

# Touch and Psychotherapy

By Bill Bowen and Craig Toonder

*It is the need for love and to love others, which takes physical expression through touch, in a hug, an embrace, a touch of the hand, a kiss, and more, that constitutes our principal demonstration of connectedness, involvement, and caring. Indeed touch becomes the touchstone, the true measure of our humanity, our seasoning of health, the enrichment of our being.*

- Ashley Montagu

Touch is an essential part of human experience. From the earliest developmental processes to the end of life care, touch has significant influences on us in the form of communication, education, nurturing, and healing (Bowlby, 1969; Montagu, 1986; Caplan, 2002; Field, 2003). The use of touch is powerfully influential on a person's experience and can play a valuable and important role in the psychotherapeutic process. Conversely the misuse of touch in therapy can have devastating and long-term negative impacts on a client.

There are many common forms of touch that are used in psychotherapy. Some are more social or comforting in nature, like handshakes, hugs, or a reassuring hand to comfort or connect with a client. Other forms of touch have a more clinical impact on the psychotherapeutic process, like direct contact, holding, bodywork, or other forms of clinically physical engagement. These forms of touch are designed to deepen awareness, access psychological material, shift habitual physical tension patterns, and introduce new options to aid in supporting the client towards transformation.

## Direct Experience Verses Interpretive Experience

There are two primary spheres of exploration in the psychotherapeutic process. They are (1) *interpretive experience* and (2) *direct experience*. Most of the commonly utilized psychotherapeutic interventions found in talk therapies utilize *interpretive experience* as the vehicle of exploration. These interventions focus within the arenas of thought, belief, and meaning.

*Direct experience*, on the other hand, primarily focuses on physical experience in the present moment. Examples of this can be found in psychodrama, aspects of trauma work like EMDR or Somatic Experiencing, and many other somatic oriented psychotherapies, like Psycho-Physical Therapy.

*The mind's first step to self-awareness must be through the body.*

- George Sheehan

Direct experience is a sensory-based experience that primarily occurs independent of (though influenced by) thought, belief, and meaning. This may include movement, direct touch, bodywork, and guided awareness of physical experience, to name a few. Direct experience brings the client's

focus into an awareness of what is occurring in his or her physical structure, in the here and now. The potency of direct experience has to do with the fact that this experience is engaging the client outside of the habitual interpretive meaning that he or she holds about his or her life. This allows new information to come into the person's awareness, bypassing the dominating influence of the meaning and beliefs systems. Thus, new psychological information that challenges old habituated patterns can be introduced, explored, and assimilated without having to struggle as greatly with ego-based resistance, defensiveness, and immobility patterns.

Touch is one of the most influential vehicles utilized in creating direct experience. Touch directly stimulates and engages the nervous system, bringing with it more information that is normally outside of the client's awareness. This information in turn can also stimulate responses within the body and mind of the client thus creating a potentially rich communication between therapist and client. Through this somatic level of communication, information about the client's self-organization can be revealed and new information received and explored. Additionally, touch can also be used to create direct change in a person's physical structure. Through the use of direct contact, guided awareness and bodywork techniques, the feedback loop between mind and body, can be utilized to create powerful changes towards a client's therapeutic goals.

## Why Include the Body in Psychotherapy?

Why the Body? Living Experiences are Embodied Experiences. Without a body there is no life, as we know it. If the body is indeed central to living experience, then it surely must have significant value in the psychological healing process. There are many different therapeutic approaches and methods for engaging the body as part of the psychotherapeutic process. While these methods differ from one another, they all share the common belief that the postures, movements, and tension patterns of a person's body both reveal and influence the deeply held habitual patterns that form the foundation of self perception on physical, emotional and psychological levels.

The body is our container. It is the vessel in which we live. It gives form to our expressions and facilitates our interactions with the world around us. However, the body is not simply a structure that houses and serves the needs of the mind. It is rich with its own innate intelligence. It is a dynamic, unified, complex system. All of its parts are interconnected and interdependent. Similarly, mind and body are interconnected. There is continuity between the physical and psychological aspects of our experience. They mutually influence each other. This continuity can be seen in the way a person's body responds to a habitual thought pattern or in the way beliefs are influenced by their physical patterns. For example, a person has an ongoing negative judgment that he or she cannot accomplish a particular activity. Every time he or she attempts the activity, the negative thought dominates. The body constricts accordingly and the task has to be aborted. The belief has an effect on the physical function. A different example would be a person whose posture is in habitual flexion, a tension pattern that restricts full respiration and limits the person's availability of energy. The person experiences depression and believes his or her life situation is hopeless. The postural pattern in this case has an effect on psycho-emotional function. These psychological and physical patterns are, of course, very complex. They mutually affect one another, forming feedback loops that create deeply interwoven psycho-physical patterns. Working with the body is a direct way of influencing these patterns.

