#### FURTHER IMPLICATIONS OF PRESENCE IN MANUAL THERAPY

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#### **Abstract**

This paper describes and advocates the *practice of presence* as a tool of healing and transformation in the manual therapies. The authors discuss the advantages and effects of presence in the therapist, methods and reasons for promoting presence in the client, and the relational aspects of presence within the client- therapist relationship. Specific exercises and therapy vignettes are provided to supply the reader with examples of the role of presence in clinical work.

It is the authors' opinion that the concept of presence may become a common denominator for understanding the effectiveness of somatic approaches in body-centered therapies. Presence, when properly understood and applied, should have new and profound influence on all therapeutic modalities. There would seem to be no reason that the practice of presence would be excluded from any therapy session except for lack of training, understanding, and experience on the part of the practitioner. The practitioner's sensitive accompaniment is fundamental to the client's journey towards body-centered self-awareness. The client's progress towards body-centered self-awareness has many stages of growth, and is comparable to a spiritual pilgrimage - there are places of reflection, resistance, reaffirmation, and insight. The somatic therapist has the role of supporting this journey through the facilitation of presence.

## **Introduction**

The key, but often unnamed and possibly missing, ingredient in somatics approaches is presence. This is a state of awareness that can only be experienced through the body in which we become conscious of a correspondence between our internal and our external environment; what we sense inside our bodies can be felt to relate directly to what we are sensing outside our bodies. In this state one may become aware of a different center of consciousness besides the thinking mind, a different ontology - our basic experience of being and existence. For purposes of this paper the authors will use the word *presence* as synonymous with being aware of phenomena as they occur – which in fact changes the phenomena. The term *presencing* will be used to mean the conscious <u>choice</u> to practice presence. In a state of continual presence one may experience gains in some or all of the following: clarity of mind, deep relaxation, unitary consciousness, peacefulness, deep stillness, profound silence, physical euphoria, no time or what has been called *nunc stans*. One may also experience a personal interaction with what in metaphysics is sometimes call *primary causation* – an awareness of the creative possibilities available in any moment.

It is suggested that bodyworkers and other manual therapists have a unique contribution to make in the practice and understanding of presence as a tool of healing and transformation. This uniqueness stems mainly from the fact that it is possible to learn to use touch as a way of facilitating and monitoring the effects of client<sup>4</sup> presencing. Also, the presencing practitioner - by conjoining the client in presencing activity - can become an additional source of change in the client's somatic experience. By joining with the client in attending to bodily sensation, the practitioner may precipitate an *episode of shared presence*; magnifying the client's comprehension of internal

<sup>&</sup>lt;sup>1</sup> There are two primary approaches to bodywork and other hands-on therapies in the US. The first, and probably most taught, researched, and practiced is treatment oriented manual therapy. This can include a broad spectrum of treatment modalities from clinical and medical massage to spa and sports massage. The other primary approach to bodywork has been loosely called 'somatics,' meaning that there is some use of the body-mind connection in working with the client. This is referred to in Hanna Somatics as "working with someone as opposed to working on someone" (Mower 1993). A basic assumption of somatics is that therapeutic change must include the relationship between personal body-mind awareness and personal well-being.

<sup>&</sup>lt;sup>2</sup> Taking the theme of presence we are standing on the shoulders of great philosophers, spiritual teachers, scientists, somatic bodywork pioneers, dancers and psychologists: Martin Buber (1986), Fritjof Capra(1992), Moshe Feldenkrais(1990), Eugene Gendlin (1996), Elsa Gindler (in Johnson, 1995), Thich Nhat Han(1987), Thomas Hanna(1993), Martin Heidegger(1962), <u>Jon Kabat-Zinn</u>(1990) Fr Thomas Keating(2000), Marion Rosen (2003), Carl Rogers(1989), Ida Rolf(1989), Eckhart Tolle(2001), and Milton Trager(1987) to mention but a few.

<sup>&</sup>lt;sup>3</sup> In this state there is a feeling of connection to all times, or as one physicist has put it, all presences (Barbour 2002). In this state there is awareness that there is *no space*, no separation between objects or places. One experiences what quantum physicists call primal causation – the convergence of all possibilities. There is a sense that life is continually being remade in the present moment and that we can be consciously involved in our own creation.

<sup>&</sup>lt;sup>4</sup> The term "client" (in lieu of the term "patient") is used throughout this paper to refer to an individual who receives treatment. This terminology is customary in the professions of bodywork and psychotherapy. Whereas in some manual therapies "client" and "patient" can be used interchangeably.

phenomena - including the interactive nature of his/her thoughts, emotions and physical sensations.

