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## THE GERDA BOYESEN METHOD: BIODYNAMIC THERAPY

*Clover Southwell and staff of the Gerda Boyesen  
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### HISTORICAL CONTEXT AND DEVELOPMENTS IN BRITAIN

#### Historical context

Biodynamic therapy was developed by the Norwegian psychologist Gerda Boyesen, who worked in Norway until 1968 when she moved to London. While completing her degree in psychology at Oslo University she also went into training analysis with Ola Raknes, a Freudian analyst who had been closely associated with Wilhelm Reich during Reich's years in Norway. During the analysis Raknes never discussed theory, but Gerda Boyesen's experience as his analysand convinced her of the importance of working with the body as an adjunct to verbal psychotherapy. Therefore before embarking on her career as clinical psychologist she also qualified as a physiotherapist.

From 1960 to 1968 Gerda Boyesen held posts as clinical psychologist in mental hospitals in Norway. At the same time, she had a private practice where she combined psychotherapy with massage as she judged best for her patients, and amassed a wealth of detailed observations of the relationship between psychological and bodily processes. She was particularly struck by the patients' vegetative reactions to their sessions, such as flu symptoms or diarrhoea, and the rapid changes that could occur in the quality of their facial tissue (grey and drained or puffy and swollen). She also noticed that certain patients would have loud intestinal sounds (tummy-rumblings) during psychotherapy sessions, particularly at moments of insight or emotional release, and that these were the patients who were showing the most rapid improvement.

#### *Biodynamic Therapy*

Intrigued by this connection, she began to listen to her own intestinal sounds through a stethoscope; correlating the different sounds with her immediate circumstances and mood, she arrived at her theory of psycho-peristalsis (described in the next section). Furthermore, she found that by means of massage - during which she would hear loud watery sounds through the stethoscope placed on the patient's belly - she was able to reduce the excess fluid in the patient's body tissue.

The psychological effect was remarkable: the patients might have come to the session feeling desperate or depressed; but as soon as the fluid pressure in the tissue was more normal they would feel 'light', at peace with themselves. (M.-L. Boyesen, 1974). The building up and releasing of pressure in the tissue seemed to be related to the building up and releasing of some sort of emotional burden, even if the patient had not consciously recognized it. What was the dynamic factor connecting this physical pressure and the emotional pressure?

Her own personal experience eventually led Gerda Boyesen to find her answer in the context of Freud's (1905) libido theory. At this period she was having further therapy with Raknes. She was experiencing enormous psychological pressure and also a strange pressure in the tongue and swelling in the mouth. Raknes had urged her to speak about what was troubling her, but she could only sense that it related to early infancy, before she had learned to talk. The pressure grew unbearable and she went out in the woods where she felt free to scream. With this emotional release came dramatic new sensations: the pressure in her mouth suddenly released, and she felt a flow of incredible sweetness and pleasure streaming down through her body. She then got the image of herself as a baby at the breast; she learned later that her mother had teased her as an infant by taking the nipple out of her mouth as she was sucking. Could it be, Gerda Boyesen then asked herself, that the oral libido fixation arising from the infantile traumas was now -thanks to her screaming - beginning to release? and that her exquisite 'melting' sensations were the sensation of the long-fixated libido moving, at last, through her body? Could it be that libido is not just a psychological factor but also a physiological reality?

When these streamings of pleasure were at their strongest, Gerda Boyesen would feel that she was in touch with what she called the 'oceanic wave of the universe', and so she hypothesized that this flowing libido must be some sort of universal life-force. Subsequently she saw in some unpublished writings of Reich that her own findings were supported by his theories of orgone energy.

Though often loosely referred to as neo-Reichian, Gerda Boyesen in fact developed biodynamic psychology independently. *Bio* means life; *dynamic* means force. Gerda Boyesen's theory is that the life-force moves in us as libido, its flow being intrinsically pleasurable except if it is blocked, when it causes symptoms both physical and psychological (M.-L. Boyesen, 1975). She reconsidered Freud's theories of child development, emotional repression and conversion symptoms in the light of her own experience of the libido flow (M.-L. Boyesen, 1976). In repressing our emotions we are blocking the flow of our life-force, our libido. The task of biodynamic therapy is to regain access to the life-force blocked in mind and body and to help it flow freely again.

Many of Gerda Boyesen's theoretical premises are similar to those of orgonomy and bioenergetics, but biodynamic psychology lays greater emphasis on the interrelation of psychological process with vegetative process, on the healing force of pleasure, and on the 'dynamic updrift', the intrinsic drive of the repressed libido to come to the surface and be re-integrated. This drive is seen as the bodily aspect of the instinct of self-actualization posited by Goldstein (1939).

Impressed though her Norwegian colleagues were by the clinical results Gerda Boyesen had been achieving, they were not receptive to her theoretical explanations, which they found too revolutionary. In Norway she had discussed her theories with few people outside her own family circle, but in 1968 she moved to London where she could be free of the constraints of the traditional background. Here she met with a lively response to her theories; she established a private practice, and embarked on teaching her methods. From London the training soon spread to Europe, and in the last ten years some 50 training programmes have been run in France, Germany, Holland and Switzerland. People have come to London from all over the world to study with Gerda Boyesen, and the seeds of her work have reached five continents. Biodynamic therapists trained in London are now planting the work in Australia, the USA and Brazil.

