

MIND, CONSCIOUSNESS, and WELL-BEING



EDITED BY

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Being Present

Philosophical and Spiritual Principles to Guide Practice

with Pat Ogden and Bonnie Goldstein

PAT OGDEN: Bonnie and I are excited to present to you today, and especially excited about our topic! We're going to discuss a set of concepts or principles that can be helpful in embodying a state of consciousness and presence that we feel is conducive to a healing atmosphere. We'll be showing videoed excerpts of Bonnie's and my sessions with clients to illustrate how these principles affect clinical practice.

Psychotherapy can be conceptualized in three levels of analysis: *technique*, what we *do* in practice; *maps or lenses* that we look through to determine therapeutic strategy; and, most importantly, *context*, our overall orientation as mental health professionals. Context has to do with assumptions that we feel are accurate even though we might not be able to prove them. These are the philosophical and spiritual principles that shape the climate or atmosphere in which therapy takes place. These fundamental beliefs are usually not conscious, but they strongly influence the overall approach and interventions used, either constraining or enlivening healing potential. For example, when I first learned how to be a therapist, I was taught that I am supposed to know what's best for my client. I learned that good therapists should have the answers for the client. Therapists were supposed to have more wisdom due to their degrees and training. However, such an assumption will promote

an atmosphere in which the therapist, rather than the client, is the expert, an interpersonal dynamic that I don't consider to be conducive to healing or to presence, and which can be disempowering to the client.

The principles that we seek to embody in Sensorimotor Psychotherapy form a foundation for a way of being in relationship with our clients that I believe create the best overall climate to invigorate healing possibility. They reflect our beliefs about human connectedness and potential and define the quality of the therapeutic relationship. This presentation examines the implicit context in which therapy and elucidates principles that guide Sensorimotor Psychotherapy practice.

My mentor for 40 years, Ron Kurtz, whom I was lucky enough to meet when I was in my twenties while working in a psychiatric hospital, changed my life in many ways. One of his biggest contributions was his emphasis on loving presence. He described loving presence in this way: "My first impulse [as a therapist] is to find something to love, something to be inspired by, something heroic, something recognizable as the gift and burden of the human condition, the pain and grace that is there to find in everyone you meet." This was Ron's orientation in the 1970s, when nobody was talking about states of consciousness and presence in psychotherapy. I learned from him that you don't have to have the answers for your clients and that you can't know what is best for someone else anyway. Each person has their own unique intelligence, their own wisdom. Therefore, the job of the therapist is to help clients turn inside deeply enough that they may be able to sense themselves and find their own answers from within.

These concepts unfolded and expanded over the years to become the foundational principles of Sensorimotor Psychotherapy that create context and guide practice. We will introduce them briefly and explore their application more deeply and specifically through the videoed cases.

Let's look at *organicity*. Borrowed from Gregory Bateson, this principle simply means that every living system has its own unfolding, its own creativity, and we can't presume to know what that is. It's unique and integral to that particular organism, to that human being. Organicity acknowledges that each culture has its own wisdom as well, and that the organicity of each person is filtered through experience and shaped by social location and culture. Once you hold this principle to be true, then *nonviolence*, the second principle, easily follows, as there's no need for the therapist to push, there's no need to struggle, there's no need to use force. Nonviolence operationalizes organicity by

the active creation of a context in which the inner wisdom of the client can emerge. We recognize the natural impulse for a higher level or organization toward integration and growth in our clients and capitalize on that impulse; we go with the grain, rather than use force, by shepherding along the client's internal wisdom and naturally emerging healing potential so that it can unfold.

Unity is a concept similar to Daniel Siegel's word *MWe* that he spoke of earlier, describing the connection between us all. The Mayan culture coined the word *inlakesh*—roughly translated means, "I am another you"—which elucidates the concept behind unity, that there really isn't separation between us. At the same time, the principle of unity embraces differences, that, while we are alike and connected with one another, we are also unique, not like anyone one else, and we also are like certain groups because we affiliate along the lines of race, ethnicity, and so forth.

Mind-body-spirit holism, simply stated, means that mind, body, and spirit are always interwoven, as different sides of the same coin. We recognize that mind, body, and spirit are essential aspects of the human organism; each can only be understood in relationship to the whole they comprise. This principle respects the different views, relationships, and traditions concerning body, mind, and spirit of various cultures and individuals.

Our community is growing with awareness of the many variations and ways of conceptualizing mindfulness. I want to acknowledge that we Westerners often lose track that we basically appropriated mindfulness practices from Eastern traditions. We often use mindfulness interchangeably with presence, but to me they are not the same thing. The way that I think of mindfulness and practice, it is by noticing what's going on in the present moment in my own internal experience, in my body, my thoughts, and my emotions. In mindfulness there's a distinct separation, because there is the observer and there is that which is observed.

So mindfulness is a dual state of consciousness that encompasses both an observer and that which is observed. Presence, on the other hand, is a unified state of consciousness, rather than a dual state. It is a participatory state of "being with" rather than observing, of engaging rather than noticing. In therapy practice, I am not mindfully observing my inner experience; I feel fully present with my client. Through presence, the client senses we are "with" them and we "find ourselves" acting without premeditation. I love this cartoon [shows cartoon] when she says, "I'm sorry I didn't hear what you were saying. I was listening to my body." [audience laughter] It illustrates that, if we're mindful, in a dual state of consciousness, we can't fully participate the relational

dance. I feel that mindfulness and presence occur on a continuum—we can be fully mindful or fully present, or embody degrees of both simultaneously. We can be more present and less mindful, or more mindful and less present. But if our consciousness is consistently in a dual state (too mindful and thus not very present), we run the risk of hindering the dyadic dance of participation, synchronicity, and “being with” our client.

BONNIE GOLDSTEIN: Many of us began our training as therapists with a psychodynamic approach to therapy, verbal narratives and interpretation were prized as what we paid the most attention to. In contrast, through the lens of Sensorimotor Psychotherapy, we aim to drop beneath the therapeutic content, to prize the body-based experience that transpires moment to moment throughout a session. Concomitant is the therapeutic presence we carry within ourselves that is fundamental to developing an effective relationship. Our aim is to be fully present with clients, engaged and immersed in each moment, mindful and aware on many levels simultaneously—physically, emotionally, cognitively, and spiritually.

In the cases that we will discuss, some common themes are sensory processing challenges that result in a compromised ability to interact with others and to self-regulate. These issues often manifest in the therapeutic context. For example, a client may experience a sense of crowding or feel there is not enough space between them and the therapist, or in the therapy room. Or the client may experience olfactory challenges, such as the smell in the room (e.g., reactivity to the room’s aroma, or to their own body odor, which may intensify when they become upset or agitated during the session). Or the client may experience auditory challenges, such as difficulty with sounds in the room (e.g., reactivity to noises, high-pitched voices or vocal tone or volume, or the ticking of a clock), or misophonia. Or the client may experience visual struggles, such as the brightness of overhead lights or too much light from a window. Finally, the client may experience tactile challenges, such as the itchy feeling of clothes, the couch, a chair, a scratchy cushion or pillow.

We can use our therapeutic presence in the practice of Sensorimotor Psychotherapy to bring our attention to these and other issues as they arise in the session. As Jack Kornfield mentioned this morning, we can observe our own experience, as well as our clients’. We can then collaboratively explore with our clients their thoughts, perceptions, feelings, and emotions, looking at their experience with a sense of curiosity about what is transpiring: Saying

things like, "Just notice what your body is experiencing as you think about that painful moment," invites mindful exploration of the client's experience in the present moment. As you will see in the following cases, clients express varying responses throughout their sessions, ranging from impulsive or unbridled aggressiveness or anger to apprehension, fear, and avoidant behavior. Rather than thinking that these challenges are obstacles, potentially interfering with our treatment goals, we can bring our attention directly to them. We can view them in our moment-to-moment interactions with the client as adaptive responses that developed from earlier experiences in life, and which may have been necessary for the client to tolerate traumatic situations. Practicing psychotherapy in this way necessitates a heightened awareness of our own presence within the therapeutic milieu to be fully present with what transpires.

Elucidating these concepts, we'll start with Alan, age 10, who had great challenges with self-regulation and modulating his arousal. Sudden, frequent outbursts and tremendous hyperarousal (yelling, hitting, temper tantrums) caused disruption at home and at school, compromising his ability to communicate effectively and proving less than optimal in his relationships with friends and with his father. Alan had recently entered foster care because of his mother's substance issues. The Department of Child Services intervention led to his father suddenly becoming the caretaker for a son he hadn't known existed. This is Alan's second session, and the first father-son session since Alan relocated to live full time at his father's home. It occurs on the afternoon after he had been expelled from elementary school for problematic behavior.

