

# The Dancing Body in Psychotherapy: Reflections on Somatic Psychotherapy and Authentic Movement

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© Stromsted, T. (2007) P. Pallaro, (Ed.) *Authentic Movement: Moving the body, moving the self, being moved*. London: Jessica Kingsley Publishers, pp. 202-220.

## Re-inhabiting the Body

*"The symbols of the self arise in the depths of the body."*

C. G. Jung (1940/1959)

People engage in body-oriented psychotherapy to reconnect with their instincts, affirm their feelings, develop healthier relationships, and explore more satisfying ways of working. They want to learn how to embody their deepest values. Along the way, they often form a more realistic body image. They come to know and love who they are, and connect with a life force that is deeper and more meaningful than they have previously known. The process can support them in feeling more whole and in discovering more creative ways of living. Some have already been through years of more traditional, verbally-oriented psychotherapy that has brought great insights. But these insights are often frozen in the intellect, and people can feel unable to put them into action. Others enter at the beginning of a personal journey, seeking to resolve conflicts, ameliorate pain, make sense of losses, or in other ways begin the process of conscious change.

Unresolved physical and emotional trauma is often held in the body, in stasis, until it can be brought to consciousness. As a dance and somatic psychotherapist, I invite my clients to re-inhabit themselves, to reenter and experience their bodies more fully through movement, relaxation, breath, sound, dreamwork, art, writing, and other forms of body-oriented and creative work (Stromsted, 1994/1995,1998). Stories emerge that are connected to deep states of feeling and belief, seeking an outlet in order to be

experienced, safely held, brought to consciousness, explored, and re-integrated into the client's identity.

In this paper, I present and reflect on somatic psychotherapeutic work, and specifically on dance/movement therapy as both a directive, structured method and as a self-directed practice called Authentic Movement (Stromsted, 2001-02). I address some of the similarities between these two basic approaches to movement work as well as some significant distinctions in their application. Two case examples, demonstrating each approach, are included to illustrate how the two processes are different in form yet similar in accessing potentially transformative experiences. I also address a number of elements related to body-oriented therapy in general, including the ongoing assessment of clients, their readiness for certain types of work, and the role of the somatic therapist in the therapeutic process.

## Elements of the Work

### Dance/Movement Therapy and Authentic Movement

Although there are many approaches to dance/movement and somatic psychotherapy, I organize them into two main categories of movement exploration: Structured and directive which are, at the same time, strongly guided by the client's process, and unstructured and highly self-directed, such as Authentic Movement. The type of movement intervention I use depends on the strength of the client's ego structure or coping resources, together with what seems best suited to his or her needs in the moment. As the client develops a stronger sense of self during the course of therapy, the work may progress from a structured, more directive approach to one that is increasingly open and self-directed. Over time she learns to experience the "difference between movement that is directed by the ego ('I am moving') and movement that comes from the unconscious ('I am being moved') (Whitehouse, 1958, p. 243; 1979, p. 57). The types of verbal interventions I make as a psychotherapist may likewise shift during the course of the therapy.

Generally speaking, structured movement interventions can help clients feel safe as they become increasingly aware of their previously forbidden bodily sensations. When the ego is fragile, defenses are weak and a person is easily overwhelmed by inner emotion and outer stimuli. Body movements are constrained, and the range of response is limited. Structured movement helps them to expand their repertoire of bodily sensation and movement, and thus extend both their emotional range and their capacity to engage the world in new and healthier ways.

The use of Authentic Movement relies on an adequate degree of ego strength and is often helpful for those already capable of enduring their forbidden thoughts, feelings, and fantasies in an unstructured environment. These individuals often long for more contact with their inner life and are dissatisfied with their ability to relate to others in deeper, more genuine and spontaneous ways.

Originally developed by Mary Starks Whitehouse (Whitehouse, 1963), with roots in dance and in C. G. Jung's active imagination approach (Chodorow, 1997), the practice of Authentic Movement allows individuals to attend more fully to feelings, body sensations, movement impulses, and images that may be present. In this process, which could be seen as a movement correlate of free association, the "mover" is invited to find a place in the room, listen inwardly, and allow herself to be moved by her bodily experience, without performance or plan (and in referring to the mover or witness as "she" I include men and women). Eyes are closed, in order to reduce outer distractions. There is no music, no choreography, no agenda to follow, and no "right" or "wrong" way to move. Instead, there is an attending to and surrendering to one's feelings, rhythms, and authentic response. In this way, one brings awareness to, and more fully "inhabits" what is already going on in the body, rather than trying to control the process with an outcome based on old patterns or notions about how one "should" be. By being willing to engage in a conscious relationship with one's somatic experience, one embraces the mystery of not knowing what is yet to come, a trust that allows for new material to emerge and to be explored.

During this process, the therapist/"witness" sits to the side of the space. Though the

therapist/witness's eyes are open, "she is not 'looking at' the person moving, she is witnessing, listening, bringing a specific quality of attention or presence to ...the experiences of the mover" (Adler, 1987, p. 21). In the safety that is created, the mover can listen deeply to and follow her own imagination and movement impulses, engaging with unconscious material directly, through embodied expression.

Material that arises during this process can be further integrated by speaking about the experience with the therapist/witness following the movement sequence. If invited, the witness responds to what she has seen, felt, and imagined, without judgment or interpretation. Her task is to be present to her own experience as she witnesses her mover. She must recognize and contain whatever elements of countertransference or projective identification may arise, working with these elements to bring further clarity to the therapy. Associations to dreams, developmental material, concurrent life situations, and relationship dynamics assist the client/mover in further integrating insights that have emerged directly from her embodied experience. When appropriate, amplifying elements reflected in myths and fairy tales can help her feel less isolated, and more meaningfully rooted in the unfolding stories, rites of passage, and other themes that have existed across time and culture. Creative arts such as painting, sculpting, and writing can also help the process of bringing form to unconscious material.

