

the usa body psychotherapy

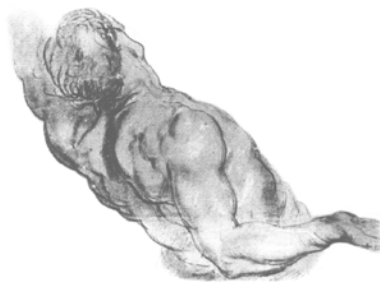


The Official Publication of

Volume 6 Number 2 2007

Table of Contents

Editorial Jacqueline Carleton, Ph.D.	2
Common Factors in Body Oriented Psychotherapy Fernando Ortiz Lachica, M.S.	4
Recovering the “Reasons of the Body” in Psychotherapy Antonio Pribaz and Mauro Pini	9
Toward Mind-Body Integration: The Organismic Psychotherapy of Malcolm Brown Mauro Pina and Antonio Pribaz	12
A Somatic Approach to Recovering from Sexual Abuse Judith Blackstone, Ph.D.	15
Subtle Touch, Calatonia and other Somatic Interventions with Children and Adolescents Maria Irene Crespo Gonçalves, Psy Maria Amélia Pereira, B.A. Ed. Anita J. Ribeiro, MS, LMHC Ana Maria G. Rios, Psy	20
The Somatics of Touch Lisbeth Marcher Erik Jarlnaes Kirstine Münster Ria van Dijke	29
Touch In Therapy and The Standard of Care in Psychotherapy and Counseling: Bringing Clarity to Illusive Relationships Ofer Zur, Ph.D.	37



©2007 USABP

USABP Mission Statement

The USABP believes that integration of the body and the mind is essential to effective psychotherapy, and to that end its mission is to develop and advance the art, science, and practice of body psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity.

A Somatic Approach to Recovering from Sexual Abuse

Judith Blackstone, Ph.D.

Abstract

This paper presents a series of somatic attunement exercises, developed by the author, called Realization Process¹, and describes their application to the treatment of the symptoms of childhood sexual abuse in adults. It illustrates, through case studies, how inhabiting the internal space of the body, and attuning to qualities of being, such as gender, power and love within the body, can foster self-possession, self-cohesion, and self-love, as well as the ability to remain in possession of oneself while connecting with other people.

Keywords

Sexual Abuse – Realization Process – Trauma – Embodiment – Self-Attunement

Adults who have suffered childhood sexual abuse present an array of clinical symptoms, including dissociation, self-hatred, eating disorders, distorted body image, disempowerment, aversion to being touched or to sexual intimacy, anxiety and depression. This paper presents a method of somatic attunement that I have developed over the past thirty years called Realization Process, and describes how it can be utilized, as an auxiliary to verbal psychotherapeutic process, to help alleviate these symptoms. It includes a description of the method and case studies to support its effectiveness. In an eight-week pilot study at NYU Medical School, Realization Process was shown to reduce symptoms of post-traumatic stress in adult women survivors of childhood sexual abuse.

The memories of sexual abuse are often repressed or subject to “psychogenic amnesia” (Freyd, 1994, p. 307), appearing to consciousness first as fragments of images or sensations. Conventional methods of psychotherapy treat survivors of childhood sexual abuse by attempting to uncover repressed memories and then to dissipate the emotional potency of the trauma and its resulting symptoms through cognitive insight. Somatic modalities of treatment, such as Bioenergetic and Reichian Orgone psychotherapy aim at releasing the somatic rigidities and energetic blocks stemming from the abuse. Somatic Experiencing, a more recent body-based method of trauma recovery, works to discharge the effects of the trauma on the nervous system.

Realization Process can supplement conventional and body therapies by adding an important dimension that is missing from these other modalities. This is the recovery of the client’s sense of self-possession, personal strength, self-cohesion and self-love through inhabiting the internal space of the body. The name, “Realization Process” refers to the realization or “laying bare” of a fundamental dimension of consciousness within the whole body. This is not a mindfulness technique, in which the client becomes aware of the internal space of the body. It is a method of self-attunement in which the client experiences his or her essential identity as consciousness itself.

