Spring 2006 Issue No. 25

THE UNITED STATES ASSOCIATION FOR BODY PSYCHOTHERAPY

# **Body Mind Psychotherapy and the Emerging Field of Listening Training**

Billie M. Thompson, Ph.D.

The therapeutic uses of sound in the form of music or chant have been known for centuries. The body can feel sounds we cannot even hear, as in a very low frequency bass rhythm. Low frequency sound waves resonate in the lower parts of the body while high frequency sound affects the brain and upper body.



The high overtones of singing Gregorian chant energizes the brain and promotes mental alertness.

Sound can create negative as well as positive effects on the human body. And when music is modified by filters and other special effects by specialists trained to analyze listening strengths and weaknesses of a person and then create a listening program, another level of impact occurs through the new field of sound stimulation listening training.

The field of listening training (using listening technologies) had its start with the work of French Ear-Nose-Throat specialist, Dr. Alfred A. Tomatis (1920 – 2001), whose publications, honors, and patents have been listed in the English translation of his autobiography, The Conscious Ear (1991). A book by Pierre Sollier, Listening for Wellness (2005) won the Independent Publishers award in the field of psychology and mental health and tells about Tomatis's work. Tomatis' theories and method achieved both controversy and acclaim. The Tomatis Method is found in the US in a few private centers.

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# Play Therapy

An Interview with Gloria Robbins. LCSW, BCD



What is the purpose, goal, and value of play therapy for children?

Adults use language to express their thoughts and feelings. Play patterns, behavior, the use of materials, and the quality of the child's relationship with their peers and adults is the language of the child. The quality of the bonding process is an assessment and diagnostic tool that illuminates the child's conflicts. Through this language we learn about the child's unresolved developmental conflicts, fears, their strength and weakness in relating to their object world. Play offers the child opportunities to communicate, organize experience, explore fantasy, express feelings, conflicts, and relate to others. Through play the child expresses traumatic fixations, conflicts and hostilities. The child can use play to disguise genuine conflicts and difficulties, or the child may use play to relax tension and anxiety.

Play is important because it fosters the child's:

- Self determination
- Problem solving ability
- Creative solutions
- Language and communication skills
- Autonomy
- Self esteem
- Confidence
- Sense of self
- Release of emotion
- Socialization skills
- Give and take capacities
- Motor planning

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# Letter from the Executive Committee

# THIS JUST IN: THE BODY AFFECTS THE MIND!

Has Botox, a cosmetic-pharmaceutical form of the paralyzing poison botulinum toxin A, brought to life public and professional interest in one of body psychotherapy's primary principles – that working with the body can affect the mind? Apparently so, according to the amount of media interest stirred up by some recent research.

A study by dermatologist Eric Finzi has provided empirical support for something a number of clinicians have reported anecdotally.(1) People who get their wrinkles smoothed and creases lifted with Botox often report an improvement in mood. Until Finzi's study, this effect has been attributed to just feeling better about having a wrinkle-free face. However, Finzi sought to eliminate this effect by excluding people seeking Botox for cosmetic improvement. As a result, his study showed that people who were not seeking cosmetic improvement showed a dramatic improvement in depression symptoms. Of ten depressed patients studied, nine recovered, and one with bipolar disorder showed an improvement in mood.

Only a few days later, I came across media reports that research found that emotions are easily passed from person to person, often without either party's realizing it, referred to as "emotional contagion."(2) This phenomenon depends on the unconscious mimicking and synchronization of another person's facial expressions, posture, body language and speech rhythms. The muscle fibers involved activate at much lower levels than when being used in the conscious expression of one's own feelings.

Such incremental muscle movements then trigger the actual feeling by causing the same neurons to fire as if you were expressing the emotions naturally. As would be obvious to body psychotherapists, the researchers "discovered" that the mood feedback loop can travel in both directions!

These articles stimulated a series of thoughts and feelings. First, I felt a certain satisfaction to see public attention being drawn to the idea that the body can affect the mind. The information in the articles was interesting too, although I also had some of that "they're proving what we already know" feeling that many body psychotherapists get upon reading such studies. Then I felt a certain regret that the articles didn't quite make the next logical connection, that if the body must be included in any psychological equation, then the body must be included in any psychotherapeutic equation.

I was also struck by the irony that the presence of Botox in the story is probably what gained a lot of the attention in the media. I could just imagine hearing our venerable Research Committee Chair, Alice Ladas, saying, "Let's get research studies done that use body psychotherapy instead of Botox! Why should Botox get all the attention?!"

Then I was troubled by a darker element in the story. Is Botox going to become The Next Great Mind-Numbing Cure? This may be Botox's chance to take its place in the mind-numbing pantheon, joining various drugs, electroshock, and lobotomy.

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# USABP Board of Directors' Meetings

The Board of Directors met on February 24 and 25, 2006. The meeting was held via conference call, partly to reduce the cost of the meeting. A follow-up conference call was held on May 15. See the conference section for information on this particular meeting. The highlights of the meeting(s) follow.

# **Budget and Finance**

Treasurer Rita Justice presented the budget, which was reviewed and amended. The Board cut expenses in several areas to assure that the budget for 2006 is balanced, i.e., that the income and expenses equal each other. Keeping the budget balanced is critical this year in consideration that our current financial condition leaves little margin for error.

Our cash reserves in February were \$15,683.85, with about \$11,000 of it contributed by members in response to the financial appeal, plus another approximately \$1,000 in contributions contributed after February. The variable in the financial picture was, and still is, the disputed bill from the conference planning company, which remains unresolved at the time this report was published. The amount under dispute is close to the size of our cash reserves, so a positive outcome would leave it largely intact, while a negative outcome would deplete most of it. The Board authorized a settlement offer, which was subsequently rejected; then a settlement offer from the conference planning company was rejected by USABP.

#### **Membership**

Membership Committee Co-Chairs Greg Johanson and Nancy Davidson reported that membership totals as of February, 2006 were 430, compared to 409 a year ago and 353 two years ago.

The dues fee for the institutional membership classification was reduced to \$250 (from \$500), based on the rationale that this would increase the number of institutional memberships. Feedback was received by the Membership Committee that institutions would be more likely to join if the fee was lower. Current institutional members who paid \$500 will be given an additional year of membership.

Two new optional membership benefits were approved. One is credit card processing, the other is conference calling services, both offered at discounted prices. USABP will receive a fee for each service purchased.

