

Touch in a time of Regulation

Tree Staunton

Imagine a government that trusted the people who elected it. Imagine agencies of the state that regarded the people's privacy as something it was the state's duty to guard...and their freedom to speak and write as they like.....imagine a nation that cherished these things as a kind of natural blessing, something obviously good that needed no justification, something like sunshine or kindness or clean water. Or honour.

We are a better people than our government believes we are; we are a better nation.

Philip Pullman on 'The Virtues Of The State'

When I was approached to guest edit this issue, the title that immediately sprung to mind was 'Touch in a Time of Regulation'. I think this may be because historically touch has been a contentious issue in the world of psychotherapy, dogged by notions of transgression and allegations of unprofessional boundaries. With the spectre of State regulation approaching, it is likely that all our old fears and fantasies of persecution and exclusion will resurface, and we might be forgiven for equating the State with our own Superego.

As the writers in this issue emphasise it is our capacity as psychotherapists to touch our clients which allows us to impact and make a meaningful relationship with them through which to facilitate growth and change. Yet it is our capacity to

touch our clients in that part of them that is necessarily outlawed – the unconscious – that carries shadows of the transgressive, and indeed some would argue that our work must necessarily be transgressive to be effective. (see Robert Stein 1998)

As body psychotherapists our training includes an experiential and theoretical understanding of the use of touch. Two of the body psychotherapists writing in this edition call for clear contracting and a coherent theoretical underpinning to the use of touch in psychotherapy, whilst a third highlights the danger of 'risk avoidance' clouding clinical judgement. However as David Mazure illustrates, many humanistic psychotherapists value the use of touch relationally, outside of these guidelines.

But in this time of regulation, as we define what it is we do, will touch itself be outlawed, as it has been in schools and other 'regulated' environments?? Or in our Brave New World, will touch, like other aspects of therapeutic relating, become a 'competency', a 'skill', a technique to be applied with a certain outcome intended, rendering it a flat and useless tool, stripped of its edge, tamed of its therapeutic power and unknown possibility? Will the door be closed before it is half open, for fear of misunderstanding or worse - a bureaucratic complaints process?



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On one side of the regulation 'debate' we seem to have been in fear of some sort of 'ossification' or deadening of the real 'edge' to what we do, a civilised - or medicalised - veneer descending, altogether losing the authenticity we hold most precious in our work. At times it appears almost as a human rights issue - our freedom of expression is threatened. Those fighting within to establish a realistic framework can be seen as collaborators in the battle against the invading army of civil servants. Joining the freedom fighters might seem the only respectable response for Humanistic psychotherapists.

On the other side of the debate we seem to fear our practice being left out of the public domain, marginalized - and ultimately becoming obsolete. We see regulation as a chance for psychotherapy to come of age, entering the 'real world' rather than remaining on the fringes of society, its very existence threatened. This speaks to the aspect of my work that seeks political and social change as a psychotherapist. A psychotherapy

that remains in its own 'sect' and refuses to be 'everyday' may become irrelevant as the world crisis deepens. We need to appeal to the masses.

Both these positions seek to preserve our body of work, yet are in total opposition to one another in how they see this being effected.

We who cultivate in our work a position of witness, who know only too well how to observe process, and use evaluative, reflective thinking, seem to be caught in a strong polarisation, a strong opposition of ideas. Things are becoming very black and white.

When Declan Kiberd came to talk at a pcsr conference in the early 90s he spoke of that famous feature of the Irish psyche - its ability to embrace 'both...and' rather than 'either...or' such that an Irish woman might go to the doctor and take what he prescribes for an ailment, whilst at the same

time taking herbal remedies and obeying the rituals of folk medicine. The one does not cancel out the other, and perhaps together they can provide a cure.

I wonder if we might take some of this Irish wisdom with us into the current debate. Could we not choose both – our autonomy and a participation in the system? We are tasked to broker a middle ground, to allow a bridge to be built between our ideals and the realities of this world. In my view, the 'touchstone' for this bridge is the body, and the type of consciousness that embodiment engenders. Whilst the mind can polarise, and persuade us that 'they' are against us, that we must resist; or that we are upholding the true nature of the work whilst 'they' seek to undermine it, when we rest in a more embodied consciousness, we can allow the 'both...and'. Body consciousness unites opposites, and as Wilber tells us, it provides the 'ground of being' from which we can hold the mind's dualism.

I would not describe my own position as 'pro-regulation' – my mind can take me in both directions... fear can take hold of me when I hear a 'story' of HPC complaints outcomes.....yet equally mistrust can arise when I sense colleagues' lack of real engagement and hitting out *against*, rather than working *with* others in the field. My idealistic self wants a pure and uncontaminated professional vocation that seeks only 'true' relationship, knowing that the real soul appears in the cracks and at the edges of what the ego decides 'should' happen. Yet, too sometimes I can feel more true

embodiment of our values in the willingness to meet and explain and discuss with the government 'bodies' – and perhaps touch them with the meaning of our work.

Our therapeutic understanding teaches us that it is not *what* we do but *how* we do it that matters – the study of the *process* of things is central to our endeavour. So what has informed my thinking in this debate has been an appreciation of 'groundedness' and a capacity to listen with a felt sense, and a holding of the complexities, of the grey areas, the not black and white... I feel in my own body the 'hardness' or 'openness' in different 'positions' and I am persuaded not so much by the arguments of each side but by the feeling of truth, and the energy of the expression. I can recognize when reason is lost, on one hand or when things are too overly reasoned on the other. When fear is taking hold, or when omnipotence rules. We need to walk our talk.