Inhabiting the internal space of the body is synonymous with mind-body integration. This integration produces a subtle, unified experience of being. The philosopher Yuasa (1987) describes this: “The ‘mind’ here is not the surface consciousness, but is the ‘mind’ that penetrates into the body and deeply subjectivizes it” (p. 105). This embodied consciousness is experienced as a homogenous mixture of awareness, emotion and physical sensation (or proprioception) reaching everywhere in the body at once. This means that awareness is not fragmented from physical sensation, as a distant observer of one’s experience. Rather, one’s observing and experiencing functions become unified. This is particularly important for people recovering from sexual abuse, which may cause severe fragmentation between observation and experience. Several of my clients remember observing themselves and their abuser from a vantage point above the bed during the abuse. This fragmentation continues in adulthood as an unconscious pattern of diffusion and vacancy, often resulting in a sense of disorientation or unreality, and difficulty focusing or concentrating.

Bessel van der Kolk writes that “the word dissociation is currently used to describe four distinct, but interrelated phenomena: (1) the sensory and emotional fragmentation of experience (2) depersonalization [feeling that you are not real] and derealization [feeling the world is unreal] at the moment of the trauma (3) ongoing depersonalization or ‘spacing out’ in everyday life (4) containing traumatic memories within distinct ego-states (Dissociative Disorder). . .”(van der Kolk, B. A., & Fisler, R., 1995, pp.510-511).

¹ Description of Realization Process Research Project: I began to develop the Realization Process attunement exercises while healing myself of a back injury in 1974. Since then, I have continued to expand and refine the exercises in response to the needs of my clients and students. In the spring of 2007, an eight-week pilot research project at the Institute for Trauma and Resilience, within the Child Study Center at NYU Medical School tested the effectiveness of Realization Process for reducing symptoms of post-traumatic stress disorder in women with a childhood history of sexual abuse. I taught the Realization Process exercises, including those described in this paper. There was also an educational component to the sessions, based on a cognitive behavioral method called Skills Training in Affective and Interpersonal Regulation (STAIR), developed by Dr. Marylene Cloitre, director of the Institute. The pre and post research interviews were conducted and analyzed by Dr. Cloitre and her staff. The research showed reduced symptoms of PTSD and increased ability to regulate negative moods. We are conducting a second pilot study this fall.

By inhabiting the internal space of the body, clients are able to experience—and to be present in—their whole body at once. They are able to think, feel and sense at the same time. They also gain a sense of internal depth that helps them feel less impinged upon by other people. This gives them a sense of safety, of truly existing, and of being in possession of themselves. These are all qualities that are generally compromised in survivors of sexual abuse.

For example, I worked with a woman who had been sexually abused by a priest over the course of several years in her childhood. Then, in her early adolescence, she was raped at knife point by a man she met at a party. Rita's main symptoms were a sense of disorientation and difficulty concentrating. She was energetically diffused with an unfocused expression in her eyes. She described herself as a "chameleon," because she experienced that she became whomever she was with. She also hated being alone, fearing that someone might break in to her apartment, and also fearing that she might "disappear" if there was no one with her. After several months of practicing the exercise (described below) of inhabiting her body, Rita came to a session very excited. She told me that she had been at a meeting with some of her co-workers and had experienced herself "taking up space."

Realization Process consists of a series of exercises for deepening contact with oneself and others. This paper will present several of the exercises. The first exercise begins with the client sitting upright in a chair, usually with their eyes closed. The client is asked first to focus on their breathing. This focus helps them become calm and present enough to proceed with the exercise.

The client is then asked to bring their attention to their feet, and to inhabit their feet. To inhabit a part of the body is qualitatively different than becoming aware of a part of the body. It means that the person actually experiences him or herself inside the body. In other words, there is a difference between attention to a body part and the self-contact and internal aliveness that occurs with actually being in the body. The client is asked to take a moment to experience themselves in their feet, to register how it feels to inhabit their feet. This helps the person integrate awareness and physical sensation, and experience the subtle level of being that results from this integration. It also augments their ability to inhabit their feet, and helps create a somatic memory of the event, so that it can be easily repeated. With practice, people are able to stabilize this new learning; they have an ongoing experience of inhabiting the body.