The Membership Committee informed the Board that some comments had been received regarding the profiles listed in the Locator Service. After discussing various ideas, the profiles will be expanded and now offer USABP clinical members these listings at no additional cost that are similar to those offered by referral services (such as Psychology Today) that charge a sizable fee.

#### **Newsletter**

The Board decided to publish the newsletter on the USABP web site. This is expected to yield significant savings by reducing postage and printing costs. The newsletter will retain its current design and production values. Postcards were sent to members that do not have email addresses informing them of the change. Members were given the option of receiving a black and white hard copy in the mail (color copies can be downloaded from the web site). The Board will evaluate this arrangement in Fall 2006.

#### **Conference**

The Board discussed at length if and when a next conference should be held. 2005 Conference Chair Scott Baum presented an analysis of the strengths and weaknesses of the 2005 Conference. The Board agreed that what we learned from the 2005 Conference will be applied to the next conference, increasing chances for success, and concluded that holding a conference remains an important endeavor for USABP. The Board also concluded that putting a conference together for 2007 would realistically be too rushed and stressful for both the association and volunteers, so the next conference will take place in 2008.

The Board scheduled another conference call for May 15 to discuss the 2008 Conference. During this call, the Board considered ideas for changes to the format for the conference. The format used for previous conferences requires a site that can provide a large number of breakout rooms, which ends up limiting site options and tending to increase costs. While discussing what the membership might prefer, the Board decided to ask members directly by conducting a survey collecting members' opinions regarding conference formats. The survey was subsequently distributed via the web site.

The Board also concluded that a conference planning company would not be hired for the 2008 Conference. This is a result of not having very good experiences with planning companies in the past and having developed sufficient conference planning knowledge within our own organization (we've learned a lot from our successes and failures!).

# **Elections**

The 2006 elections of the Board of Directors will be held on the USABP web site, rather than by mail ballot. This will yield substantial savings for postage and printing. The elections will continue to be by a secret ballot.

The next meeting of the Board will be held September 15-16, 2006.  $\sim$ 

# **PLAY THERAPY** continued from page 1

Play strengthens the ability to think. Thinking awakens the child's curiosity. Curiosity can lead to experimentation. Often experiments lead to further questions, challenges and integrative processes.

# How does your knowledge and training in Bio-energetic Analysis interface with your work as a play therapist?

Developmental, attachment, object relations and bioenergetic concepts are the theoretical stepping-stones used in my play therapy methodology. The physical body serves as a road map through which we can learn the organization of the child's mental process, and ego development. The ego controls motility and can release an action or hold it back. Ego strength is expressed through the movements and play activity.

The knowledge and experience gained through Bioenergetic Analysis and Rhythmic Integration training allows me to assess the child's character structure. It heightens the awareness of the charge and dis-charge of energy. The mechanism of the charge and dis-charge is expressed and accomplished at each stage of development. Is the body structure firm or soft? Is motility and verbal expression fluid or choppy? How efficient is the child's play (ego) in being able to achieve what they want. Does the ego structure support their desires, goals, motivations and impulses. These concepts are best illustrated in a 55 minute video tape "Ego In Motion." 1 which I created and directed. It is a video that portrays the body structure, musculature, and ego development of four pre-school children 3-5 years old. In this tape, the strength and weakness of the ego is seen in the children's bodies, play and relationship to their object world. Through play therapy and interventions by the therapist, the children's energy is charged and discharged, blocks are opened and muscles are strengthened as the ego develops and the natural flow of energy is restored.

# What skills assist a therapist in working with a child? Practice Skills For The Therapist

- 1. Ability to understand the child's relationship to their object world (materials in the playroom).
- 2. Ability to recognize the child's capacity to form attachments to significant adults.
- 3. Understanding the language of play and what the child is communicating through their play. Ability to communicate to the child that their symbolic play (language) is understood.
- 4. Ability to set limits.
- 5. Ability to recognize the developmental root of the child's struggles and conflicts.
- 6. Knowledge of the function and purpose of the play materials and having the particular materials available to address specific issues.
- 7. Ability to recognize play skills and patterns of growth and change.

#### **Observations Of The Child**

- 1. Is the child tense or relaxed?
- 2. What is the child's special interests, talents and/or natural abilities?
- 3. What is the child's cognitive strength and weakness?
- 4. How efficient is the child's body (ego strength) in meeting their needs?
- 5. Is the child able to engage in appropriate social skills?
- 6. Does the child engage in symbolic play?
- 7. How does the child relate to their object world?
- 8. Is the child able to receive pleasure from mastering self and their environment?
- 9. What are the developing skills of the child?

#### **Self Observation**

- 1. Does the therapist manage and direct the child or does the therapist guide and support self-determination in the child's developing social and cognitive skills.
- 2. What are the therapist's developing skills in the language of play. Where does the therapist need to grow and develop? What are the therapist's deficits?
- 3. What are the therapist's values? Does the therapist impose these inappropriately on the child?
- 4. How does the therapist use materials to foster the child's interactions and tap into the child's needs and interests?

# What can parents do to foster self-esteem, mastery, confidence and self respect?

The work of childhood is play and free expression. Free time is as important as structured time. These are the years where they attain mastery and autonomy. In contrast to getting their identity from their caretakers, their peers are their new mirrors as they make the move from self to others. Belonging and believing they have something to offer is vital at this age.

**Parents help when they:** (1) encourage their child to join constructive groups of their age. (2) Offer opportunities for developing skills with no strings attached (3) Make their home available to friends (4) Avoid making them feel guilty for moving away. (5) Carefully choose responsibilities that allow time with peers.

If parents and caretakers cannot accept a child's feelings, the child learns to reject feelings. Human understanding brings warmth, comfort, and safety; it bridges the gap of alienation. How does autonomy and individuation "play out" in the therapeutic alliance with children of different ages? From the moment of birth, the striving and growth of a child is to become separate and autonomous. The child is continually growing toward independence and selfhood. The child's presenting problem and age determines the interventions to be made by the therapist and the use of self in relationship to the child. All action is purposive and goal directed in both healthy and pathological behavior. Younger children (pre-school) express their drives and unresolved conflict through their motor- affect expressions. In a young child, the less developed ego (play) demands

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# **PLAY THERAPY** continued from previous page

more of a passive stance while the more developed ego (play) demands more interaction. In the less developed ego (play), the therapist functions as an auxiliary ego (mirroring, enhancing "I" statements, tracking, augmenting mastery) in order to build an ego, a sense of self. In the more developed ego the therapists' responses are curative, creating the space for the working through of unresolved conflicts through their play.