On the basis of Gerda Boyesen's theory and methods the biodynamic approach has been further extended by members of her family. Ebba Boyesen has specialized in the energetic aspects of body therapy, including birth release, auric massage and grounding, and psycho-orgastic therapy. Mona-Lisa Boyesen has specialized in orgonomy and has developed the bio-release programme, a self-help course in body-mind self-regulation; she has recently been concerned with promoting the sensitive care of newborn

infants. Paul Boyesen has developed primary impulse training and transformational psychology, a more analytical approach to body therapy. This chapter, however, will deal only with the central theory and methods of Gerda Boyesen herself.

### Developments in Britain

The London centre of the Gerda Boyesen International Institute was established in Acton Park in 1976, and provides the most comprehensive training in biodynamic methods, extended over three or more years. Some 30 students enter the programme each year, attending several times a week for theoretical teaching and practice. A variety of shorter courses are offered for people in the helping professions, and there is also a programme of courses and workshops for the general public.

The Gerda Boyesen Clinic, staffed by therapists trained at the Institute, provides a range of individual outpatient treatments, including biodynamic psychotherapy, and psychoperistaltic massage to help specific problems such as lower back pain. Many patients come referred by doctors familiar with the work. Over the years the clinic has treated many hundreds of patients, some of whom arrived in acute distress of body or mind, while others come to deepen their self-awareness through the unique biodynamic integration of 'mind- and 'body-work'. Patients generally attend once a week over a period of months.

## THEORETICAL ASSUMPTIONS

### Image of the person

In the biodynamic view, the functions of mind, body and spirit are totally interfused. Everything that happens in us and everything we do - our shivers, shouts, visions, actions, thoughts and feelings - all are manifestations of the life-force moving in us. How somebody relates to the movements of their life-force - inherently pleasurable when flowing freely - is central to the biodynamic image of the person.

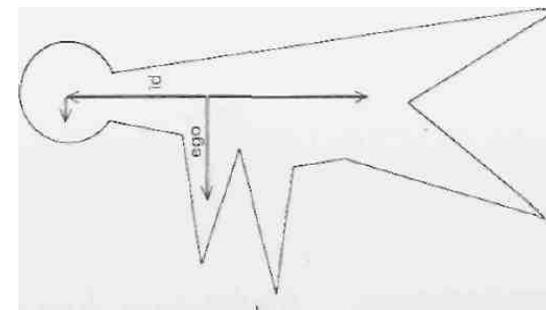
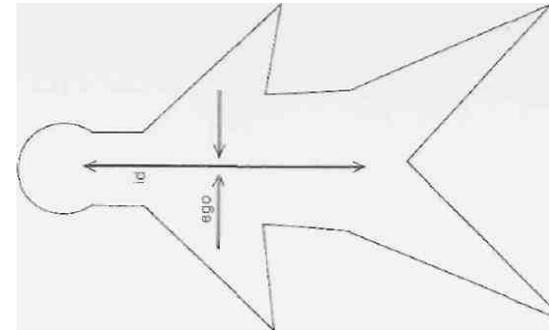
#### *The primary and secondary personality*

We distinguish between the primary personality and the secondary personality. People locked in the secondary personality have lost touch with their life-force and have thus been 'cheated of their birth-right of pleasure'; the primary personality, on the other hand, is in harmony with the rhythms of the life-force. Most people in fact manifest aspects of both primary and secondary, and the aim of biodynamic therapy (as we shall see in the section on practice) is to dissolve the constrictions of the secondary personality and to encourage a person's true inner nature, the primary personality, to emerge and mature. Gerda Boyesen (1982, pp. 5-8) writes:

The Primary Personality has a natural joy in life, a basic security, stability and honesty. . . . There is pleasure in work and in relaxation, a gentle euphoria and a mild intoxication in the pleasure of living. ... He or she is in touch with the instinctual self, the primitive and animalistic urges, yet this is integrated also with the transcendent. . . . There is a sense of being at one with the universe, and not just an isolated individual... a natural love for humanity and, at times, a rage for those whose abuse this in others. . . . We are born with the potential for inner happiness, security and wonder. We can lose part of this as we become limited, over-rational, deprived and thus self-seeking.

When, from childhood onwards, the world presses in on us too hard and does not accept us as we truly are, we develop the secondary personality. Then, not only do we create ways to protect ourselves from the onslaughts of the outer world, but we suppress our own inner impulses, because they are too threatening to us; we block these movements of our life-force, and so limit the expansion of our true potential.

Figure 9.3 Emotional vasomotor cycle



### *Id and ego - interplay between vertical and horizontal*

The secondary personality has lost the natural harmony between the ego and the id. The biodynamic view of ego and id differs from that of Freud, who saw the id as a selfish, anarchic and anti-social force, at war with the ego (Freud, 1915). In biodynamic theory both id and ego are seen as functions of the life-force.

As a conceptual model of the relationship of id to ego, we consider the interplay between the *vertical* and the *horizontal* flow of the life-force in the person. The id, with its upsurge of raw emotion, is an aspect of the vertical flow (Southwell, 1982): the ego functions both in the vertical axis (perception, thought) and in the horizontal (action, regulation). The ego puts the force of the id into effect by carrying it horizontally out into the world, as for instance through the arms and hands (Figure 9.1). Also, the ego regulates the id's vertical upsurge by means of the horizontal counterforce (Figure 9.2) of the body musculature, which functions, as described by Reich (1950) in horizontal segments. Harmony between these horizontal and vertical forces (discussed further in the next section) is what traditional psychology calls *ego-strength*. People whose ego is well-developed can encompass and handle a strong flow of the id-force. They regard it as their ally, not their enemy, because they have found how to respect and co-operate with it.

