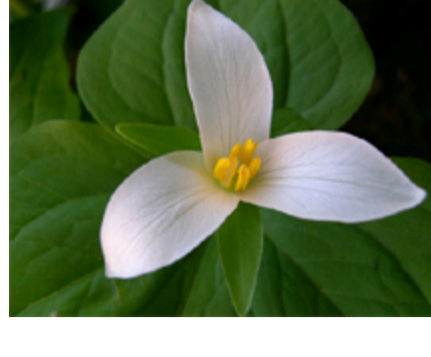




Presencing Issue 54

Palliative Passages Part III



J Krishnamurti and David Bohm

Embodying words: To describe bodily sensations with words requires seasoned practice: I'm not sure if I can adequately describe what I think is a very important shift. That shift takes place when we can move from feeling sensations to verbally expressing what we are feeling. Our ability to use language develops over our lifetime. Bodily sensations exist only now, whereas our thinking relies on memory, and past conditioned responses. Intellect is drawn from past learning. We have created a separation between intellect and body-centered awareness. The growth of personal acuity in feeling our body senses is quite different from thought. Separation between thought and feeling is at the heart of whether or not we are sharing a cocoon of presence together.

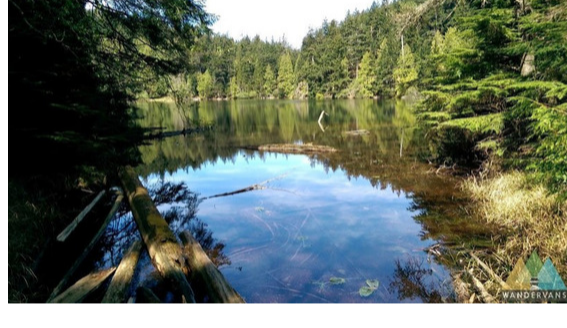
Touching presence: When we add touch to the mixture both giver and receiver have an added channel of sharing. Touch is sensory and therefore

only exists now. Touch is also a two way experience. Since we are talking here about the experience of presencing and sharing that experience with one another, it is critical that our experience is mutual and reflective. I have found that when a person first tries to describe what something feels like inside, the words are less informative: "it feels good, open, sad, angry, blocked, solid, warm, puffy, vague." After the person has more experience with describing what she is feeling or when she hears her words reflected by the giver she becomes more articulate: "it feels like a rock with a sharp edge, it feels like burning lava, it feels like a large hook with a very sharp point... oh now it is softening... congealing and cooling... the point is now becoming warm and melting." As these words emerge, and become more present, aided by the two way channel of touch both receiver and giver can feel changes occurring in the body tissue.

Emerging Presence: All of these ways of interacting rely on the bodily sensorium: The sensorium is described as all the body-centered sensations that communicate our present state of awareness, our present state of being. We might say that the body and mind are communicating our aliveness to one another. This state of aliveness includes the sensations that accompany our thoughts as well as our memories and our emotions. The sensorium accompanies us every moment of our lives... waking or dreaming... aware or not. It is a complex and baffling accompaniment because we cannot describe how this continual presence could occur. Most of our lives we are too absorbed with the issues at hand to pay much attention to our sensory accompaniment. The exceptions are those times when we are starting to feel bodily and mental limitations on our actions, emotions or thoughts. At times we may notice that what we are saying, or doing, or thinking are conflicting with what we are feeling inside or what we are seeing on the faces of others. Our minds are continually monitoring our situations for feedback, trying to make the best choices... the best impressions. During all of these experiences our bodily sensorium is truthfully accompanying and creating possible doorways to becoming humbly present to ourselves and to our mutual interactions. Example: "Based on what I'm feeling inside, perhaps it is time to check in with one another to find out if we are really tracking one another."



Interactive presencing: Results from observations I have witnessed over the years. Since sharing and comforting are goals of palliative care, I think that it is obvious that interactive presencing should really be considered as an accompaniment to those who are approaching the end of their lives. As I stipulated earlier we have to practice presence ourselves so that we can truly journey with our clients. I have not spoken much about particular bodywork techniques because I believe that the sharing of presence through words and touch are the very important components of palliative care. Remember that "the one you are touching is touching you," which is essential for sharing presence. The same cannot be said about words unless the commitment is to create mutually reflective interactions in which the words reflect our sharing, and are emerging for each person within a cocoon of presencing.