Authentic Movement is powerful and affirming work as it can restore the person's sense of inner authority, and the voice with which to articulate it. Blocks to creativity may be liberated, reestablishing a sense of hope and direction in life that springs from a deep inner source. The process also develops the capacity to be present, both with oneself and with another, in a more vital, embodied, and increasingly conscious relationship (Adler, 2002; Stromsted, 2001).

### *Somatic Assessment of Clients*

As a psychotherapist, I sometimes sit and talk with clients for extended periods, learning about formative elements in their background, what has brought them into therapy, their conflicts and dilemmas, and the ways in which they have tried to

ameliorate them. Most often, I integrate movement and somatic psychotherapy modalities to deepen the work, functioning as the client's primary therapist. On other occasions, analysts and therapists refer their clients to me as a "movement specialist" to open pathways that may be further explored with their primary therapist and to assist the person in embodying the insights he or she is discovering in the verbal work.

When a person walks into my office, I begin with an assessment that includes what I observe and sense in his or her body. Through posture, gait, degree of sure-footedness, gestures, tissue and muscular tone and color, the body tells its story. Each body has its own way of articulating how someone has learned to shape herself in order to live with her history. As Somatics pioneer, Stanley Keleman states, "I have embodied my encounters with the world and they have left their mark" (Keleman, personal communication). Our history is encoded in our body just as the rings of a tree encode the life story of that tree, including its genetic inheritance and the atmospheric conditions that were present from year to year. Though every individual's presentation is uniquely his or her own -- and I've come to appreciate the beauty of what Somatics educator, Don Hanlon Johnson, calls the "somatic genius" (Johnson, personal communication) of each person's way of coping with enormous challenges -- there are certain patterns that can be discerned that mark the site and degree of the wound.

While working with clients, I watch carefully for the feedback that will guide us in the direction and pace of the work. Gradual, structured body awareness and movement explorations can be helpful during the early assessment and rapport-building phases of therapy (Brooks, 1986). Depending on the situation, beginning with large or strongly expressive movement may unbound or disorient the client. Similarly, moving too quickly into more self-directed Authentic Movement may result in her feeling lost or becoming flooded with feelings and/or recovered memories. Without the adequate inner or outer support to be able to experience and work these through, she runs the risk of reinforcing the wound. Timing is crucial, as is creating a safe container where she can surrender her defenses enough to experience her body-felt sensations, images, memories, and/or associations, connecting these with congruent affect. The next step is to give them form through movement, art work, song, or poetry -- creative vehicles for assisting the client/mover in creating new, healthier, more embodied images and

experiences of herself. In these ways, she moves towards new possibilities in behavior, in self-knowing, in recovering her body as her own, in relating with others, and in becoming more fully who she is.

## The Healing Relationship

Wounding occurs in the context of relationships, and it is within relationships that healing most effectively takes place. Sensitivity, emotional honesty, intuition, and a sense of trust in one's own felt-experience are the foundation of therapeutic work. At a basic, bodily level, somatic psychotherapy involves linking the client's current experience in relationships to relational patterns established early in his or her life. These early interactional patterns have a powerful impact on the individual's embodied experience, sense of self, and ability to relate to others. "We do not grow up entirely by ourselves, but as bodies in a particular environment or matrix," says Stanley Keleman (Keleman, 1984, p. 116). The ways we are treated and the ways we respond, the shapes of our bodies and the messages we receive about them, all have their impact on the images we carry of ourselves, the identities we create and the style in which we live. Our structure, postures, gestures, language, images, and dreams are all a reflection of that history and that ongoing process.

## Shadow Work

*"One does not become enlightened by imagining figures of light, but by making the darkness conscious."*  
C.G. Jung (1945/1967)

Body-oriented psychotherapy, and therapy in general, often involves coming to terms with what C.G. Jung called "the shadow" (Jung, 1959) - - those lesser known and often frightening qualities, feelings, and viewpoints we carry within. These uncomfortable parts of ourselves may be denied, split off, or frozen, and they require tremendous energy to repress. This energy can have a profoundly transformative effect when experienced, differentiated, and integrated. The shadow may also represent positive elements within ourselves - "everything that is yet unborn or not yet conscious within

us" (Bolen, 1989, p. 289) -- that we cannot "own" but instead project onto, attribute to, or elevate in someone else whom we feel is able to do something that we "could never do."

Shadow elements often emerge spontaneously through unconscious movement responses, gestures, voice tone, verbal expressions, breathing patterns and mood. These can, over time and with rapport, be reflected back by the therapist and experienced more consciously by the client. This is sensitive work, as the client must be ready to acknowledge their presence without further distancing herself from the feelings associated with them. Exploring the body-level responses provides a bridge to the unconscious, frees life energy essential for growth, and connects a person to a deeper sense of knowing, creativity, and wholeness.

## Therapeutic Use of Touch

As we enter into therapy, I tell my clients that the work may involve touch, as its conscious and appropriate use can sometimes amplify and support feeling. This sensitive use of touch, with the right sense of timing, skill, involving only safe areas of the body, and with the client's permission, can be invaluable when the development of healthy boundaries, genuine self-contact, and a sense of intimacy are a focus of the therapeutic work.

Sadly, the issue of touch has become shrouded in a great deal of confusion, fear, and controversy, particularly given the current climate of abuse. In patriarchal cultures the body has long been associated with "baser instincts", temptation, evil and the feminine. As a result, this vital, fundamental aspect of our existence has become split off from "higher" spiritual values and cognitive processes, relegated to the shadows. Direct embodied experience has also been overlooked in much of the practice of psychotherapy. Unfortunately there have also been boundary violations by therapists acting unconsciously, as well as situations in which the well-intended use of touch was experienced by the client as invasive, wounding, seductive, or as an abuse of power (Greene, 1980, 1999, 2001; Paula Koepke, personal communication). In considering

whether or not to use touch with a particular client, I assess the nature of the transference relationship as well as taking into account the gender and level of developmental functioning of the person at that time. When I use touch, it is always with the permission of the client and with a profound appreciation for the impact it may have.