### *The three levels of the emotional cycle*

Emotions are movements of the life-force in the body as well as in the mind. We distinguish three levels through which the life-force flows in us: the psychological, the muscular and the vegetative. By the *psychological* level we mean our cognitive and emotional experience, such as memories, choices, feelings, perceptions, all of which involve functions of the brain; by *muscular* we mean the level of motor action through the voluntary muscle system; the *vegetative* level includes the functions governed by the vegetative nervous system, the basic life functions such as metabolic, digestive and respiratory processes and the circulation of fluids in the body. We distinguish these three levels (which relate to the three cellular layers of the embryo) simply as a working model; in reality they all interfuse, and in a well-integrated person the happenings in the different levels will be congruent with each other. However, when people have lost touch with their life-force their psychological experience will often be at odds with the reality of what is happening on the bodily levels. They may lack co-ordination, be stilted in their gestures and be physically insensitive. Also, even when reacting to a stressful situation with enormous inner tension - gut processes arrested, breathing shallow, eyes dilated, shoulders

raised - they may be under the illusion that they are 'perfectly calm'. So, in biodynamic therapy we take care that the life-force flows freely in all three levels and that the person is able to integrate them.

### *Upward and downward phases of the emotional cycle*

When somebody makes you angry you may sense the anger literally coming up in you as you visualize how you would like to retaliate (psychological); but you may not notice how you are clenching your fists and grinding your teeth (muscular); and most probably you do not realize that virtually all the vegetative functions of your body are also responding to the emotional stimulus. Biodynamic psychology sees all these movements as the first, upward phase in a natural cycle of the life-force, which we call the *emotional vasomotor cycle*.

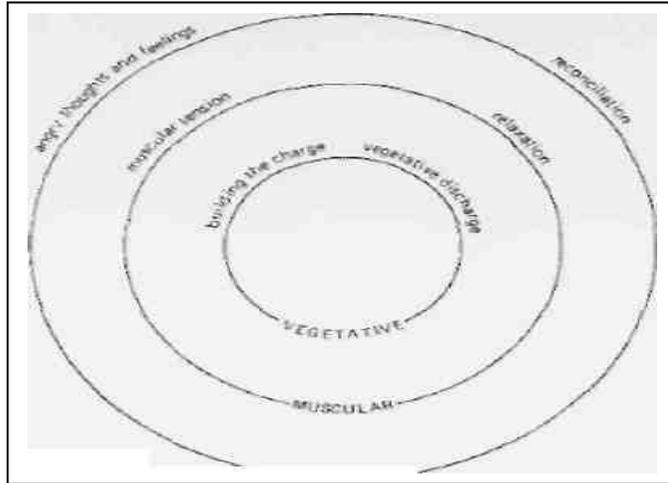
Once the emotional incident is over, we come to the downward phase of the cycle. The feeling of anger subsides and we begin to come to terms with what has happened (psychological), the contractions in our limbs begin to relax (muscular) and the whole metabolism of the body tissue slowly returns to normal (vegetative) (Figure 9.3).

In the upward phase of the cycle the psycho-organism went through a massive disruption as it prepared to deal with the outer world. In the down-going, 'returning' phase we must then clear up this disruption inside ourselves, assimilate the experience, and restore our inner equilibrium.

### *The 'emotional canal': psychoperistalsis*

In the upward phase of the cycle, the actual force of the emotion (the *charge*) is born; according to biodynamic theory, this occurs in the alimentary canal, which Gerda Boyesen refers to as the 'emotional canal', or 'id canal'. Our feelings are expressed at the top of this canal, through the mouth, by our words and voice, smiles or grimaces. According to Gerda Boyesen's theory, the intestines, in the lower part of the canal, digest the remaining emotional stress. Through this function, which she term *psycho peristalsis*, we literally clear out of the body - ultimately through excretion - the vegetative after-effects of emotional stress.

Re-organisation to respond to outer world



Re-organisation to restore inner equilibrium

### The digestion of emotional stress: completing the cycle

Stress is part of the fabric of life, inherent in the dynamic interaction between a person and the environment (Selye, 1978). But once the external stress situation is past we must be able to restore our internal equilibrium, by completing the emotional cycle on all three levels. Otherwise, we retain some residue of disturbance. For instance, on the psychological level, we perhaps are unable to accept that we were angry and so we retain a residue of guilt; on the muscular level we may not completely let go the contractions and so some tension remains; on the vegetative level there may be a residue of fluid pressure in the body tissue which can drastically affect our psychological well-being (see section on 'Acquisition of psychological disturbance').

### Concepts of psychological health and disturbance

As we saw in the previous section, psychological health depends on the strength of our life-force in both the vertical axis and the horizontal, so that the two are well-balanced. Healthy people need not be afraid of intense feelings: the passions of love, the excitements of new discoveries, and furies of rage, even the 'dark night of the soul'. They can safely adventure into the heights and depths of

experience because they have the capacity to return to equilibrium, as surely as a swinging pendulum will always return to centre. These people can complete their emotional cycles and so restore their inner balance.

We distinguish this 'dynamic equilibrium' of the healthy adventurer from the 'neurotic equilibrium' of people who pride themselves on 'letting nothing upset them'. Such rational, 'well-adjusted' and socially acceptable people may - in the biodynamic view - be sadly limited in their range of experience. This is one aspect of the secondary personality. These people have achieved rigid control of their feelings at the cost of the richness of their inner life, and they may be totally out of touch with the life-force.