The latency (6-8 early) (8-12 late) aged child's psychological task is to be able to symbolize their aggressive and sexual drives. The aggressive drives are filtered through symbolic formation, play stations, monsters, TV shows, teasing, laughing at bodily functions, teasing the opposite sex, while the sexual drives are transformed into shame, embarrassment, and disgust since the sexual organs are not mature enough to provide an outlet for the sexual drive. During latency, the mastery of these primal feelings is what gives the child the structure to achieve academically and the ability to meet the standards set by his/her given culture and society. A state of good behavior, pliability and educability is maintained as a result of an equilibrium between defenses and drives.

The function of play in latency is to provide a discharge for the drives. In latency, feelings toward the primary objects or their substitutes are safely displaced onto symbols. At this stage, fantasy is linked to the drives as a derivative and a sole outlet. Playmates are their new mirrors as they make the move from self to others. This age group is preoccupied with boy-girl feelings, friendships, and family issues. These are the years to attain mastery and autonomy.

In early adolescence (13-15) there is a quest for independence as well as a mourning over the loss of childhood. In late adolescence and beyond (16-19) fantasy detracts from relationship with the real world and object seeking as the means of solving emotional problems. Adolescents are able to be engaged in conversations. If one is able to listen, one can enter into their world of worries and accomplishments.

# What are some presenting issues that may warrant a therapeutic intervention?

The disturbance that might be detected in a child is relative. We look for the intensity, frequency and the context in which these behaviors are being exhibited. We want to know the norm for the behavior in question. There is a psychological saying that most children "have had a good enough mother". There are many behaviors that children will grow out of with time. Most children are responding as best as they are able to the family dynamics and life situation to which they are exposed and over which they have no control. However there are some more severe behavioral and emotional manifestations that demand attention. School is an environment where emotional difficulties appear. A school setting reflects peer relationships. The school community is able to detect such problems as depression, apathy, defiance, fear, withdrawal, as well as

poor academic achievement. Overt behaviors, such as serious physical fighting with peers or family members, severe destruction of property, severe rage for seemingly minor reasons, detailed threats of violence, self injurious behavior and/or threats of suicide, are exposed. A child is likely to reveal difficulties in their family situation to peers or to a trusted adult.

# Can you summarize for us what you have learned about children through your extensive experience with play therapy?

The central theme I have taken away with me in working with children is that they know "everything". They are only lacking the physical development and maturity to communicate it in a form that we can understand. Not only do they know their own feelings, but they know those of the adults around them. When one of my granddaughters was twenty months old , she would at times shout "time out". She learned in day-care that "time out" was stated when someone was doing something that another person did not like. She was telling us she didn't like what we were doing at that given moment.

I have learned that school aged children know all about the subtle feelings of sexuality, jealousy, anger, and hostility struggles. I had a group of sixth grade girls who were able to express issues in their family that were troubling to them. One group member brought up the issue of her father watching pornography. She wept as she shared the hurt for her mother and for her own sense of budding femininity. "Doesn't my Dad like my Mother,?" she would ask. Another child would talk about the stresses with her step mother and all the fighting that went on.

Children are prone to act rather than verbalize their thoughts and feelings. The growth and change seems to take place when the interventions maximize the child's strengths and minimize the child's deficits and weaknesses. Children, given the opportunity, will work out their difficulties. They have the ability to make the world the way they want and need through play, movement, and expression within the context of a warm, accepting environment.

# References

1. Robbins, Gloria. *Ego in Motion*, Poughkeepsie, NY. Available from grobbins@hvc.rr.com

Gloria Robbins, LCSW, BCD, has been trained in Psychodrama, Bio-energetic Analysis, Object relations, Rhythmic Integration, Jungian Analysis, Play therapy, and many spiritual paths. She has been a clinician as well as leader and founder of The Woman's Group for over thirty-five years. She has conducted workshops, presented papers and trained other therapists throughout the Hudson Valley, South America, Israel, and Europe. She was a Steering Committee Member of the USABP. She is the past President of The Mid-Hudson Chapter of The New York State Society of Clinical Social Workers and currently is a Member At Large at the State level of the organization. She has been a board member of The Dutchess Interfaith Council, Randolph School and is currently active in The Dutchess County American Red Cross. ~

# **LISTENING TRAINING** continued from page 1

Dr. Tomatis first discovered that since the ear and voice are closely related, to help singers improve their voices, he had to improve their listening. Next, he discovered that listening to modified, filtered, and gated music and to one's own voice heard through this modification helped people listen more effectively to their body and mind, to others, and to the environment. Improved listeners become more aware of sensations in their own body and of people in their local space. The development of a "conscious ear" resulted in breakthroughs in personal, educational, and career experiences (e.g., improved motor control, sports performance, and social interaction) for adults, children and parents with their children.

The Tomatis Method was the first systematized training method with technology as its base, using sound as an educational and retraining intervention. Dr. Tomatis distinguished between <a href="hearing">hearing</a> as the passive reception of sound and <a href="listening">listening</a> as an active, motivated, tuning-in to what one wants to hear and tuning-out what one does not want to hear. Both abilities are required for good listening. Ultimately, Tomatis directed our attention to the role of the ear in developing and perfecting one's voice, in social interaction, in balance, in posture, in all motor acts, and in a myriad of other areas of human development. (Refer to "The Emerging Field of Sound Training" by Thompson and Andrews for more information.)

The Tomatis Method of listening training opens the body to self-listening and deep psyche work. This integration occurs because our ears have two of the three main sensory integrators in our body, the auditory and vestibular systems. Observations that people can be trained to process incoming sound more effectively led to the development of the new EnListen™ sound listening training software program designed to produce specific effects in the listener when recommended protocols are followed. EnListen™ modifies licensed classical music of world-renowned orchestras using filters, gating, delays, tone channels, and other treatments to achieve the assessed needs of the individual who is listening.

EnListen™ listening programs are provided by Sound Listening Corporation and a growing number of Licensed EnListen™ Professionals. This listening training achieves the effects of retraining the ear and voice and linking the psyche through deep sensory integration. Deep muscle relaxation occurs that can allow body relaxation and posture changes that are not easily achieved otherwise. As the listening training proceeds, the listener engages in other processes while listening for two hours each day for fifteen days. These include self-exploration through art, games, crafts, writing, and sensory based skills. The listener becomes more open to change because the brain receives a large amount of stimulation that opens new pathways.