### Working with Dance/Movement Therapy

Though I see a wide range of clients, my work with women who have a possible history of sexual abuse and other traumatizing early experiences provides an example of what I may find while doing somatic psychotherapy work with others. As I meet with my client, I am assessing her access to spontaneity, range of movement and feeling, and the degree of relatedness between parts of her body. I note areas that seem isolated or cut-off from her overall expression. I note how she "holds" herself, knowing that this reflects how she has been held -- how supported she has felt --and how she continues to "carry" her experience. I also ask her about any medical problems, physical symptoms, bodily injuries or traumas she may have had, as well as any pleasurable physical memories. I have an ear not only for what she says but also for how she talks about her body. One woman might talk with cold scientific exactness, as if putting her body under a microscope. Another will speak with a sense of vagueness, inaccuracy, disgust, or disdain. Sometimes a client becomes annoyed with my request, impatient with my attention or interest in her bodily experience. Others may present their information with compulsive attention to somatic detail, almost hypochondriacally, and with inappropriate affect. Though these presentations are often viewed as "resistance" by the more traditional therapeutic disciplines, I see them as the body's best attempt to tell its story. This is due to the unconscious nature of the wound - - or, if the memories of abuse are in awareness, the results of years of imposing secrecy, shame, or silence.

Some clients may have genuine difficulty talking, in which case gently working to support, encourage, and perhaps to amplify what the body is already expressing can be instrumental in building a sense of trust (Mindell, 1985). This can be done through bringing attention to the breath, or by asking for any images, sensations, or feelings the



client may have. Ultimately, however, allowing the client to tell the story of her abuse, as much as she knows of it, is crucial to the healing process. When she does eventually speak, I listen for the tone and volume of her voice, and for the images and metaphors she uses when she describes herself. What is the quality of feeling in her voice? What age is she in this place? What kind of music does her voice suggest and how is it related to the content of the story she is telling me?

When sexual abuse is an issue, I may see stiff or frozen pelvises and arms that are flaccid or disempowered, or that are over-built from a chronic, unconscious pattern of "keeping a grip on herself" or pushing people away. The eyes may be glassy and frozen with fear, deadened, or seductive; often their expression bears little relationship to the rest of her body. The chest area may be collapsed or underdeveloped, doing its best to hide, denied breath and blood supply that would bring sensation and attention to her breasts. Alternatively, it may be defensively thrust forward and exposed, while the woman describes being cut off from real feeling. The hands can feel like lifeless, numb, powerless appendages or they may flutter like lost birds, or distractedly engage in distressed hand wringing, washing, or folding and tearing up Kleenex. Body-image drawings that are a part of the somatic therapy I practice often depict a little-girl face - - wide-eyed and innocent - - with a sexy, siren-like adult woman's body, notable for its tremendous curves and cleavage. Sometimes the opposite is true: a woman may draw herself covered entirely in clothing, giving a childlike and formless impression. The mouth may sometimes be drawn as a single line or not there at all, indicating the inability to speak about her abuse. At other times it is overdrawn - - perhaps the site of the trauma.

Over time, my assessment begins to tell me how severe the wound is, how aware my client is of her body-felt sensations (Gendlin, 1978), how strong her boundaries are, the extent to which movement or body-oriented interventions will be initially helpful, and what pace we must take in the therapy. Beginning gradually is always important, in order to build rapport, trust, and comfort in the therapeutic relationship; it is essential when there has been any kind of trauma or abuse: sexual, physical, emotional, or psychological. I recognize that some women who have been abused can be compliant, thereby raising the potential for feeling abusively pushed in the therapeutic process.

I often begin by engaging my client in becoming more aware of her own physical responses, inviting her, with her eyes open or closed, to notice what sensations she is aware of in her body (Bainbridge-Cohen, 1997; Brooks, 1986; Gendlin, 1978; Hanna, 1979; Keleman, 1975). I may draw her attention to the quality of her breathing (which may be held high up in the chest in a kind of panic response), and the meaningful expressiveness of her own natural gestures, postures, stance, and characteristic motility patterns. If her speech has taken on an intellectualized or runaway quality I may ask her to slow her pace, letting her know that "it seemed like something important was being expressed through her body," encouraging her to "tune in" or "listen to" what she's experiencing internally at that moment. In an effort to lay the foundation for her to pay attention to and re-inhabit herself, I may ask: "If this image, incident, dream, or story were 'living' or residing anywhere in your body where would it be?"

Another method I sometimes use is to "mirror" with my own body specific postures, gestures, feelings, breathing, or holding patterns that I see in my client's presentation (Adler, 1989; Chace, 1975; Chodorow, 1991; Schoop, 1974; Woodman, 1989). I do this in order to acknowledge, reflect, and bring more consciousness to what is being expressed non-verbally. At the same time I must be careful not to mimic, judge, or patronize her through this method of offering back what I see. If I sense that we have adequate rapport and that my client has the strength and willingness to try, I may ask her to amplify or exaggerate gestures she is already making, letting her know that these movements are already going on in her body and that, in making them consciously, we are working toward discovering the meaning in their expression. Throughout the process, I encourage her to trust what emerges and to try not to judge, numb out, cut off, or dismiss whatever feelings or sensations she may experience. "The body tells its story," says a colleague of mine. "The body does not lie," says pioneer dance therapist, Mary Whitehouse (Whitehouse, 1958/1995, p. 242). Furthermore, "the body remembers" as we can see and feel when a wound reopens for a client, or in our own lives.

### Case Example - Lydía

The following case illustrates the use of a relatively structured somatic movement approach with a woman whom I will call "Lydia." Our work was conducted in my private psychotherapy office, a spacious and warm room with ample natural light. Here, comfortable chairs are moved in for verbal work and off to the side to clear the space for movement. A futon folds out for work on the floor. There is a sound system with a wide range of music. Paper, pens, and colors are available for writing and drawing. Fresh flowers add their beauty to the space.

