

EUROPEAN FEDERATION FOR BIOENERGETIC ANALYSIS - PSYCHOTHERAPY

**ANSWERS TO EAP's 15 QUESTIONS ABOUT THE
SCIENTIFIC VALIDATION OF BIOENERGETIC ANALYSIS**

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1. Please provide evidence that your approach has clearly defined areas of enquiry, application, research, and practice.

1.1. Definition: Bioenergetic Analysis (BA) is a psychotherapeutic method the roots of which go back to Freud, e.g. to psychoanalysis. In contrast to psychoanalysis, however, which focuses on fantasies, thoughts and dreams as the only expressions of the unconscious, BA in addition pays close attention to the bodily expression of the patient as manifested in gestures, mimics, voice and breathing patterns. Rather than splitting body, mind and soul BA understands them as an indivisible unity whereby each influences the others and where therapeutic interventions on one modality can have an effect on the others.

BA originally was developed by Wilhelm Reich, student and later associate of Freud and finally an ardent critic of Freud. He introduced the concept of character armouring meaning that certain emotionally traumatic experiences, often stemming from early childhood, can cause a substantial tightening of certain muscular regions and with it a deadening of the affective state as a protection of the soul. "Character analysis", Reich's most famous piece of writing (Reich 1945) thus describes and explains physical and expressive structures in terms of certain neuroses and introduces the reader to a number of body-oriented psychotherapeutic techniques. Two of his students (and patients), John Pierrakos and Alexander Lowen took the ideas of Reich further. While Pierrakos developed a body psychotherapy form known as "Core Energetics", Alexander Lowen developed BA as it is known today. Bioenergetics actually means dealing with the "energy of life"; somatic, psychic and affective expressions are controlled by a common biological energy-dependent mechanism.

1.2. Enquiry

Alexander Lowen (1958, 1975), basing himself on his own experiences with Wilhelm Reich and by studying his patients very carefully from the point of view of physical structure, appearance and motility, of their limbs, their chest and pelvic region, their breathing pattern, their facial mimics, eye expression and gestures, he concluded that human beings can be divided in five basic personality structures: the schizoid, the oral, the masochistic, the narcissistic and the rigid character. These expressions have their basis in Freud's concept of developmental phases; they were further explained and inquired into by Keleman (1981) and also Johnson (1985), Keleman paying more attention to the anatomy of a person and Johnson trying to reconcile with Freud. Depending when during development certain deficits or traumata occurred, in coping attempts one or the other character feature would emerge, be rehearsed and would find its form also in the physical structure of the person. BA as

psychotherapy would then be to analyse the deficit, trauma or unresolved conflict, find some verbal and physical interaction to bring them out and help the patient find a means to heal. Lowen has described in many vignettes how he goes about; in fact he has also developed what is known as “body reading”, whereby he practically can read the character structure of a person by analysing the body structure and muscular tension pattern. His theoretical and practical concepts are all entirely based on personal observations and are in need of scientific proofs. The section on research will show that the bioenergetic community has been actively engaged since a few years to fill this gap.

1.3. Applications

From the above it is clear that BA is a form of body psychotherapy useful for adults suffering from neurotic and psychosomatic disorders. How useful it is for psychotics is unknown at the present time, as we have no publications yet referring to the treatment of these disorders. Also the application of BA to children and their disorders (Ventling 2001) is still in the beginning, but publications begin to appear. From inquiries and research data (for more details see 1.4. on Research) we know that most our adult patients can be classified according to the ICD-10 as belonging to the class F4 e.g. suffering from neurotic disorders, such as phobic and panic disorders, anxieties, compulsive disorders, adjustment problems, depressions with and without psychosomatic complications etc. A smaller fraction suffers from personality and behaviour disorders, and are classified as F6; about the same proportion suffering from affective disorders we can classify as F3. (Gudat 1997; Ventling & Gerhard 2000; Bertschi 2003).

1.4. Research

Historically speaking for many years no questions were asked whether BA was an effective form of psychotherapy, what exactly the training of the therapists was based on, what the therapist population or for that matter the patient population consisted of, whether the psychotherapeutic techniques followed definite concepts or rules and on what these depended, etc. etc. Many such questions were asked in recent years from state health departments, health insurances, health laws in various countries and thus became often a political issue. They were also asked from within the bioenergetic community. While for years it was the custom to publish success stories of psychotherapies (not just in BA!) in form of vignettes or entire case histories, this was considered proof enough that the modality of psychotherapy described was reliable and therefore commendable.