PAT OGDEN: What we want to illustrate in this video segment is how the principles I mentioned are embodied in the practice of Sensorimotor Psychotherapy, in very specific ways. Bonnie elicits this child's inner intelligence. You will notice how she is not violent, she doesn't push; rather, she creates opportunities through her use of mindfulness and presence. Let's watch a little bit of this session, which illustrates the principles to guide practice we are discussing today.

BONNIE GOLDSTEIN: What I love from the outset is the way he describes his problem. Rather than my telling you, let's view Alan sharing with you why he was in therapy.

[video]

BONNIE GOLDSTEIN: What happened?

ALAN: I made a mistake at class.

FATHER: Look at her when you speak, please.

ALAN: I made a little mistake at my classroom [head down, shamefully peeking up at me].

BONNIE GOLDSTEIN: A little mistake in your classroom. What happened?

ALAN: I punched and hit someone.

BONNIE GOLDSTEIN: You punched and hit someone? Remember we were talking yesterday about these body-based, physiological responses and how quickly you can go from cold-to-hot or green-to-red (analogous to a traffic light)?

ALAN: Yes.

BONNIE GOLDSTEIN: And right now, you're holding the green squeezey ball. Do you remember what the purpose of those balls is?

ALAN: To think about stuff [robustly squeezes the green stress ball that he's holding].

BONNIE GOLDSTEIN: They help you think about stuff, yeah. What you're doing right now, squeezing the stress balls while we talk, is exactly the purpose of those balls.

[pause video]

PAT OGDEN: Now, to my mind, that was beautiful. Bonnie took this experience that the child was quite ashamed of, and she paralleled something positive that the child was doing in the present moment and allowed the child to be successful and feel good about himself. She continues to validate and

create these opportunities for the child, and as you'll see, she models how to relate to the child for the dad beautifully in this next segment.

[video]

[As Bonnie brings up his "little mistake" at school, Alan starts throwing the ball onto the ground.]

FATHER: You're throwing the ball on the ground on purpose. That way you can get up. You didn't ask me if you could get up, did you? Will you please pick up the ball?

[pause video]

PAT OGDEN: We can see the child's body language, his discomfort—his shoulders hunch up and his body constricts. He just lost his attachment figure (mom) and then moved into a strange man's home, whom he learned was his father. We can feel this boy's pain at the criticism. And Dad is a new father, learning to be a dad, trying to control his child's behavior, as we often tend to do as parents.

[video]

FATHER: Pick it up off the ground.

BONNIE GOLDSTEIN: I think it's hard to talk about our mistakes.

[pause video]

PAT OGDEN: What Bonnie does here is she contacts the implicit level that's really troubling this child. "It's really hard to talk about our mistakes," she says. Which brings it right into unity as she uses *our* instead of *your*. "We all make mistakes" is this message to this boy, and she conveys that it's difficult for all of us to discuss them.

BONNIE GOLDSTEIN: And the message to the father as well.

PAT OGDEN: Yes, and then you help the boy to regulate. Bonnie uses pil-

lows, blankets, and other props that are available in the office to foster regulation.

[video]

BONNIE GOLDSTEIN: This is really hard stuff to talk about, isn't it?

ALAN: Yeah [nods].

BONNIE GOLDSTEIN: I have a trick. During difficult moments when Dad wants you to sit and talk about something, you can take pillows and create a cocoon that you can cozy up into, like we can do right now [taking a pillow and handing it over to Alan, who nods encouragingly]. Where should we put this one? Is this a good spot [tucking the pillow into the space between Alan and the chair's edge]? We do this sometimes when we are in group with other kids, which I would love for you to join, Alan.

[pause video]

PAT OGDEN: Bonnie also has her clients work in small groups of same-age peers. Her clients experience various form of therapy, individual, group, and family as well.

BONNIE GOLDSTEIN: We'll discuss these principles as they inform group therapy shortly. In this session, we are working collaboratively toward fostering regulation and safety in the room, helping Alan find ways to quiet his "wiggly squiggly" constant movement and the urge he feels to get out of the chair. This behavior was exacerbated as we discussed his problem at school. Now he is beginning to feel the soothing containment that comes from the deep pressure of the pillows piled atop and beside him. He asks for more pillows to be placed around him, creating a safe cubby within the chair. The myriad of pillows of all sizes that are abundantly available in our offices make this possible.

[video]

BONNIE GOLDSTEIN: I'll put another pillow right here. Yeah. How's that feel?

ALAN: One more! On top, please!

BONNIE GOLDSTEIN: Just notice what happens inside your body when I put that here.

[pause video]

PAT OGDEN: With a question like that, "Notice what happens inside your body," Bonnie's starting to teach this child mindfulness. Alan turns his attention inward to answer that question. She's saying, "Let's notice what happens inside you, and let's find words for it."

BONNIE GOLDSTEIN: I'm tracking his body, noticing his responses. I can see that he seems to feel pleasure and to feel calmer, with the deep pressure for regulation. Of course, we would not have continued in this direction if he did not seem to like it. And some clients don't respond favorably to this deep regulation. I've had clients that I think might find the deep pressure soothing or comforting, but when I ask questions such as, "Notice what's happening now," I learn that they are experiencing discomfort or I sense by their facial expression or posture that they seem to feel constricted. The regulatory qualities of comfort and coziness that Alan expresses are similar to the experiences many of us describe when we climb into our bed: tight sheets and heavy blankets or a cozy comforter create a sense of safety and can be calming. We can help our clients to cocreate a safe space in an unfamiliar room such as our therapy rooms, so that they can shift states from what may be experienced as an unsafe environment toward a more comfortable and therefore therapeutic environment. This shift arises from the physical sensation or experience Alan reports is bringing him comfort. Because of this positive feedback, I continue with this deep pressure.

PAT OGDEN: And because of that, and because Bonnie's helping him to shift his consciousness from the high arousal to a more regulated state, Alan can be more present.

BONNIE GOLDSTEIN: Our clients lead the way with their responses to our questions, such as "You tell me how it feels" or "How's this pillow pressure?" We continuously elicit reports from our clients, as information flows back and forth.

PAT OGDEN: Sensorimotor Psychotherapy builds upon a variety of little therapeutic experiments in our work that pertain not so much to content but to what's underneath, driving the content. This child has trouble with proximity, and distance, and boundaries—he's hitting classmates who come too close or take his toy—so Bonnie's helping him sense inside himself, exploring what it's like when somebody moves too close to him, as you will see in this next little experiment.

[video]

BONNIE GOLDSTEIN: I'm going to take this large pillow and move it toward you. How about if you show me when it gets too close. Ready? [slowly moving a large pillow close toward Alan's face]

ALAN: [giggles and smiles as the pillow approaches] You're too close please.

BONNIE GOLDSTEIN: Okay [moves the pillow back, and then suggests trying once more].

ALAN: [more giggling as the pillow starts to approach, but this time, as the pillow comes even closer, his body turns away, his head drops, and he averts his gaze]. You're too close please.

BONNIE GOLDSTEIN: [slowly backing the pillow away, noting that his body relaxes] How does it feel inside your body when I back off?

ALAN: Happy.

BONNIE GOLDSTEIN: Something feels different. Hmm. Where in your body do you feel happy? Is it in your head, or in your tummy, or in your chest?

ALAN: Tummy!

BONNIE GOLDSTEIN: Tummy. Okay, so let's just notice what's happening in your tummy.

ALAN: I feel it in my tummy.

BONNIE GOLDSTEIN: You feel it in your tummy!

[pause video]

BONNIE GOLDSTEIN: Collaboratively we become curious about affect, arousal, and shifts in energy. We experiment with questions such as "How does it feel?" or "What do you notice?" or "Where do you feel it right now?" or "What's happening right now/what sensations are you feeling?" Using Dan Siegel's acronym from yesterday's talk [SIFT]—"What sensations, images, feelings, or thoughts are coming up now?"—we're helping our clients to start to be curious themselves. We're collaborating with them to look into and get past what's happening in their story, to focus on what's happening right now. Often clients aren't sure. They don't know how to answer these questions. So, we offer them a menu of possibilities, such as "Do you feel it in your tummy?" or "Where do you feel this tingling?" or "Do you feel a tingling, or a pulsing, or pounding?" or "Your hand just went to your heart . . ."

PAT OGDEN: And this is an illustration of using mindfulness in therapy. In order for clients to answer these questions, they must become aware of present-moment experience and find the words to describe it. Therapists also name present-moment experience, as Bonnie says, with statements like, "Your hand went to your heart," or "You seem sad right now," or "It looks like your body just tightened up." Mindfulness is embedded within the relationship as Bonnie helps this child to become aware of his emotions and his body and finds the words to describe his experience. Next, Bonnie reconstructs the same exercise, but this time to find out how he organizes internally when a boundary violation happens.

BONNIE GOLDSTEIN: Things seem to be going well for Alan, all ensconced in the pillows. And then we introduce a topic he has upset feelings about, and that presents a challenge.