As a Certified Rubenfeld Synergist®, I have often witnessed powerful body, mind, emotion, and spiritual transformation from the use of talk with gentle touch. EnListen™ Listening Training Programs use sound to achieve similar results with the touch of different frequencies that stimulate different parts of the body. Integrating body, mind, emotion, and spiritual work with EnListen™ has produced some of the deepest transformation for adults who have been searching for an elusive deep psyche connection for years.

The following commentaries indicate the powerful and lasting effects of listening training. The first comments are from a mother and teacher in her 40's who completed sixty hours EnListen™ Listening Training. She describes bodymind-emotion-spiritual integration experiences that are precise and leave no doubt as to the depth of consciousness achieved. She reported the following at one point in her integration period:

The biggest thing I'm noticing is a realization that what I was previously interpreting as "fullness in my ears" is actually a state of my ears being open! It was just an unfamiliar sensation, and I initially connected it with "something wrong" when in fact it was an opening up and expanding.

I am noticing that when I am truly listening with my entire being, sounds seem to drop into a kind of crystalline silence, leaving psychic imprints in consciousness like ripples of water emanating from a stone dropped into a lake. It is beautiful, and joyful.

I am noticing that I seem able to adjust my ears to seek out and capture different sounds.

I toned today for the first time since my last listening block, and felt a huge difference in my vocal quality in the lower registers. At times I felt like my body had disappeared and my energetic body was "riding" the sound, kind of like riding on the back of a dolphin.

I notice that there are times, when tired or stressed, that I slip back behind my wall and tune people out. I am seeing this not so much something that "happens to me" as coping mechanism I learned as a child, and that I now can choose to take care of my need for rejuvenation in a healthier way. It seems that when I become aware that I'm tuning out I can refocus my awareness and tune back in, or communicate my need for "time out" instead of just checking out without explanation.

I am amazed by the effectiveness of the reading aloud in maintaining the listening. When I'm reading, I can feel my ears 'working' to catch and hold the sounds of the music as well as my voice. I also feel something happening in my brain, as I simultaneously attend to the meaning of what is being read and appreciate the music. It's fascinating!

And, lastly, [some close colleagues] told me, spontaneously, that my voice is deeper and fuller now. I can hear the change as well.

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# **LISTENING TRAINING** continued from previous page

The next comments are from a mother of a young autistic boy (pseudonym used) and shows how his work with EnListen™ has changed his communication, learning, socialization and body connection. The first is after 90 hours of EnListen™ that followed 60 hours of Tomatis two years previously.

Phillip is actually communicating with me. He started asking: "What are you doing?" "Mommy, come sit down." "Mommy, read to me." His eye contact is improving. Phillip has learned so much since school started. He now understands what day it is. He is learning math, comprehending more words and sequencing better. He can almost dress himself and is learning how to brush his teeth. He also goes through phases where he wants to know what everything says, such as cereal boxes and advertisements. He is also trying to write and draw shapes on his own, although he gets frustrated and erases it if it doesn't look perfect. He said hello to our neighbor the other day, loud enough to be heard, and his singing Voice is coming out! He used to stop singing if I tried to join in. Now we sing songs together!

Phillip keeps growing and progressing, although he still has social and behavioral issues. We had about 8 children here for a couple of hours on Saturday and Phillip did very well. He watched a movie with them, allowing them to sit touching him. In the past he would have left the room until everyone was gone. He allowed them to play with his toys and observed them. He still does not interact, but he is starting to become more patient and interested.

The joy felt by this mother, watching her son develop and imagining how his becoming more responsible changes their own relationship, is something all parents want. Tomatis and  $EnListen^{TM}$  have been very helpful in training listening of children on the autistic spectrum.

Finally, an article by Linea McLellan, writer for the Dothan, Alabama newspaper Al Eagle, April 18, 2005, tells about another young boy who was having speech and attention problems, which caused him to have difficulty learning. Both of his parents talked about their son's progress first with Tomatis and then with EnListen™.

Charles was never diagnosed with autism, but showed early signs of speech delays and possible autistic traits, including attention deficits. He completed two 15-day sessions of the Tomatis Method in New Orleans and then another 30 hours of EnListen™ listening training at home. Each intensive of 30 hours was separated by 4 or more weeks break for integration of changes. The results were very good throughout his training.

Charles' mother said, "Even in the hotel during the first 15-day program [in New Orleans], he started to communicate better and started to say bigger words and the words

that came out were a lot more easily understood. And he didn't tend to repeat words. It's been the most incredible experience. We feel really, really blessed to have found this process,"

"When he left [home], he didn't respond to any questions," Charles' father said. "It was remarkable. He can count to 40 now and read and write. Two years ago he wasn't smiling much and he would just sit there."

In fact, Charles reads to his classmates at daycare and anyone else who will listen.

At the opposite end of the spectrum, and in the field originally researched by Tomatis, i.e. the voices of singers, a high school student did 90 hours of Tomatis training toward his goal of winning the State Tenor Competition. His mother said:

Dr. Thompson, I almost said I hadn't seen anything with Mason [pseudonym], but last night he sang at the school's holiday concert and he was fabulous. He says The Tomatis Method enabled him to hit such notes. Mason just called to let us know that he made third chair in the All State choir. This has been his goal since 6th grade. Seven tenors were chosen from our state. Thanks for your help and encouragement.

Listening is the most basic communication and learning skill we have, and we can improve it with  $EnListen^{TM}$  and Tomatis listening training programs for all ages.

Each person has a story to tell about using Tomatis and /or EnListen™.

From problems to success,
From dreams to reality,
From poor listening to good listening and healthy body-mind-emotions.

Thompson, BM and Andrews, SR. "The Emerging Field of Sound Training." *IEEE Journal in Medicine and Biology*, March/April 1999.