In some countries, notably Germany, Italy, Switzerland and possibly others, laws demand a precise definition of the education of the therapists, scientific proof of the method in terms of efficacy, and of the concepts and theories behind the method. This legal enforcement of an exact definition of psychotherapy has put considerable demands on the bioenergetic community and initiated a change in thinking about research. One of the first research questions was simply this: *is BA effective and if so, does it bring about results which last?* Gudat (1997) in Germany was the first to undertake an exact study investigating the client population (according DMS-IV), doing statistics about their age, lengths of therapy, the psychosomatic problems and their resolution etc. by means of questionnaires sent out after the therapies were terminated. This quantitative outcome study, which yielded highly significant positive results, was followed by a similar efficacy study where in addition the education of the therapists was noted, the client population was classified as above but according to the ICD-10, the effectiveness of bodily interactions etc. upon new insights of the patients, and more, plus also the success of the therapy in terms of lasting duration after termination of the therapy was investigated, all of this by means of questionnaires (Ventling & Gerhard 2000). This study again provided proof of the effectiveness of BA and of its lasting therapeutic result. A recent follow-up (Bertschi 2003) emphasising the F4 group of neurotic disorders, and questioning former patients with different questionnaires than previously used, came to the same conclusion. With these three retrospective studies we feel that the effectiveness of BA has been sufficiently proven and new studies focus on the process during therapy and the therapist-client relationship. Thus a study dealing with body-oriented psychotherapy of various European schools including BA, still running, has provided very promising preliminary data (Koemeda-Lutz et al. 2003b) and a second much more enlarged investigation, under the auspices of the Swiss CHARTA, an umbrella organisation of more than 20 different psychotherapy schools, including representatives from analytically oriented to cognitive to body-oriented schools from Switzerland, will begin in 2005.

The concepts of Lowen, such as using body language in addition to the verbal expression, the concept of physical interaction, the benefits of doing exercises, the concept of the character structures and their bodily expressions in terms of physical appearance, etc. are all in need of being proven in a scientific way (Ventling 2002). A list of published case vignettes and complete case histories testifies in a descriptive way that the concepts of Lowen are helpful and possibly valid (see "Case History List" of references). A special mention here must be extended to Fehr (1998, 2000) for his effort of establishing a questionnaire which would clearly define the character structure of a person, to Koemeda-Lutz for her efforts of

demonstrating a statistical valid relationship between body reading and character structure (Koemeda-Lutz 2001, Koemeda-Lutz & Peter 2002; Koemeda-Lutz, Peter & Emmenegger 2003c).

1.5. Practice

BA is a form of psychotherapy where two languages are combined: the verbal and the body language. Verbal language does not need explaining, but body language possibly does. We distinguish between so-called “exercises” and bodily interventions. Lowen (Lowen & Lowen 1979) and several followers (Sollmann 1988; Dietrich & Pechtl 1991) have described physical “exercises” the purpose of which is to gain a better consciousness of one’s body and its parts, especially those parts which are tense, but also to feel more alive, as Lowen called it, more vibrant. Some exercises are intended to bring a person more to his feet, to feel the ground, others to help him to feel freer. Ultimately the effect is that the patient is also more sensitive and open to feelings like sadness, anger, fear, despair etc. and dares to show them. These exercises can be offered to a patient during a therapeutic session or as some therapist colleagues do it, they offer exercise classes. There exist such classes for children in Rome (Pantanelli & Maiello 2001) where they can improve their self-confidence and assertiveness.

A bodily intervention is different: here we may mirror a certain gesture or facial expression or suggest taking up a stress position or even a cathartic movement, this with the idea to bring out the hidden feeling that we therapists noticed. There exist many case vignettes reporting such interventions (see the books by Lowen) and also a number of complete case histories with explicit details of such interventions (Ventling 2001, 2002).

2. Please provide evidence that your approach has demonstrated its claim to knowledge and competence within its field tradition of diagnosis/assessment and of treatment/intervention.

Bioenergetic Analysis is represented by training institutes and therapists practising in numerous European, North and South American countries and New Zealand. The training is organised by national or local training institutes according to the curriculum of the International Institute of Bioenergetic Analysis. The co-ordinating trainers must be members of the international faculty. Additional subject matters may be taught by local trainers.

The training lasts from 4 to 5 years, with a minimum total of training days of 75 to 80.

Teaching is done by means of experiential learning, reflection and theoretical instruction.

Every candidate must provide evidence of a minimum of 140 hours individual therapy in Bioenergetic Analysis, at least part of which should take place accompanying the training.

From the second year of training practising therapeutic interventions becomes crucially important. At the beginning of this stage the candidate gets support from a supervisor during at least 50 sessions, part of which the supervisor may actually attend.

As soon as the candidate has met all the training requirements and two supervisors have given their consent in terms of positive reports, the responsible training institute in co-operation with the international trainers may award the certification.

It is particularly in diagnosis at the beginning of the psychotherapeutic work that the bioenergetic character structures play an important part.

The Bioenergetic Analysis has developed a character-analytical model concerning the different psychic and somatic experiences in the early human life. (Lowen 1979, Lowen 1980, Lowen 1981, Bäurle 1988, Dietrich 2004, Koemeda-Lutz 2002 C). This clearly shows, that specific life experiences, made in certain developing phases characterise the personality in a very specific way. They impress his/her behaviour, his/her relation to people, to the world, her/his expectations, her/his spiritual physical and emotional orientation, her/his somatic stance and expression. All injuries during certain developing phases constitute special personality aspects and can obstruct a satisfied and fulfilled life so definitely, that therapeutic help could be useful or is even necessary. The different character structures can thereby give valuable hints for the diagnosis and can indicate where the person is hindered in its potential and in which developing phase the injury or trauma has taken place (Heinrich 1997). But a so-called character structure always describes the person's personality, not only its pathology (Schwieger 1998).