Typically, clients are but dimly aware of their internal environment, particularly kinesthetic signals. Learning to be present in bodywork involves the process of bringing awareness to aspects of experience that are often in the "unconscious" realm. According to Thomas Hanna (1995), "It is only through the exclusionary function of awareness [into body parts] that the *involuntary* is made *voluntary*, the *unknown* is made *known*, and the never-done is made *doable*. Awareness serves as a probe, recruiting new material for the repertoire of voluntary consciousness." This is important because it enables a parallel apprehension of the inner experience of self, which is a strong foundation for the therapeutic process in bodywork. The phrase *inner experience of self*" refers to awareness of inner state of being – important for the ongoing, constructive process involved in the creation of sense of self (Greenberg & Van Balen, 1998).

### A Common Bodywork Scenario

In many bodywork environments the focus of the practitioner is on the delivery of a massage aimed at relieving muscle tension, pain, and other client complaints. Often the massage is given using techniques so familiar to the therapist that it can be delivered automatically. The intention of the practitioner can be to use his/her hands to knead, press, and stretch or otherwise manipulate tissue – to provide symptomatic relief for the client. When the client expresses discomfort or emotions arise, the practitioner may vary the technique but often considers inquiry to, or discussion of, the client's internal experience as bordering on "psychotherapy" and thus outside his/her scope of practice. These kinds of sessions typically involve little verbal communication other than the accompaniment of small talk and or the recording of symptoms. The practitioner is often focused on moving through the massage in a smooth, efficient manner so that both sides of the client's body have been massaged within 50 minutes. The practitioner's hands "know" the routine and his/her mind is free to wander. The client often experiences pleasant drifting sensations involving a disconnect from the thinking and observing mind. This unconscious drifting is often described as "spacing out." The therapist and client may be each floating their own separate worlds, connecting again only when the session is over.

The above scenario is described to create a counterpoint to a different kind of bodywork session –where the practitioner's intention is to *accompany and support* the client's inner experience. Integral to this work, the practitioner focuses his/her attention on the emerging phenomena of the client's process. This will typically involve inviting the client to share information while tracking his/her internal physical experience, emotions, and sometimes memories and stories about her or his life <u>as they emerge</u> during the session. These body-centered spontaneous sharings can reveal clients' core dilemmas and hopes. While the impact of these sharings can be challenging and daunting, many practitioners, as they mature will eventually encounter such situations in practice.<sup>5</sup>

<sup>&</sup>lt;sup>5</sup> Where states have regulated massage and somatic therapies, many have incorporated guidelines that include body-centered approaches that involve client participation and verbal interaction(c. f. North Carolina Guidelines – Board of Massage and Bodywork Therapy. "Subject Matter for Approved Courses Include: Body-centered somatic psychology, psychophysiology, interpersonal skills – which may include

This paper is aimed at the growing number of bodyworkers and other manual therapists who are inclined to incorporate an intentional focus on and trust in the client's inner experience into their practice<sup>6</sup>.

# **Presence in Bodywork Practice**

One way the therapist/practitioner can practice presence is by monitoring or witnessing the sensory information that comes through her/his own body. In every moment the body is relaying sensory information. As awareness of these sensations grow, it is possible to suspect that all sensations produce thought responses (including memories, images, emotions, cognitions). Correspondingly it is possible to notice that thoughts themselves are accompanied by bodily sensations that seem to generate more thoughts. One could hypothesize that thought and sensations are epiphenomenal (i.e. linked together or interrelated). When any sensory phenomenon is observed – along with accompanying thoughts and/or visceral responses - the individual is *present*. There are four parallel channels of sensing that make up presence:

- 1. external observation (external sensing),
- 2. internal observation (internal sensing),
- 3. mindful thought (as comprehension and integration of internal and external information) and
- 4. the conscious choice to be present or presencing<sup>7</sup> (reflexive or interactive apprehension autopoesis.)<sup>8</sup>

This paper will include reference to these four aspects of presence within the context of presenting some of the 'how-tos' of working in presence.

# **Presence in the Therapist**

In order to accompany clients into a presencing of their bodily experience it is essential that the practitioner-therapist be adept at self-presencing. Much practice is required to learn to be sensitive to the degree of a client's somatic awareness or the unique sensations a client is experiencing. There are two primary elements to attend to: the therapist's own state of presence, and the promotion of presence in the client. The therapist's own state of presence involves, first, the choice to be centered or in a state of self-presencing, and second, the intention to promote this state of presence in the client. Presence is then a shared tool of the therapy that is being practiced in synchrony by both parties.

Becoming body-centered is often the first step towards achieving a state of presence. Some massage and bodywork schools teach students to take a few minutes to

communication skills, boundary functions, phenomena of transference, countertransference, and projection."