Lydia was a twenty-eight year old woman with green eyes, thick wavy black hair, and pale skin. A beautiful woman, she covered her lower body with full-length skirts and tall boots, a dramatic juxtaposition to the plunging necklines of her blouses. Depressed and anxious, she'd been referred to me by a physician at a women's health clinic.

In our first session, Lydia described her panic attacks and unremitting nightmares. She talked about her relationship with her husband whom she was unable to leave - - an extremely demanding and possessive man, fifteen years her senior, but one who had "saved her" from her earlier life. Before marrying him, she'd been a cocktail waitress in a jazz club and struggling with drug abuse; she often took men home with her after work. Since her marriage five years ago, she'd had an unfulfilling office job, and her husband had forbidden her to leave the house alone except to go to work. He stayed at home, not working. When she returned, he expected her to tend to the house, prepare dinner for him, and fulfill his sexual needs without reciprocation. Any sign of resistance would result in one of two responses. Either he'd slap her and pull her around the bedroom by the hair, showering her with humiliating insults about how she was "soiled goods," or he would collapse and, in a baby voice, whine for her affection and care.

During her early visits, Lydia mounted the stairs to my office with "frozen hips", swinging her legs in the manner of an elderly woman with two peg legs. On other occasions, when I invited her to stand and walk in a way that felt comfortable to her, she took on the demeanor of what she eventually began to call "Daddy's little princess," swinging her hips in a sashay style, her pelvis tilted back and broken off from the vertical line of her body, while her nose and jaw lifted into the air. These embodied

compromises had contributed to pressed-disc problems in her neck and back that had further hobbled her ability to move into the world. Lydia also complained of eczema, swollen lymph nodes, and multiple yeast and vaginal infections which she reported "saved her from intercourse" with her husband. Additionally, she showed me rashes that sprang up around her jewelry, most notably her wedding ring and her watch.

Over time, we worked with a number of approaches to exploring what might be meaningful to her in these skin problems. They were not only "irritating and embarrassing" to her, but also painful, as she could not refrain from scratching and tearing at them, making them bleed when no one was looking. Noticing the scabs one day, I asked her about them and, when she began to tear at them in response, asked if I could see them. At first she became angry and then began to cry, telling me she'd been doing this for years. As she held her hands out, I asked if I could touch them. Cupping them in my hands, I explored their wounded surfaces tenderly and carefully. As I did so we talked about how important her hands were - - for her work, for getting what she needed in the world, for pushing away what she didn't want, and for taking care of herself.

I told Lydia that I was glad that she was able to show me and tell me how painful this was for her and how sorry I was that things were so difficult. Then I encouraged her to express the pain and irritation on safer surfaces, such as by scratching pillows and wringing towels. As she made these movements I asked her to exhale, make sounds, and eventually statements about how she was feeling. "Vulnerable," "raw," "bleeding," "too open," "red," "violent," "body crying" were some of the words that emerged. Her relationship with her husband was leaving her feeling weak, hopeless, and ashamed. We talked about her feelings about being at home, alternative places for her to stay, and ways to set boundaries and limits with her husband. She had come into therapy wanting to leave him but did not feel strong enough to do so. Nor did she feel capable of living on her own in what she perceived as a hostile world. I urged her to call the police if the abuse continued and to call me if she felt in danger or despair. After a month of working continuously in this way, these body symptoms disappeared.

Soon after this, Lydia and I began to work with "grounding" exercises (Keleman, 1975).

Placing both feet firmly on the floor, about shoulder-width apart and with knees gently bent, Lydia began to feel her connection to the ground and to develop a sense of having her own legs to stand on. Her husband was frightening to her but also some source of security, though tentative at best. She had grown up with an alcoholic mother, her father having left when she was three years old. Her mother had remarried to "someone she didn't love in order to get a roof over [their] heads" and Lydia had often been in charge of tending to her stepfather's needs. "At least he won't leave me," she said of her husband, caught in the old trap.

One week Lydia had a horrible nightmare about cats with their heads severed. She was beginning to sense the disconnection and wounding she felt and wrote this poem:

*Woman:  
the only flower  
that doesn't have the sense  
to stay shut  
when the sun's  
not out.*

As she became more aware of her body and trusted it to support her, Lydia's feelings arose. She suppressed them by grimacing with her mouth and "unscrewing" her head from her neck with a series of quick "no"-like shakes. When I asked her what she was feeling and if she was aware of her movements, she was silent. "Real feelings," she finally said, "are not permitted and even dangerous." She felt worthless and explained how other people's needs were more important than hers. If she was being punished, somehow she must deserve it. During her worst moments at home she would sometimes, without knowing why, break something of her own or fantasize about running a knife through her hand. As she spoke I noted the childlike quality of her voice; this was followed by the pulling up of her body, with a stern and rigid expression. My sense was that she was identifying with the child who had assumed blame for the parents' actions. Instead of learning that an awareness of her own perceptions and feelings could help her to care for herself, she'd learned that her sense of self was out of her control.

As we began to access these feelings, there were times when Lydia would call to cancel her appointment, making up excuses not to come. The work was going nowhere, she said, and the pain was too great. She began to feel depressed and described suicidal fantasies. Further exploration led to my recommending an assessment by a psychiatrist, which made her feel that I was acknowledging the seriousness of her fears. She realized that her impulses were a call for help. She kept her appointments with me and began writing me letters in between sessions, to help her maintain a sense of contact. These letters were powerful, revealing feelings that she had not been able to speak aloud. They often served as a beginning place for our work in the sessions that followed. In this way, over time, Lydia began to let her feelings, dreams, and imagination take the lead.