[video]

BONNIE GOLDSTEIN: Let's do the same experiment with the pillow again. But this time, when you say "Too close," I'm not going to be a good listener. Okay? Ready?

ALAN: Mm-hmm.

BONNIE GOLDSTEIN: Just notice what happens inside your tummy as the pillow gets really close.

ALAN: [laughs at first as the pillow inches toward his face, then grows visibly more uncomfortable and turns his body away, his head down, as giggling stops]. That's so close. You're too close.

BONNIE GOLDSTEIN: Am I too close? Too close, huh? Okay, I'll move back. Now, when the pillow came too close you giggled. What else could you have done?

ALAN: Walk away!

BONNIE GOLDSTEIN: That's right. That's one thing you can do when kids get too close to you or bother you on the playground, right? But what did you do today at school?

ALAN: Push [looks down at the ground, pausing for a moment, and then jumps up and starts to do somersaults in the room].

[pause video]

PAT OGDEN: So, you can sense and see the child's arousal start to escalate, and it goes up more as they continue to address the aggression that happened in school. So, let's just watch what happens as Bonnie follows the child's lead and helps make sense of it.

[video]

BONNIE GOLDSTEIN: You just have so much energy.

ALAN: I have it now! I get way more energy than I look [speaks breathlessly after a series of somersaults].

BONNIE GOLDSTEIN: I see you do. I think you also have a lot of energy because you had to go home from school today.

ALAN: Yeah.

[pause video]

BONNIE GOLDSTEIN: So, I'm bringing up the issue that necessitated Alan go home from school, because, as he told us, he was aggressive. When his aggression is brought up in this session, you can see his arousal escalate.

PAT OGDEN: Since Alan is breathless after a series of somersaults, and taking deep breaths, Bonnie follows what she is tracking to bring Alan's attention to his breath and help him develop it into a resource he can use to calm himself.

[video]

BONNIE GOLDSTEIN: Let's notice what is happening with your breath after all those somersaults.

ALAN: [takes an even deeper breath, and then another]

BONNIE GOLDSTEIN: I have a trick. I notice that your hands are moving. What if we take our hands and hold them up, open them wide, reaching up, making a huge circle and landing in prayer position on his chest [Bonnie demonstrates this movement].

ALAN: Happy! [takes a deep breath, hands circling widely, mirroring Bonnie]

BONNIE GOLDSTEIN: And then did you notice anything change in your body as you took that deep breath? Let's see. I notice you're more still. Seems you're breathing more deeply, and you seem calmer.

ADAM: [nods smiling]

[pause video]

PAT OGDEN: So together they focused on breath and practiced deep breathing coupled with a lovely arm movement that opens the chest, releasing tension

that can constrict the breath. And then Bonnie works with the father and son to increase their connection directly and to empower the child as a teacher for the dad. In this way, Bonnie creates an opportunity for Alan to be proud of himself and what he is learning and able to teach.

[video]

BONNIE GOLDSTEIN: Hey, let's see if we can teach Dad how to do it. Dad, are you okay trying this breathing trick?

ALAN AND DAD: Okay.

ALAN: How you do it is you take a deep breath with your nose, and blow out through your nose, and do this [sitting cross legged, Alan's hands circle the air and land in prayer position on his chest].

FATHER: [exhales loudly and mirrors the body movement]

BONNIE GOLDSTEIN: Dad, what do you notice in your body when you do that?

FATHER: Calmness.

BONNIE GOLDSTEIN: Calmness. Yeah. You're a good teacher, Alan. You really taught him well.

[pause video]

PAT OGDEN: So now comes the real challenge: linking the use of the resource of the breath with the problematic incidents of boundaries being invaded, so that Alan has something he can do instead of impulsively lash out. Bonnie's going to ask the child to use his breath to create a pause that inhibits his impulse to be aggressive as he remembers the incident at school.

[video]

BONNIE GOLDSTEIN: So, let's imagine that this pillow is the boy from your fight at school this morning.

ALAN: Uh huh.

BONNIE GOLDSTEIN: Okay, this is him. He's about to come. Instead of doing the pushing, instead of doing the hitting . . . ?

ALAN: Let's do the yelling.

BONNIE GOLDSTEIN: I was going to say, "Let's do the breathing."

FATHER: Yeah.

ALAN: I think yelling. It calms me down too.

BONNIE GOLDSTEIN: Yelling calms you down too, huh?

ALAN: Yes. And playing with my yo-yo [takes one of the strings of the squeeze ball and starts playing with it as if it's a yo-yo].

BONNIE GOLDSTEIN: Okay, you're playing with your yo-yo, and let's imagine the boy from school comes in to take your yo-yo, and . . .

ALAN: Will you please stop taking my yo-yo when I'm using it? When I'm done, I can give it to you.

BONNIE GOLDSTEIN: Yeah. Hey, what do you think, Dad?

FATHER: That sounds great.

BONNIE GOLDSTEIN: Sounds really great. This is something to try at school so you don't get sent home.

[pause video]

PAT OGDEN: Those little points are so critical. The child is successful in not lashing out and instead using words to set his boundary, which Bonnie uses to give the father the opportunity to compliment the child. This is building their relationship in a positive way. Next, Bonnie asks Alan to practice again, doing the exercise with the dad this time, with Dad reaching to take

his pretzels. This is something that then father and son can practice at home as well.

[video]

ALAN: [breathes deeply at first, with arms reaching up and open to the air] Please don't take my pretzels, I'm saving them for later.

BONNIE GOLDSTEIN: What do you notice happens in your body when you take the deep breath and reach your hands high?

ALAN: I feel a little good.

BONNIE GOLDSTEIN: You feel a little good. And it slows things down so you can remember to pause, to breathe before hitting. Let's practice one more time, with Dad. This time you're playing with your ball and slowly he comes in.

ALAN: Please don't take my ball [feet planted on the ground, visibly more powerful, voice stronger].

BONNIE GOLDSTEIN: You looked powerful and very strong, and confident too.

ALAN: I feel good.

[pause video]

PAT OGDEN: So the focus on using a resource to regulate his arousal is working.

BONNIE GOLDSTEIN: Unity between ourselves and our clients unfolds collaboratively, as we follow our client's lead, reinforcing what works and noticing what doesn't work. Through little exercises we highlight the contrast between what works and what doesn't work. We're back to the "MWe" that Dan Siegel discussed earlier.

PAT OGDEN: Can you say anything, Bonnie, about the aftermath of the work with Alan and his father?

BONNIE GOLDSTEIN: It's a journey [audience laughter]. I'd love to say that everything was better by the next session, but what we can recognize is that we were developing more tools for success, and we were fostering resilience from within. We are narrowing the field of consciousness by selecting relevant cues, redirecting attention, and bringing curiosity to behavior. I'm always searching for signs of resilience, curious as to how their resilience developed despite extremely challenging early-childhood experiences.

PAT OGDEN: Okay, let's now return to the foundational principles that guide our practice. I think you saw all of them illustrated in Bonnie's work. Unity is there consistently. As therapists we feel it and demonstrate it through the collaboration, through the give-and-take that you saw with Bonnie and this father and son. You heard her think out loud with phrases like, "I wonder what would happen. I wonder if," which includes them in her thinking, promoting a felt sense of unity. In this way, Bonnie also elicited the family's confidence in working together, which is often not easy.

BONNIE GOLDSTEIN: Yes, especially in the initial sessions with a client or family, when the anxiety is heightened because of novelty or fear of the unknown, or doubt about therapy's effectivity. Whenever we are working with families, so many things can trigger or dysregulate any one of the members. Concomitantly, the sheer amount of sensory stimulation at any given moment can easily be overwhelming. Therefore, since our aim is to ensure a sense of safety for all, letting each family member feel our respect for them—communicating respect, implicitly and explicitly—or our wish to make them feel more comfortable is paramount. Our belief that they have wisdom, competence, and insight is essential to success. Thus, our work as mental health practitioners becomes to help clients find their own answers, to capitalize on their strengths, their abilities, and wisdom. And that again highlights the value of unity and collaboration.

PAT OGDEN: This reflects our trust in organicity—that Alan has wisdom inside of him. I do want to add one thing about unity. Dan Siegel speaks often about linkages and differentiation. I used to think that unity was just about the linkages, but that's not true. It's also about honoring the differences, and valuing the differences as well, which is critical especially in our world climate today. Unity includes not only linkages but differentiation as well, validating those differences among us, including cultural differences.

Let's move on to our next case presentation. One of the ways that we work with unity and the feeling of being in it together is that we make sure the client understands why we're doing what we do and the purpose of our interventions. Our use of psychoeducation helps meet this goal and was important for this next client, a young man who did not understand why work with the body might be helpful to him. So we discussed that right away, and I demonstrated different postures so he could see how each one correlated with different emotions and words. "Michael" is a young cisgender gay man who had a tough childhood: poverty, fetal alcohol syndrome, abandoned at birth, several surgeries for club foot, physical abuse, entered foster care at age 7, first hospitalization for depression and a suicide attempt at age 8. In therapy, he stated, "No one has ever respected me, ever." At the time of this session, he in an abusive, violent relationship with an older man.