### *Excess of the horizontal over the vertical force*

Biodynamic theory regards this neurotic equilibrium, where the horizontal is overweighted against the vertical, as a form of psychological disturbance. The opposite imbalance - the vertical in excess over the horizontal - is found in the people regarded as disturbed or pathological also by conventional psychology. These people lack the (horizontal) ego capacity to direct the force of the id in an effective way, and so are easily overwhelmed by the vertical upsurge of their feelings. This imbalance may manifest in thought disorder, emotional chaos and bizarre behaviour, which, in the biodynamic view, are essentially symptoms of unresolved pressure.

Indeed, many of the disturbances we suffer, with psychological symptoms such as chronic anxiety or with physical symptoms such as headache, are essentially symptoms of pressure. This pressure arises when the life-force does not complete its movement through all three levels of the emotional cycle, but is interrupted in its path and so accumulates in the body tissue.

When, on the other hand, the flow along both horizontal and vertical axes is too weak, people will suffer from apathy, sluggishness, resignation and lack of assertion.

### Acquisition of psychological disturbance

Biodynamic psychology follows psychoanalytic theory as to the effect of emotional trauma on psychological development, particularly in children. Yet even more significant than such specific traumatic events, past and present, is - according to biodynamic theory - the *atmosphere* in which we are living. Given an atmosphere of security and trust we can - thanks to the inherent healing force of the emotional cycle - recover even from severe trauma. For instance, a baby who has just had a hard struggle through the birth canal will recover unscathed

from the trauma if it can then rest and recuperate on its mother's body; a child who has had a violent quarrel with its parents will recover completely from the trauma, provided it knows that the episode has not shaken the parents' love. The stress then can melt away: no trace of the trauma is left in the body.

Without this atmosphere of security the cycle cannot be completed and the child stays on the alert, partly locked in the emotional experience. The earlier in life this happens the more devastating for our development. Thus the seeds of much psychological disturbance lie in the patterns of childhood experience.

### *The atmosphere conducive to the primary personality*

Children are full of exuberance, curiosity, noise, and, when frustrated, of rage. If parents can bear with the full liveliness of their children, can listen to them, respond to them and provide a structure of clear limits, then these children will feel met, recognized and accepted. There is then a proper balance between the life inside them and the life around them: support and challenge, space and security. These children will know they have the right to be who they are. They will learn to shape their life-force, but will not have to stifle it.

### *The atmosphere that leads to the secondary personality*

'We can become ill', Gerda Boyesen says, 'simply from the repression of joy.' If all children hear is 'Sit still!' 'Be quiet!' 'Be quick!' 'Do it right!' then they may begin to feel that there is something inherently 'wrong' with them, and they may even feel guilty for existing. So they start stifling their impulses, hiding their feelings: in biodynamic terms, interrupting their emotional cycles and compromising their primary personality. These children will not necessarily suffer specific severe traumas, but the whole atmosphere in which they live is thwarting to their evolution.

Puberty is a critical period, when the child's self-expression may not at all suit the male and female images of the parents. Some children will then rebel, in a desperate effort to assert their primary personality; others, in the attempt to make themselves acceptable, will diminish themselves, developing a bodily system of weak muscles, wan smiles, lethargy, and depression. Others, in a strategy of passive resistance, become phlegmatic, unresponsive and - at the extreme - may become catatonic.

### *The secondary personality becomes a fixed structure*

The older we get, the more the patterns of our society impinge on us. 'Men don't cry.' 'Women don't shout.' We swallow more and more frustration; absorb more and more distress, while 'putting a brave face on it': the face of the secondary personality.

In so doing we also distort our body functioning. If you do not want anyone to know how excited or angry or miserable you are, you will not let a sound escape you, not even a sigh. So you hardly breathe out at all. Or, if you do not want to be overwhelmed by the feelings coming up in you, you hardly breathe in. So we disturb the natural responsiveness of the diaphragm, our main muscle of respiration. This is part of the 'armouring' process described in the next section and in earlier chapters.

### *Perpetuation of psychological disturbance*

When our capacity for self-regulation is functioning well, we can 'catch up with ourselves' and recover from psychological disturbance. But the more we lose our self-regulation, the more armouring we build up, which then holds fast the patterns of disturbance within. This happens on both the psychological level and the bodily level.

Each time we fail to complete an emotional cycle a trace of the stress remains in the body. The posture we repeatedly distort will rigidify into 'muscle armour'. Also, when insecurity repeatedly prevents us from completing the cycle, we develop 'visceral armour': the intestines lose their sensitivity to the subtle pressure which should activate the psychoperistalsis. The more armoured we become the less we can digest the stresses of living. So we suffer more pressure; so we build more armour.

The pressure comes from inside us and from the world outside. Our culture is biased towards external achievement and rationality, 'getting on in the world', 'being reasonable in all things', 'not letting your heart govern your head'. Already as children we learn not to pay attention to our own sensations and experiences. As we lose touch with the life-force and identify with the secondary personality we may win social approval. But, not respecting our own basic rhythms, we lose the capacity for self-regulation, we build up armour, and our patterns of disturbance become chronic.