In one session, she came in saying that there was "no escape." She felt trapped both at home and at work and was too anxious to sit down. I paced with her as she spoke about how frightening it was for her to make boundaries for herself. Then, coming to a standstill, I joined her in the grounding work that we'd done, and invited her to say "no" by pressing into the ground first one heel, then the other, and then both while shaking the fists that her hands had formed. (In previous movement explorations, her hands had hung limply from her wrists. Looking broken or cut off, they gave rise to feelings of helplessness in her, as well as to images of women who were once placed in stocks, accused of being witches.) After first tentatively exploring this new movement, Lydia was able to do it more fully and eventually to say "no" aloud. "See if you can recruit as much of your body as possible into this expression of 'no'," I encouraged her, "from the ground up and all the way to the sensations in your mouth and out through your eyes. Look at me and say it. Or, if that doesn't feel right, look at the empty chair or at an object of your choosing in the room. If possible, see if you can really hear the sound of your own voice and your heels on the ground!"

Lydia practiced the movement several times, connecting with her breath and her voice while looking at a tiny black panther that I had on my bookshelf, stopping when she felt satisfied. As she left my office that day, she asked if she could take the panther home with her for a while, along with the gold lion that stood next to it. I agreed, wishing her well with these dark and light animal allies who were capable of natural

responsiveness, fierce protectiveness and moments of tenderness. She growled playfully as she left my office, swiping her "claws" in the air.

Over time, Lydia and I worked along a continuum of gentle to strongly expressive gestures. We engaged various body parts to music, exploring issues and conflicts she presented verbally. At first I moved with her, mirroring her gestures and offering support with my presence and modeling. Gradually I began to move back to allow her to find her own movement and to take her own space more fully. Through finding the particular rhythm, shape, and tension in the movement she began to feel more of her own body, and was able to experience her own feelings and to communicate them. These were messages from the body that sought recognition, voice, and consciousness, rehearsals for new action that wanted to come into form in her life. Not long afterwards, she reported being surprised to find that people at work said she looked and sounded different and they began to treat her with respect.

Earlier in our work Lydia had reported feeling terrified of relaxing, as a flood of bad feelings threatened to drown her. Vigilant since childhood, I sensed that her life had been driven by her sympathetic nervous system, with little access to the recuperative effects of her parasympathic response. Though she knew that this frantic activity could not last forever, she had felt that it was the only way to protect herself and to siphon-off some of the tension she felt in her body. Frequently, she'd arrived dressed up and pressured, pressing the boundaries of the hour with stories about her experiences at home and at work, sharing her fears and fantasies with me. On the heels of the assertive boundary work, however, she came in saying that she was too exhausted even to talk, eyeing the futon in my office. My sense was that shadow material was beginning to emerge, and, following her cue, I asked her if she'd like to lie down and rest. She could talk to me if she wanted, or simply attend to her own experience.

After some quiet time, Lydia began reporting sensations in various parts of her body. I directed her to see if she could stay with them a bit longer, bringing her breath to them and perhaps placing her hand on that part of her body for contact and support. At one point she put her knees up and began gently rocking her pelvis from side to side. I asked her if she could feel the movement and if she was aware of how her head was

twisted away and to the side. Slowly she eased the muscles in her neck, bringing her head into alignment with the rest of her body. Her lips and chest began to tremble and her breath dropped into her belly. I encouraged her to place one hand on her heart and the other on her belly. When she did, her lips gave way and a great howl emerged, followed by a long period of sobbing. A dam had broken. Her earlier cat nightmares came spontaneously to mind, and we talked about how they seemed connected to the twisting-off movements in her neck and the sense of her feminine nature, symbolized by the cats, which had been so profoundly wounded.

In the following weeks, Lydia's work grew more self-directed. She continued to ask to lie down, and we worked with her breath and body awareness. At one point, her feet began to fidget and paw the futon. When I encouraged her to amplify these gestures, little kicks began to emerge and grow more forceful, taking on a steady rhythm. Seeing her hands flail, I invited her to make fists and pound the futon with them as well as with her legs, supported by her breath and the firmness of the floor beneath her. "Let the force of your contact travel through your bones," I encouraged. We were building a body container for her feelings (Barlin & Greenberg, 1980). Sounds began to emerge. Gradually, I encouraged her to see if there were any words. "Stop," she yelled, "get away from me!" I had her spread her palms and make pushing-away movements on her exhalation. At one point I put my hands up in the air above hers and invited her to push against them if the contact felt comfortable for her. As she did so, Lydia began to feel the strength in her hands and arms, and was able to meet the pressure in my hands with her own.

After several rounds of assertive movement, she placed her palms against mine and left them there. "I can feel the warmth of your hands," she said "and in mine." This was unusual for her, she said, as it began to replace the cold numbness she often felt there. Pausing to allow her to feel the sensation, I asked how far down her arms she could let this warmth travel. After a moment she reported being able to feel it trickle down her forearms and into her chest, where it pulsed and swirled. "It's touching my heart," she said, placing her hand there to feel her heart beat. As she did so, her face flushed pink and her eyes brightened. "I feel powerful, and... whole," she said. Indeed, she was radiant.



Following this experience, Lydia shared her memories of several men by whom she had felt used, and her shame at having had sex with them. We spoke about the rivalry for her stepfather that had been created between her and her mother while she was growing up. Her mother had "taken off" for months at a time, leaving her "in charge" of her stepfather. In the following weeks, Lydia began to have memories of sitting on his lap and feeling uncomfortable, describing how she had learned that the only way she could experience her power, or any sense of contact, was through her sexuality. She began to see how many of her relationships had been sexualized, substituting seduction for a genuine sense of contact, care and empowerment - an authentic sense of self in relationship.

After working on this material for several sessions, Lydia reported a dream in which she'd been riding an earth-colored horse with a firm saddle. Her hair flying in the wind, she'd made her way into a circle of redwoods. There she'd dismounted and, tying her horse to a tree, lay down in the streams of sunlight that filtered through. Feeling comforted and safe, she'd fallen asleep there, awakening to find her grandmother sitting quietly by her side, smiling. Lydia returned the smile. "I love you," she said, putting her head in her grandmother's lap. The grandmother nodded and began brushing Lydia's hair.

