

Psycho Corporal Therapy from Retrospective to Theoretical Applications

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Introduction

Psycho-corporal therapies emerged in France about 50 years ago, but it took several decades before they were recognized and respected. At the time when psychoanalysis was reigning, it was possible to read from Didier Anzieu quoting Lacan: what happens through and by means of language is the only thing that we should take into consideration [1]. Breaking this rule was considered to be a transgression likely to encourage sexual seduction or to lead to regression in to an endless process of mothering.

No one could imagine then, that, only a some decades later Alain Prochiantz would write: it is the body which thinks, even though we are not able to find the right place for its thoughts in the body alone and that the neurosciences would be able to demonstrate the decisive role of the body in the foundations of the mind [2]. This would ignite quarrels between those in favour of cartesian dualism where the body and the mind totally separate entities, and supporters of monism who have the same convictions as Prochiantz. Today we have to find the tools necessary for building the theoretical foundations of psycho-corporal therapies which continue to draw upon the experiences felt by the body in order to increase awareness and to change the feelings we have.

First developments of psycho-corporal therapy: keys steps

The exclusive use of the spoken word to express the activity of the mind reached its limits in cases considered to be inaccessible to psychoanalysis or blocked by strong mental resistance. Confronted by this situation some psychoanalysts tried to imagine a possible connection between the mental resistance and muscular tension or contraction.

As early as 1920 Sandor Ferenczi, in his Clinical Journal, proposed some relaxation exercises aimed at generating a reaction to treatment that was not making progress due to defensive psychological blockages [3]. Much later, around 1990 Ferenczi became a reference for Michael Balint and Michel Sapir, who decides to develop a relaxation method that took place within an analytical framework described in the latter's book: Variable Induction Relaxation - VIR. Sapir's protocole included a word association with a gentle touch, which became associated with a part of the body, then, with the whole body. These representations were seen to help in the recovery of memory, particularly in cases of trauma. Sapir's conclusion was: VIR is useful in cases where the patient has difficulties in representing or intellectualizing, using the metaphor as a defensive game, or in absence of metaphorisation [4].

In contemporary clinical practice these cases, called unanalysable are very numerous. Narcissistic personalities, borderline cases, and some cases of psychosis share the characteristic of having a very vulnerable ego. These patients suffer from deficiencies and from early separations in early life, before they had mastered enough language to enable them to translate their suffering into words. They had not yet encountered words that could be applied to their difficulties, words, which could enable them later to pre-symbolise their feelings and emotions. Hence, since they are lacking in emotional interactions where tonico-postural dialogue, expressions and mimics would enable them to express their emotions, their body has no alternative but to preserve the inscription

in tensions and blockages of a different nature with their inevitable consequences on their later development

Two schools: Françoise Dolto's unconscious body image and Didier Anzieu's skin ego

First, psycho corporal understanding was divided into two schools of thought.

Francoise Molto's unconscious body image and Didier Anzieu's skin ego helped build a bridge between the first recognition of a tangible foundation for mental suffering and the psychoanalytic requirement to touch the mind without touching the body.

This consists of identifying the parts of the body that contribute to supporting the mind, such as the skin: the housing of the body is seen as a barrier, considered to be the borderline between the self and the non-self. But therapy remains a question of imagining and describing comforting gestures that can be felt without actually being put into action.

In the second school of thought there are many more systematic parallels drawn between the body functioning and the mental functioning. The exercises suggested as part of the therapy primarily aim at increasing awareness of sensations, whilst at the same time encouraging the expression of emotions, whatever they may be.

Psycho-corporal therapies

Psycho-corporal psychotherapies on the other hand present the problem in a different way in terms of the importance they grant to emotional reactions and the trace that they leave, bearing witness to the subject's history. The body is a witness, but also a mediator needed to express the suffering experienced and the subject's memories of it.