Besides the traumatic experience and the thereby following restrictions of the life's quality, the Bioenergetic Analysis also takes in consideration the specific skills and the characteristic identity. Because the direct expression of impulses was not possible, the body needed help concerning holding, protection, affirmation were not given the afflicted individual has provided itself with alternatives and expedients, in order to survive and develop (Schwieger 1998).

The bioenergetic character structure model has described the schizoid, oral, masochistic, psychopathic (narcissistic) and rigid structure (Lowen 1979, 1980, 1981, Koemeda-Lutz 2002 B) and meanwhile the borderline structure as well.

A client's character structure can be defined on the one hand by exploring his history of development, the typical patterns of behaviour and those disorders he adopted to cope with

life, the specific topics occurring during his lifetime, on the other hand by analysing his body: e.g. stance, bodily expression, muscular tension in different body segments, voice and way of walking.

3. Please provide evidence that your approach has a clear and self-consistent theory of the human being, of the therapeutic relationship, and of health and illness.

1. The human being as a self-regulation system.

Since the Bioenergetic Analysis accepts in its conception and in its mode of operation the indivisible body-mind-soul-unity, it follows, like many other body-psychotherapeutic schools a “holistic” conception. Because Bioenergetic Analysis wants to understand and wants to have an influence on the interplay of biological and psychic processes, it has to develop a concept of the structure and the organisation of these.

Fundamental is the idea, that beings, and especially human beings are organised according to the principle of self-regulation (Capra 1996, Mahr 2001A, 2001B): Aiming at sustaining the living system, to improve the living conditions, to propagate, it tries to adapt to changing conditions and to eliminate disturbances in self-regulating or self-healing processes. The principle of self-regulation does not only work within the human organism. By this principle the organism also forms its relationships to the inanimate and to the animate social environment, to find optimal and secure living conditions (Damasio 1996).

This system of interconnected mechanisms is so complex, that one can hardly determine from the outside, if and at what specific place it is possible to intervene safely and effectively. The “human system” actually only needs help, when the self-regulation processes are massively disturbed by biological or psychic influences coming from the outside or the inside. In our body-psychotherapy we therefore work especially on the elimination of these factors that disturb or handicap the self-regulation, mostly called self-healing. Among these factors are dysfunctional patterns of behaviour and mental attitudes, traumatic experiences with acute or chronic fears, but also strong need-restrictions, or conditions, that hamper the self-confidence, or bodily patterns of all kinds of tensions. Based on this background body-psychotherapeutic treatment is always preventive work, as it improves the potential by which the human organism can regulate itself (Mahr 2001 B).

Self-regulating processes not only exist in human organisms, but even in inanimate structures in our world. Humans, however, can change the interconnected mechanisms themselves, by their own structures of thinking and consciousness and they can adapt

themselves to new living conditions. That's why human beings count to "complex" structures in our world and are to be adjoined to the area of non-linear reality, with the consequence that their behaviour cannot be predicted (Capra, 1996, Mahr 2001 B). Thereby validity and objectivity of observable effective correlation in psychotherapeutic processes are relative.

Different standards of Self-Regulation

Besides the principle of Self-Regulation Bioenergetic Analysis notices that human life takes place on different levels (Mahr 2001 A):

- In a human body processes occur on the organ's physiological level that is working interconnected and self-regulating (Buhl 2001, Miketta 1997).
- These were mainly steered by neuronal processes that dim to their own work strategies and tasks.
- Each organ lives by and through a specific cell structure with its own information and regulation system.
- There are other levels with molecular, atomic and subatomic structures with their correlation, without those no life could exist (Warnke 1998, Bischof 1995, Dzempra-Depré, Popp 1984).

The terms "Bioenergy" and Reich's concept of "Orgonenergy" find their place here (Boadella, 1980).

Since all levels correlate indivisibly, each therapeutic intervention can be effective on each of these levels. Vice versa it has to be questioned, if certain interventions are more adequate for a specific level, than others. It seems, for instance, that processes on the neuronal or subatomic level can rather be achieved by meditative methods than by aggressive exercises that can, however, be very efficient on the physiological level.

Such a differentiate view allows the Bioenergetic Analysis to develop precise concepts concerning efficiency and design of psychotherapeutic work.

2. The Body-Mind-Soul-Unity

If all psychic occurrences always have a biological and physiological basis and can be seen as an expression of this process, the relation of body-mind-soul can, according to Capra, be understood and depicted as a function of a somatic happening (Capra, 1996). The psyche develops as a consequence of the highly complex and connected interplay of its parts. A car e.g. does not function as a car because of the simple addition of its multiple constituent parts, but because of the functional connection between them. The "soul of a car" will strongly

differ from the soul of a living being, anyway. E.g. by the ability to generate offspring, to develop the systems by themselves and to create skills, the system didn't know before. A prerequisite for this process is a constant streaming of energy through the system (Capra 1996, Mahr 2001B).

This view does in no way question that the functional expression of somatic processes – the psychic – is of utmost importance for our individual and social companionship. But we can only observe the expression as a consequence of the biological and physiological incident that we experience as something psychic. Even transpersonal experiences can be described by the categories of the material or energetically structured world. Concepts of modern physics, especially the quantum physics provide us with useful models. (Warnke 1998, Mahr 2001 B).