As she shared the dream with me, Lydia said that she couldn't remember ever having felt this peaceful before, or so loved. She told me that she didn't own a car and rarely left the city. She'd heard about these circles of redwoods but had never actually seen them. Sensing her longing, we wondered about how she might ask a friend to join her, taking a car or a bus to the woods. Though this remained a fantasy for a while, one week Lydia arrived beaming, saying that she and a friend had rented a car and made an outing to the redwoods. There she'd felt their power, age, and graceful presence, and recognized the roots she experienced in herself.

Following this experience, Lydia realized that she could no longer continue to split off parts of herself. She reported feeling a new sense of confidence that allowed her to take action. Months before, she'd reported that her husband was no longer abusing her, nor

insisting on having sex with her, stopped by her ability to say "no" in a full-bodied way. Indeed, her voice, which had once been by turns childlike and then seductive, had a stronger timbre and was more resonant, coming from a deeper part of herself. Though her husband's intentionally hurtful behavior had stopped, Lydia realized that she did not love him and could not continue in the marriage. "I guess he's been more like a protector for me," she said, "but at quite a cost. I realize now that I thought he would rescue me from my mother's neglect and the destructive sex with the other men." In a cafe near my office she composed a letter to her husband, voicing her feelings, stating that she wanted a divorce, and would be spending the next few nights at a friend's house. Later they talked and she packed up her things, moving in with her friend until she could make other arrangements.

A month later Lydia found a full-time job leading arts and crafts groups with teenage girls. She realized that her work was bringing her full circle, as she supported the girls in a way that she wished she'd been supported herself. The change also allowed her to expand her relationships, spending time with other staff members whom she liked and by whom she felt valued. And it enabled her to develop her own skills. Though creative herself, Lydia had stopped drawing as a child. She now began to paint self-portraits and brought them in to share with me, learning to witness herself through this process. Discovering her own ability to create filled Lydia with a sense of well-being and gave her another outlet for expressing her feelings - - both the difficult ones as well as her newer sense of self. "For the first time in my life, I feel like I have a future," she said.

After looking around for the right medium, Lydia began taking African dance classes. These allowed her to experience her relationship to the earth and to her healthy sexuality, and to feel a sense of belonging in a multi-ethnic community. She loved watching the man and woman who took turns leading the class. "Through them I can see a totally new way to relate to a man," she said, "respectful, sensual, and fun. I'm not sure that I can manage that quite yet, but I look forward to it." She befriended another woman in the class, who was new to town, and the two found a spacious apartment to share in a safer neighborhood.

Before leaving therapy, Lydia began selecting music from our sessions to support her in creating grieving, empowering, sensual and joyous dances in her new home as she continued to develop a life of her own. Though she acknowledged that she still felt afraid or "down" sometimes, her life was much better and she had confidence that she could now take care of herself. We agreed that it was a good time to stop the therapy. We spent the last few sessions going over the changes that she had accomplished in the course of the work and confirmed that she could call me for some follow-up sessions, should she ever feel the need.

In our last session, I marveled at Lydia's spontaneity and access to her feelings. Laughter, tears, tenderness, movement, stillness, strength - - all were reflected in her face and body and in her ability to relate in the moment.

Following this session, I sat quietly and closed my eyes briefly as I often do. There I saw a vision of a man's clenched fist releasing a woman's face into the river. As I watched, the face became a reflection of the full moon in the water.

### Working with Authentic Movement

Authentic Movement may be employed both within the context of individual psychotherapy and in group settings (Pallaro, 1999). Here, for the sake of contrast, I describe group work, with a focus on the experience of a young man.

Before assembling an Authentic Movement group, I screen group members to ensure that each has sufficient ego strength to engage in this unstructured approach; that is, to discern reality from fantasy and to manage anxiety-provoking material. Screening includes asking applicants about their expectations of the work and how they have handled difficult feelings during challenging periods in their lives. I also ask about their history in therapy, including whether they are taking any medications or have ever been hospitalized in a psychiatric setting. What has been their experience with other forms of bodywork or movement and what has been helpful for them?, I ask. It is

also important to assess the congruency of their affect, as well as how safe they might expect to feel working with their eyes closed. Though closing the eyes may seem like a subtle point, without sufficient object constancy a person in contact with unconscious material can experience considerable anxiety when unable to visually track the presence of the witness/therapist and her responses. If I am not sure that the person's ego strength is sufficient for engaging unconscious material and powerful affects directly at a body level I may include a brief Authentic Movement experience in the interview process. If I sense that more preparation is needed, I may refer the applicant for individual Authentic Movement sessions to further prepare him or her for group work at a future time. Acknowledging each person's strengths and gifts and the resources that he or she brings to the group can be a particularly rewarding part of the assessment process for participant and group leader/therapist alike.

As an Authentic Movement group facilitator, I assume the simultaneous roles of witness and therapist. I am functioning as a group therapist when I offer participants the basic elements and safety guidelines of the practice of moving and witnessing. These guidelines include encouraging group members to engage in a practice of deep inner listening with an attitude of curiosity and respect for one's own embodied experience, reminding them that there is no "right" or "wrong" way to move. I also counsel them to trust their own "flood gates" as it is not necessarily wise to push oneself beyond one's own comfort level or sense of correct timing. To ensure everyone's safety, I ask that people open their eyes a little if they are going to make any large or sudden movements.

Physical contact also sometimes occurs naturally between group members in the practice of Authentic Movement. When this occurs, I function as a therapist, encouraging movers to move away from any unwanted contact or to take the risk to engage in contact that feels genuine and consistent with his or her own process and development. Such experiences, when brought to consciousness, can be reparative, providing a sense of safety in one's own skin while relating to another.

As the work unfolds, through my example as a witness, I demonstrate a containing sense of presence. The focus and concentration I bring, together with the group's quiet

attention, contributes to creating a safe and protected space for the movers. When I provide verbal responses at the end of a movement session, I am again a witness but also a therapist as I look to guide the witnesses in giving responses which are as non-projective, non-interpretative, and non-judgmental as possible. I will, however, assume my therapist role if my clinical experience and judgment are required. I might intervene, for example, if I feel that projections are beginning to take over the process or if a group member is encountering a particularly difficult and prolonged impasse. Over time participants also learn witnessing skills. Working with distinguishing one's own material from someone else's, and beginning to sense when to contain feedback and when to share it, are important cornerstones of the work.