What we want to show you in this brief excerpt was how we can draw on the emergence of Michael's organicity and work with his body to help him shift his consciousness and foster self-esteem. His typical posture reveals his painful history and—his chest is caved in and tight, his shoulders are lifted and hunched, which reflects his traumatic history and the lack of safety and low self-esteem he currently experiences.

After telling me about his childhood, he spontaneously said, "What did I do wrong? I didn't ask for this life." Then he said, "I deserve respect like everybody else." So, we used those words to shift how he holds his history in his body.

[video]

PAT OGDEN: The words you said, "I deserve respect," seem important.

MICHAEL: Yeah.

PAT OGDEN: Okay, let's explore this. So, if you take those words on, "I didn't do anything wrong. I deserve respect," almost as if you can say those words with your body, would your chest open, or would you sit a little taller, or take a breath or . . . ?

[pause video]

PAT OGDEN: His posture is slumped and tight, which does not reflect a posi-

tive statement like "I deserve respect." Those words emerged spontaneously, from his inner wisdom or organicity, a part of him that knows he is deserving of respect. If he embodies these words, his posture must shift. A different posture than his typical posture must emerge to be congruent with "I deserve respect."

[video]

MICHAEL: Yeah, I deserve respect . . . [puts his feet flat on the floor and lengthens his spine].

PAT OGDEN: You become a little bit taller.

MICHAEL: Yeah.

PAT OGDEN: Yeah. Can you sense that?

MICHAEL: Yeah, I can. A little more confident, yeah.

PAT OGDEN: A little more confident. What's that feel like inside? "I deserve respect."

MICHAEL: It feels good [smiles slightly].

PAT OGDEN: Like all over feel good? Or does it feel good somewhere in particular?

MICHAEL: My heart, I guess.

PAT OGDEN: Your heart.

[pause video]

PAT OGDEN: You can see that the posture that he came in with and the posture that embodies "I deserve respect" are very different. His consciousness changes as he embodies those words—it's a new way of living in his body. And it's significant that he said he felt the good feeling in his heart because he had said his heart was so wounded, having never experienced love or respect.

This shift in his posture affected his heart, which he reported felt stronger and less "broken."

In Sensorimotor Psychotherapy, we do not just work seated, in chairs. We embody new ways of being in movement so that the changes can be more fully experienced. I wanted Michael to discover how these new words and posture would affect his movement, especially his gait, so we conclude the session integrating the statement "I deserve respect" and his more upright posture through walking together. I asked if he would be willing to stand up and walk around the room with me to explore how those words affected his movement.

[video]

[Client and therapist are walking around the room together, sensing the movement of walking.]

PAT OGDEN: As we're walking, could you say those words again, "I deserve respect"? And let's see what happens to the way you are walking if you say those words.

MICHAEL: Okay.

PAT OGDEN: You can say them to yourself or out loud. Just allow the words, "I deserve respect," to affect your posture and movement.

MICHAEL: I deserve respect.

PAT OGDEN: Yeah. Could you feel your chest change? An opening?

MICHAEL: Yeah, I took a deep breath. My heart feels more open [smiles].

PAT OGDEN: Yeah, you took a breath. Let's just walk with that openness, deeper breath, just for a moment, to enjoy this new feeling.

[pause video]

PAT OGDEN: In this way, Michael learns more tools to integrate this phrase

when he is walking—he can practice saying the words and/or he can practice taking a deep breath and lengthening his spine. To help Michael become more aware of the physical cues that might precipitate feeling less deserving of respect, I asked him to contrast the new statements with the opposite words.

[video]

PAT OGDEN: Just for a little experiment before we stop, I wonder if you could take on that sense of "I don't deserve to be loved" in your body.

MICHAEL: Okay.

PAT OGDEN: And just see. Just see how this changes your body and your walk. Do you feel what happens, can you sense it?

MICHAEL: Yeah, it's like my back kind of tenses.

PAT OGDEN: Exactly. That's exactly. And your shoulders come just a little bit forward. You can feel that, right? Your breath constricts a little too, huh.

MICHAEL: Yeah [smiling and contrasting moving his shoulders forward and then back again].

[pause video]

PAT OGDEN: I think Michael is smiling here because he is learning about himself and enjoying it. He is curious. As he voluntarily takes on the old belief for a moment and then embodies the new one, Michael is learning about the physical indicators that reflect his traumatic past and how he can change his posture and breath to shift the embodiment of his history. This is an illustration about using his awareness and mindfulness to shift his consciousness. His homework was to mindfully notice the somatic cues of "I don't deserve respect": the curving forward of his shoulders, tensing his back, and constriction of breath, and then return to embodying "I do deserve respect."

BONNIE GOLDSTEIN: Pat works so beautifully with this client, who expresses his hopelessness and suicidal history and lifelong traumas. As mental health professionals, we recognize our powerlessness to effectively predict and impede the nationwide rise in suicidal ideation and suicidal attempts; indeed, this steady increase in children, adolescents, and adults contemplating suicide necessitates helping professionals find new ways to approach treatment collaboratively, through sensitive and skillful listening, inquiry and dialogue about the client's inner experience, and welcoming unbidden and often unwelcome emotions.

This next case, with a young adult client who struggles with hopelessness, reports that he contemplated suicide a few years earlier, in the aftermath of his father's death. Max, a high school senior, assumed the role of "man of the house" following his father's death when Max was 14 years old. His life revolves around his father's three requests in his final hours at the hospital: "Finish your education," "be a model to your siblings," and "take care of your mother, because you're the head of the house now." Concomitant to emotionally supporting his mother and younger siblings, he buried his upset in the aftermath of his father's death, working hard academically, feeling that he must set a work ethic and standard for his siblings. Finally he got what he thought he wanted—to go away to an elite college. Yet soon after receiving an acceptance letter to his dream college, the one that his father attended, he recognized that he felt obligated to stay home. He was afraid of all that he would leave behind, fearing that something catastrophic might happen in his family if he was not there to provide emotional support to his mother and stability to his siblings. At the same time, he was worried that he would lose out on his life goals if he gives up his dream and elects to stay in Los Angeles. Whether he chose to leave or stay, both choices evoked a sense of loss and regret.

PAT OGDEN: In the previous session, the client found the new words first, which we then used to support a more empowered posture. In this session, Max finds the new posture and then finds the words to go with the posture. Max's natural posture is very similar to the previous client: shoulders hunched, pulled inward, burdened, heavy. Through the course of their session Bonnie helps him embody a new posture, and then they discover the meaning of this shift in posture, toward what the client calls a "more powerful" stance.

[video]

BONNIE GOLDSTEIN: [after working together, noting shifts in posture, directing his attention to his experience and looking for meaning to different ways he holds himself] I wonder if it's okay, if we do another experiment with your posture. This time, as you stand up in this new position, slow it down some. See if you can observe the shift as it's occurring. See how your body carries this new attitude.

MAX: [stands very tall] This is how I'd like to walk if I was walking into an interview or something.

BONNIE GOLDSTEIN: And what would the words of your body be, walking like this? If it had words, what would your body say?

MAX: Like pride, I guess.

BONNIE GOLDSTEIN: Pride, huh? So where do you feel the pride?

MAX: I guess this section of me [points to his heart]. It's here, or in this section of my stomach. But it's inward.

BONNIE GOLDSTEIN: Pride. Great word. Let's try walking with this new pride. See how it lives in your body. [Slowly starts walking around the office, standing up tall.]

[pause video]

PAT OGDEN: You can see this shift of consciousness.

BONNIE GOLDSTEIN: I love that by slowing the exercise down and really noticing what was transpiring moment to moment, he came up with that word *pride*. That was completely within, and we went with it. This is a clear example of the principles, whereby the therapist follows the client's lead. The organicity and unity deepened as we considered how his pride would feel. At one point I tried on the new posture alongside him, collaboratively mirroring him. I, too, experienced the feeling of power and strength that the body stance can offer us. And I was led there by him. That's the gift of this model of collaboration: the client is able to experience a newfound sense from within, and then we can deepen into the experience together. These experiments that resulted in new

experiences, and, in the aftermath, new insights which informed his deliberation about whether to accept the college offer and move across the country.

PAT OGDEN: I think it was Aristotle who said, "We are what we repeatedly do." With both these clients, our hope is that they will do something different, that they will practice a more aligned posture, a new way of living in the body which will transform how they organize their experience internally and how they hold their history. Changing these physical tendencies learned in a traumatic environment enables our clients to be more present, so that their inner wisdom can come forward more easily, and they can engage more fully in relationship. But they must consciously practice the new posture so that eventually the new posture becomes the new norm.