I do not believe that touching our clients will be outlawed in a regulated profession. Doctors and nurses touch, as do physiotherapists, OTs and osteopaths. Within the medical paradigm, a 'doing / fixing' kind of touch is safe and known, and utterly permissible. Subterraneously it a legitimate answer to the need for care and love when we are sick.

But what I feared might be under threat, partly because it is so much harder to define, is involving the body interactively, in work which emerges from the unknown place that is neither 'you' nor 'I' which we now call

'relational' – the co created third other, which is the relationship itself. Will the 'I-Thou' embodied meeting be lost? As Gill Westland tells us in her article, touch is not a technique, but the invitation to an embodied conversation. It is 'exploratory and contactful' – subject to subject. Of all our forays into this unknown intersubjective territory, physical touch is the most direct, butting right up against the Self boundary, questioning the edge itself, negotiating new territory, or reminding us of the old set terms of engagement.

In raising this question, I decided to find out what National Occupational Standards had been set about working with the body. Many of you will remember that Humanistic and Integrative psychotherapy was originally left out of the Skills for Health project, and we fought a good fight to be defined as a modality in our own right. Here's a couple of NOS from the Humanistic competences that I found interesting and relevant to my enquiry:

Hum 09 Enable the client to understand their relational difficulties through immediate experiences in therapy

2. articulate and explore the thoughts, feelings, intuitions and somatic responses that may arise in you and the client in a minute by minute way

Hum11 Enable the client to become aware of unconscious aspects of their experience

10. draw on your own and the client's embodied experiencing

You can view them at www.skillsforhealth.org.uk/competences/competences-in-development/psychological-therapies. There are many more interesting descriptions which capture aspects of what I consider my practice to include – but nothing specifically related to touch. As Tom Warnecke advocates, we need to develop "explicit guidelines for the use of touch in psychotherapy as a matter of urgency"

Nevertheless these competences are a long way from the original focus on 'mentalization' and I admire all those Humanistic therapists who got in there and rolled their sleeves up so that we have had proper representation. As I understand it these are the criteria and skills that will inform employers and job descriptions though how they will be used I find hard to understand at the moment. However they seem to me to be far more detailed and relationally defining than anything I have seen in the HPC Standards of Proficiency. It has only gradually become clear to me that the proposed HPC Regulation is not intended to proscribe or 'regulate' *what we do* as professionals. The details of what we do will be left to ourselves, and –perhaps unfortunately- these NOS are not intended for use in regulation. The HPC is a broad brush approach, offering a license to practice, and the recent uproar about their proposed Standards of Proficiency was because the broad brush swept us up in their off the shelf set of standards, defining us within a medical model. The proposed changes to these can be seen at www.psychotherapy.org.uk. As



far as I am concerned they are still a work in progress, and we will all be watching closely to see their response, but one of the phrases I like to see repeatedly is 'consistent with chosen theoretical model'.

It is consistent with my chosen theoretical model to work with the body and, where appropriate, to use touch in a relational and considered way. Wilber described how Humanistic therapies address the centaur level of consciousness, and a central tenet is that the psychological life of the body is of paramount importance in the development of consciousness. Neuroscience has backed this up with the knowledge that our right brain functioning is key in the development of a balanced and integrated engagement with the world, and this cannot be achieved without the inclusion of the body. I stand on firm ground in this established tradition.

Twenty five years ago body psychotherapists were not mainstream, and largely considered second rate to psychoanalytic or psychodynamic approaches. We needed to 'justify' our use of touch in the therapeutic relationship. Tricia Scott's article gives some sense of how far we have come. From the early days of cathartic bodywork and emotional discharge as a focus, we have developed deeper and more subtle ways of focussing on body process. Conscious embodiment of the toucher has become as important as the receptivity and readiness of the 'touchee', and the 'space between' the two has offered a meeting point theoretically for psychoanalysis and humanistic approaches. (Stolorow and Atwood, Orange et al) Humanistic philosophy has been almost invisibly absorbed into the mainstream of therapeutic discourse.

I can identify in myself a wish for all this 'State interference' to go away, to let us get on with developing and researching and doing the thing we do best: psychotherapists are not well known for their paperwork and admin skills, and this interface with civil servants has been a steep learning curve. But ignoring it will not make it go away, and everything points to the need for *more* contact with regulators, more dialogue, more understanding rather than a withdrawal because of the clash in paradigms. If we are to refuse or refute any of the current proposals we need to engage intelligently and authoritatively, and not simply turn our backs and stamp our feet. If what James Antrican says is true and

it is 'the only game in town' Humanistic psychotherapists need to be key players rather than bystanders.

Many of us must be wondering who in this world we can trust to lead our profession forward into the next era. I suggest the answer is ourselves. Yes, ourselves - our own gut feelings, our instincts, our embodied thinking and impassioned feeling. We need to nurture Pullman's *virtues that a nation needs in order to be a state fit for human beings to live in* - *Courage,*

intellectual curiosity, modesty and honour.

None of us know what will happen in the next few years. The bigger picture points to huge and dramatic changes in our environment and we face massive losses as a human race. We need to be led by our hearts rather than our heads.¹ We need a kind of embodied politics, where questions are more important than answers; presence is more important than principle; discrimination more important than dogma. We need to stay in touch.

Note ¹ Romanyshyn (2007) calls this *Cardiognosis* - a way of knowing with and through the heart

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Sad news

Vivian Milroy, founder editor of *Self & Society* and a facilitator at the Humanistic Festival in 2007, died peacefully on 2nd September. For more details, contact chair@ahpb.org.uk. Vivian brought such energy to everything he did, and was a wonderful, inspiring presence at our 2007 festival.

If you have photos, memories, or would like to write about Vivian, please get in touch at editor@ahpb.org.uk.