In this particular group which I describe below, movement sessions ranged from ten to forty-five minutes, building gradually over the duration of the course. The work was guided by group members' increasing capacity to attend to their embodied experience and to express and contain unconscious material. Participants engaged in their own individual psychotherapy concurrently outside of the group. This provided them with additional support for the further exploration and integration of what emerged in the movement work. Confidentiality was also agreed to, so that group members could feel free to engage more fully.

The group met in a spacious, carpeted room with large windows. After a brief movement warm up, I invited participants to find a safe place in the room, to close their eyes, and to begin to attend to and be moved by their inner body-felt sensations, movement impulses, images, and/or feelings. Drawing and journal writing often followed the movement sessions, assisting in the transition to speaking. I sat to the side of the space where I could see everyone clearly. In the windows opposite, a large tree lost its leaves and then bloomed again during the months of our practice together.

### **Case Illustration ~ Daniel**

Of medium height, lean, and agile, "Daniel" was a fairly shy though sometimes playful man in his early thirties. He often felt that he was solely engaged in superficial conversations with his peers and said that this exhausted him. Following his initial

experience of moving in a group, he had a dream in which he was sitting in a rowboat on a deep sea, terrified that if he "rocked the boat" and fell overboard he would be eaten alive by a huge white whale. He reported also that his mother had been intrusive and physically abusive. In one dream he had to stop her from looking at his nude body by using his elbows to push her away. He began to realize that for some time he had felt that he could never escape her gaze; he had continued to see her in his mind's eye and attempted to read her facial expression in order to know how to act or what to make of what he was feeling. Over a few weeks' time, Daniel began to see how his mother had become a powerful internal reference point and, simultaneously, a source of painful and fragmented memories and low self-esteem.

As the other group members engaged in their movement explorations with eyes closed, Daniel spent a good deal of time curled up in a fetal position on the floor, sometimes still and frozen, sometimes rocking himself. Occasionally he tried to stand but found himself returning again and again to these early movements, curling up in a ball on his knees with his head touching the ground and his arms either holding his belly or covering his head. Learning to stay with the sensations and feelings that he experienced, he began to realize that this position expressed the dilemma he felt so profoundly: on the one hand he felt safe in it, but on the other, he felt unable to express the fear and the rage that he had never been able to show at home while growing up. He realized that he was hiding from himself and from others, "out of a fear of being rejected" for who he was. He had an insight that this stemmed from not having had a safe place in his childhood to express his anger and fears.

Following this insight, two characters began to emerge in Daniel's imagination and in his movements. The first was a huge, impish hobgoblin who didn't care about anyone else and did what he wanted. Daniel felt both relief and repulsion. The second figure was a strong stoic. At one point, he embodied the mischievous imp, and enjoyed feeling that he deserved whatever he wanted. He allowed himself to turn his back on all his witnesses in the group, embodying what it was that he wanted to hide from everyone and finding that it was a relief to be so "bad."

This movement was immediately followed by the appearance of the strong stoic.

Standing upright and tall, Daniel folded his arms over his chest in an authoritative pose. His head held high and pulled back, he occasionally shook his finger at an imaginary figure, grimacing and pulling his head in at the neck. "It was upsetting to go back to the stoic. Do I have to?" he asked. "I feel like the child who was made to stop playing all too soon. In going back to the hobgoblin I am angry. I either want to be one or the other. There is not room enough for both. Anger wells up in my belly and there is pressure over my heart. This responsibility that I feel I need to carry weighs on my heart. I feel myself caught between the hot belly of anger and the weight of the pain over my heart."

At this point in his process I encouraged Daniel to stay with the tension between this pair of opposites, attending to his feelings and bodily sensations and allowing them to guide him in discovering a way through his dilemma. By following the heat that he found in his belly while rolled up in the ball or "hiding" position, he began to pound on the floor with his fists. At first the pounding was soft but then it gradually grew louder and firmer with a definite rhythm. Finding that he couldn't express himself fully from this position, Daniel sat up, experimenting until he found a position in which he could feel safe and yet could express his rage. With his legs curled under him in almost a lotus position, he leaned forward, placing his weight on his fists. From this position, Daniel was able to feel the weight of his emotions and his body behind the anger, and banged his fists with renewed vigor. "I felt the anger," he said later. "I felt aggressive and yet I was able to honor my need to feel secure. I could honor the armor that I have created, even as I released my pain."

Following this movement session, another group member expressed her experience of needing to hide who she was. Daniel then shared what he had just written in his journal: "I am sick of hiding." Touched by her words, he began to sob, his body shaking. This went on for some time. Following this experience he wrote, "It was amazing to be able to really express my feelings and not be judged by the witnesses. Now I feel that a profound change has taken place within my psyche. Before, I was trying to fight this ghost of my mother who abused me from my distant past. I couldn't fight her. The catharsis brought my attention to the core issue behind my mother ... the degree that I feel the need to hide things from everyone. And now I am in this place

where I feel like I can work on and learn from my issues as they unfold more and more over time. I feel like my imp and the stoic are trying to find a common ground."

Daniel shared another entry from his journal: "Perhaps my movements are a dialogue between my mind and body... I am desperately trying to find something valuable that I have lost. The mind is on top looking down the tiny hole trying to find what it has lost. And the body is a caged beast, trying to get out where there is no door. I feel like a lion and if I could get out I'd kill something. I am trying to let loose, just trying to move away from the scrutiny of the mind. And maybe, just maybe the mind is trying to find the key to unleash the beast." Robert Lewis Stevenson's famous tale of "Dr. Jekyll and Mr. Hyde" describes a similar dilemma. In the story an upright doctor struggles to cope with the tension between his primitive shadow aspects and his over-adapted, disciplined, "good" persona. However, rather than using drugs to assist him in negotiating this impasse as Stevenson's character did, Daniel was engaging in the slow, careful work of bringing the shadow to consciousness, integrating this heretofore forbidden affect and energy into a more empowered sense of self.