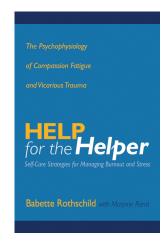
Billie M. Thompson, Ph.D., is President of Sound Listening Corporation and a leading pioneer in the emerging field of sound listening training. Dr. Thompson was the founding President of the International Association of Registered Certified Tomatis Consultants and the first US Tomatis Method trainer. She founded and directed five Sound Listening & Learning Centers and did Outreach programs in 30 cities to provide Listening Programs to over 6,000 families (1986 - 2004). Dr. Thompson trained with Dr. Tomatis and edited English translations for two of Tomatis' books, The Conscious Ear and The Ear and Language. With Don Campbell she co-facilitated Power of Sound workshops for six years. Her Ph.D. is from Arizona State University. She is certified in Rubenfeld Synergy Method®, NLP, and Structure of Intellect and licensed in EnListen™ to provide professional training. Dr Thompson can be reached at: Sound Listening Corporation, 1635 E. Seldon Lane, Phoenix, AZ 85020, 602-381-0086, drbthmpsn@aol.com, www.soundlistening.com. ~

# Help for the Helper:

# The Psychophysiology of Compassion Fatigue and Vicarious Trauma: Self-Care Strategies for Managing Burnout and Stress.

Babette Rothschild, with Marjorie Rand. W.W. Norton Co., 2006.

"Based on neurobiological and psychological concepts, this book is particularly helpful for the body psychotherapist. Our most powerful tool, somatic empathy, can also be the greatest risk to our well-being. Case illustrations and self help exercises equip the therapist with the tools necessary to identify and mediate their own risk factors for compassion fatigue, vicarious traumatization and burnout." – Marjorie Rand



"Rothschild has done a masterful job in laying out important

ful job in laying out important principles and strategies to avoid compassion fatigue, vicarious trauma, and burnout. She integrates several core psychological concepts – countertransference projective identification, and empathy – with recent research on mirror neurons, emotional contagion, and neurobiology. *Help for the Helper*, so clearly written and well organized, will benefit any practitioner who wants to avoid the fatigue that interferes with treatment of the people who are most in need of our help. Reading this book and following the exercises Rothschild provides will be of value for both new and experienced therapists." – Marion F. Solomon,

Ph.D., founder, Lifespan Learning Institute, Los Angeles; author of Narcissism and Intimacy and Lean on Me.

Therapist burnout is a pressing issue. Self-care and risk-avoidance are possible only when therapists actively help themselves.

Good therapy cannot occur without empathy. Empathy, however, can jeopardize a therapist's well-being and eventually compromise the therapeutic process itself. The authors draw on the powerful mind-body perspective put forward in Babette Rothschild's best-selling *The Body Remembers* in order to help therapists help themselves through an understanding of the role the body plays in mental health and overall well-being.

Self-care must be grounded in neurophysiological theory and be practiced correctly and consistently in one's mental health work. The difference in the new awareness that Rothschild and Rand recommend will be felt not just in the life and well-being of the therapist, but also in the therapy hour, when this attentiveness affects the exchange between therapist and client. Based on the scientific foundation of the phenomenon of somatic empathy, Rothschild and Rand offer clinicians practical skill-building advice to manage burnout and stress inside and outside the consulting room.

Babette Rothschild is author of *The Body Remembers* and *The Body Remembers Casebook*. She offers workshops and training sessions worldwide. She earned her B.A. and M.S.W. from Washington University, St. Louis, and practices in Los Angeles.

Marjorie L. Rand, Ph.D. has been a body psychotherapist for 30 years and is co-founder with Jack Rosenberg of Integrative Body Psychotherapy. She has previously co-authored *Body*, *Self and Soul*; *Sustaining Integration* and contributed a chapter to *Getting In Touch: A Guide To The New Body Psychotherapies*.

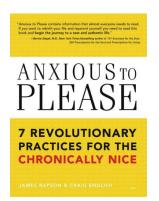
This book review was reprinted with a few changes and additions, with permission of W.W. Norton & Company. ~

# **Anxious to Please:**

# 7 Revolutionary Practices for the Chronically Nice.

James Rapson, M.S., LMFT, and Craig English. Sourcebooks, Inc., 2006.

Anxious to Please examines the ubiquitious syndrome of chronic niceness from the vantage of attachment theory and object relations, blended with insights from Buddhism and other wisdom traditions. The authors present seven practices that foster transformative growth and healing in emotional, cognitive, and somatic dimensions. The writing is clear, incisive, and laced with humor, making it a useful tool for both clients and clinicians. For more information, go to www.anxioustoplease.com ~

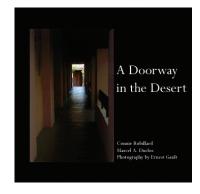


# **Author's Notes:**

# A Doorway in the Desert

Marcel Duclos, M.Ed. M.Th., Connie Robillard, MA,

The story of <u>A Doorway</u> In The Desert began in Tucson, Arizona. We were excited about traveling to the desert of Arizona and presenting a workshop on Spirituality and Body Psychotherapy at the June 2005 USABP Conference. The atmosphere of the conference and the beauty of our



surroundings surely added to an introspective view of the world during the visit.

The hotel brochure reported that Mission San Xavier del Bac was on the National Registry; "an interesting place to visit."

We spent only an hour at the mission. We left with different thoughts and feelings. We noticed this and found it interesting that two people can be together in the same space and have an entirely different experience. It is amazing and yet as therapists we know it has to do with past history, inner parts and body sensations that have been reawakened and triggered by the external encounter.

#### Marcel:

I became angry at the perceived evidence of cultural violations and indigenous exploitation all in the name of what is holy.

It was Father Sebastian who, in a dream, visited me late in September of 2005. He came as a wise, caring image who walked among the people with respect until he loved and understood them. I both enjoyed him and found him to be a healing presence.

# Connie:

I left the mission with my senses filled with the beauty of Mission San Xavier. I took in the images of the paintings, gardens, architecture and especially the scent of burning candles. While at the mission I was fascinated with the candles and curious about the people who came to pray.

Once home, I began to write without a direction. Naomi emerged as a character who spoke to me about Native Wisdom. It was then that I remembered that my own Native-American grandmother who was afraid to talk about her native roots. When she died the secret of her heritage died with her. A young part of me somehow believed the tribe where I belonged would magically find me in Arizona. It was sad leaving there without the answers to unspoken questions.

As Naomi and her grandmother shared their secrets my spirit joined them. The part of me that longed for family found it in the relationship between an old native grandmother and the kind heart of Naomi.