<sup>&</sup>lt;sup>6</sup> This body-centered, client-centered approach is similar in orientation to Carl Roger's client centered psychotherapy. "Trust [in the client]... depends on the actualizing tendency in every living organism - to grow, to develop, to realize it's full potential" (Rogers, 1989)...

<sup>&</sup>lt;sup>7</sup> This is similar to the conscious joining that Martin Buber called "I-Thou" (Horwitz, 1988).

<sup>&</sup>lt;sup>8</sup> Autopoesis refers to self-maintaining body-mind systems, and an epistemological approach to cognition and self-learning which implicitly includes reflexivity, internal organization and creativity These concepts can also apply to the somatic interactions between client and practitioner.

center themselves before entering a treatment room or putting their hands on a client. This can be achieved through the simple practice of closing one's eyes and taking a series of long, full breaths while consciously moving attention inward and away from the busy thoughts of the day. Centering may produce the qualities of balance, openness, groundedness and inner quiet.

The practitioner can bring himself/herself into presence and remain in presence by monitoring his/her own bodily sensations. Conscious breathing, conscious weighing, conscious awareness of balance and or effort expenditure – all are ways of remaining present. The following paragraphs provide examples of some of these techniques body therapists may use to achieve and maintain self-presence.

#### Weighing

One of the simplest ways to remain present or in a continuous state of mindfulness is to monitor the effects of weighing or giving weight. Whatever else is going on in the practitioner's mind, he/she can be asking, "how much does it weigh?" or "how does it (the tissue) respond to my weight?" The practitioner can also periodically step back and weigh parts of his/her own body and then notice the body/mind changes of presencing that occur. This device is deceptively simple... to apply it automatically and with great specificity requires much practice.

**Example:** Switch to feeling the effects of weight when working with a client and notice what happens. Notice any changes in physical or mental effects in yourself and your client. There are two aspects to feeling or giving weight. First, notice how much lifting or compressing effort your muscles are expending. Second, you may notice some the tingly sensations in your palms or other body parts. The linear rays of gravity are the triggers for these tingly proprioceptive signals. As you lift and weigh or compress and lengthen the muscles, joints, and connective tissue, feel the client's tissue response. Be aware of the weight and the act of consciously interacting with gravity; this activity will facilitate presence because the experience of weight only exists in the moment.

#### **Measuring Effort**

Another form of sensory information that can be tracked is effort, "how much or how little effort am I expending to perform this task?" In some somatically oriented work, e.g. Trager and Feldenkrais, it is asserted that the less we effort the more effective we are - *less is more*. The practitioner who self-reflects on these questions not only remains present, but also tends to work more easily - with more relaxed hands, thus opening the door to continual improvement and modeling/facilitating for the client the relationship between ease and openness and letting go. <sup>10</sup> If we presence or continually

<sup>&</sup>lt;sup>9</sup> The practice of *weighing* to achieve presence or what he called "hook-up" can be directly attributed to Milton Trager (Blackburn 2004).

<sup>&</sup>lt;sup>10</sup> This is similar to the jazz musician who is improvising in the moment – feeling for what needs to come next based on the results thus far experienced, rather than reading it off of a score.

monitor our efforting (versus the results of our work with the client) we can refine our approach through a process of correction and feedback.<sup>11</sup>

Example: When you are working with your client, ask yourself: "Can I do less than I'm doing right now?" If you are applying pressure or kneading compressing or stretching tissue back off to the point that you feel more comfortable in your hands or the rest of your body. Feel the shape, the temperature, the texture, and the tonus of the tissue under your hands. Notice if you can feel the client's breath pulse, cranial rhythm, energetic movement, and connections to other body parts. You may notice, as you track these sensations, that your hands soften and become much more subtle and less forceful. You may find through this process of presencing that information about how and where to work with the client emerges — ... everything, even your own thoughts, seems to be effective in surprising ways and you feel refreshed and invigorated by the experience. You may also notice that the client has joined you in this experience.

### **Sensory Paradoxes**

There are other techniques, which can keep a practitioner present. These experiences can be grouped under the rubric of sensory paradoxes: weighing nothing, listening to silence, feeling stillness under movement, seeing into nothingness, touching emptiness, apprehending with the heart. Presence is actually being practiced as sensory abilities are heightened.

Example: Ask yourself the following kinds of questions: What is the weight of nothing? Try to feel it with your hands. What is the sound of silence? Can you hear it behind or underneath all other sounds? What is the feeling of stillness inside? Can you feel the stillness in your own body? Can you feel the stillness in nature? Can you feel the stillness in your client's body? How do your perceptual abilities change when you become aware of these subtleties? Pause, stop what you are doing, remove your hands and ask the client to feel down into the places you have just been touching. Meanwhile let your eyes soften to a gaze by feeling sensations in your own body and patterns you discern in your client's body. Before you return your hands to the client's body, ask if it is okay to not know what needs to happen next? Ask the not-knowing and notice what insights surface. Notice what kinds of connection you feel with the client when you come back in with your hands.