## PRACTICE

### Goals of therapy

Biodynamic therapy can be used at many different levels. Short-term treatment may relieve persistent psychosomatic symptoms such as digestive disturbances or headaches, or can help people return to a level of psychological clarity when their vegetative self-regulation has been upset. As a longer-term process biodynamic therapy is a journey of profound self-exploration, to become who we truly are. The client's vision of what is possible often changes along the way, as we shall see in our case example. Biodynamic therapy is not a goal-oriented, problem-solving process. It is not our concern to 'improve' the secondary personality or to challenge the particular ego defences. We try to get under the secondary personality, to help the client reach into the depths of the unconscious and contact the life-force bound in those depths, so that the emotional cycles interrupted in the past can now be completed. Regression and catharsis may occur in biodynamic therapy, but this is not an end in itself. In the biodynamic view, the healing lies in completing the emotional cycle, with special emphasis on the down-going, inward phase in which we digest and assimilate our experience. When the cycle is complete we can enjoy the full benefit of the life-force. Whether we are working with people over a period of years or just for a couple of sessions, we will always aim to increase their capacity for pleasure and *self-regulation*, so that they find their own harmony with the life-force, their own *independent well-being*.

Accordingly, we aim to harmonize the flow through all levels of the cycle - psychological, muscular and vegetative - so that these functions will nourish and support each other. We want to balance the ego with the id, and the active 'male' functions of the left brain hemisphere with the receptive 'female' functions of the right hemisphere, and to integrate our animal nature and our higher nature. We want people to be able to achieve equilibrium while enjoying the richest possible range of experience.

In distinction to the genital character postulated by Reich, Gerda Boyesen speaks of the developed individual as the *ethical personality*. Rather than being constrained by the superego dictates of the disembodied will, the ethical personality lives in harmony with the universal values through being in touch with the inner life-force.

### The 'person' of the therapist

The basis of biodynamic therapy is the trust in the life-force, our reverence for its potential in each person. Only when we are in touch with the life-force deep inside ourselves can we perceive the workings of the deeper forces in our clients, and help them contact those levels in themselves.

It takes a deeply receptive, non-judgemental therapist to create an atmosphere in which the client feels safe enough to give up at least some of the self-protection of the secondary personality and begin to let the primary speak. The specific biodynamic techniques, if used only in a mechanical, non-expansive way, simply will not work. The quality of the 'therapeutic presence' is all-important.

### Therapeutic style

The key factor in biodynamic therapy is time. Time enough to feel safe, time to explore; time to follow your own rhythms, time for these stimuli to begin to impinge.

### *Inviting and encouraging*

We follow the movement of the life-force, rather than a therapeutic programme of our own devising; this is the *ripeness* principle. We work with the dynamic updrift of the life-force in the client, watching for any tiniest movement from the primary level, then helping it grow stronger and clearer, till at last it says whatever it has to say.

The client may have kept the primary impulse buried for so long that he or she simply does not recognize it when it impinges, or thinks it 'wrong' and fears it. We now have to 're-educate' people to help them feel that what is moving inside them is fascinating and significant. Accordingly the style of biodynamic therapy is inviting and encouraging rather than probing and critical. Interpretation is used sparingly, if at all. It is a person's own sense of what is moving in them that is so valuable. Biodynamic therapy is a process of deep self-recognition.

As people contact their life-force more and more strongly they will often come to experience the spiritual dimension of life. Again, biodynamic therapy gives support and confirmation but no esoteric teaching, so people develop their own understanding on the basis of their own direct experience.

## *Resistance*

We recognize that there will naturally be a tussle between the expanding primary force -which brought the client to therapy- and all the contracting, self-defeating fears of change. So while, on the one hand, we are calling on the primary personality to emerge, we are trying, on the other hand, to melt whatever obstacle is standing in its way. Is that immediate obstacle some process of the body? or is it some restrictive attitude of mind?

Characteristically, we speak of 'melting' the armour rather than of 'breaking through' and the wide range of techniques at our disposal means that we seldom run into a total impasse. We may try to melt the resistance: we do not battle with it. Sometimes, indeed, we encourage people to explore that side of themselves which is silently saying No. Finding one's strength in opposition to someone else may need to come before one can reach the pleasure of simply existing in oneself, for one's own sake.

## *Pleasure, harmonization and healing*

Biodynamic therapy works with the essential pleasure of existence. Fear of pleasure - ultimately, fear of surrender to orgasm - is, we find, present in almost everyone. Yet pleasure is a naturally expansive force, infinitely healing. So, at many junctures of the work we will invite the client simply to 'see what feels good right now', 'explore the pleasure of the moment'. Or, we may suggest simple movements (similar to Reich's oronomy exercises) which help the life-force to stream through the body with vibrations so fine they are scarcely perceptible to the eye, yet creating an internal 'buzz' that is exquisitely pleasurable. This is the physical reality of the healing power of the libido flow.

Fundamental personal change may involve some uncomfortable periods of 'healing crisis'; but biodynamic techniques of harmonization let us minimize the pain and disruption which can occur. Towards the end of most sessions, when the life-force is moving to complete its cycle, we may leave time for the client simply to rest. During these minutes of rest, healing and integration will get under way, from the vegetative level through to the conscious. The process works on throughout the week.

## *Major therapeutic techniques*

We shall consider biodynamic therapy under three headings:

1. Biodynamic massage - a range of techniques serving various specific therapeutic purposes, such as to harmonize, to vitalize, to provoke the dynamic updrift, to strengthen the client's sense of bodily form

2. Biodynamic vegeto-therapy - in which we encourage clients to explore their bodily sensations and impulses, as a way of bringing unconscious material to the surface
3. Organic psychotherapy - verbal work 'rooted' in the dynamic processes of the body.