The client is also asked to be aware of their breathing while inhabiting their feet, and to see if they can remain within their feet as they continue to breathe. Most people, when they first practice this exercise, lift up out of their feet when they inhale. To remain inhabiting the feet while breathing helps the client experience the flow of breath in their whole body, rather than just in their respiratory system. As body-mind integration is achieved, the breath becomes continuous with the energy system and flows through the whole body. Wherever a person inhabits their body, their breath/energy system can flow. This circulation provides the client with a felt sense of vitality and aliveness.

The client is then asked to inhabit, sequentially, their ankles, legs, pelvis, mid-section, chest, shoulders, arms, hands, neck, face and brain, while continuing to be aware of the breath. Then he or she is asked to inhabit their whole body at once. At this point, I often use the image that the body is a temple. The client is sitting inside the temple of the body, and breathing. Then the client is asked to open their eyes and again feel that they inhabit their whole body at once. I suggest that even though the world now appears in all its vividness, they are still sitting inside their own temple, their own body.

As will be illustrated in the following case studies, this exercise has many variations to fit the needs of different clients. For example, I often ask clients to attune to the qualities of their being, particularly in their torso. I may ask the client to attune to the quality of their gender within their pelvis, the quality of power within their mid-section, the quality of love within their chest, the quality of their own voice or their potential to speak within their neck, and the quality of understanding within their whole brain. These are not ideas about themselves, but actual feelings of being that can be accessed within the body. Attuning to these qualities helps anchor the client within their body. It also helps them feel that there is a palpable quality to their existence, something that is truly themselves that has not been taken away from them by their abusers.

The quality of gender is particularly healing for survivors of sexual abuse. The defensive tensions in the pelvis and sexual organs that often result from the abuse may constrict the quality of gender. Also, negative ideas and feelings about one's gender may arise from the abuse. The exercise is not asking for a particular male or female quality, but rather how their gender feels to the client.

I worked with a woman named Molly, who grew up in a chaotic, neglected family with many siblings and overwhelmed, ineffectual parents. Throughout her childhood, she was often awakened in the middle of the night by an older brother molesting or raping her. She never cried out for help or told anyone about the abuse, for fear of adding to her parents' burden. But she grew up feeling contempt for her own femaleness, blaming the abuse on the vulnerability of her gender. For a long time in our work together, Molly was unable to inhabit her pelvis. To do so evoked terrible images of the abuse and a sick feeling within her whole body. We spent many months just having her inhabit other parts of her body. We particularly focused on her inhabiting her feet and legs while standing, until she felt a sense of foundation. We then concentrated on her inhabiting her mid-section and attuning to the quality of power inside her mid-section. These qualities are difficult to convey in words, and like many clients, at first she said that she had no idea what I was asking her to do. The quality most accessible to people is love; almost everyone I've worked with knows what love feels like, and can access it by thinking of something or someone they love. The quality of power is also a distinct feeling in the body.

When Molly asked what I meant by power, I sat opposite her and attuned to the quality of power in my own mid-section, and asked her to match my power. She was surprised that she was able to do this; still not being able to verbalize what was actually happening. I then increased the intensity of power in my own mid-section and she did the same. After about a year, Molly was ready to attempt to inhabit her pelvis. At first she reported that it felt "dark and rotted out" in her pelvis, but

she was able to tolerate the feeling and continued to practice the exercise. Soon she was able to feel the same sense of foundation in her pelvis that she felt in her legs and feet. Around this time, Molly met a young man and began going out with him. Although she identified her orientation as heterosexual, she could not imagine allowing a man to touch her. She said that being close to a man made her feel soft and tender, and this brought up great anxiety for her. This new man in her life motivated her to address these issues. She practiced inhabiting her chest and her mid-section at the same time, attuning to the softness of her love and the strength of her power simultaneously.