3. Disease – Healing

The human organism will get sick, when its abilities of self-regulation have been disturbed, restricted or broken down. This can happen by the destruction of biological structures. But also life conditions, modes of behaviour, and characteristic attitudes, mainly acquired in early childhood, can permanently hinder the person from doing what has to be done for the sustenance of security, desires needs and development. This process has been described by Wilhelm Reich with the conception of pulsation of charge and discharge, expansion and contraction of all living systems (Reich 1969, 1974, 1983, Lassek 1997A, 1997B). When this oscillation gets interrupted or disturbed, the whole system will be irritated and the living processes autonomic pulsation and development will be restricted or entirely stopped. The system self-regularly tries to create alternative and compensatory patterns (e.g. collateral blood circles in case veins are blocked, e.g. new brain area's activation, when certain function are destroyed). On a psychic level, neurotic symptoms, shock-traumatic reactions or characteristic behaviour have to be understood as such compensatory reactions.

In Wilhelm Reich's opinion this pulsation is an energetic occurrence and therefore has phenomenological been depicted as to the degree of free or restricted pulsation and also as to the free or blocked energetic flow.

Based on this background, acute and preventive therapeutic work means to Bioenergetic Analysis:

1. To optimise or at least to facilitate the human organism's self-regulation.
2. to eliminate the factors, that hamper the pulsation or the energetic flow, or to enable the client to handle differently.

This can happen

1. on a somatic level e.g.
 1. by relaxation of the muscles
 2. by bringing the vegetative nervous system in balance (Buhl 2001)
 3. by changing the breathing pattern
 4. by the improvement of movement possibilities
 5. by the modification of neuronal structures.
2. on a psychic or behavioural level e.g.
 1. by the examination of the introjected norms, rules and mind sets
 2. by the analysis of the actual menace - scenario
 3. by reflecting the right of own impulses of different lands
 4. by improving the self- and object-perception
 5. by improvement of the ability to relate to others.

In Bioenergetic Analysis healing occurs in a process of checking:

The perhaps very old traumatic situation will be reproduced, but in a time and environment, that differs in many ways from the former traumatising situation. Meanwhile the client is grown-up, more competent, stronger, less dependent and the therapeutic setting offers trust, hope, support and understanding. Thereby it is feasible to check, if a real threat is still given, which would demand an inner retreat, or readiness to fight, or the renunciation of important needs and desires. In spite of the rather rational description, these processes are at no rate only rational. They are possible and often necessary in all layers of the human organisms: the rational, emotional, psychic, biological, physical and subatomic layers.

If other therapeutic schools (e.g. psychoanalysis) describe the therapeutic process as a reanimation of the traumatic situation, that can then be analysed, they probably mean the same procedure.

A person would be wholesome, when self-regulating processes would function in the inner organisms as well as in the outer environment and the social reality, so that survival, propagation and development would be optimally guaranteed.

4. Therapeutic relationship

Like in many different psychotherapeutic conceptions, the quality of relationship between client and therapist plays an important role for the success of the whole process. Developmental psychology, especially neurobiology, demonstrates, that the physical, emotional and spiritual development of human beings can only succeed in interaction and

relatedness to others (Shore 1994, Ciompi 1999). That's why it's plausible that the modification of such processes can only be successful by means of communication and relationship. The eminent importance of transference and projections indicate, that certain mind sets, emotions and patterns of behaviour are connected to a meaningful relation to an other person. Working with transference aims at revealing such relational patterns and enabling the patient to establish new relational structures that may better suit his real life situation.

Psychotherapeutic work needs the relationship between therapist and client, but is a lot more than just the network of transference and counter-transference. First of all a relationship is a structure, where information can be communicated that are necessary for the development and modification of a living system (Mahr 1999). The deeper changes in the structure are intended, the more specific the required information and relation has to be. Often it seems, that the emotional structures of relationship, combined with the non-verbal forms of communication - even including sometimes the telepathic ones – are the ones that are effective. We are used to describe these modes of relation and communication as empathy and resonance between two people. And this interrelation is based on a biological and physical background has been made clear by the corresponding natural sciences (Mahr 1999, 2001B).

4. Please provide evidence that your approach has methods specific to the approach which generate developments in the theory of psychotherapy, demonstrate new aspects in the understanding of human nature, and lead to ways of treatment/intervention.

When describing psychotherapeutic processes as the result and expression of biological and physical processes, Bioenergetic Analysis emphasises aspects that can be of great importance to the understanding of the psychotherapeutic process and to the development of bioenergetic theories and concepts themselves:

1. Psychic processes, mostly due to experiences, sensations, images and fantasies, get a more reliable basis, a kind of anchorage with human physical structure. Concepts of body-psychotherapy have to match with biological and physical reality.

2. It is by the explicit focus on the body that the demand of entirety can be answered. Psychic and physical processes can no longer be discussed separately. Nothing but the biological and physical process is the source of psychic and mental experience and activity. Mind and soul are the functional expression of life itself.