#### **Promoting Presence in the Client**

The process of facilitating the awareness of presence in clients involves working with intention, touch and words to stimulate the client's ability to apprehend his/her own bodily experience. The therapist's intention to be in presence can be used to promote aspects of presence in the client. Presence can be communicated both verbally and non-verbally to the client. In bodywork, nonverbal communication can involve distinct *presencing qualities*, all of which can be conveyed through the practitioner's hands as he or she touches the client:

<sup>&</sup>lt;sup>11</sup> c.f. Hannah (1993), "And when sensory awareness of the state of one's muscles results in the adjustment of those muscles, it is a case not of "mind over matter," but sensory over motor. However the changed motor patterns cycle back and give new sensory impressions, which again readjust the muscular coordination and so on. It is a constant feedback loop that never ceases from birth until death."

- Sustained and clear focus communicating the overall intention of the practitioner to attend to the client's experience
- Receptivity communicating the practitioner's listening attention
- Trustworthiness communicating the practitioner's reliability and safety
- Curiosity communicating the practitioner's accompaniment into an unknown and unfolding process
- Patience communicating a state of non-hurried, relaxed openness to the client's emerging self-awareness

Teaching the client tools to support presence is best accomplished as an integral aspect of the bodywork session – in other words, incorporating the teaching into hands-on work rather than introducing it as a topic for discussion. The following paragraphs provide specific techniques for promoting presence in the client.

### **Working with Breath**

"Keep breathing, take a deep breath." When working on an area of the client's body that is particularly tight or in an area that is associated with emotion it may be noticed that the breathing rhythm changes. Typically, there is either a pause in the breathing rhythm (a holding of breath) or a shift to a shallower pattern. Such a change in breathing pattern may indicate a lack of presence in the client, and is often associated with the unconscious process of "holding on." The authors suggest that as an attempt is made to hold onto experiences, or to prevent awareness of experiences, the situation can be described as being 'stuck', static and full of pain and resistance. In contrast, when the client directs his or her inhalation into a particularly tight or emotionally laden area of the body, this can release constriction and emotion, and is one method of using the breath to remain in connection with present-moment experience. Taking in and embracing what is occurring right now and then letting go of the experience on the exhale becomes a living metaphor for all of life.

As with the breath, everything, every life form, every experience, every action, every reaction has the components of active engagement, absorption, integration, and release. (The awareness of this can be called the Tao or way of harmonious living Blackburn 2002) There is a joy in embracing, a joy in absorbing, and a joy in letting go. Presencing, or experiencing these aspects of life rhythms consciously, allows a fuller participation in the dance of life. Conscious breathing can be like that.

Example: Have the client breathe into – as though inflating - the tissue that is in contact with the practitioner's hands with breath (not muscles). The practitioner's hands can serve as a focal point for the client, to assist with the focus of the breath into a specific point or area of the body. You might suggest that the client "push up against my hands with your breath." This allows the client to connect and interact with, and then to embrace or absorb, the actual sensations in the tissue and bodily area. This is then followed by a letting go or releasing of that momentary experience with a deep exhalation. This can produce a very palpable change in tissue tonus and gives the client a self-help tool for the release of – and connection to -tension, pain, and emotional holding.

#### **Tactile stimulation**

It is not uncommon to encounter a fearful response to touch in clients who feel protective of an area of their body due to chronic pain, injury or emotional trauma. It can be helpful for the practitioner to gently tap or flutter small portions of the client's body, for example the facial muscles, in order to draw the client's awareness into that part of the body without triggering a fearful, or sympathetic response. The authors have found that using such tactile stimulation, such as precise tapping in combination with compressions, and positional releases can be highly effective in coaxing the client's awareness from unconscious to conscious involvement in very specific places – whilst maintaining a parasympathetic state. The stimuli used and the words that accompany them are geared to evoking healthy intrinsic tonus by bringing the client into presence – rather than a "flight or fight" or sympathetic response (Blackburn 2002). It is the client's own somatic experience of presence that seems to make the difference – rather than something that the client mystically appropriates from the practitioner.

#### **Verbal Interaction**

Inviting the client to talk about his or her bodily experience during bodywork facilitates client identification with and articulation of *inner awareness*. Inner awareness involves sensing the experience of the body – what the tissue or area of the body feels like from *an internal perspective*. The easiest introduction to verbal interaction involves attending to internal awareness in response to the practitioner's hand pressure. For example, asking the client to find words to describe physical awareness or sensation in the area being worked on. For clients who are having difficulty, it may be useful to suggest that he or she use awareness of the treating hand's pressure as a focal point for bringing attention under the skin and into the deeper levels of internal perception. The practitioner's invitation to articulate bodily awareness tends to promote a sense of self-curiosity and interaction in the client –and can facilitate client access to information/understanding/insight on bodily state.