Following this breakthrough were several dreams in which Daniel found himself naked with an erection in public places with his girlfriend, feeling humiliated and needing to hide himself. In these dreams his coat falls away and he is mortified that everyone will see him - - see his manliness. He pulls his coat up around himself, feeling he has to "harness" it. During the movement that followed these dreams, Daniel found himself alternately feeling strong and able to stand up, with his chest out, and then fearful. "I feel secure and not," he wrote about this dilemma. "I feel like I am just sitting there waiting for the blows to happen. I want to be more mobile, defensive, and active. I want to feel strong as well as safe so it is important for me to find a new position."

In his next movement session the image of a turtle came to him. While attending to this image, he began to close up like a turtle, bending over and covering his heart with his arms, cradling it like a baby. He returned to the rocking motion, having a sense of being both the infant who is being rocked and the one doing the rocking. He brought his knees in together, covering up his crotch and hips. He touched his torso down to his knees. He reported that at this point he realized that he was not "weak" in this position,



no less than when he was standing up, so he stood up again.

Daniel described this experience to the group: "I move back into the same position I was in before only this time I feel the true nature of my stance. I am willing to show myself; I am willing to slowly come out of hiding... for myself and others, but I need to feel safe and protected," he says. "How to do this?" I think. "But then I remember Tina's voice encouraging me to listen to my body and trust that it will help me find a way. My arms have begun to move out in circles above my head and out to my sides. I am taking and releasing a huge breath as I make each circle. Finally my arms rest just over my belly, in what feels like a martial arts position. Not like 'Here I am, strong, taking on the world,' but rather, 'I am here, secure. I am prepared to defend myself if I need to but... I would like to try to meet you.' I smile as I experience this new sensation, a zone of steadiness and comfort between my need to hide and my wish to be open and to release so much of what I feel I need to hide."

In the next movement session, Daniel had the image of being a scorpion, "twisting and turning close to the ground, [his] pinchers and tail raised to an unknown enemy." As one of his witnesses, I felt energized, alive, powerful, and mobile. Simultaneously, I had a sense of my own quiet stillness, and felt a strong central axis moving down along my spine and into the floor. When he asked for my response I shared my experience with him, adding that during his movement, I felt that I could be here with him in the presence of his power and fury, neither interfering with it, nor abandoning him. His eyes welled up, and he heaved a huge sigh as a smile spread across his face.

As Daniel's work continued, he became more confident in himself, speaking out more readily in the group, his voice deeper, enacting less of the jesting he'd once employed so automatically in relating to others. He reported being better able to affirm his boundaries and later shared with me that through continuing to follow his dreams and bodily sensations, he was able to make a career choice that had previously been too difficult for him.

Through this movement work, Daniel became able to embrace his direct bodily experience. He also learned to develop a more discerning "inner witness", capable of

stepping back and reflecting on his own life. As his feelings surfaced and found expression, he became more compassionate and discriminating in his overall point of view. He no longer felt subjected to the moods that used to possess him, blunting his awareness and his ability to make choices until the storm had passed. As is so often the case in this work, the site of the wound had become the gateway to which one returns and moves through, as healing takes place.

### Reflections & Questions for Further Research

How can we, as therapists, increase our awareness and comfort with our own bodies, so that we can model this with our clients and not unconsciously impose limitations on the direction of the work? As we engage in healing work it is essential to remember that there are not only two psyches in the room but two bodies, two souls seeking incarnation - - a critical element that may often be overlooked in verbally-oriented psychotherapy. Becoming aware of the impact of the work on the therapist's body is an important step in this direction (Adler, 1987; Atwood & Stolorow, 1993; Bernstein, 1984; Lewis, 1993; Pallaro, 1994; Stromsted, 2001; Woodman, 1984). In working with a client, my intention is to attend to the music of the work as it plays through the bodies and imaginations of both people, deepening my ability to listen for the many voices – the cellular resonance through which the Self seeks expression.

As I reflect on the developments in the field of Somatic psychotherapy and of Authentic Movement, many other important elements and areas of application such as age, gender, race, culture, and specific areas of physical or psychological limitation emerge that are beyond the scope of this paper. Advances in the fields of trauma work, neuroscience, pre- and perinatal psychology and attachment theory are deepening our understanding of the relationship between body, psyche and spirit within the intricate dance of self and other. This, in turn, offers new hope for the prevention and treatment of developmental impasses, including traumas that occurred before the acquisition of language (Chodorow, in press; Kalsched, 1995; Levine, 1997; Pert, 1997; Rothschild, 2000; Schore, 1994, 2003; Siegel, 1999; Siegel & Hartzell, 2003; Van der Kolk, McFarlane, A.C. & Weisaeth, 1996, Woodman, 2004).

In the medical arena, as was suggested in the work with Lydia's physical symptoms, movement can also offer a great deal for people struggling with a range of illnesses. My experience in working with post-mastectomy women has given me great respect for the power of Authentic Movement in assisting women in re-inhabiting the body, which they often feel has betrayed them (Dibbell-Hope, 1989; 1992). Somatics practitioners, dance therapists, analysts and medical professionals could learn a great deal from one another and work more effectively by communicating along these deep interfaces.

### Conclusion

My experience continues to teach me how movement psychotherapy, whether structured or inner-directed, is a process of soul-making and body-making. Together, body and psyche, matter and spirit, find union and generate new form. This unfolding, creative process yields enriched access to the self, enhances relationship and assists in building community. What moves me most has to do with embodied presence, and how it awakens and grows. I find wonder in the richness of life as we experience it through our senses. And I trust the power of this wisdom to inform our spirited participation with one another in the natural world. Shall we dance?

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