BONNIE GOLDSTEIN: And the practice is informed by our collaborative and cocreated work together, as we saw with Max, who came up with the word *pride* to describe his inner sense and his lived experience. We also addressed his sense of responsibility for his family, this duality of wanting to go and feeling compelled to stay and care for his family members—a difficult dilemma, necessitating that our work also embraces self-compassion. As Jack Kornfield spoke about earlier this morning, if your compassion doesn't include yourself, it is incomplete. So our work involved Max's burgeoning sense of self-compassion for the untenable decision he must make, as we worked to selectively direct Max's attention toward awareness of his body posture alongside the meaning and insights that come from this new awareness.

PAT OGDEN: So let's do a little experiment right now so you can experience what we are illustrating: if you'll close your eyes just for a moment and just be mindful of your posture right now, your body, just as you're sitting, without changing anything. Be aware as you sense your posture, how you sense your spine. Notice if your spine is long or if it seems compressed or collapsed. Notice if you're sitting on your tailbone, kind of squishing your sacrum, your sacred bone, or if your weight is resting directly over your sitting bones, so your sacrum has room to breathe. You might need to move your bottom back into your chair so you can sense your sitting bones. And then just gently and slowly place your feet on the floor and push slightly with the soles of your feet as you allow your spine to lengthen. And as you lengthen, see if you can take up space in your body, in your breathing, in the length of your body, filling up your torso front and back. See if you can just allow yourself to get as big

as you can in your body right now, without force, gently filling up to your skin and beyond. And just notice what that feels like. You're extending your body up, you're expanding your body front to back and side to side, taking up space. Perhaps there are words that go with this expansion—"I deserve space" or "I can be proud of myself" or "I have a right to be here." See what the words are for you that go along with taking up space in your body, almost as if your body could talk with this posture and expansion. Stay with that a moment, and then just let your eyes drift open.

BONNIE GOLDSTEIN: This brief exercise Pat illustrated can help some of our younger clients learn the skill of focused attention they need as an entry into mindful awareness of their bodies. Mindfulness harnesses the brain's innate neuroplasticity. As Dan Siegel mentioned in his presentation, neuroplasticity necessitates focused attention and direction. In other words, this practice is less a matter of the therapist providing correct instructions, and more a matter of clients mindfully examining their internal experience.

PAT OGDEN: Yes, we can capitalize on neuroplasticity by helping our clients have new embodied experiences, and mindfulness of the body is a great vehicle for that because mindfully changing the way we live in our bodies immediately creates a new experience. So, let's talk about mindfulness. Ron Kurtz, whom I mentioned earlier, taught me that therapy is not about conversation; it's about getting underneath the conversation to what it is driving the content of our client's lives. He said we need to help our clients be mindful of their present experience in the context of an attuned therapeutic relationship to reveal how they're organizing their internal experience—not the content of their experience, but the habits of organization that influence and drive the content. This reminds me of Moshe Feldenkrais, who said, "You can't do what you want until you know what you're doing." Through mindfulness, we learn what we are doing inside ourselves to perpetuate old patterns of thinking, feeling, and acting, and from there we can change these patterns.

In the past three case illustrations, we learned that certain stimuli will affect our organization of experience in certain ways. For example, when that young boy thought about being sent home from school, he started to organize differently inside himself, growing hyperaroused, hyperactive, and so forth, and then mindful exercises helped him change this organization. Learning about mindfulness so early in my career was a huge paradigm shift

for me because I had learned that therapy was about conversation, not mindful awareness. But now four decades later, mindfulness is all the rage. It seems like nearly every therapy methodology currently uses mindfulness, in different ways. It's kind of like this cartoon where a leader is shouting, "What do we want?" The crowd yells, "Mindfulness." "When do we want it?" "Now!" [audience laughter] But in Sensorimotor Psychotherapy, we use it in a different way from mindfulness meditation.

Dan Siegel speaks about mindfulness supporting self-attunement, and I love this because mindfulness is a way to alter our relationship with the self. Through mindfulness, as Dan says, we can create new states of information flow, which potentiates neuroplasticity and changing old patterns through awareness. We use mindfulness in Sensorimotor Psychotherapy to also deepen the engagement between therapist and client. Mindfulness is embedded within the relationship, integrated into what transpires between therapist and client. When clients become mindful of their own internal experience—their thoughts, sensations, movements, images, emotions—they share with the therapist what they notice, as if they're taking the therapist by the hand into the landscape of their internal world. As the therapist asks what they experience in the present moment, they're telling the therapist, "This is what I'm experiencing right now." I coined the phrase *embedded relational mindfulness* to describe this way of using mindfulness. Embedded relational mindfulness not only increases engagement with the self, as it does in solitary meditation practice, but also increases the engagement between therapist and client through the practice of embedded relational mindfulness. We are going to elaborate on this in the next group illustration.

BONNIE GOLDSTEIN: Let's look at a group psychotherapy session, where the words *pay attention* are a focus. The members in this group experience describe how challenging it can be to get their parents' attention. Most of us have been in this situation in different forms in our own lives. We say, "I want your attention! Get off the phone!" [audience laughter] In this group the young members, ages 8–11, look how they embody their own sense of authority and their presence, how they carry themselves, when asking for attention. Through the lens of Sensorimotor Psychotherapy, we help each of the members develop body awareness and understand their movement in response to others, exploring proprioception, et cetera. Moreover, we are working as a group to exploring different ways to feel big, tall, strong, et cetera.

PAT OGDEN: And I think it is important to keep in mind here that Bonnie's teaching them about being mindful of their bodies to increase presence and become centered. This is important because these kids tend to collapse physically and withdraw when their parents don't give them the attention that they want, instead of lengthening or elongating their spines, which can support presence.

BONNIE GOLDSTEIN: And with all our clients, we are aiming, through practice, to hardwire lasting inner strengths into the nervous system. Our goals include fostering greater resiliency and enhanced well-being. To help create an even more cohesive group environment, we often have teen assistants who bring a youthful vitality and can model behaviors, movements, gestures, or help propel forward our goals. In this next video, you will see Maddi Siegel, who was completing her high school internship, bring her presence and her ability to be fully engaged and immersed in the experience, qualities which foster a safe, supportive group environment. This safety is so important for building the foundation for presence that Pat has been emphasizing. Listen to the kids and how they describe their wish that their parents pay attention to what they want.

[video]

CLIENT 1: They never talk to me, they're always texting. Dad's always on business calls, or texting, and I can only talk to him when he's not on his business calls, but I just feel like this takes forever, it feels like it's forever.

[pause video]

BONNIE GOLDSTEIN: I love watching how present Maddi is. Her sound of "mm-hmm" and other nonverbal signs of encouragements, and her head nodding are signifiers of encouragement and of her presence and encouragement.

[video]

GROUP MEMBER 1: I'm only usually with him when I come to find him in his bedroom, or at breakfast sometimes.

BONNIE GOLDSTEIN: So, you don't get to see your dad as much as you want. And then even if he's there, he's often texting. [turns to the group members] It sounds like he doesn't get as much time with his dad as he wants. What do you guys think?

MADDI SIEGEL: No

GROUP MEMBERS 2 AND 3: No, uh-uh.

BONNIE GOLDSTEIN: Is this something others of you also feel? [Group members all nod.]

[pause video]

BONNIE GOLDSTEIN: We are exploring these issues with all our group members. We're working collaboratively, identifying and arriving at group agreement that this is something we might want to look at.

[video]

BONNIE GOLDSTEIN: Let's try something. Will you stand up for us? [Group member 1 stands.] Right there. Now everybody, what do you think he's saying with his body?

GROUP MEMBER 4: Everyone's looking at him.

GROUP MEMBER 3: Look at me. I'm going to say something.

GROUP MEMBER 2: Listen.

BONNIE GOLDSTEIN: Could be! Say, is there a way you could stand even taller? Right there, let's see if you can stand really tall. Notice, when he stands super tall, how we're all paying attention. Now, even taller.

MADDI SIEGEL: Oh, look at your face, at the serious look you have. [Group members giggle.]

BONNIE GOLDSTEIN: What's his face saying? With his body language, only, without words, what is he saying?

GROUP MEMBER 5: That he's angry. Or that he doesn't like anyone.

GROUP MEMBER 1: Not true.

BONNIE GOLDSTEIN: Not true? Not true that you're not angry, or not true that you don't like any of us?

GROUP MEMBER 1: Both.

BONNIE GOLDSTEIN: It's a good thing that we clarified that. It's good that we asked, right?

[pause video]

BONNIE GOLDSTEIN: So, often misunderstandings occur based on misinterpretations of body language. Either we misconstrue, as we saw occurring during this exercise, as members erroneously interpreted or guessed something that is not accurate or not likely. So by checking in with all the members, we get to revisit and redo this exercise, and we are also modeling a skill that we want to encourage our clients to do more of.