This gives rise to many questions, the first relating to the Body-mind dialogue. Refuting the value of thought and placing the body in a dominant position where it embodies the whole truth of the individual simply recreates the same gap as before between the body and the mind. Each time psychotherapeutic techniques consist of prescribing a physical activity of some sort with the aim of reconciling the subject with his or her own body, we run the risk of turning the subject back into a patient without necessarily integrating the body as the framework of the self.

Working with the body by means of exercises inspired by Eastern practices (Tai chi Chuan, Yoga, etc.) or others methods such as anti gymnastique, holistic gym, etc. before moving on to words in order to express feelings and where necessary, associating dreams or memories,

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become a thesis about the body. However strong the awareness, the dichotomy is still there; by reducing the importance of the body we give priority to the mind and move towards dualism. But the opposite is also true; when the attention is devoted exclusively to the body in a similar separatist way, this too fosters a divided a representation of the human being, as suggested by Varela.

Another issue is the representation of memories that arise when physical exercises provoke expression of emotions that had been repressed. Let's consider a case reported by Alexander Lowen in *Fear of Life* [5]. In this session, a man called Marc realized how afraid he was during an experiment involving the way he looked. This fear conjured up a memory from his childhood: he was about 3 years old, sitting in his high chair, alone with his mother, when he felt a strange feeling around himself. He said: my mother felt abandoned and lonely; she turned toward me and I felt her opening her arms to me, but if I opened my arms in return, I knew they would burn me; I would be rejected .

Should this account be considered to be no more than a memory?

Neurosciences have shown us that memory is not a carbon copie, nor a code representing an object. What we feel is endlessly shifted and mixed with the multitudes of connections likely to make reference to it. All conscious elements encounter formerly registered traces, which will redefine them, including both topical events and memories from the past. In Marc's case, can we even try to imagine how many situations had crossed the path of that high chair associated with fear before that moment came back to him as a memory during that session?

The emotional interaction with his mother was the direction taken by Marc's memory-emotion on that particular day. Considering it to be a true and a fully memorised scene would only serve to impede the fluidity of later associations.

Perceiving and understanding the importance of emotions and the role played by the body in the construction and the organisation of the mind is fundamental.

The next stage is to set their methodology within a stricter theoretical framework in order to select the best type of therapy to offer the patient, and the position of the therapist in terms of his or her actions and interpretations which should strive as much as possible toward a therapeutic process worthy of the name: Psycho-corporal Therapy.

The brain: captive audience of the body

Over the past 20 years, growth in scientific knowledge has contributed to redefining the relationships between the body and the mind thanks to the contribution of neurosciences which have shown just how much everything that happens in terms of feelings, emotion and affect - and hence in relationships with others - has its root in an anatomical substrate [6].

Today we understand that the important point is not to draw out emotions, which have been repressed or denied, but rather to develop awareness of them as much as possible. The experiments of Antonio Damasio concerning the triggering and experiencing of emotions have shown that our whole body is mapped out into the various areas of our brain using systems that continuously represent the state of the body and a certain numbers of its aspects [7]. And yet the emotions use the body as a stage by creating reactions that bring out modifications to the landscape of the body and the mind. These modifications, mainly

concern posture, movements, facial expressions (facial muscles, color of the skin), breathing and heart rate. The visceral functions also undergo changes. The subject might become aware of some of these effects due to the changes that they bring about. Because our emotions are profoundly interlinked with our interactions and with the outside world, awareness of them is an extremely important cognitive process, in that it provides us with informations about the nature of the extent of our reactions. They are the source of our initial perceptions during our development and are the carnal dimension our representations, subject to, as we saw before, the quality of our exchange with the mothering environment, which will foster to a greater or lesser extent the subjectification process through these emotions. Later on, emotions will have an impact on our environment in which they facilitate communication whilst at the same time, participating in stress management.