3. This point of view could offer a fundamental answer to the question if there are two kinds of illnesses - mental as well as bodily ones. All experiences that deeply move a person –

e.g. threat, love, etc. – bring about physical reactions. The vegetative nervous system shows a state of over-stimulation, there are changes in pulse and blood pressure, the immune system is evidently affected etc (Buhl 2001, Miketta 1997). Such reactions generally happen in daily life and are clinically measurable. If those states of excitement become chronic and disturb the self-regulation of the organism there is of course the danger of diseases springing up. Such a disease is real and far from being imaginative. It differs from “physical” illnesses just in so far as it is not caused by infections, intoxication etc. but by emotions and psychic experiences.

4. The focus on the body also implies that any therapeutic progress is not only expressed in a changed consciousness, knowledge and sensitivity, but also in a change on the body level, which should be visible and in some way measurable.

5. Changes in the muscular tension and other body parameters must be reflected in a person's mental and psychic experience (Lowen 1980, 1981).

6. The hypothesis of the effects of psychic events on the biological and physical system allows a closer examination of those effects. Thus psychotherapeutic processes are accessible to much broader research. A number of psychotherapeutic hypotheses will have to be conceived in a way as to measure bodily changes relating to psychic experiences. Therefore the technical terms generally used in body psychotherapy should be congruent with the ones used in biology and physics (Mahr 2001A, 2001B).

7. The focus on the body reminds us that man is not just a unity, but consists of different layers such as the organ level, the cellular and subatomic levels, which are all interrelated in a complex way. A close examination of what is happening on a particular level may contribute a great deal to the description of the psychotherapeutic process. Quantum physics describing subatomic events offers interesting models to represent relational processes with their phenomena of transference and counter-transference (Mahr 2001, Capra 1996)

By its particular way of looking at psychic processes Bioenergetic Analysis, in addition to well-known therapeutic methods such as paying attention to verbal expression, emotions, images and fantasies, disposes of a bodily approach. Body exercises, changing breathing patterns, concentrating on inner body sensations may activate repressed feelings and memories which have been blocked so far by resistance in the field of verbal expression. It is especially early childhood experiences, emotions and images of which are not accessible to remembrance that can be recalled and worked upon, as they are stored in a person as body sensations (Stern 2003) Preventive bodywork that can help to improve a person's self-image,

body perception and liveliness, is often a necessary condition for clients to expose themselves to worrying emotional experiences.

5. Please provide evidence that your approach includes processes of verbal exchange, alongside an awareness of non-verbal sources of information and communication.

Bioenergetic Analysis uses in its sessions all possibilities and channels to communicate with each other. Voice, gesture, mimicry, eye contact, body-expressions, position movement and touch are - besides language - forms to communicate and to get to know the client (Lowen 1980, 1981, Klopstech 2002). Especially the non-verbal forms of communication, including body-contact, are very suitable for the occupation with the client's earliest childhood; since at that time they have been the only, or at least the main means of communication. Like language, body-contact is interconnected with the therapeutic intervention (Mahr 1994, Carle 2002). The hence appearing images, feelings and emotions can be explored and analysed. The therapeutic process and the therapeutic relationship determine what kind of body-contact is useful.

Body-contact and body-oriented interventions in Bioenergetic Analysis are also used to improve the person's self - perception, to relax those muscles and tissue and to deepen the breathing. Since there tensions serve the resistance of intense and unwanted feelings, their release leads again to the contact to the underlying rage, injuries, desires and so on, and make it accessible for analysis. The cathartic acting out of feelings the Bioenergetic Analysis is often connected with, above all aims at making the frozen or repressed feelings again perceptible and to reanimate them. Usually they alone do not lead to healing. They are imbedded in the therapeutic process and have to be seen and analysed in their biographic, social and psychological context (Steinmann 2002).

Psychotherapeutic work with body-contact is only possible, when it is exclusively used for the therapeutic process. Only by being absolutely safe as to this, the client can allow touch, can learn to understand its meaning and the correlated fears that come up with it. There is no therapeutic reason for any sexual contact, because a therapeutic relationship fundamentally differs from real relations with their own aims and rules in our life. Then, the Bioenergetic Analysis does not allow personal relations and connections between therapist and client, neither before, nor during or after therapy (Mahr 1994).

Even since Freud, but more specifically since Wilhelm Reich the concept of energy has been playing an important role in body-psychotherapy. By describing energetic structures and processes the Bioenergetic Analysis, as an occidental form of therapy, leans on the

conceptions of physics, which defines energy on the ability to perform work (Tipler, 1995). This skill can find its expression in different energetic forms (potential, mechanical, kinetic, electric and electromagnetic energy and so on). These physical forms of energy develop and steer the human organism. Thus, it is not necessary to postulate special “life energies” (Mahr 2003). The same energies, which have been holding our universe together since its existence and will continue doing so in its far future, function also in us. (Mahr 1995)

Since there exists nothing else in our universe than energetic structures, a psychotherapist cannot do anything else than deal with energy - whether she/he analyses dreams or modifies behaviour.