**Example:** Practitioner: "While I'm working here on your shoulders, bring your attention to how it feels inside of your body in the area underneath my hands." Next: "What do you notice?"

The practitioner monitors any changes in the tissue under his/her hands as the client responds to the question. The practitioner suggests that the client continue to stay aware in this part of the body.

Practitioner: "I'm going to continue working here. While I do, you might continue to pay attention to how it feels and what you notice in here." The practitioner continues manual work and pauses often to elicit what the client is noticing inside the body. The client's awareness will typically focus on the physical aspects of experience, for example "It feels like a hard knot inside." With continued focus on inner awareness, information about the inner body may include emotional awareness or associations, for example "The knot is getting softer and I'm aware that I'm feeling a little sad..." or "It just occurred to me that this area my body started to feel really tight when I was visiting my brother last week."

#### Working with pain and verbal interaction: moving away from symptomatic relief

Most clients wish for the removal of their pain. They see their pain as something that inhibits their expression and full involvement in life. When the practitioner verbally accompanies a client who has acute or chronic pain, it may be possible to follow the reversal of the cycle that led to the pain, helping the client to focus into the pain by means of words and touch. It is important not to use so much pressure that the pain signals are over-ridden. The client can learn to contact the pain from within, mapping and investigating the various qualities of the pain. The practitioner can encourage the client to come in more fully, more objectively, translating the pain into a collection of basic sensations (e.g. burning, pulsing, sharp, dull, aching, stabbing, freezing, throbbing, expanding, diffuse). While the client is describing his/her experience, the practitioner monitors the client's somatic response through touch and observation, and encourages the client to stay with the process as the sensations change and to report any other experiences such as images, sounds, feeling states, and reactions or shifts in other parts of the body.

Pain signals can then become a direct channel internally and externally for connecting to holding patterns in the body. The symptoms of any particular pathology – physical or mental pain - can be worked with to undo aggregates of physical, emotional/mental and spiritual patterns, i.e. conditioning. In working this way, a fuller understanding of illness and disability may be arrived at, as highly customized markers on the clients' paths towards wholeness. In this way the practitioner can act as a trail guide or companion who helps clients learn about and interact with their illness as a part of their own process or path. The role of the practitioner with this approach can humorously be called *path-ology*.

Working with presence and verbal interaction with clients can help to shift the focus away from symptom relief and towards responsibility for change. The practitioner uses his or her tools and sensitivities to support the client towards increased awareness and integration of various aspects of awareness (external/internal/cognitive). The roles of both the somatic therapist and the client are shifted away from the traditional therapist/client relationship model.

If a client continually seeks symptomatic relief, it can be disempowering to both the client and the practitioner. A possibility for mutual understanding and sensitivity to life processes may be missed, keeping both client and practitioner at a lower level of development and awareness. Many of the fears – of both client and practitioner – are closely related to feelings of powerlessness over events in the body and in life in general. Being present with - and embracing - a client's internal process in the face of fear, can be a courageous act by both client and therapist, and enhances the practitioner's ability to accompany clients as they move towards fuller lives and self-understanding.

# **Assessing Presence**

Integrating verbal interaction into body therapy is an active and often challenging process for clients who are not used to being in connection with their inner bodily experience. For the practitioner, the therapeutic challenge is to facilitate continued attention to the process. For example, the client may start talking about his or her experience from a "thinking," rather than an experiencing, perspective (Price, 1999). Guiding the client toward inner awareness involves *assessing* presence – in other words,

being able to discern whether or not a client is in presence, or engaged in presencing through direct apprehension.

When a client is first seen, he or she comes in with various abilities and inclinations toward presencing inner experience. The client's ability and inclination to be present can be assessed early in the session through the practice of a body scan prior to table work (see also Ford, 1992). An inner body scan involves moving awareness through the body from head to foot, noticing where there is discomfort, tension, pain, or a sense of energy blockage or emotion. Many clients can do this easily when guided and will describe inner awareness during a body scan with great facility. For example, a client who has back pain may say about his back during a body scan: "It feels like a dull ache. I know my back is tense because sometimes it spasms. I've noticed that the spasms are more likely when I'm stressed and anxious." This client's response indicates that he/she will probably be able to easily access awareness of his body during massage.