If it has been enabled, an awakening to awareness of the body and its modifications will shine light upon the nature of our relationship experiences. If this does not happen, various forms of misunderstanding about oneself will have an unfortunate effect on our emotional life and relational life. Psycho-corporal therapies can help in refocusing the subject on what is inside him and made him tick , at the same time developing his ability to perceive and understand emotions in others.

The discovery of mirror neurons gives us access to a means of understanding our experience of other people before any conceptual or linguistic form of mediation [8]. Sexuality is quite obviously the best example of this, where the slightest gesture or touch, even when unexpected, can be a source of extreme pleasure, as opposed to clumsy or inappropriate caresses.

More specifically, this discovery puts an end to the dichotomy between the sensory system and the motor system, in which the latter is no more than an executor to reproduce actions and movements by associations. An illustration could be: I notice that my rival's gestures has a great impact, so I try to understand what he does and then act in the same way in similar circumstances, also sometimes rather clumsily. The less comfortable the subjects are with their body, the more likely they are to exhibit this kind of behavior, and even if they practice psycho-corporal technics, they will do so by learning them mechanically rather than be truly feeling them and becoming one with the subject of the experiment.

An action using the pathway of mirror neurons is quite different. The action is observed and the executed actions share the same neural code. To put it in layman's terms: my body feels and understands the gesture, posture and expression of the other person and these are meaningful to me Today, there is a clear distinction between the two ways of grasping the corporal and emotional dimension of relationships between human beings. This distinction also enables us to better assess the methods used in psych corporal therapies. This is particularly important in sexology since sexual difficulties are often accompanied by difficulties in establishing a relationship with the partner's body and emotional reactions. The pathway of the mirror neurons works by fast, spontaneous, empathetic reactions. In cases where they are deficient and the subject is limited to simply learning corporal's skills, there will be a high risk of increasing self-observation and intellectualisation, to the detriment of spontaneous ability to become emotionally moved by the partner's gesture and expressions.

Proposal for different definitions of psycho-corporal therapy

Experiencing personal emotions at the first sign of a gesture

from someone else; the first flutter of an intent on their part, feeling emotions that sometimes escape even those who are the stage on which such emotions is being played out; such is the wealth of spontaneity and empathy accessible to us each time our perceptions use the mirror neurons code.

The methods based on learning different techniques: respiratory techniques, relaxation or certain postures taken from Yoga, martial arts, theater, etc., remain the most meaningful bases upon which we can add the various forms of experience where seeing, understanding and feeling are all intertwined.

Clinical experience

A case that is of a particular note for its paradoxical nature is of how a physical skill, an exemplary mastery of the body can continue to exist alongside persistent sexual difficulties.

A 50-years-old man with a long acting career who was used to all sorts of contortions and physical exercises in his various roles was suffering from constant erectile difficulties and an absence of desire, despite frequently taking Viagra. An initial period of psycho corporal therapy designed to link him to his emotions identified a very extensive ability on his part to go through the exercises whilst thinking about something totally different or to look at himself in the same way in which he does during his very brief relationships. During the second period of therapy, whilst he was saying he felt discouraged, depressed and still experiencing no desire, exercises focusing on variations in his posture and expressions gradually released violent impulses in him and a desire to fight which he had some difficulty accepting. And yet at the same time, he was able to sustain a new relationship in the long terminal which gave him the possibility of experiencing sexual relations with occasional penetration.

Conclusion

Today the legitimacy of psycho corporal therapy is acknowledged. Studies of the corporal dimension of any human experience and training in body therapy now have their own tools and experiments which enable behavioral and relationship modes related to the subject's body to be differentiated from those based on intellectual reasoning. The path of the theoretical and practical developments we need for the future is clear.

Summary

Through the long way from a psycho analytic world that refused the Body Language, to the validation of the importance of emotion in psycho corporal therapies, we discover the different therapeutic tools that contribute to develop: body consciousness, emotional sensitivity, and the pleasure to live in a body which feels and understands. It is the best path to understanding the mirror neuron's work and what is a true empathy.

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