The Bioenergetic Analysis tries to pay special attention to the way energetic structures work in our organism, and how they can be influenced. The work with movement, nourishment and breathing change e.g. the energy level on an organic layer or in the cell-structure. The work with the relationship and meditative methods can reach the neuronal and subatomic layer in a very special way. (Mahr 2001 B)

For Bioenergetic Analysis it is very important to bring the clients into contact with their feelings, to facilitate the adequate expressions and to analyse them (Lowen 1981). The feelings interfere in the processes of self-regulation of the organism itself and with its biological and social environment. That is why we are so much interested and focused on the structure and functioning of the feelings. According to neurobiology (Damasio 1996, Ciompi 1999) the origin for all feelings are somatic perceptions (warmth, coldness, tension, excitement and so on), which indicate to the brain, that the organism has got deficits and needs that have to be regulated. There are data about the status of the somatic condition. The brain collects different perceptions and becomes aware of them as feelings. By them the brain is able to decide and to change self-regulating processes. A highly developed emotional world helps the person concerning thinking, planning and choosing the patterns of behaviour.

6. Please provide evidence that your approach offers a clear rationale for treatment/interventions facilitating constructive change of the factors provoking or maintaining illness or suffering.

Bioenergetic Analysis, with its concept of character structures, describes the way a person in a specific situation in his early development reacts to bodily and emotional restrictions with changed behavioural and relational patterns, a certain cognition of the world and a corresponding body expression. (Koemeda-Lutz 2002 C)

Bioenergetic Analysis does not deal with changing a person's character structure, however, it fosters a greater flexibility in thinking, behaviour, emotional and bodily expression so that the client can freely pursue his aims and achieve them more easily than this would have been possible, had he not worked upon his own structure. As a person's thinking, behaviour, feeling and body are likewise marked by life experiences or influenced by his character structure, therapeutic interventions can focus on any of these spheres. You can work with the body expression and observe the effect on feeling, thinking and behaviour or vice versa. (Lowen 1980, 1981)

No matter which level is being worked upon, bioenergetic therapy is always about guiding a person towards a better understanding of the structure of his own thinking, behaviour, feeling and body. Only then it will be possible to examine if traditional and obstructive patterns originally meant to protect the person and help him to cope with life, can be changed in the future. The therapeutic goal is the increasing autonomy of the client or - in other words - to optimise the self-regulating system. (Mahr 2001 A)

From a point of view focussing on the body the therapeutic process is described in this way: traumatic experiences are reflected in specific patterns of tension, especially in the muscles, bringing about "blockades" which are to control unwanted impulses, movements and emotions. Therapeutic work - often interventions on the body level - releases those tensions, which allows a new kind of self-awareness and perception of the body and sets free "frozen" feelings, which can then be worked upon by other therapeutic methods (Lowen 1980, 1981, Koemeda-Lutz 2002 D). Since the tension of a muscle is always determined by the amount of energy in the muscular cell and by corresponding neuronal impulses, any modification of the muscular tension directly attains neuronal structures. On the other hand the release of tension is only possible with the neuronal structure permitting. (Mahr 2001 A)

The disorders treated in psychotherapy become disorders only when they are dysfunctional in a person's present living conditions so that the person's needs cannot be adequately met.

Originally they were meant to solve a particular problem: they offered protection, guaranteed life or helped to bear it. Such attitudes and behavioural patterns can only be given up in view of clear alternatives. Consequently these processes take a certain time until new experiences can be made and a feeling of security can be established. Bioenergetic Analysis fosters this development by stabilising the client's personality so that he can become aware of the multitude of his own resources. Bodywork is very efficient at promoting this kind of "grounding". The client experiences being sufficiently strong, alive and lovably which

encourages him to confront the threatening aspects of his own history and enables him to tolerate them. It goes without saying that the intensity of the bodywork has to be carefully adapted to the client's structure and ego-strength. (Lowen 1980, 1981)

7. Please provide evidence that your approach has clearly defined strategies enabling clients to develop a new organization of experience and behaviour.

Bioenergetic therapy is preceded by intensive work on diagnosis. The present life situation, the personal history of development including prenatal, natal and postnatal period are explored as well as the medical history, the experiences in relationships and their qualities. Body expression, posture, muscular tension, blockades in different body sections, degree of liveliness and body awareness are carefully observed and - hypothetically - related to the character structure which seems closest to the person.

Thus the therapist gets an idea of the client's life topics, his fundamental problems and his characteristic strategies of solution. Even if this idea needs continued re-examination in the course of therapy, it still offers a practical orientation to structure verbal and non-verbal information as well as body signals. These first impressions teach the therapist what to expect from a client in terms of reactions, resistances etc.

Both verbal and bodily approaches pave the way to the therapeutic process.

- The verbal approach starts from the client's reports paying attention not only to the words but also to the emotional nuances and the bodily reactions involved. The focus is then put on the latter kind of communication so that the client becomes clearly aware of it and can express himself more adequately.

- The body approach first attempts to deepen the breathing and to improve body perception and awareness. This can be done choosing from a wide range of exercises in stress positions, in a state of relaxation or in different forms of movement. The aim is to foster the spontaneous emotional expression of the client - or even make it possible again - and lead him to conscious reflection. (Lowen 1980, 1981, Dietrich 2004, Steinmann 2002)

8. Please provide evidence that your approach is open to dialogue with other psychotherapy modalities about its field of theory and practice.

