biological model of psychological distress, he accepts that many clients seen in publicly funded environments will inevitably be receiving pharmacological treatment as well as talking therapy and that to set up a split between the two would not be in the interest of either the client or their recovery. He therefore acknowledges the necessity and desirability, in some cases, of pharmacological treatment as part of a 'two pronged' approach in conjunction with CBT, placing particular emphasis on supporting clients in not seeing drug treatment as a weakness or an indulgence.

The chapters unfold in a fairly predictable manner, dealing with the various aspects of the treatment of psychological distress, whatever the model involved, such as 'Perfectionism and competitiveness', working with 'negative emotions' etc. It's all good stuff, with plenty of practical examples and giving a good foundation for working efficiently with clients presenting with a wide variety of symptoms and responses to treatment. However, as you read through the chapters and particularly the case illustrations, the cynicism inevitably reasserts itself. One thing I have a problem with, as an experienced practitioner, is the simplistic approach to the setbacks which occur in the therapy. The overall thrust seems to be in the direction of 'persuading the client that their thinking is Wrong, with a capital 'W'. There are times, for instance, when inviting the client to consider his/her fear of a particular consequence, say acute embarrassment, in relation to the possibility of their child being killed or of suffering from a permanent disability themselves may have the effect of putting that fear into a realistic context, but I can't believe that this always works in the way Danny Lam suggests that it can.

I'm grateful to Danny Lam for illustrating 'Socratic Questioning', a well established CBT technique, in a way that equates with my previous understanding of the Ancient Greek philosophical/rhetorical technique, whereby the proponent of a hypothesis could win an argument by forcing their opponent to either agree with the hypothesis or to make a fool of themselves by seeming to support an absurd alternative. However, I would feel rather uncomfortable adopting such a stance myself in relation to another human being's psychological distress and I'm doubtful as to its long-term efficacy in the face of ingrained patterns of distress.

This book on CBT is certainly worth reading, as much for its opposition to the biological/genetic model as for anything else, and it gives a succinct account of this way of working which is perhaps just as useful as the undertaking of an expensive 'top-up' training which is being offered extensively in response to the current therapeutic climate! Danny Lam is to be congratulated and supported in the boldness of his approach and the realistic parameters within which he explores this therapeutic method.