[video]

BONNIE GOLDSTEIN: Let's see what his body says when you look at her now. What's his body saying right now?

GROUP MEMBER 4: That he wanted to have a turn talking.

BONNIE GOLDSTEIN: Beautiful. [turning to ask group member 1] What do you think? Is that what your body was saying?

GROUP MEMBER 1: No, I was embarrassed that people were watching and judging me. I didn't feel comfortable standing so tall.

BONNIE GOLDSTEIN: Oh. Isn't it interesting that even when we don't mean to, our bodies can give a message to other people?

[pause video]

BONNIE GOLDSTEIN: This is another illustration of how traumatized children can have difficulty with appraisal. Even in the safety of a peer group with familiar members, this member had difficulty detecting accurately whether he was safe with others in the room. Similar to Alan, the first boy we presented, he often reacted, either in sympathetic hyperarousal (having lots of physical energy, struggling to self-regulate or calm down) or parasympathetic blunting (shutting down, low energy). By directing group members' attention toward understanding their body-based responses along with what happens in their nervous system, they start to notice how they feel. Each of the members of this group had the opportunity to do the exercise of standing up tall, supported by the other group members. Some of the kids elected to have other members go before them, paving the way through familiarity with the exercise to feel more comfortable before their turn. Members then shared their responses, arising from this present-moment experience (from loving the attention or feeling powerful or proud to feelings of shame, judgment, or anxiety).

[video]

BONNIE GOLDSTEIN: [In anticipation of a family session following this group session, we add another dimension to this group exercise by inviting group member 1 to stand aligned atop of the large exercise ball, supported by other members, in order to extend his sense of height.] How does this feel?

GROUP MEMBER 1: Wow. [Joyous laughter abounds.]

GROUP MEMBER 2: Oh, now he looks so big.

BONNIE GOLDSTEIN: I bet, just by standing like that, so tall and with his head high, he can start to get his dad to listen to him more. Look at how he is standing in such a powerful stance.

MADDI SIEGEL: I feel ready to listen to you when you stand like that, looking so powerful.

BONNIE GOLDSTEIN: Right. Maddi's really noticing how powerful you look when you hold your head that way [He then holds his head even more aligned, deepening his experience and extending his sense of elongation and height, supported by the other group members as he stands atop the ball.] What are the words you might want to say to your dad, standing like that?

GROUP MEMBER 1: Attention. Attention. Attention.

BONNIE GOLDSTEIN: Yeah, I think so. Pay attention. Those are really powerful words when Dad doesn't pay attention, aren't they?

GROUP MEMBER 1: Yeah.

[pause video]

BONNIE GOLDSTEIN: I love how thoughtful he was. His capacity for self-reflection is growing. We're coupling work on his body stance and alignment with work to get him to pause before taking action—to think before acting out rather than just reacting on impulse. In the past, this boy's problematic behavior seemed to garner attention, albeit negative, from his father. We are promoting more adaptive behavior, helping him inhibit poor, maladaptive responses, and repeating new, more successful ones.

Through the lens of sensorimotor group psychotherapy, each participant has an opportunity to try on new physical movements and behaviors and to explore the meaning for them. That's the beauty of the community, wherein each member is able to reflect, talk, integrate, and notice what's happening in the present moment, as the therapist reflects on these moment-to-moment interactions.

There is an organicity to this. For example, I didn't start the group with the intention to do this particular exercise. Rather, through awareness of the group milieu, and being open to what transpired in the moment-to-moment flow, this exercise spontaneously came to mind. Our offices are filled with props; balls, pillows, ropes, scarves, and space in which group members can explore. Pat and I have written many papers offering ideas for office props and

ways to use office space, and which will be expounded on in our forthcoming book on Sensorimotor Psychotherapy with children, adolescents, families and groups. (Norton, in press)

PAT OGDEN: I hope you're getting the sense of how these principles operate in action. When Bonnie describes the organicity of the group experience, that's the wisdom of the group informing the technique, and informing the intervention, not the other way around. And also the collaboration, working in concert with the group members, fosters that sense of unity. They're in it together. The creation of the changes in the therapy hour are not just the therapist's responsibility; it's also the clients' responsibility, and all the group members are participating. I think drawing on the principle of mind-body-spirit holism is self-evident. The vision statement of the Sensorimotor Psychotherapy Institute is "to harness the wisdom of the body to liberate human potential." That's what Bonnie's doing: she's harnessing the intelligence of the body, and the kids are learning about this intelligence through being mindful of the changes that emerge when they embody a different way of being in their bodies. This is a clear illustration and application of both mind-body-spirit holism and organicity in practice. As Bonnie illustrated, the therapist must rest in not knowing and relinquish agendas so that this intelligence can emerge from the clients themselves.

BONNIE GOLDSTEIN: When we add in the family dynamic, especially when there's an agenda of the parent or of the school to address inappropriate behaviors, unmet expectations, et cetera, we have to aim to get past this agenda so that we can be in the experience. We invite our clients to be with whatever comes up naturally, to play with possibilities.

PAT OGDEN: A quote by Hermann Hesse exemplifies the principles of Sensorimotor Psychotherapy, especially organicity. He says,

*I can give you nothing
that is not already
its origins within yourself.*

And that's the attitude that we go into our therapy sessions with, seeking to help make the inner world visible. I think that that's all we *can* do. People often call me a healer, and I've always had an aversive reaction to that because

I never feel as though I can heal anybody. Rather, I can help to create a container where they can heal themselves, a relational container that is conducive to growth and well-being. I don't do the healing—the client does. That container is created through seeking to embody these principles and drawing on these principle to guide my interventions.

Let's take a look at our next client, a Jamaican American woman in her late forties, of middle socioeconomic status, cisgender, but not able to work due to PTSD, so her husband is the breadwinner. Her symptoms of anxiety, depression, and suicidal ideation stem not only from her individual trauma history but from racial trauma. Macy disclosed several incidents of racial harassment and trauma that have occurred recently, such as the vicarious trauma of witnessing police brutality toward people of color in her community and in the media, and being called demeaning racial slurs, but reported that she can't remember much of anything about her childhood except the abuse. How do we help throw open a picture gallery when all she sees is horror and abuse? She also suffers from alexithymia and expressed wanting to be able to sense her body and her emotions. One way to shift consciousness and shift procedural patterns is by embodying a time when a person did feel connected or good in some way. So we discussed that perhaps we could start by seeing if she could remember a positive event from her childhood, and she recalled an incident of chasing butterflies with her siblings.

[video]

PAT OGDEN: Just put yourself back there in that memory of chasing butterflies with your brothers and sisters, running down the hill after them, the good feelings in your body. [We took time for Macy to recapture this experience until she felt she was "there."]

MACY: I just remember it felt, I don't know, I guess the word's *free*.

PAT OGDEN: It felt free. Yeah.

MACY: Yeah. It didn't feel like there was so much wrong . . .

PAT OGDEN: Uh huh.

MACY: . . . if that makes sense.

PAT OGDEN: Yeah, absolutely it makes sense. So, for a moment, let's capture that feeling, all right? That free feeling, remembering that free feeling just running fast down the hill after the butterflies. There's probably wind in your hair, probably wind on your face. Maybe you can feel the sun and see the butterfly you're chasing.

MACY: Yeah.

PAT OGDEN: Yeah. And what do you sense right now when you remember that free feeling, as you're running, chasing butterflies? How do you remember that in your body?

MACY: I think I remember it as sort of, I don't know if this even makes sense, but a lifting from my shoulders. It's like . . . [Client looks at me questioningly, moving her shoulders.]

PAT OGDEN: Oh, a lifting.

MACY: Yeah, if that makes sense.

PAT OGDEN: Yeah, a lifting, like something lifting off your shoulders?

MACY: Yeah.

PAT OGDEN: Uh huh. Right. Like something just sort of lifted off, and now you sense this freedom.

MACY: Yeah. Yeah. Yeah.

PAT OGDEN: Just stay with that . . . what's it like to remember the freedom, to feel it in your body?

MACY: Actually, it makes me really sad.

PAT OGDEN: It does?

MACY: Yeah, Just 'cause it's one of the few memories I have that's even partly good.

PAT OGDEN: Yeah. Something that makes you sad that you didn't have more memories like that.

MACY: Yeah. It's just sad that all I got was . . . I don't remember much more that's positive. So . . .

PAT OGDEN: Well that is sad. [The empathic resonance is palpable and client looks teary.]

[pause video]

PAT OGDEN: Consciousness and the organization of experience are always changing second by second by second. Macy had a moment of feeling that freedom, but then the good feeling is coupled with the sadness, and then it started to become coupled with dysregulation, as you'll see.

[video]

PAT OGDEN: Where are you right now?

MACY: I'm actually sitting here thinking, "Okay breathe, 'cause you're not going back there."