Bioenergetic Analysis is open to intensive discussion with other psychotherapeutic schools and attempts to integrate their views and methods in bioenergetic theory and practice. As among the international faculty there is a large number of trainers with psychoanalytical

background, a great affinity to psychoanalysis is obvious. This is, of course, due to the roots of Bioenergetic Analysis, which go back to Wilhelm Reich and Sigmund Freud.

To achieve a better understanding and a more detailed description of therapeutic processes Bioenergetic Analysis keeps trying to match its own concepts with biological, physiological and physical processes. In this respect neurobiology, modern baby research, quantum physics and philosophical questions concerning self, ego, consciousness and perception are actually of great importance.

Theory and practice of Bioenergetic Analysis are regularly presented and discussed at yearly local meetings and international congresses, which are open to representatives of other psychotherapeutic fields. Below are some examples:

- Second European Conference for Bioenergetic Analysis. Barcelona (Spain) 1999. Will Davis, George Downing

- International Conference on Bioenergetic Analysis. Belgirate (Italy) 2001. Prof. D. Stern.

- International Conference on Bioenergetic Analysis. Salvador (Brasil). 2003: Prof. Dr. H. C. Traue. Ulm, Germany

In reverse, other psychotherapeutic societies keep inviting Bioenergetic Analysts to their congresses in order to have them present their concepts. Below are some examples:

- “European Conference for Body-Psychotherapy” - Switzerland, 2000: Sollmann, Mahr, Ehrensperger

- “Congress of the German Society for Body-Psychotherapy”. Bodies and Soul. Berlin, 2003: Konrad Oelmann, Ulrich Sollmann, M. Koemeda-Lutz, Rainer Mahr

- “Federal Conference of the Catholic Marriage and Life-Advisors”. Suhl, 2004: Dr. Vita Heinrich-Clauer, Dr. Jörg Clauer, Rainer Mahr

- “World Congress for Psychotherapy”, Vienna, 1999. Dr. Vita Heinrich-Clauer

- “Conference of the Swiss Charter for Psychotherapy”. Neuro-Sciences and Psychotherapy - The Human Being: A Topic, Two Worlds. Zurich, 24.03.2003: Dr. Christa Ventling, Dr. Margit Koemeda-Lutz, Hugo Steinmann.)

Besides the large number of books by Alexander Lowen many bioenergetic publications - books and articles - have appeared meanwhile, sometimes in editions of colleagues from other therapeutic fields. (Check the section “References” at the end of the document)

9. Please provide evidence that your approach has a way of methodically describing the chosen fields of study and the methods of treatment/intervention which can be used by other colleagues.

It is true that various books describe bioenergetic exercises, a way of getting into better contact with one's body, releasing tensions and of finding access to one's feelings (Lowen A, Lowen L (1979), Sollmann 1988, Dietrich 1990, Steinforth 1999), but they cannot serve as an operating instruction. Alexander Lowen emphasises the clinical presentation of his work in his books and so they contain numerous indications of how to realize the principles of his form of body psychotherapy.

Similarly, many colleagues showed in their publications of case studies how body-psychotherapeutic processes can be initiated, influenced and worked with. (Check the section "Bioenergetic Case Vignettes and Case Histories" at the end of References)

Real competence in Bioenergetic Analysis is achieved through self-experience and intensive training. Trainees get the knowledge and skills needed to perform good diagnosis and therapy, integrating verbal and body work on the material emerging from the client. A fundamental principle in teaching is to connect theory with personal experience. (Stiehl 1997)

The training has to meet the requirements set by the International Institute for Bioenergetic Analysis in its Certification Guidelines (2001) and the Training Curriculum (2003).

10. Please provide evidence that your approach is associated with information which is the result of conscious self reflection, and critical reflection by other professionals within the approach.

Alexander Lowen's concept itself results from his critical attitude towards the vegetotherapy by Wilhelm Reich. He was aware of the necessity to combine bodywork with psychoanalytical knowledge. The deep emotions triggered off in body processes need to be understood before they can be integrated in new behaviour.

With the work of Robert Lewis (Lewis 1994) it became evident that cathartic release of emotions by means of stress exercises and confrontation is not appropriate to clients suffering from early disturbances. These patients need holding, bonding and confidence to find access to their traumatic experiences. It is by his method of holding the client's head that Lewis expanded the concept of grounding. (Lewis 1986, 1998). It turned out to allow a better emotional contact with the period of preverbal child development. The theoretical discussion

has been continued by David Campbell (Campbell 1991, 1993, 1994) and others introducing relational theories to bioenergetic concepts.

The critical view of Sander Kirsch (Kirsch 1994), Jacques Berliner, (Berliner 1991, 1994), Peter Geißler (Geißler 1994) and others concerning stress-oriented bodywork emphasized the concept of transference and counter-transference in the therapeutic relation.

The post-traumatic stress syndrome with its particular difficulties being a central topic in the world of psychotherapy, it became clear that reliving the traumatic situation should only be induced with increasing security and competence of the client. Bodywork improving the client's aliveness and physical self-image helps him to prepare for confronting his trauma (Levine 1990, 1997, Eckberg 1999, Müller 2000, Clauer, Heinrich 1999, van der Kolk 1994).