Which technique we will choose for a particular session depends partly on the client's horizontal/vertical balance, partly on how much the client is already in touch with himself or herself. For instance, in some people the muscle armour is so rigid that it literally encages them, limiting their sensitivity and stifling the movements of their life-force. Such people are incapable of feeling what is going on inside, and so are not 'ripe' for vegeto-therapy or organic psychotherapy. We must first disrupt their neurotic equilibrium by using more provocative exercises or special forms of biodynamic massage to loosen the grip of the horizontal defences.

## *Biodynamic massage*

### *Massage to melt the muscle armour*

We work week by week, over a period of perhaps several months, using deep systematic massage to soften the armour. At first the body may feel almost like concrete under the hands, but slowly the apparently solid mass will soften and we can differentiate the individual muscles. The muscles will not all soften at the same rate, and when one muscle lengthens, another will take more strain, so the process is one of constant adaptation. As the ripening proceeds, more fluid comes into the tissue and the muscles become tender. This is a sign that the emotional dynamic is nearing the surface.

Every muscle tension is connected with a disturbance in the breathing pattern. As we work on the muscles we adjust the rhythm of our touch so as to encourage the sudden, spontaneous deep 'emotional in-breath'. Then at last the dynamic updrift of the repressed emotions can begin to impinge.

This technique is deeply provocative: we are restimulating the upward phase of old, incomplete emotional cycles so that the dynamic process of resolution can get under way.

### *Massage to encourage the downward flow*

Sometimes our therapeutic intention is just the opposite: to restore the client's equilibrium by encouraging the downward flow of the life-force. When the client is excessively agitated or confused we may work with *energy distribution*. Using a series of strokes, some deeper some lighter, we draw the life-force in the client to flow down through the body from the head towards the feet, and also encourage it to surface from deep in the bones, through the layers of muscles and fascia, until it radiates out through the skin, as it naturally should in

the healthy person. At times we will hardly touch the physical body but work directly with the life-force in the aura. *The psychoperistaltic sounds.* As we work we will be listening through a stethoscope to the movements in the client's belly, to hear in precise detail how the psychoperistalsis is responding to the various movements of our hands. (Indeed, psychoperistaltic massage is sometimes seen as the 'trademark' of biodynamic therapy.) The psychoperistaltic sounds come in an astonishing variety. Dry, percussive sounds tell us we are softening some fibres in the chronic muscle armour; sounds like thunder tell us we are moving excess fluid out of the tissue; gentle continuous sounds like a babbling brook tell us that the life-force is flowing harmoniously. The more watery the sounds the riper is the life-force that we are mobilizing; the drier the sounds the more deeply the dynamic is buried. The language of the sounds tells us, from second to second, what effect our work is having and guides our hands in the most effective way of approaching the client.

#### *Massage to deepen the client's self-awareness*

Through biodynamic massage a client can gain a deep sense of his or her inner substance. The pattern of the breathing wave shows how emotionally free the client has become. Our ultimate aim is to help the diaphragm become so flexible and responsive that the breath comes in spontaneous, unbroken, harmonious waves. Gradually the client will become aware of his or her own inner movements, of the rhythm of his or her 'inner ocean', and eventually of the cosmic rhythms of which he or she is part. At first this is hardly a conscious sense, but rather a vegetative sense, a sense in the viscera: literally, a gut sense. With it comes a sense of his or her own inner richness and power, his or her own libidinous flow. The client finds his or her independent well-being.

Through the massage we are 'speaking' to the client at a deep, unconscious level and the effects continue long beyond the session, with repercussions in all aspects of the client's life, including the client's dreams. Biodynamic massage is not just 'body work'; it speaks to the whole person, bearing an invitation to profound change.

### *Biodynamic vegeto-therapy*

The technique of biodynamic vegeto-therapy is particularly valuable for discovering the psychological content of the dynamic updrift and for deepening the client's awareness of his or her emotions.

We ask the client to lie down and close the eyes, to take time simply to feel the body and to 'let it breathe'. The very tone and rhythm of the therapist's voice help the client to sink below the level of the bodily defences and contact the inner depths. We invite clients, should they feel any impulse to say anything or to do anything, simply to let it come; we do not ask them to 'make sense' of it.

Biodynamic vegeto-therapy has been described as a technique of 'free association through the body'. A session might, typically, develop in the following way.

The client, a middle aged man is lying quiet and still; breathing is regular. As he relaxes more deeply we may see a fluttering movement in the region of his diaphragm. This tells us that the breathing defences are letting go and that the vegetative charge is mounting.

Soon we may notice a tiny movement in the fingers of one hand, as the pressure of the life-force impinges from within. We ask him to 'feel what the hand is doing', and 'let the movement grow'. At this stage the client may recognize no emotional significance in the movement: it is simply 'happen-ing'. We let the movement evolve and grow stronger without, at first, having to be named or defined in any way. As the movement intensifies it may develop the character of a particular emotional action, such as angry hitting. Even now the client, who is a passive, self-effacing character, may 'have no idea why' he is hitting. In the early stages of the session we deliberately avoid engaging the client's ego, as his rationality could block or predetermine the course of the emerging life-force.

When the signs of anger become more apparent in the client's face and in the rest of the body, we may invite him to let out a sound, and to speak any words which come into his or her mind. To the client's own surprise, he may hear himself shouting 'I hate you!' Gradually the old scenario emerges as we ask 'How old do you feel?' 'What's happening?' 'Whom are you shouting at?' The client is temporarily in regression, reliving an occasion - perhaps typical of his childhood - when his emotional cycle was traumatically interrupted. For example, perhaps, as a boy, his father had hit him for something that was not the boy's fault, giving him no chance to explain. We now encourage the client to complete that old cycle: to vent his anger physically and to say to his father what he could not say then - and indeed has never been able to express since. The therapist's support makes it possible for the client to overcome his inhibitions of guilt.