#### Marcel & Connie:

In the end our visit sparked both of our imaginations. Dream images, memories, heartfelt longings, ideas and conversations resulted in the fictional story of Father Sebastian and the symbolic characters that inhabit this tale. We are convinced that all of the characters in this book are parts of ourselves, having lived in our bodies for years. Now able to find their voice and speak through us, we honor them.

# Namaste'

Connie and Marcel are members of USABP and psychotherapists in private practice in Londonderry and Concord NH. This book is their second co-authored book. The firsts, Common Threads: Stories of Life After Trauma. They are in the process of creating a documentary based on Common Threads. You can find more information about their work and preview of the documentary at www.eventidecounseling.com

The Doorway in the Desert is published in partnership with Serge Prengel; LifeSherpa Publications on the web at www.lifesherpa.com and New Hampshire photographer, Ernie Gault at www.bobanderniephotography.com

We give this book, **The Doorway In The Desert,** as a free gift to the readers of the USABP Newsletter. You can access this free e-book at **http://www.lifesherpa.com/zyx/Doorway.pdf** ~

# Aposhyan Now A Review of

# Body-Mind Psychotherapy: Principles, Techniques and Practical Applications

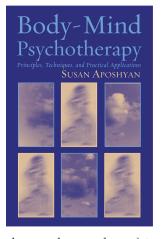
by Susan Aposhyan. W.W. Norton, 2004.

I was going to propose that Susan Aposhyan's *Body-Mind Psychotherapy* is a body psychotherapy classic, equivalent to Reich's *Character Structure* or Lowen's *Language of the Body*. But its more than that, its actually a contribution to the field of contemporary psychotherapy as a whole. It heralds the arrival of a complex, body-oriented, systems aware psychotherapy for the 21 century. Aposhyan illustrates throughout how bodymind integration is the ability "to touch deeply enough to include the body, but lightly enough so that the mind opens and releases its fixed identity and view of the world."

The psychotherapy outlined in this book is grounded in very up to date neurophysiology, affective neuroscience, attachment theory and body systems theory. Complicated, dense and difficult to relate to actual practice? Not at all. The principles of work, and the theoretical and research basis from which they are derived are very clearly formulated. The level of integration between theory, practice and clinical example is a testament to the actual nature of psychotherapeutic work being described. This is an approach which is sensitive to development, congruence, context and relational nuance. Its also incredibly practical and the case illustrations show how the application of these bodymind principles can be effective in working with early disturbance, severe depression and anxiety, trauma and somatic symptoms.

Aposyhan starts with an overview of the history of bodymind psychotherapy: Reich, the founding father, whose influences continues to permeate and Jung, an analytical cousin, with a different emphasis. She highlights the contributors to the third and fourth generations Lowen, Keleman, Mindell, Rosenberg. Central to Aposhyan's own development is the wonderfully creative synthesizer, Bonnie Bainbridge Cohen, who developed and expanded the discipline of experiential anatomy and movement repatterning. She also draws on the work of Peter Levine and Lisbeth Marcher, key figures in developing somatic trauma therapy.

In addition to this broad base of modern body psychotherapists, Aposhyan introduces us to the line up of the Neuroscience All Stars: Schore, Damasio, Trevarthen, Panksepp, Porges, Llinas. Neuroscience is confirming the basic premise of body psychotherapy: that the sense of self is rooted in the body and catalysed by relationships.



So she takes the new research findings in her stride and goes farther than others who have strived to translate the implications of neuroscience for therapy. (Cozzolino, Pally, Gerhardt) Aposhyan communicates her root and branch understanding of the 'brain-mind-body' and the range of technical skills to work with it.

The interdisciplinary tempering of one perspective by another (for example, evolutionary models

by attachment theory) is vital to progress and balance in understanding. Aposhyan's formulations are clear distillations of this. "As mammals we all have an innate capacity to read certain key aspects of others' physiolology." This capacity is enhanced by bodymind trainings, where "the clinician's sensitivity to their own bodies is vitalized and naturally generalizes to an increased sensitivity to the nonverbal experience of others. "

This book explains how trauma and intense physiological reactivity is different from developmental deficiency. Carefully titrated work with this intensity enables stabilization of neurophysiology which supports the fabric of the self. Furthermore paying attention to the physiological levels of attunement allows therapists "to work more authentically with development of positive affect". The critical marriage between cognitive, relational and embodying techniques means that clients can develop resources, experience wellbeing, and be empowered in an integrated way. In other words, a therapeutic process which is NOT about overlaying cognitive statements that are dissonant with body, nor catharting out pain only to maintain fixed inner patterns of relating, nor about staying stuck for years in a therapy that does not progress or change anything.

From a body mind perspective, a therapist has many tools for observing how any 'psychological' disturbance is actually manifest throughout a client's bodily organization and orientation in space. Aposhyan gives the example of a client, Hank, whose conflict around reaching out, unresolved after years of psychotherapy, is visible in "the strong spinal push that came through head, eyes and voice" whilst reaching through the arms is held back. She describes how she worked with "constant negotiating" in order to meet and contain his rage, to help him find the ability to push

interventions which are both precise and open-ended.

# Continued from previous page

through his arms and hands into her hands. With the rage comes the terror, and the need to allow and acknowledge the involuntary quivering of his jaw, as well as containing his impulses to explode. She supports him by allowing it to emerge incrementally through practicing looking at her "with a sense of power in his eyes". What comes across is Aposhyan's almost methodical meeting and processing of layers of embodied internal conflict and distress, each layer being met through movement, contact, understanding and exploration.

Bodymind Psychotherapy sparkles with insight, humour and gentleness, It also encapsulates a wealth of learning. The body systems approach of recognizing the innate functions of different systems the muscle as structuring, the fluids communicating, the cells transforming and the brain as modulating and co-ordinating is presented for the first time as part of a model of psychotherapy. The traditional body psychotherapy themes of working with breath ("Often the tail end of breath holds the pith of emotional intensity") meet the newer skills of conscious psychobiological interactive regulation through attunement and tracking body process. Aposhyan defines sequencing as "the uninhibited flow of energy within all parts and aspects of the bodymind and between ourselves and the environment". Here Reich meets systems thinking, ecopsychology meets movement repatterning, and ancient energy models are grounded in neurophysiology. In terms of psychotherapy, sequencing means the initial perception/identification with the client's state and subsequent allowance of that state to evolve and develop in the therapist's body. This is the basis for creative, attuned

Bodymind Psychotherapy includes some brief guided experiential excercises, many short and longer case histories, and a wholly uptodate primer of body psychotherapy principles. References to transference and counter-transference are minimal but it is evident that this is a psychotherapy with a very sophisticated and flexible perspective on the nature of the therapeutic relationship, one which is marked by a very contemporary common sense and an intimate awareness of paradox and polarities.