Once the practitioner has won the trust of the client, it can be helpful for the client to inhabit his or her sexual organs. This constitutes a reclaiming of the organs that were violated. Since I had a strong therapeutic alliance with Molly, I suggested that she practice inhabiting her female organs, and imagine them as made of light. We talked about how she was in control of turning this light on and off, and she practiced this control as she inhabited her body. After about a month of this practice, she reported that her female organs felt “sweet.” The young man she was dating turned out to be a gentle, patient person and Molly embarked on her first intimate relationship.

At the end of the exercise of inhabiting the body, I sometimes suggest to clients that they attune to the quality of the pronoun “I” within their whole body. This deepens their sense of existing as individuals, and of connecting to their own desires and initiative. It can help clients overcome feelings of shame and vulnerability at having been overpowered. The sense of “I” is also an integrative experience, fostering self-cohesion.

When I first asked Rita to attune to the quality of the pronoun “I” she said that it made her feel too “exposed to the world.” But she was able to experience the feeling of “me” in her body. After practicing inhabiting herself as “me” for a while, she was finally able to experience herself as “I.” She said that “me” was self-enclosed and safe, but that “I” could relate with other people. I spent many sessions with Rita integrating the safety of “me” with the openness she experienced as “I,” as she inhabited her body.

It can also be helpful for the client to imagine that all of the parts of their body are made of light, or to bless or cherish each part as they inhabit it. A client named Sharon had been repeatedly molested by a neighbor from her eighth to twelfth year, and described herself to me as “damaged goods.” Sharon came from an Orthodox Jewish background and had learned to recite many different blessings as part of her childhood religious training. As she practiced the exercise, she said a blessing on each part of her body. This consecration of her body gradually replaced her image of herself as damaged beyond repair with a felt sense of her preciousness.

As I have said, inhabiting the body is body-mind integration. It produces an experience of internal spaciousness and internal sentience, as if one were made of consciousness. This sentient space feels both substantial and permeable. Inhabiting the body is also the basis of openness to the environment. Wherever we inhabit our body, that part of our body is permeable and available for experience. For example, if we inhabit our chest, we will experience the present moment both outside of ourselves and within our chest, at the same time. We will also feel fluidity, the potential for emotional responsiveness, within our chest.

When we reach a certain degree of inward contact with our body, we discover (or uncover) a very subtle expanse of consciousness that pervades our body and environment as a unity. This pervasive consciousness has been described in spiritual traditions, particularly in the East, where it has been called the “essence of being” and “the nature of mind” (see Rabjam, 2001, among many others). Although this experience has mainly been discussed in spiritual literature, it is helpful for healing trauma because it allows people to participate more fully in life without losing inward contact with themselves. The Eastern teachings are sometimes couched in language that can foster dissociation, but the actual experience of pervasive consciousness refines one’s perception, and makes the world appear more vivid and immediate. When I taught the attunement to pervasive consciousness (described below) during the research project at NYU, one of the women in the group surprised us all by announcing that she suddenly realized that the filing cabinets in the room were not important. When asked for an explanation, she said that she could now see how much more alive the people in the room were than the metal cabinets.

I teach attunement to pervasive consciousness when clients have become proficient at inhabiting their body. When Sharon had developed an ongoing sense of self-possession and begun to feel self-love, I felt she was ready for this more subtle exercise. First, she inhabited her whole body at once. I then asked her to find the space outside of her body, the space in the room (with her eyes closed). Next, I asked her to feel that the space inside and outside of her body was the same, continuous field of space, the same unified field of subtle consciousness. It pervaded her. Sharon then opened her eyes and repeated the same sequence, feeling that she inhabited her body, and that her body was pervaded inside and outside by the same continuous expanse of space. Next, I asked her to feel that the space that pervaded her body also pervaded the room, even the walls of the room. At first she left her body and energetically projected herself into the room. But this exercise is not an energetic movement, and not an expansion outward. It requires settling even more deeply within one’s body. When she did this, she was able to experience that she could be in her body, and experience the same space pervading her body and the room. She reported that when she did this, she could see a subtle radiance in the air around her. After practicing this exercise for a while, one no longer has to volitionally attune to this pervasive space. The exercise produces an effortless state of continuity between one’s internal and external experience.