This effort leads to deep satisfaction, as the client resolves that old conflict between his indignation and his sense of inadequacy.

Once the anger is expressed, waves of love will often follow, and as the client rests after the session, psychoperistalsis completes the final phase of the emotional cycle.

The purpose of such a session is not to 'make believe' that the original situation in the past had a 'happy ending'. Rather, it is to acknowledge and accept the reality of the emotions, impulses and frustrations which were occurring at that time, and now - at long last - to help the life-force complete its natural cycle so that it can flow through muscles and consciousness in a new-

found pattern of vigorous self-assertion.

### *Organic psychotherapy*

We may use organic psychotherapy when someone is already very open to the movements of the life-force and does not need the more physical techniques, or when the dynamic updrift is already very strong in its pressure towards resolution, so we want to avoid increasing the vegetative charge.

Sitting comfortably, the clients can explore whatever comes to mind, ruminating on difficulties in present life or perhaps on events in the past. They are not simply talking *about* these issues: thoughts and feelings are literally moving them as they speak.

We give clients 'all the time in the world' to express themselves without interruption or comment, simply offering the occasional word to encourage the flow of speech. Meanwhile we are watching for minute physical changes, uneven rhythms of breath, varying tones of voice. If we see that nothing is actually changing inside them as they speak, and that they have slipped into disconnected generalizations, we may ask them to pause a moment and register how they are sitting, how they are breathing. This will help people reconnect with what is really moving them.

Eventually, in most such sessions, the client will arrive at a simple sentence which encapsulates the essence of the matter. On the level of consciousness the emotional cycle has now reached completion; we hear a sigh of relief, often followed by rumblings in the belly, as the psychoperistalsis completes the discharge on the vegetative level. The psychotherapy has been an organic process of change.

### The change process in therapy

The dynamic updrift is the key to change in biodynamic therapy. As the repressed life-force presses nearer the surface of consciousness the pressure will get more intense. The stronger the pressure the stronger the symptoms and - paradoxically - the stronger the healing potential. At such a time a person may - in the eyes of conventional psychology - appear to be 'disturbed'. Biodynamic psychology sees this phase as a healing crisis: the very intensity of the symptoms is a sign that the person is getting nearer to genuine psychological health. The buried conflict is now ripe to be recognized and resolved.

We take care that equilibrium is not disturbed for too long. Our motto is 'provoke and dissolve, provoke and dissolve', layer after layer, until the neurosis is progressively cleared out of the psycho-organism. Phases of upheaval will alternate with phases of harmonization, as the updrift is first liberated and then

re-integrated, completing its cycle.

As we develop a sense for the emotional cycle we grow to trust it more and more. Once we find that we can live *through* pain and reach pleasure again, we become less afraid of intense feeling. We reach a certain basic security and can dare to open ourselves to the streamings of the life-force both in ourselves and in the world. We no longer feel victim to ourselves or to outer circumstances. We discover that it is good to live; the world is no longer 'flat'. Our inner treasury of joy, love and spirit is open to us again.

The following account of a client in therapy for some seven months shows how biodynamic methods were able to help one woman who had been locked in a 'neurotic equilibrium' to become more open to her own emotional processes and discover more of her inner resources.

### CASE EXAMPLE

Betty, aged 43, comes for biodynamic massage 'as a last resort', to see if it can relieve the recurrent headaches for which her doctor finds no physiological cause.

Betty regards her life as 'very satisfactory'; she is comfortably off in a 'good marriage' to a successful business executive; her two sons (by a former marriage) are at university. Five years ago Betty had a hysterectomy following two miscarriages and an ectopic pregnancy, but she has 'completely recovered from all that'. She would never think of herself as needing psychotherapy, but a friend had suggested that biodynamic massage might help the headaches, and

### *Early memories surface*

It is no surprise to Betty's (woman) therapist to find that her neck, shoulders and upper back are as hard as wood, and the muscles at the top of her right arm somewhat swollen. As the therapist is working down to the fingers of Betty's right hand, Betty starts to smile. She is remembering how her piano teacher had spread her hand over the keyboard in her very first lesson, and the first piece she learned at the age of six. She hums a phrase of it to herself and draws a sigh. A wave of sadness comes over her, and she tells how she had dreamed of being a concert pianist but had left the Royal School of Music early because she 'had to get married'. She had then got submerged in a rapidly deteriorating first marriage, with two small sons and never enough money.

At the end of the session Betty gets off the massage table looking young, and a little bewildered. She is amazed that these old memories should suddenly have surfaced, but says she feels 'light' and relieved and decides to come for a further three months' treatment at least.

### *Massage releases the dynamic updrift*

With this commitment her therapist now feels free to work more strongly, and for the next few sessions she uses deep systematic massage to loosen Betty's chronic muscular tensions and so release the repressed life-force. Betty dreams vividly during this period. After the sixth session she dreams that she is wandering in a strange town and cannot find her children: this theme of the 'lost child' recurs over the next weeks. During the sessions Betty gradually confides more of her feelings to her therapist, telling of the 'nuisance' of not having been able to have a child with her present husband, and how their sexual relationship has dwindled. She also begins to report 'uncharacteristic' incidents such as 'just standing there laughing' when she found she had left her husband's treasured suede coat out all night in the rain.