Susan Aposhyan maintains a private practice, trains helping professionals internationally, and is the author of *Natural Intelligence: Body-Mind Integration and Human Development* (Lippincott, Williams, & Wilkins, 1999) and *Body-Mind Psychotherapy*, (W.W. Norton, 2004). For ordering or info: www.bodymindpsychotherapy.com

This book review is reprinted with permission by the book review author, Roz Carroll, and the editor of the *Scimed Journal* where it was first printed (**www.scimednet.org**). Roz Carroll, M.A., A.Ch.P, is a United Kingdom Council for Psychotherapy registered body psychotherapist, a member of the Society of Neuro-Psychoanalysis, and head of training for the Integrative Psychotherapy M.A. at the Minster Centre, London, U.K. Her recent publications include chapters in *Advances in Body Psychotherapy* (Ed. Staunton), *Revolutionary Connections: A New Relationship Between Neuroscience and Psychotherapy* (Ed. Corrigall and Wilkinson), *How Does Psychotherapy Work* (Ed. Ryan and Karnac 2005), and *New Dimensions in Body Psychotherapy* (Ed. Totton, N. 2005). Check out her web site at:

# **LETTER** continued from page 2

She may have never actually said it, but Alice is right! Body psychotherapy instead of Botox!!!.

- (1) Eric Finzi. Dermatologic Surgery. May 2006; 32: 645-650.
- (2) Stacey Colino. That Look It's Catching! Emotions, Like Germs, Are Easily Transmissible. The Trick is Passing and Receiving the Right Ones. Washington Post. May 30, 2006; HE01.

Additional contributions have continued to arrive. Thank you for responding to the financial appeal to:

Andre Fritz Lisa Guerin Amelia Kaplan Jim Kepner Joyce Nawy Patrizia Pallaro Thomas Pope Rebecca Ridge

Elliot Greene President, USABP

# **RESOURCES**

# Recent Publications About Body Psychotherapy

The new **Body**, **Movement and Dance in Psychotherapy Journal**, published by Taylor and Francis, is available online at **http://www.bmdpjournal.net**.

Lori A. Parker, SEP, CFP, Ph.D.
Polyvagal Theory: What Is It and Why Should We Care?
Lori A. Parker, SEP, CFP, Ph.D.
Shock Trauma, Autonomic Nervous System Dysfunction
& Autoimmune Syndromes: What's the Connection?

For many body psychotherapists, the explosion of relevant material applying recent findings in neuroscience is just overwhelming. The volume of material and its technical scientific specificity are just too much for us to decode, much less apply to our clinical practice. So, I am thrilled when someone comes along to guide me through some of it. In volumes 3#1 and 4#1 of the USABP Journal, Aline La Pierre has provided us with a guided tour of the latest relevant works in neuropsychology and neuropsychoanalysis in the context of a primer. I have found both articles useful for myself and in teaching body psychotherapy. A third and final article will appear in the Fall, 2006 issue.

And now, a second guide has appeared on our horizon to fill what has felt like an unbridgeable gap. Author and teacher, Dr. Lori A. Parker. had long been interested in the creation of harmony and integration on levels ranging from civic education to deeply spiritual inner work. Then, a fateful occurrence in 1993 (she began to have epileptic-like seizures in the middle of a cranial sacral session) propelled her to an interest in the wider meaning of healing and various healing methods. She eventually became a certified practitioner of both the Feldenkrais Method and Somatic Experiencing. Written originally for her own understanding and that of her clients, the two papers reviewed here are directly relevant to the work of body psychotherapists.

She soon realized that few of her colleagues and students were able to really comprehend and apply some of the more scientific literature, such as Stephen Porges' work on Polyvagal Theory, especially his article, "Orienting in a Defensive World: Mammalian Modifications of our Evolutionary Heritage. A Polyvagal Theory". (Many of us had that experience when Dr. Porges spoke at the USABP conference in Baltimore some years ago. I remember thinking it all quite fascinating, but just a little beyond me).

In an effort to clarity her own understanding of this important but complex subject, Dr.Parker has written a guide to it entitled, *Polyvagal Theory: What Is It and Why Should We Care?* in which she walks the reader step by step through a thorough understanding of the theory and its implications. The theory

is clearly articulated, and repetition of key points reinforces the material. Wonderful drawings and charts illustrate complex concepts. Simultaneously deep and comprehensive, it is also interesting and thought provoking. And, in addition, she provides an extensive section on applications of the theory for both body psychotherapists and for those psychotherapists who do not touch. Footnotes contain references to source materials such as Feldenkrais tapes and a DVD to teach therapists to recognize micromovements in facial expression that may be crucial for work with trauma survivors. Several of her own related papers are also available free of charge to interested students and practitioners (I ordered them from her and they have proven similarly useful).

A second paper entitled, "Shock Trauma, Autonomic Nervous System Dysfunction & Autoimmune Syndromes: What's the Connection?", focuses on the physiological trail that leads from shock trauma to symptoms and syndromes in general. Written again for practitioners and their clients alike, it illuminates a difficult field with charts, figures, pertinent examples and incisive analogies that make these complex connections comprehensible and usable. What is the difference between an autoimmune syndrome and an autoimmune disease? As clinicians we and our clients need to know what factors may contribute to the development of autoimmune disease so that we can better help them and so that we can help them educate and coordinate their other health practitioners.

In this time of increasing medical specialization, "managed" care, astronomically expensive health insurance, and overwhelming paperwork assigned to healthcare practitioners, we and our clients have to take responsibility for looking at the totality of our own and their health care issues. As specialists struggle to stay abreast of their own specialties, the patient must be increasingly knowledgeable just in order to elicit the correct information. Autoimmune diseases remain one of the most baffling areas to scientists while they account for an enormous proportion of the illness in the US and in many industrialized countries. Drawing heavily on the work of Dr. Peter Levine, Dr. Parker explores the contribution of the autonomic nervous system as it reacts to stress.