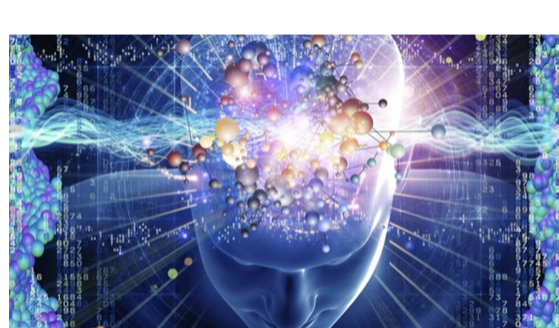


Presencing touch: Even when a client loses other faculties she can still interact inside her body: When I was doing emergency calls for patients on Orcas Island I learned that it is important to keep verbally addressing comatose patients in order to apprise them of what was happening. I learned some years ago to do the same thing with dying patients who have lost the ability to communicate verbally. I was working with a long-time client about seven hours before she died. She was unable to speak. At first I was disheartened since our

conversations and her descriptions of what she was feeling in her body were such an essential part of our interactions. But then I was reminded of emergency patients and started to tell her what was happening, and also honestly telling her that I was so pleased to be with her and also that I of course could not know what was happening for her. But then I realized that she was interacting with my hands wherever I placed them on her body. Doty and I had gone past the need to make any assumptions. My physical contact with her was very gentle; her responses in touching me back were likewise very gentle. I could tell her how much I loved her and feel her responses coming from inside her body. Up to that session I had no idea that we could communicate so deeply. Doty continues to teach me.

Accompaniment: The value of teaching presencing to dying patients and their families is that it can enable easy and life affirming passages. Most of my words in this newsletter have been directed at the value of using professional touch so that practitioners can make very valuable contributions to peoples' lives. In palliative care situations touch practitioners can teach presencing touch to family and friends of dying patients. The presencing methods I have alluded to incorporate the active participation of the receiver as well as the caregiver. Most friends and family can learn at least some of those approaches. There is a mutual benefit to such interactions because the patient is receiving from persons who have been close to him. But one of the most important factors is that friends and family often feel helpless, especially when the dying person is in a medical facility. With presencing they can learn to feel the immediate effects of increasing comfort and decreasing fear from their loved one. And those factors devolve to the caregivers as well. Since the dying process is often hidden from family and friends, through presencing interactions they can learn that there is no reason for that part of our journey to be shrouded in mystery and darkness.

Body and mind changes: emerge in accord with client awareness of presence: As stated in Presencing 52 the experience of presencing is considered mind-cleansing in traditional Buddhism. Bringing the mind into the present moment relieves us of many of the burdens we have carried for most of our lives. We have trained our minds to surrender to guilt and judgment, neither of which exists in the present moment. As we start to explore these realms beyond the gateless gate we start to recognize that our lives are anchored in the eternal moment, not the past. In reaching into that state of now we start to discover that everything is connected, not by time or thought, but by presence and that the overall PRESENCE is a loving gift that welcomes us home to life... prodigal sons that we are.



Journeying: The same things happen for the practitioner who realizes that she is on the same journey as her client. I want to point out as I said in the beginning that the awareness of death can be a factor in our own awakening. We begin to accompany the physical endings of those who go before us. We are on the same journey they are... only... they have a head start. As we begin to share those endings, we may realize that we all have completed many such journeys and passages and those are all part of our collective consciousness. With that realization comes the life-changing truth that there is nothing to fear. So as we engage ourselves in palliative care... caring beyond fixing... caring beyond rescuing... we start to realize that the most valuable thing in life is sharing all phases of our journeys. Many have said that the true state of presence is the awareness that Love subsumes all existence.



Eternal moment: What are the preparations for a palliative care bodywork practitioner? Stepping back from the agenda of fixing and or rescuing; Stepping into our own awareness of presence by practicing somatosensory awareness to anchor our minds in this moment. Becoming aware that we have tools at hand in our body-instrument to bring ourselves into presence any moment we choose. Starting to discover the hidden awareness that resides within us; starting to share that awareness with others in a variety of ways; allowing our inner guidance to direct us towards our own destinies; affirming that guidance and starting to share the experience of presence with others; thus affirming our

role on the journey. Finally becoming aware of our own looming emergence into the eternal moment, not out of loss and diminishment but out of extension of our own being, as a participant in the Oneness that we all share. Last words: Prepare ye the way... your own way!

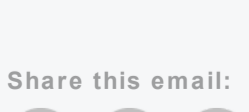


- Open hands
- Open mind
- Open face
- Open heart
- Open creation

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