PAT OGDEN: Not going back?

MACY: To the memories. It's hard not to have bad memories sometimes.

PAT OGDEN: Uh huh. Yeah. It's hard not to go back to the bad memories.

MACY: Yeah. I just follow the train of thought to probably what would happen next at the farm, and you know . . .

[pause video]

PAT OGDEN: Can you hear the tightness in her voice? The muscles around her larynx are tightening, her voice is more strained. Steve Porges says that this is one of the first signs of the social engagement system going off-line, because

the ventral vagal complex governs the larynx. And as it starts to tighten, her arousal is rising over the upper edge of the window of tolerance, and she is becoming dysregulated.

[video]

MACY: . . . and the yelling, and all the stuff that would go on. So it's hard not to go there.

PAT OGDEN: You sort of go there [to the negative memories] automatically. [Macy nods.] Yeah. Right. Can I ask you just one question about that? Would that be okay?

MACY: Sure.

PAT OGDEN: I would like to know, when you go there automatically, I wonder if it's something that happens in your body.

[pause video]

PAT OGDEN: I'm curious about this because I know that, if she can identify how her body participated in the arousal, we will have something concrete, something physical that we can draw on to shift her consciousness and change her organization of experience—we will have a resource. If she is pulling in, for example, or if she has stopped breathing, or if she is pulling back, we can discover from her body a movement or action that would counter that pattern, a movement she can use right now to shift her consciousness and regulate. Her body holds the wisdom and the key to change.

[video]

PAT OGDEN: Is there something your body wants to do, like tighten up, or push it away, or run away?

MACY: Yeah, there's a lot of feeling like I just want to curl up and hide from it. Just . . .

PAT OGDEN: Oh, just go away from it.

MACY: Yeah. I didn't want it . . . I don't want to see it and feel it.

PAT OGDEN: Yeah. Yeah. Okay. Is it over at this side, or is that my imagination?

[pause video]

PAT OGDEN: Macy's body is almost imperceptibly leaning to the right, which I tracked, but in the spirit of unity and collaboration, I wanted to check with her and see if she notices this too.

[video]

MACY: No, no it's . . .

PAT OGDEN: It's kind of over on this side? [points to Macy's left side]

MACY: Yeah, it always feels like it's on this side of my head.

PAT OGDEN: It always feels like it's on that side. Yeah, right. And your impulse would be to curl up and just get away from it. [Macy nods.] Yeah. So, I'd like to ask you to try something else, just as an experiment. Make this motion with your hands, to make an active motion, to kind of push it away instead. [Pat demonstrates a pushing to the left motion with both hands and arms.] And how does that feel just to push it away?

MACY: That feels strange.

PAT OGDEN: It feels strange. Yeah? Yeah. Check it out, do it a few times. Just . . .

[pause video]

PAT OGDEN: It does feel strange to her, because she's in what Onno van der Hart would call *trauma time*. She's remembering, mostly implicitly, all those memories of terrible abuse where of course she couldn't, in any way, defend herself. So we are experimenting with her making an action that

challenges what she learned before, in that trauma context, to keep herself safe. In that context she would just curl up. And there's organicity in that, in response to that abusive family situation from which there was no escape. That was the best option at the time.. But now she can safely execute another, more empowering action. But of course, this new action feels strange, because it's countering the familiar pattern of how she reacts physically to threat.

[video]

PAT OGDEN: Go head, push . . . keeping that away. What happens? You took a breath, I noticed.

MACY: Yeah.

PAT OGDEN: Did you feel that?

MACY: Yeah.

PAT OGDEN: Yeah. A breath happened. How are you doing?

MACY: I'm okay.

PAT OGDEN: You're okay.

MACY: I'm okay.

PAT OGDEN: Does it feel like that [the trauma memories] is farther away now? Or . . .

MACY: It actually does, a little bit [voice sounds surprised].

PAT OGDEN: Uh huh. It does, a little. How can you tell? Do you feel more relaxed in your body, or something else?

MACY: Yeah. It's not so pushing. It's not so impulsive, it feels like . . .
[She pauses, looking at me.]

PAT OGDEN: Uh huh. Like the memory, or the bad memory, is not so present, it's not so impulsive.

MACY: Yeah. It doesn't feel like it's going to sort of overflow me.

PAT OGDEN: Right, that's great.

[pause video]

PAT OGDEN: Changing ways of living in our bodies to support more expansive states of consciousness does not happen all at once. This is a beginning for Macy but it will take a lot of practice to regulate herself and embody that freedom she experienced for a moment.

[Pat shows the audience two contrasting pictures: the first of Macy's posture, which is compressed, with her chin down and shoulders constricted inward, at the start of the session and second, the lift of her chin, the length in her neck and spine, and the widening of her shoulders when she embodies the feeling of chasing butterflies and reported the freedom she felt.]

You can see the change in her body when she said "freedom": everything shifted. That's a huge difference! It might look like a very tiny change in her body, but it is a huge change of consciousness. It not only changes her posture, it shifts how she participates with others. If your shoulders are like this [demonstrates hiked, constricted shoulders] it's hard to reach out to somebody else. You can't even extend your arms all the way. Try it on: lift your shoulders up like that and tighten them, and then try to reach out. [The audience mirrors the posture and action that Pat demonstrates.] It's difficult. But when your shoulders are down, that's going to support relating—you can more easily reach out. Now try reaching when your shoulders are down—you can feel the difference, right? Reaching, like eye contact, are instinctive actions, called *proximity-seeking* actions, that support nearness and connection with others. Proximity-seeking actions, and all actions, including pushing, grasping, pulling, and letting go, are supported by the integrity of an aligned, flexible spine.

We must remember that each posture embodies a part of the self that has

its own kind of island of truth, like the client in this posture [shows another picture of a different client], who has her own reality based in the trauma of the past. That part of her needs recognition and help. Her body is so constricted and pulled in, but she found a way to open up and expand physically, which was another way of being and another state of consciousness. But then the part of her that had been hurt and abused felt too exposed and unprotected. We have to integrate the part of her that felt exposed and felt like she wasn't safe with the more expansive, open part. She integrated these parts by discovering an action of putting her arm across her body, where she could maintain an expansion and openness but still tend to the part that was so terrified of being exposed, and protecting that part with her arm. We must remember that, as we change posture and try new actions, we should be careful not to override a part of the self that might find the new posture threatening, and instead integrate these parts through the body.

Let's illustrate the principles through another group session illustrating working with conflict in the group. Often it is through negotiation of the conflict, within the individual or group session, that significant treatment outcomes occur. In this group, one young girl, Danni, had taken another girl's private note away the week before, much to her chagrin. Bonnie uses this group session to teach about setting and respecting boundaries. From the onset, her upset is evident as she does not want anything to do with any of the group members (she avoids looking at others, her head is down, she turns her body away). Now, there's an opportunity to repair.

BONNIE GOLDSTEIN: Often in the group dynamic, the sheer amount of sensory stimulation available at any moment can easily trigger or overwhelm a child. We all know clients who find their bodies are always on somebody else: their foot, their hands, or some body part. They can't keep themselves from becoming dysregulated and can't keep from violating boundaries. Respecting others' boundaries is one of the hardest things to teach young kids, and group therapy presents ample opportunities for exploring present-moment experience of boundary violations and repair, as every moment has potential for disruption and for repair.

This group illustrates a Sensorimotor Psychotherapy exercise where clients use ropes or strings to form a circle signifying their boundary (as large or as small as determined by the client and the space in the office).

[video]

BONNIE GOLDSTEIN: [asks Danni, who is now sitting inside the large circle she's created using a long silver rope of Christmas tinsel] Is this the right size for your circle?

[pause video]

BONNIE GOLDSTEIN: As Pat mentioned, you can tell by her body how she is feeling.

PAT OGDEN: Bonnie starts the video by setting up an experiment with Danni, who is the girl who had the difficulty respecting her groupmates' boundary, so that she could sense what it is like to have a boundary herself by making this one with the silver tinsel. If Danni can sense her boundary and feel the safety of it from the inside, then from there she can hopefully learn and come to respect boundaries of others.

[video]

DANNI: [She fixes the boundary and adjusts it to make it just right and nods.] Now it is.

BONNIE GOLDSTEIN: Now it is. Huh . . . Just notice what it's like for you inside your circle. Let's all move our hands away from the circle, and move our feet away, so that nobody is going into your boundary. [Group members all move back, away from the circle.]

DANNI: No one gets to go into my boundary [big smile across her face, sitting tall, arms crossed].

BONNIE GOLDSTEIN: Look around. Is there a way you can say to each of us, "Stay out of my boundary"?

DANN: [barks out, loudly] Stay out of my boundary!

BONNIE GOLDSTEIN: Okay. Just look around at your mates. Is anyone touching your boundary?

DANNI: [softly] Please don't go into my boundary.