Sometimes clients need to be *taught* how to access inner body awareness. This is particularly true for clients who tend to dissociate from their bodies. Dissociation involves separation of consciousness from awareness of present experience or from aspects of the self<sup>12</sup>. Dissociation is understood to be a protective and coping strategy for physical and emotional pain (Herman, 1992); dissociation from the body is often clinically apparent in clients with chronic physical pain or in clients with a history of psychological and physical abuse (Timms and Connors, 1992; Ford, 1999; Maltz, 1987), and is also apparent in bodywork clients who tend 'to live in their heads' to avoid focusing on their physical or emotional experience. Teaching clients to attend to inner body awareness is, in large part, about teaching clients to increase their capacity for somatic and emotional connection, important for integration, balance and self-regulation (Siegel, 1999).

For the practitioner to discern presence *during* bodywork involves using a hands-on assessment. The practitioner can learn to distinguish client presencing from a lack of inner awareness. When a client is presencing, the practitioner should notice a change of tonus in the bodily tissue. To the practitioner this may feel like increased vitality in the tissue, and is typically accompanied by a shift in the client's overall demeanor toward a state of deep inner-attention. The client's ability to *maintain* the presencing activity is also something that can be "felt" through the therapist's hands. When the client "leaves" – (i.e. his/her awareness absences the inner body), this can often be sensed immediately by the practitioner; there is a reduction in the *élan vital* in the tissue. In a study of a body-oriented therapy process with women in recovery from childhood sexual abuse, research clinicians were asked to assess the quality of client presence during sessions. The results of this study suggest that there is a positive relationship between presencing and emotional awareness (Price, 2004).

Dissociation is conceptualized on a continuum from normal, everyday experiences (absorption) to moderate experiences of dissociation involving depersonalization, to more severe and uncommon experiences (dissociative disorders). Absorption is a normal everyday aspect of dissociation involving the experience of concentrated focus on something to the point of eliminating other aspects of awareness – for example driving home while daydreaming without conscious attention to the act of driving. Depersonalization – a more moderate dissociative experience, involves the feeling of separation or detachment from self or environment. Dissociative disorders involve an interruption in waking consciousness, for example a lack of memory for events in life history, or fragmentation of identity (Carlson & Putnam, 1993).

Exercise: Find a bodywork client who can easily move in and out of inner body presencing. Place your hands on either side of the client's upper chest (one hand on front and one hand on back) while the client is lying prone. Ask your client to attend to his/her thoughts and not his/her body. During this time, bring your attention to the client's tissue and notice the quality of the tissue between your hands. Then ask the client to move his/her awareness into the area between your hands. Ask the client to tell you when she/he is present in the space between your hands. What do you notice in your hands? What are the indications of presence that are available to you? Is there a sense of increased stillness in the room or in the client's body? Is there a sense of deepened attention within the client? Do you sense that your hands can move deeper into the tissue of the client during presencing? Each practitioner will have his or her own kinesthetic ways of assessing presence. Part of the challenge is to recognize the cues are that are specific to you. When you have repeated this exercise many times and feel confident in your ability to assess presence, ask the client to silently choose to either stay in presence or to remove presencing attention from the space between your hands so that you can practice distinguishing presence from non-presence.

#### **Dual Awareness**

Being attuned to self and client involves keen attention at many levels of awareness. The areas of awareness in the practitioner called-on in bodywork practice typically include:

kinesthetic – "What do I feel under my hands?" somatic – "What do I feel in my own body?" visual – "What do I see in client bodily movement and expression?" auditory – "What is being said and how is it being said?" emotional – "What do I notice on an emotional level?" energetic – "What is the energetic quality of the experience?"

Touching with the intention of attending to inner client experience, allows the practitioner to tune into the inner state of the client – to feel the quality of tissue, breathing patterns, and notice facial expressions that may reflect physical, energetic, or emotional experience. It is important for the practitioner to simultaneously track his/her *own* inner awareness while attending to the awareness of the client. This is particularly important in moments of intensity – for example when working in an area that is painful for the client, or in an area that brings up difficult emotions - such as anger or sadness – in the client. It is possible to maintain somatic awareness during the session by asking "What do I feel inside when I am working on this area?" The advantage of dual somatic awareness is that it typically deepens the client's therapeutic process. Presencing in both client and practitioner supports sustained presence for both and facilitates the emergence of more self-awareness and/or release of holding patterns in the body.

#### **Meta-thoughts**

Most people experience a constant stream of seemingly random thoughts and feelings in the background of their activities that rarely concern what is occurring in the present moment. For purposes of this paper these non-present thoughts and feelings are

termed *meta-thoughts*. The practice of tracking inner awareness can help practitioners deal with meta-thoughts as they arise during a session. A helpful presencing technique is to acknowledge that this is occurring e.g. "I am thinking of having a cup of coffee." This acknowledgment opens up a *witnessing* portion of the mind, a channel of presence that *notices* the mental activities, thus returning the mind to presence.