Rigid, somatically anchored defenses, and the binding of emotional pain in the body obstruct our ability to inhabit the body and to attune to subtle, pervasive consciousness. These exercises can both reveal somatic holding patterns and help people release them. In particular, they can help people feel secure enough within their bodies to relinquish the somatic barriers they have erected between themselves and their environment in order to dampen the impact of experience. Also, when

clients experience that they have within them this radiant expanse of consciousness, they often recognize that no matter how much abuse they suffered, they have not been damaged in the core of their being.

Another woman, Laura, came to work with me because her father had molested her from her early childhood until she became an adolescent. Her main symptom was that she could not be touched by anyone. Even a casual pat on her arm would cause her to feel nausea and panic. As would be expected, the most traumatic aspect of the abuse for Laura was the betrayal of the two people she loved and needed most in the world, her father who used her for his own twisted needs, and her mother who turned a blind eye to the abuse through all the years of Laura's childhood. This betrayal had caused Laura both to feel unworthy of love, and to distrust the caring expression of any other human being. It has been pointed out (Frawley-O'Dea, 2002) that the term "sexually executed relational abuse" may be "the most meaningful way of conceptualizing that which we call sexual abuse."

When Laura first began to practice inhabiting her body, she protested that she could feel the abusive presences of her parents so vividly within her body that there was no room for her. It took many months of practice for her to begin to feel that she could possess herself. Still, she did not feel comfortable talking about herself with me, and she particularly shut down if I showed concern or empathy for her. Then one day, she requested that I do the exercise along with her. As we added this element of mutual exercise into our sessions, she began to warm towards me, and to talk more openly about herself. She said that she felt she could trust me because she knew that I was in my body also, so that I would not try to be in hers.

I taught Laura the exercise of connecting to another person without leaving the internal space of one's own body. I asked her to inhabit her chest, as I inhabited my chest. Then I asked her to find the internal space of her chest and my chest at the same time. When she did this, we could both feel a resonance between the feeling in her chest and the feeling in my chest. Most people who practice this exercise for the first time are surprised at how easy it is. The internal, qualitative space of our being is capable of contact; we can easily find each other from the internal space of our bodies. Laura was delighted by this new ability to stay in possession of herself inside her own body while feeling connection with another person. This contact was also a kind of touch. Touching in this way, across distance, opened the way for her to be able to accept and enjoy physical touch.

When she was accustomed to connecting with me across distance, she felt she was ready to inhabit her body while being physically touched. We then practiced with me holding my hand a few inches from her lower arm, while she concentrated on inhabiting her arm. Then, I was able to actually put my hand on her lower arm while she remained in possession of herself within her body. I also taught her how she could keep out the sensation of my touch, or let it in; that she was in control of how much she felt when she was touched. We also practiced with her touching my lower arm, so that she could feel how to touch a person within their body rather than just on the surface. I chose to practice this exercise with our lower arms, as this is a relatively non-intimate part of the body, and afforded us what I felt was the appropriate degree of physical contact for our relationship.

The last exercise I will describe is called the "core breath." Readers familiar with the *chakras* (sensitive points along the subtle vertical core of the body, and throughout the body, described in Hindu yogic and Buddhist tantric traditions) will recognize this exercise as a variation of chakra work. In Realization Process, these core points are used not only to cultivate the qualities associated with them, but also as the basis of deepened perspective, internal cohesion and connection with other people. When Anthony came to work with me, he was in his early twenties. He had been repeatedly raped by his stepfather as a child, and now felt "out of control" and abused in his promiscuous sexual encounters with older men. He appeared severely diffuse and disoriented, unable to make eye contact, diffident and apologetic in his manner. He also seemed extremely sensitive, responding and adjusting to small changes in my emotional state, without even glancing at me. After we had spent several sessions talking about his history and his current life, I taught him the core breath exercise. I asked him to find the center of his head. This is not the point in the center of the forehead usually considered the sixth chakra, but rather an area in the very center of the internal space of one's head (between the ears). As with all the core points, the center of the head can be recognized by an energetic feeling or "buzz" when one comes in contact with it. Locating the center of one's head also produces a feeling of resonance down through the whole vertical core of one's body.