BONNIE GOLDSTEIN: There's a real difference between the two ways that you said that.

[pause video]

BONNIE GOLDSTEIN: She found that shift, the second time, and was able to come up with a gentler way of saying it.

PAT OGDEN: Yes, because her first impulse is to be aggressive.

[video]

BONNIE GOLDSTEIN: For you, there was a big difference, Danni. What happens for you when you say it differently.

DANNI: I feel good.

BONNIE GOLDSTEIN: Where in your body do you feel good?

DANNI: Well, the first was out of my mouth, and the other was out of my heart.

[pause video]

PAT OGDEN: "The other was out of my heart," she says. Isn't that sweet? She's finding, through the work, that ability to relate. It's not her default yet, but she's getting there.

[video]

BONNIE GOLDSTEIN: Show us out of your heart again.

DANNI: Please don't go in my boundary.

BONNIE GOLDSTEIN: Let's do this exercise again. Jump back into the middle of your boundary.

DANNI: Boom.

BONNIE GOLDSTEIN: Now, can you sit up and look around first, and then tell us that? Tell us, "Don't come into my boundary."

DANNI: [looks at each member] Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary. Please don't come in my boundary.

BONNIE GOLDSTEIN: Wonderful. You really asked that well.

[pause video]

PAT OGDEN: There's that positive reinforcement, "You really modeled well," and you can see the pleased expression on Danni's face. Now comes the challenge: as the members change roles, the girl whose boundary Danni violated now sets her own boundary, and then Danni is challenged to respect her boundary.

[Video shows the girl, Laurie, who was violated sitting inside the boundary she constructed with pillows around her.]

BONNIE GOLDSTEIN: All safe inside your boundary. Now I think what we are going to do is look at what happened last week. [Danni is sitting on the sofa, and hearing this, her posture immediately droops, head down.]

[pause video]

PAT OGDEN: Danni's posture changes—it shifts so rapidly. That looks like a shame posture of curling over and ducking her head.

BONNIE GOLDSTEIN: So quickly, when we bring her back to the problem that arose last week, her eyes looked down, her shoulders and head dropped, ever so quickly, because she knew what we were going to discuss, and the shame was already embedded in her.

[video]

BONNIE GOLDSTEIN: This is your boundary. When we were talking about your letter, and people took your letter and started reading it, you were upset. Now, what words would you want to say to people if they came into your space? Just take a moment to think about it. [Bonnie takes a deep breath, demonstrating to the group members this brief pause.] Now, we need a volunteer. Who wants to volunteer? [Danni raises a hand.] Okay, let's have you stand up, and let's do an experiment in which Danni comes toward your space, and when she comes into your [Laurie's] space, you use your hands to say stop [Bonnie brings her hands up to model stop]. Okay, ready? Take a small step first. Okay, Good.

[pause video]

BONNIE GOLDSTEIN: Do you love it? You can just see her processing, practicing.

[video]

BONNIE GOLDSTEIN: Slower, slower, even slower [speaking to Danni, who is moving quickly]. That's right. Now let's go to the back. Why don't we try this again, and you [speaking to Laurie] can tell her to stop? You can use your words, your voice, or your hands as stop signs. Are there words that you want to use?

[pause video]

PAT OGDEN: I thought it was great that Danni volunteered, clearly showing that she wanted to repair and resolve the conflict. Now, Bonnie is helping both Laurie and Danni negotiate their conflict and achieve success. She's helping Danni find her way through using touch to gently restrain Danni from jumping into Laurie's space and to communicate that she needs to slow down. At the same time, she is teaching Laurie how to set a clear boundary through her physical action to find the words that go with it.

[video, in which Laurie uses a brushing-away movement to indicate her boundary, to communicate to Danni that she should move farther away]

BONNIE GOLDSTEIN: What's the meaning of that hand?

LAURIE: Can you please not go in my space.

BONNIE GOLDSTEIN: Let's write that down.

[pause video]

PAT OGDEN: So this is an exercise we use in Sensorimotor Psychotherapy. The client thinks of the words that they might like to say, something they want others to know, or messages that they wish to convey to communicate their boundary. These words can be written on a piece of paper and then folded over so that the side of the paper that faces out communicates these words to others.

Here, Bonnie wrote Laurie's words down on the paper, "Can you please not go in my space," and Laurie places it at the edge of her boundary.

[video]

BONNIE GOLDSTEIN: Your space is yours [speaking to Laurie].

LAURIE: It feels like I have everything to myself [smiling].

BONNIE GOLDSTEIN: It feels like you have everything to yourself, and it feels really good, huh. Show us with your body, please. What are the words?

LAURIE: Can you please not go into my space? I don't like it.

DANNI: Okay.

[pause video]

BONNIE GOLDSTEIN: Throughout the conflict, as we work toward resolution, we notice that what's transpiring is reflected in their body posture: as you can see, both group members experience a shift as illuminated in their bodies, which were more aligned. What arose through their conflict and through our attempts toward resolution became other issues to be identified, named, and

framed. These enactments and attempts toward resolving conflict become opportunities for other experiments or as something they can look at through the group process and relational negotiation of conflict.

PAT OGDEN: I thought that was beautiful. Laurie is learning to clearly set her boundary, and Danni is learning to slow down her impulsivity and respect boundaries. It's hard to deal with kids in conflict. In Sensorimotor Psychotherapy, instead of talking about it directly and processing it verbally, or in addition to, we're setting up these experiments where the children learn from the inside what it's like to have their own boundary and have others respect it.

Dan Siegel coined the term the *window of tolerance*, which is such a wonderfully descriptive term. To help clients widen their window, we must work at the edges, which as Philip Bromberg stresses, is "safe but not too safe." Embodying the principles of organicity, nonviolence, unity, mind-body-spirit holism, mindfulness, and presence enables us to create a context within which our clients experience enough safety to risk the challenges of working at the edges of their windows. Using mindfulness helps clients to first become aware of how experience is organized and then change that organization in the direction of integration and expansion so that more options are available. That expands the window. Each of the clients here got a little bit of a wider window of tolerance.

BONNIE GOLDSTEIN: I thank you all for the gentle support with which you joined us today, as we explored ways of working with concepts such as mindfulness, presence and awareness through the lens of Sensorimotor Psychotherapy. We nurture burgeoning awareness in our clients by using our own therapeutic presence to become more aware of ourselves and of what transpires within us and between us. We work collaboratively to foster compassion (for our clients and within the therapeutic relationship), as Deepak Chopra's presentation highlighted the concept that mindfulness is really the foundation of self-compassion—in loving, connected presence. In the spirit of helping our clients cultivate mindfulness, we start with the process of noticing new things about the familiar. This active noticing promotes heightened sensitivity to small shifts, which are often missed unless we bring our attention to them. We aim to develop awareness of subtle body-based shifts and improvements and then explore why these occurred. As we address areas of hypersensitivity—perhaps in touch, sound, sight, smell, or taste—and foster body awareness by noticing body gestures and movements, we capitalize on moment-to-moment experiences.

PAT OGDEN: There's one more principle that I have not mentioned yet, our newest one that I've added: *relational alchemy*. You've seen it operational in all the excerpts we've shown. Relational alchemy refers to the enigmatic and impressive forces underlying the changes and transformations that happen when two or more people or things come together. There is mystery and unique wisdom inherent in impact of the relationship upon the parties involved that cannot be understood with the rational mind; different aspects of oneself emerge in different relationships, different strengths, struggles, and growth possibilities. Relational alchemy speaks to the distinctive qualities and emergent elements of each relationship, the unique quality of that coming together that spawns something bigger than the sum of the parts. Relational alchemy encompasses both the wonder of healing that occurs naturally, through tapping organicity, as well as the challenging stress of therapeutic enactments that emerge, especially in long-term therapeutic relationships, as well as the unique enactments that can emerge from a collision of culture and social location.

The real magic and healing power of clinical practice often come about from navigating the unformulated, unconscious impact of therapist and patient upon one another, which includes the influence of culture, social location, and personal histories of both parties. What you just saw was the resolution of an enactment between the two children in Bonnie's video. The embodiment of relational alchemy means the therapist welcomes therapeutic enactments and strives to relationally negotiate them, as Bonnie did. By recognizing the growth producing power of therapeutic enactments, relational alchemy grounds the principles and the work in the paradoxical reality of both the imperfection of the human condition and the intelligence behind the interaction of implicit selves that lead to the struggle of enactments.

To summarize, these essential principles of Sensorimotor Psychotherapy provide a philosophical/spiritual ground for clinical practice. They shape the nature of the relationship and the overarching climate in which therapy takes place. All our therapeutic strategies, maps, interventions, and techniques are developed from this foundational base. Together, these principles create a paradigm that we believe maximizes the possibility for healing and thus enables the client to take their next step in their own evolution.

Thank you so much for your attention.