During a session many of the practitioner's meta-thoughts may be inter-relational with the client. In other words, they have to do with his/her perceptions, judgments, and projections relating to *that* client; the term for this process in psychology is 'counter-transference' Preconditioning predisposes practitioners to make up stories that accompany whatever is gleaned from the client. The practitioner's emotional responses to persons and the situations they represent commonly arise out of a personal background. The authors suggest, for example, that we often find ourselves making up stories about the client based upon what the client may have said to us as well as inferences derived from what we pick up with our hands. These self-generated stories take us out of noticing what is actually occurring in the present moment.

As meta-thoughts are witnessed, awareness may occur of the bodily sensations that accompany them. Surprisingly, this process of self-monitoring by the practitioner of his/her meta-thoughts and projections can contribute to <u>more</u> sensitivity to the client's physical and psychical states.

# **Dual awareness – Dual presencing**

Therapist and client presence are intimately intertwined. Being present to self and client in bodywork requires a dual state of presence that takes both practice and discipline <sup>14</sup>. The following example relates a practitioner's experience of dual awareness.

#### Example:

The muscles in Carol's neck were taut. She had come into the session complaining of a stiff neck. The first thing I did on the table was to place my hands gently on her shoulders. I began by using my hands to scope into her tissue beyond the obvious tightness of her neck muscles. I could feel the constriction in her breathing, and I looked at the rise and fall of her chest and noticed the shallowness of her breathing pattern. I sensed an element of restricted emotion, and after waiting a couple minutes to allow us to both settle into each other's presence, I placed one hand gently on her upper chest while cradling her head and neck in my other hand. Tears came to her eyes almost immediately, and slowly ran down her cheek from under her closed eyelids. I became aware of a resonant sadness inside me. I reminded myself to breathe... noticing that my legs were tightening slightly as my system responded protectively to my/her sadness. I took a couple deep breaths and re-centered myself while simultaneously refocusing my

<sup>&</sup>lt;sup>13</sup> The term 'transference' is used in psychology for the process of conscious or unconscious emotional, ideational, or physical response to the therapist by the client and 'countertransference' when it is the process of the therapist in response to the client or client's material (Pearlman & Saakvitne, 1995).

<sup>14</sup> (Rogers, 1989) "...like meditative experience, when I feel myself as a center of consciousness, and yet with that extra-ordinary sense of oneness, the separateness of each person [client and practitioner] present has never been more clearly preserved... I felt its presence without the barricades of *me-ness* or you-ness."

attention to my hands. The tissue in her neck started then to soften and she began to breathe more deeply.

This example suggests the therapeutic impact of dual awareness. The practitioner was able to stay in presence, and to better attend to the client's experience - and this, in turn, enabled a state of deeper release in the client.

Dual awareness provides a positive way to work with in-the-moment countertransference. Maintaining inner self-awareness during bodywork practice can also provide practitioners with information about their own patterns of response and areas of unresolved psychological material. Supervision may also be necessary to work through countertransference issues and to support the practitioner with the therapeutic aspects of bodywork process. Working with countertransference information in supervision, the recall of inner patterns of response can facilitate the therapist's growth and ability to maintain appropriate boundaries and presence in future sessions (Blackburn, 2003).

# **Co-conscious presencing**

When practitioner and client are both engaged in intentional and focused presencing, they can experience an enhanced state of awareness that serves to heighten and support mutual therapeutic gains. This experience generally occurs when the practitioner and client are both focused into the same area of the body. The process of co-conscious presencing was utilized in a study comparing body-oriented therapy to a standardized massage for women in recovery from childhood sexual abuse. The body-oriented therapy participants learned to bring their awareness into their bodies and to "presence" their bodily experience. The study findings indicated that the presencing process facilitated the development of a somatic self–perspective, or embodiment, among the body-oriented therapy group –providing new ground for self-knowledge and insight (Price, 2005).

**Example:** Both practitioner and client may be focused-in on the abdominal area of the client: the practitioner with a hand on the abdomen and a hand underneath the client's low back. When both are keenly focused on the same area, and fully present, they are engaged in a witnessing and accompaniment of the process that allows the inner-bodily self of the client to unfold and guide the journey. This is an extremely supportive and empowering experience for the client and practitioner.

#### Summary

In conclusion, the state of presence and the choice to practice presencing can enhance the therapeutic process in bodywork and other manual therapies. The practice of self-presencing in the practitioner, promoting client presencing during sessions, teaching clients how to practice presence on their own , and the willingness to enter into a state of shared presencing – all of these aspects can be a model of somatic practice that strives to move both client and therapist into a more interactive and evolving process - and one that we believe ought to be explored, researched more thoroughly and incorporated into continuing education in all body-centered therapies.