Like many people who begin this exercise, Anthony first found the point too far up in his head but, with a little guidance, was able to find it exactly and to feel the resonance through his whole core. I then asked him to initiate his breath in the center of his head. This is a subtle, internal breath with a mental quality to it; it feels as if the mind is breathing within the center of the head. It also feels as if, just by breathing in the center of the head, one is breathing the whole vertical core of the body. After Anthony had found this with his eyes closed, I asked him to open his eyes and continue to breathe within the center of his head. I then asked him to notice how he could experience the room not just from the surface of himself, but from this core of himself.

Anthony recognized that this was a major shift from his usual way of being. He said, "I feel like there's space between me and the room." Being in the core of the body deepens one's sense of perspective. Instead of feeling directly impinged upon by the environment, objects and people seem to be further away. Over the next few weeks, he repeated this exercise with a point in the core of his chest and the core of his pelvis, initiating the subtle, "mental" breath and experiencing the room from within these points. This helped him feel more centered in his body, and gradually, along with the verbal aspect of our sessions, to feel more centered in his life. He talked about how he had always felt he had to do whatever other people wanted him to do. He felt that they were already in his body, displacing him, so there was no way to get away from them. When he remained in his core, however, he could feel that there was room for him to exist. He said that, for the first time in his life, he could see other people as separate from himself, that he could actually look at them and see who they were. He was surprised

to find that the men who had dominated and coerced him into sex did not seem as powerful when he actually looked at them. This enabled him to feel his true responses to them, and to say “no” when he did not want intimacy with them. This, in turn, gave him the courage to remember his stepfather and to begin to process the intense and complex emotions that he had felt towards him as a child.

Summary

In this paper I have showed how the Realization Process exercises can help heal many of the symptoms of childhood sexual abuse in adults. They can help people experience the deep inward contact with themselves that is the basis of self-possession, self-cohesion, and self-love. They can also help people remain in possession of themselves while experiencing contact with other people.

References

- Frawley-O’Dea, M.G. (2002). The long-term impact of early sexual trauma. Presented at the National Conference of Catholic Bishops, June 13, 2002.
- Freyd, J. (1994). Betrayal trauma: Traumatic amnesia as an adaptive response to childhood abuse. *Ethics & Behavior*, 4, 307-329.
- Rabjam, L. (2001). *The precious treasury of the basic space of phenomena* (R. Barron, Trans.). Junction City, CA: Padma Publishing.
- Van der Kolk, B. A., & Fisler, R. (1995). Dissociation and the fragmentary nature of traumatic memories: Overview and exploratory study. *Journal of Traumatic Stress*, 8, 505-525.
- Yuasa, Y. (1987). *The body: Toward an Eastern mind-body theory* (N. Shigenori & T.P. Kasulis, Trans.). Albany, NY: State University of New York Press.

Biography

Judith Blackstone, Ph.D. developed Realization Process over the past thirty years and teaches workshops and teacher trainings in it throughout the United States and Europe. She has also been a psychotherapist in private practice for twenty-five years. Her books include *The Empathic Ground: Intersubjectivity and Nonduality in the Psychotherapeutic Process* (SUNY Press, 2007), *Living Intimately*, *The Enlightenment Process* and *The Subtle Self*. Her work is based in New York City and Woodstock, NY. Email: blackstonejudith@aol.com.

USA BODY PSYCHOTHERAPY JOURNAL

The Official Publication of

United States Association for Body Psychotherapy

Jacqueline A. Carleton, Ph.D., Editor (jacarletonphd@gmail.com)

USABP Mission Statement:

The USABP believes that integration of the body and mind is essential to effective psychotherapy, and to that end, its mission is to develop and advance the art, science, and practice of body psychotherapy in a professional, ethical, and caring manner in order to promote the health and welfare of humanity.