While this concept that the body and mind mutually affect each other is common knowledge in psychotherapeutic work, it is often underutilized. To actively work from this concept means to continually look for and directly engage the interactive dynamics of mind and body in all stages of the therapeutic process. When a therapist is properly trained in the use of touch, this concept of mind-body continuity is more than just an idea; it is a deep-seated value that shapes the way the therapist works.

## Awareness, Presence, and Acceptance

The process of change starts with individual awareness. Presence is the ability to see, be with, and accept the reality of the moment. At the foundation of any healthy endeavor or transformation are these qualities of awareness, presence, and acceptance. Without awareness, one will be blind to what is actually occurring and the ability to deeply understand oneself is limited. Without the presence and acceptance of what is actually happening, a person often lives in projection, fantasy, denial, resistance, and internal or external conflict. New possibilities do not grow well in this soil.

## Touch and Hands-On Bodywork

*“The body isn't all there is, but it's all you can get your hands on”.*  
- Ida Rolf

Touch is all about what you can get your hands on. It's about what is physical, concrete, and in the here and now. When the use of touch is applied to psychotherapy, it is about bringing the client's present moment experience on line and into *direct experience*. As with verbal interventions, the therapist can use the quality of his or her touch, like the quality of his or her voice, to communicate presence and acceptance of what the client is experiencing, allowing greater clarity and self-understanding to emerge. By deepening this awareness of the limiting physical and psychological patterns and introducing more expansive physical and psychological options that replace older restrictive patterns, a client can expand his or her capacity to understand and transform the dynamics by which he or she creates his or her psycho-physical reality.

Additionally, hands-on work has the capacity to elicit and transfer information directly through felt experience and to directly change the structure of a person. For example, work on the legs and feet can change the way a client stands, thus altering the way he or she experiences support from the surface on which he or she is standing. This structural change can bring into focus new possibilities about how one gets support, physically and also psychologically.

With traumatized clients, touch and bodywork can be used to help in the modulation of activation levels, either to increase or reduce those levels. It can also be valuable in helping dissociated clients re-associate or integrate rejected parts of their bodies. Hands-on work can build resources that allow clients to sense a greater possibility for containment, support, capacity for connection, expression of feelings, etc. Bodywork can also create structural change that supports the resolution of post-traumatic stress issues.

## To Touch or Not To Touch

The use of touch has long been debated and feared in the field of psychotherapy. Studies have continuously shown that the use of touch is essential for human development, bonding, healing, and survival (Bowlby, 1969; Harlow, 1971; Montagu, 1986), as well as, benefiting therapeutic alliance, increasing trust and safety, and alleviating symptoms of depression and anxiety. (Aposhyan, 2004; Field, 1998, 2003; Hunter & Struve, 1998; May, 2005). On the other hand, the concern that touch will elicit sexual misinterpretation by or lead to exploitation of the client has left many of us leery of using touch in our practices. More over, this fear of touch being confused with sexuality has led to a common misperception that touch is illegal, unethical, or generally needs to be avoided in psychotherapy.

The use of touch is a major therapeutic intervention. As with any powerful intervention, care needs to be taken with issues of boundaries, ethics, transference and counter-transference. The effective use of touch and hands-on work takes a lot of training and experience. Therapists must translate what they see, hear, and feel into both verbal and non-verbal interventions. The more they can recognize developmental and traumatic based physical compensation patterns, the more easily and effectively they will be able to help a client establish new resources that transform these patterns.

In Psycho-Physical Therapy, we believe that touch, like any intervention, needs to be done conscientiously. Informed consent is monitored at every step of the therapeutic process. Clinical assessment of risks and benefits are considered before, during and after the use of an intervention. More importantly, the therapist's own issues around touch need to be understood and worked through, as well.

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