## **References**

- Barbour, J. (2000). The End of Time. Oxford University Press, New York
- Blackburn, J. (2004). Trager® 2: Hooking up: the Power of Presence in Bodywork. Journal of Bodywork and Movement Therapies, 8(2):114-121
- Blackburn, J. (2002). Working with Fear. Washington Massage Journal. Sept/Oct 2002
- Blackburn, J. (2003). A Call for Supervised Practice. Washington *Massage* Journal. May/June 2003
- Buber, M, 1986. I and Thou, Second Edition. Macmillan Publishing, New York.
- Carlson E, Putnam F. An Update on the Dissociative Experiences Scale. Dissociation. 1993; 6(1): 16–27.
- Capra, F and Steindl Rast, D. (1992). Belonging to the Universe. Harper Collins, San Francisco
- Feldenkrais, M. (1990). Awareness Through Movement. Harper Collins,
- Ford, C. 1992. Where Healing Waters Meet: touching the mind and emotions through the body. Station Hill Press, NY.
- Ford, C. 1999. Compassionate Touch: the body's role in emotional healing and recovery. North Atlantic Books, CA.
- Greenberg, L., & Van Balen, R. (1998). The theory of experience-centered therapies. In L. Greenberg, J. Watson, & G. Lietaer (Eds.), *Handbook of Experiential Psychotherapy*. New York: The Guilford Press.
- Gendlin, E. (1996). Focusing Oriented Psychotherapy. Guilford Press, NY
- Hanna T. (1995) What is Somatics? In: D. Johnson, ed. Bone, Breath and Gesture: Practices of Embodiment. Berkeley, CA: North Atlantic Books; 341–352.
- Hanna, T. (1993). The Body of Life: Creating new pathways for sensory awareness and fluid movement. Healing Arts Press, Rochester, VT.
- Heidegger, M. (1962) from Macquarrie, J and Robinson, E. Selections from Being and Time. Harper and Row, New York
- Herman J. Trauma and Recovery. NY, NY: HarperCollins Publishers; 1992.
- Horwitz, R. (1988). Buber's Way to "I and Thou." The Jewish Publication Society, NY.
- Johnson, D. (Ed.) (1995). Bone, Breath and Gesture: Practices of Embodiment. North Atlantic Books, Berkeley.
- Kabat-Zinn, J. (1990). Full Catastrophe Living. Dell Publishing, NY.
- Keating, T. (2000). Open Mind, Open Heart. Continuum International Publishing Group, London.
- Maltz, W., & Holman, B. (1987). Incest and sexuality: A guide to understanding and healing. Lexington MA: Lexington Books.
- Mower, M. In Memory of Thomas Hanna. Massage, Nov/Dec. 1990
- Nhat Hanh, T. (1987). The Miracle of Mindfulness. Beacon Press, Boston Massechusetts
- Pearlman, L. & Saakvitne, K. (1995). Trauma and the Therapist: Countertransference and Vicarious Traumatization in Psychotherapy With Incest Survivors. W. W. Norton & Company, NY.
- Price, C. (1999). Fantastic Voyage/Fantastic Voyagers: A Story of Connecting Inside and Using Imagery during Bodywork. Somatics, Vol. 12(4): 32-34.
- Price, C. (2004). Body-oriented therapy in sexual abuse recovery: A study of efficacy, dissociation, and process. (Doctoral dissertation, University of Washington, 2004). Dissertation Abstracts International, DAI-B 65/05.

- Price C. (2005). Body-oriented therapy in recovery from childhood sexual abuse: An efficacy study. Alternative therapies in health and medicine, 11(5):46-57.
- Rosen, M. & Brenner, S. (2003). Rosen Method Bodywork: Accessing the Unconscious through Touch. North Atlantic Books, Berkeley.
- Siegel, D. (1999). The Developing Mind: How relationships and the brain interact to shape who we are. The Guilford Press, NY.
- Rolf, I. (1989). Rolfing. Healing Arts Pres, Rochester VT.
- Rogers, C. (1989). "Client-Centered, Person-Centered, Approach to Therapy." In Kutash, I. And Wolfe, A. A Carl Rogers Reader. Houghton Mifflin, NY
- Trager, M. (1987). Trager Mentastics. Station Hill Press, Barrytown, NY.
- Timms R, Connors P. Embodying Healing: Integrating Bodywork and Psychotherapy in Recovery from Childhood Sexual Abuse. Orwell, VT: The Safer Society Press; 1992.
- Tolle, E. (2001). Practicing the Power of Now. New World Library, Novato, California