USA Body Psychotherapy Journal Purpose:

This peer-reviewed journal seeks to support, promote, and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an interdisciplinary exchange with related fields of clinical practice and inquiry.

SUBSCRIPTION & BACK ISSUES

(all funds USD)

_____ \$65 (USD) Two year subscription

_____ \$35 (USD) One year subscription

_____ \$20 (USD) Single issue

_____ \$25 (USD) Keleman issue

2002 _____ Vol. 1, No. 1 _____ Vol. 5, No. 2

2003 _____ Vol. 2, No. 1 _____ Vol. 5, No. 2

2004 _____ Vol. 3, No. 1 _____ Vol. 5, No. 2

(Scler Issue)

2005 _____ Vol. 4, No. 1 _____ Vol. 5, No. 2

(Research Issue)

2006 _____ Vol. 5, No. 1 _____ Vol. 5, No. 2

(Boadella Issue)

2007 _____ Vol. 6, No. 1 _____ Vol. 6, No. 2

(Keleman Issue)

2008 _____ Vol. 7, No. 1 _____ Vol. 7, No. 2

(Lowen Issue)

(Research Issue II)

2009 _____ Vol. 8, No. 1 _____ Vol. 8, No. 2

2010 _____ Vol. 9, No. 1 _____ Vol. 9, No. 2

(Research Issue III)

POSTAGE

Shipping to U.S. and Canada included

International Orders need to include the following postage fees.

SUBSCRIPTIONS

The following postage rates apply *per year*.

_____ \$18 Mexico, Western Europe

SUBSCRIBER INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____ Country _____

E-Mail _____ Telephone (daytime) _____

An email address is required for electronic notification. A non-AOL address is preferred.

Amount Enclosed _____ Check ☐ Discovery ☐ Visa ☐ MasterCard ☐

Card Number _____ Exp. Date _____ Security Code _____

Signature _____

☐ I would like information about becoming a member of USABP



The United States Association for BODY PSYCHOTHERAPY

7831 Woodmont, PMB 294

Bethesda, MD 20814

Phone: 202-466-1619 Fax: 832-717-7508

E-Mail: usabp@usabp.org

Abstracts and Indexes available at www.usabp.org

The USA Body Psychotherapy Journal

The Official Publication of the
USABP

Editor

JACQUELINE A. CARLETON, PH.D.

Peer Review Board

SUSAN APOSHYAN, M.A.

DAVID BROWN, PH.D.

RUELLA FRANK, PH.D.

MARY J. GIUFFRA, PH.D.

BARBARA GOODRICH-DUNN

ELLIOT GREENE, M.A.

LAWRENCE HEDGES, PH.D.

JOEL ISAACS, PH.D.

GREG JOHANSON, PH.D.

BLAIR JUSTICE, PH.D.

RITA JUSTICE, PH.D.

ALICE LADAS, Ed.D.

ALINE LAPIERRE, Psy.D.

LINDA MARKS, M.S.M.

JOHN MAY, PH.D.

PATRICIA PALLARO, LCMFT, ADTR

MARJORIE RAND, PH.D.

LAUREL THOMPSON, M.P.S.

Proofreaders

ELIZABETH McMILLAN

DASCHA JENSEN

Journal Interns

SARAH HASSAN

ALEXA HUBBARD

DASHA JENSEN

SHAZEDA KHAN

NISHA KOCHAR

SHAWN LEE

ELIZABETH McMILLAN

Production Manager

ROBYN BURNS, M.A.

USABP BOARD OF DIRECTORS

VIRGINIA DENNEHY, PRESIDENT

PAUL BRIGGS, VICE PRESIDENT

LYNN TURNER, SECRETARY

JACQUELINE A. CARLETON, TREASURER

CHRISTINE CALDWELL

MARY J. GIUFFRA

KAREN JACOBSON

GREG JOHANSON

ALICE KAHN LADAS

KATHY SCHEG

KATY SWAFFORD

LAUREL THOMPSON

ADVERTISING INFORMATION

The USABP Journal accepts advertisements for books, conferences, training programs, etc. of possible interest to our members. Please contact usabp@usabp.org for more information.