### *Abreaction of protest*

During the ninth session, as the therapist is working on the deltoid muscle of the right arm, she sees that Betty's jaw is tightening and her legs stretching out as if she were 'digging in her Reels'. Betty is remembering how, one day when she was 12, her father had called her to put away her bike, but she was immersed in a book and had not done it right away; that evening her father had been cold and silent. The therapist then invites Betty to get down off the massage table and lie on the big mattress on the floor. Betty's whole body stiffens, feet and fists in an attitude of defiance. The therapist encourages Betty to express whatever she is feeling. In a thin, hesitant voice she brings out 'No, I won't! Gradually she gains courage, she begins to kick and her protest escalates to the sort of temper tantrum seen in small children. Exhausted at last, memories of childhood pour into her mind as she rests.

### *Completing the emotional cycle*

When Betty arrives for the next session her face is distended with fluid, she appears depressed and her manner is abstracted and distant. When she starts to speak it is not about her feelings but about the trivia of the day. The therapist recognizes the signs of the uncompleted emotional cycle: the energy which had come up so forcefully last time had not been fully integrated and there is again massive fluid pressure in the tissues. The therapist returns to massage, now not with the aim of loosening more of the muscle armour, but to empty the tissue of the excess fluid. At first she hears few sounds in the stethoscope and recognizes that something on Betty's mind is preventing the psychoperistalsis. Betty is not feeling secure enough to move into the downward phase of the emotional cycle.

So, as she massages, the therapist gets Betty to talk about how she has been feeling since the 'temper tantrum' last week. Betty is reluctant at first: 'What's the point? It won't be any good.' The therapist coaxes her to say more about this, and it gradually emerges that Betty used to have similar feelings of helplessness and hopelessness as a child, when 'the grown-ups didn't understand'. As soon as she says these words the psychoperistalsis starts.

### *Deepening contact with the emotions*

The dynamic process is now well under way. In further powerful vegetotherapy sessions more childhood material emerges. Then at last Betty begins to speak about her miscarriages, and the horror of the ectopic pregnancy.. She feels as if she had not merely lost the babies she should have borne but had, in a sense, lost touch also with the child-being in herself. Grief is mixed with feelings of inadequacy and guilt and also of blame. 'It's all my fault' alternates with 'It's all his fault', and during this period she has outburst of disproportionate irritation against her husband.

To help maintain Betty's equilibrium her therapist works intermittently with emptying or harmonizing massage, encouraging Betty to talk the while. The tension patterns in her back are changing from week to week, and as the armour dissolves Betty is becoming more expressive, verbally and physically. In the vegeto-therapy sessions, it's 'Men don't care!' 'Men never understand!'

### *The animal instincts emerge*

The next major turning point comes in the fifteenth session. Betty is lying on the mattress. Her torso starts to writhe in a blend of sensuousness and aggressivity. She gets up on her hands and knees, snarling. She is like a tigress protecting her young. Soon the sensuality outweighs the hostility and she stands up, the libidinous movement continuing through the whole body. Her therapist encourages her to overcome her hesitation at 'displaying herself' and Betty begins to giggle like a teenage, enjoying the movement more and more.

### *The Oedipal triangle*

This session too has a backlash. Next week Betty is reluctant to meet her therapist's eye, and eventually admits she's been anxious about meeting her. After the last session. It emerges that Betty's mother disapproved if ever Betty mad and exhibition of herself' or did anything to win Daddy's attention. It is a shock for Betty to see her 'perfect' mother in this light. Now the can or worms is opened and a host of tiny incidents come to mid where mother had somehow sabotaged the child's pleasure. Betty relationship with her mother now plummets and she cancels her Easter visit. As so much material is now mobilizes the therapist works with organic psychotherapy for the next two sessions, to let Betty talk it through without increasing the dynamic updrift.

### *Transition to pleasure*

The nineteenth session – vegeto-therapy again – brings a change of heart. Betty comes into a strong abreaction and pounds angrily on a cushion ('her mother'). But as the fury of the outburst passes Betty's hands caution she begins to caress and clutch the cushion, though with much ambivalence, as she begins to reconnect with the longing and the love she had for her mother.

In the next session too these tender feelings are in the ascendant. Holding the cushion to her breast, Betty reaches deep pleasure and her breath comes in long slow waves of unprecedented fullness. She lets go of the cushion, and libidinous streaming pour through her body. For many minutes she lies quiet, only the subtlest waves of movement visible as she breathes. Betty has reached the places of independent well-being.

### *Independence*

Betty is now out of the regression stage of her therapy. Impulses to stretch out her body, and to 'take her place in the world' are encouraged by her therapist, and Betty develops more self-assertion. She sees that her stance in the marriage has been rather like that of child to father, and she now -sometimes! - takes a more adult stand with her husband. She also puts a long-dormant ambition into practice and gets in touch with some experimental musicians; they meet together each week for improvisation sessions. Her relationship with her sons becomes more enjoyable for all as she lets go of the compulsion/burden of 'looking after them'. The headaches are a thing of the past.

### *Termination*

Although Betty is still vainly hoping for more from her husband than he is willing or able to give, she has reached a plateau of well-being in herself, and decides to stop therapy. Although she has by no means reached her full individuation, the quality of her living has already improved substantially. If, later on, she felt moved to explore more deeply they would probably-her therapist foresees - be able to uncover and resolve more of the conflicts of Betty's early years while her father was away at the war and her mother under great strain. But the therapy to date has far more than met Betty's original hopes.

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### *Suggested further reading*

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