Again, examples and analogies and wonderful charts and drawings (in color!) lead us gently through this complex subject. How and under what conditions does PTSD become an autoimmune disease? In case examples, she illustrates how the original sources of stress or trauma may be easily ignored and/or overlooked. She also presents her own personal struggle in illuminating detail to exemplify a possible course of understanding and treatment. Intriguing appendices and footnotes abound.

Both papers, while reading like detective stories, are meticulously researched and footnoted. They are available from the author at **info@integrationforall.com**, or from her website, **www.integrationforall.com**.

Reviewed by Jacqueline A. Carleton, Ph.D. ~

# PULSE Community Calendar

### **JULY 2006**

## July 23-28, 2006

Jung on The Hudson: Memory, Mind and Meaning: How We Heal Rhinebeck, N.Y.

This didactic and experiential conference assembles an international, resident faculty, with presentations by Allan N. Schore, Ph.D., Jean Knox, Ph.D., Jeffrey Satinover, M.D., Margaret Wilkinson, B.A., Hons., Dipl. Ed. Joe Cambray, Ph.D., & Tina Stromsted, Ph.D., ADTR. Combining presentations, small groups, experiential Authentic Movement sessions, and a closing panel, we will engage in passionate dialogue and an exchange of experiences and ideas between participants and faculty. http://www.nyjungcenter.org/index.asp or Phone: (845) 256-0191

## **SEPTEMBER 2006**

# September 7-10

American Academy of Pain Management 2006 Clinical Meeting, Beyond Boundaries: Forging New Alliances in Pain Management, Walt Disney Swan and Dolphin, Orlando, Florida

www.aapainmanage.org

## September 21-23

American Association for Integrative Medicine 2006 National Conference In Affiliation with the American Psychotherapy Association Walt Disney Hilton, Orlando Florida

Workshops topics by leaders in the growing field of Integrative Medicine, include such topics nutritional strategies and genomic data for prevention of breast cancer recurrence, anti-aging and anti-cancer substances, and use of integrative medicine for pain, stress, headaches, etc.

#### September 21-24, 2006

10th Anniversary EABP Congress Askov Folk High School, Denmark

Congress Themes: Love and Sexuality, Work and Play, and Knowledge and Science Keynote Speakers: Joachim Bauer (Germany), George Downing (France), Lisbeth Marcher (Denmark), Kinesthetic Learning, Gustl Marlock, (Germany), Eros revisited: The therapeutic discourse on sexuality, love and passion from Freud to the present forms of Neo-Sexuality. Kenneth Purvis (England/ Norway), Myths and realities abut orgasm (Temporary title) Kerstin Uvnas-Moberg (Sweden)

**Panels:** There will be at least four: *Children and body-psychotherapy*, Medication and body-psychotherapy, Work and stress, and Survival in crisis. The following have already agreed to participate on one of the panels: Marianne Bentzen, Amara Eckert, Ingeborg Joachim, Ditte Marcher, Luciano Rispoli, Ilse Schmidt-Zimmermann.

# **Pre-congress workshops**

- Life Energy Process and the resonant body with Dr. Stèphano Sabetti
- Integral Bodypsychotherapy with Andreas Wehowsky

## **Post-congress workshops**

- A Taste of Peak and Shock with Erik Jarlnaes and Bodynamic colleagues
- Love, Sexuality and Relationship with Siegmar Gerkin eabpcongress2006@eabp.org

#### **FEBRUARY 2007**

#### February 22-25

International Society for the Study of Women's Sexual Health Annual Meeting Walt Disney Hilton, Orlando, Florida

# **USABP Members** In The News

USABP member, Dr. Cynthia Price, who received Honorable Mention for her research by the USABP Research Committee a few years ago, has just been cited in an article in Massage Magazine (Issue #119, 2006) entitled "Research Matters." She had presented a workshop at the Massage Therapy Foundation's first research conference: "Highlighting Massage Therapy in CAM Research" in which she talked about developing and testing new measurements. She "led the audience through her process of creating and evaluating a valid scale to assess subjects' levels of body connection."

**Biography** (Inadvertently omitted from previous newsletter at end of her article)

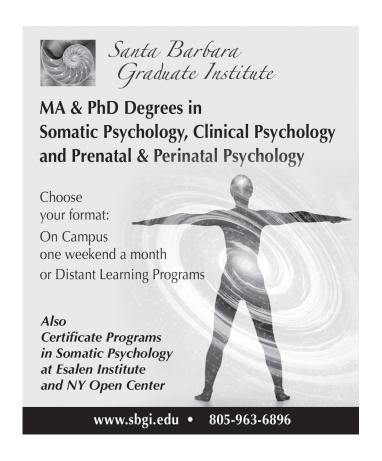
Born in Cleveland, Ohio, USA, Laura Hope Steckler, Ph.D., C.R.S./W.L., R.S.M.T. is an accredited Body-oriented Psychotherapist, Clinical Psychologist and Registered Somatic Movement Therapist. She received her doctorate in Clinical Psychology in 1984 and subsequently trained with Ilana Rubenfeld, becoming certified as a Rubenfeld Synergist® in 1996, and a group/workshop leader in 1998. She currently resides in Edinburgh, Scotland, works as a psychologist in a multidisciplinary pain clinic, practices as a body-oriented psychotherapist and performing artist.

# **Quote of Note: Medicare Part D**

"If every senior's health were improved to delay the onset of one chronic illness by three to five years ... the cumulative saving[s] to Medicare would be hundreds of billions of dollars. That does not count the increased wealth and productivity generated from longer life. Although some say that prescription drug spending will simply overwhelm other forms of healthcare expenditures, the cost of drugs is never as high as the cost of treating the same disease."

> **Washington Times** June 8, 2006

So – imagine the savings if everyone, not just seniors, received body psychotherapy...!



# Santa Barbara Graduate Institute's Somatic Certificate Program

New York Open Center, NY: For info and application: www.nyopencenter.sbgi.edu

June 21-25, 2006: The Embodiment of Being: Body, Soul, and Presence in Somatic Psychology Sept 6-10, 2006: Interpersonal Neurobiology, Attachment and Somatic Interventions Feb 7-11, 2007: Integrating Somatic and Breath Awareness Effectively into Clinical Practice

**Esalen Institute, CA:** For info and application: www.esalen.sbgi.edu

July 9-14, 2006: Working with Character, Trauma, and Developmental Issues: The Somatic Experience in Psychotherapy Sept 17-22, 2006: The Embodiment of Being: Body, Soul, and Presence in Somatic Psychology

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