VOLUME 6, NO. 2, 2007

Printed in the USA

CRITERIA FOR ACCEPTANCE

How does material in this manuscript inform the field and add to the body of knowledge? If it is a description of what we already know, is there some unique nugget or gem the reader can store away or hold onto? If it is a case study, is there a balance among the elements, i.e., back ground information, description of prescribed interventions and how they work, outcomes that add to our body of knowledge? If this is a reflective piece, does it tie together elements in the field to create a new perspective? Given that the field does not easily lend itself to controlled studies and statistics, if the manuscript submitted presents such, is the analysis forced or is it something other than it purports to be?

PURPOSE

This peer-reviewed journal seeks to support, promote and stimulate the exchange of ideas, scholarship and research within the field of body psychotherapy as well as an interdisciplinary exchange with related fields of clinical practice and inquiry.

To ensure the confidentiality of any individuals who may be mentioned in case material, names and identifying information have been changed. It must be understood, however, that although articles must meet academic publishing guidelines, the accuracy or premises of articles printed does not necessarily represent the official beliefs of the USABP or its Board of Directors.

The USA Body Psychotherapy Journal (ISSN 1530-960X) is published semi-annually by the United States Association for Body Psychotherapy. Copyright (c) 2008 United States Association for Body Psychotherapy. All rights reserved. No part of this journal may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording, or by any information storage and retrieval system, without written permission of the publisher.

Subscription inquires & changes of address should be sent to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814. For customer service, call 202-466-1619.

Subscription Rates: Single current issue \$20; \$35 yearly. Postage outside the US and Canada please inquire at usabp@usabp.org.

Postmaster: Send address change to *USA Body Psychotherapy Journal*, 7831 Woodmont, PMB 294, Bethesda, MD, 20814.

SUBMISSION GUIDELINES AND SPECIFICATIONS

First consideration will be given to articles of original theory, qualitative and quantitative research, experiential data, case studies, as well as comparative analyses and literature reviews. Submission of an article to the *USA Body Psychotherapy Journal* represents certification on the part of the author that it has not been published or submitted for

publication elsewhere.

Initial submission should be e-mailed to jacarletonphd@gmail.com as an attachment in Microsoft Word.

Manuscript should be double-spaced in 10pt. type, with at least a one inch margin on all four sides-please include page numbers, otherwise manuscript should be free of other formatting.

Title, full authorship, **abstract of about 100 words and 3-5 key words precede the text.** Please include an endnote with author's degrees, training, mailing address, e-mail fax, acknowledgement of research support, etc.

Authors are responsible for preparing clearly written manuscripts free of errors in spelling, grammar, or punctuation. We recognize that the majority of contributors are not professional writers, nor do they function in a publish or perish mode. Furthermore, we are aware that the work of our profession is sometimes pragmatic, associative, intuitive, and difficult to structure. However, a professional journal such as we envision normally accepts only pieces that are fully edited. Therefore, we may occasionally suggest that writers find a reviewer to edit their work before it can be accepted. We will suggest names of possible editors if requested.

References: References within the text should include author's surname, publication date and page number.

Full attribution should be included in bibliography at end. *For books:* surname, first name, book title, place, publisher, date of publication. *For periodicals:* Surname, first name, title of article in quotes, name of publication, year, volume, and page numbers. Or, consult the latest edition of the Publication Manual of the American Psychological Association.

LETTERS TO THE EDITOR

The editors are eager to receive letters, particularly communications commenting on and debating works already published in the journal, but also suggestions and requests for additional features or departments. They may be sent to the email address below. A selection of those received will be published in the next volume of the journal.

CORRESPONDANCE ADDRESS

Jacqueline A. Carleton, Ph.D.

Editor

USA Body Psychotherapy Journal

115 East 92nd. Street #2A

New York, NY 10128

212.987.4969

jacarletonphd@gmail.com