Meanwhile Bioenergetic Analysis intensifies the attempts of integrating neurobiological views and takes account of the latest baby research. Thus we manage to describe the significance and impact of body processes on the psyche and to find more irrefutable scientific proof for the body approach. The explanation of bioenergetic terms on the basis of natural-scientific definitions plays an important part there. (Mahr 2001 A, 2001 B, 2003, Schindler 2002, Klopstech 2002)

11. Please provide evidence that your approach offers new knowledge, which is differentiated and distinctive, in the domain of psychotherapy.

1. With its understanding of psychic processes from a body perspective Bioenergetic Analysis emphasizes the fact that all human life, even in its psychic and mental aspects, has a biological, physical and material basis. Emotional and mental life only exists as the expression of physiological processes. Considering this principle, psychotherapeutic concepts gain a solid realistic basis for their own theory and practice. How different their psychotherapeutic views and practice may be, confronted with human biological reality, therapists might discover what working procedures they have in common that grant efficiency. (Mahr 2001 A)

2. It is entirety, the oneness of body, mind and soul, which is the main principle of all body-psychotherapeutic schools. However, this principle cannot be taken into account, if differentiation and separate evaluation of physical, psychic and mental processes keep being required. Considering human life from a consequent body-oriented point of view which understands mental and psychic processes as expression and function of biological processes, helps to bridge this gap. A greater social acceptance of this view of man would have a

remarkable influence on human self-image and self-confidence and could improve man's attitude towards nature and stabilize his position in the universe. (Mahr 1995, 2001 B)

3. This understanding of entirety clearly implies an interdependence of emotional and mental processes on the one hand and physical structures and processes on the other hand. We need not ask the question any longer if a psychosomatic view of diseases makes sense or not. The very connections of cause and effect become object of research. (Mahr 2001 B)

4. From its bodily point of view Bioenergetic Analysis describes man as a self-regulating system organising internal processes as well as connections with his environment and social relations. It also considers his capacity to create his own rules within those systems and to adapt them to changing conditions. (Mahr 2001 A)

This principle definitely reveals the complexity of man which psychotherapy attempts to influence. Once this complexity becomes transparent, it can be modified effectively and to the point. It often seems more reasonable, however, to respect a consistent structure and leave it as it is. A therapist's tasks would then consist of creating a positive setting for a better functioning of self-regulation.

Beyond any special psychotherapeutic views and methods the principle of self-regulation could represent a matrix describing therapeutic processes and evaluate their consequences.

5. Bioenergetic Analysis, with its concept of character structures, points out that neurotic disturbances and mental diseases are to be considered, in the first place, as an important achievement that guarantees a person's survival and his development in difficult circumstances. Aspects of a personality are perceived as disturbances as soon as they can no longer cope with the usual demands and / or cannot be sufficiently changed. Such a view implies a deep respect of the client's personality. Besides the fact that this respect leads to more trust and openness in the therapeutic relation, deficits can be dealt with more light-heartedly and in a differentiated way and new splits may be avoided. (Lowen 1980, 1981 , Schwieger 1998, Michel 2002)

12. Please provide evidence that your approach is capable of being integrated with other approaches considered to be part of scientific psychotherapy so that it can be seen to share with them areas of common ground.

Sigmund Freud repeatedly claimed that without a physical complement psychoanalytical theory would remain insufficient (Freud, Puner 1947). Wilhelm Reich was committed to this complement whereas Alexander Lowen has been working at integrating both aspects

(Boadella 1980). This connection is generally accepted and even further developed since Bioenergetic Analysis considers itself as a depth psychologically method (Koemeda 2002B).

Other body-psychotherapeutic schools stem from the same roots and work out their theory and practice according to similar principles. Bioenergetic Analysts can communicate with them and convey their concepts. Many authors belonging to those schools enjoy a good reputation as body therapists in Bioenergetic Analysis. The affiliation to a different school is of minor importance. In return representatives of Bioenergetic Analysis - with their contributions to reviews or congresses - are received with attention and respect.

13. Please provide evidence that your approach describes and displays a coherent strategy to understanding human problems, and an explicit relation between methods of treatment/intervention and results.

According to the concepts of Bioenergetic Analysis psychic problems subject to psychotherapeutic treatment are caused by a failing self-regulation within the organism itself or in its contact to the biological and social environment. The energy model describes this phenomenon as blockades of different intensity in the energetic system in various body areas. Such disturbances can be due to body factors, traumatic experiences, patterns of behaviour, roles and experiences, to norm and self-image. The increasing flexibility of these patterns allows a more adequate behaviour, sensation and development. As these patterns developed their idiosyncrasy on different levels, such as the cognitive, emotional or organic ones, the solution as well can be found by different approaches. Verbal expressions, emotions, body movements can alternate, mix or become especially important. It is often the approach a particular client can tolerate that determines the therapist's choice.

In Bioenergetic Analysis the body approach is especially important, because it often allows a direct access to neuronal structures where a lot of relevant patterns are stored, above all those from an early developmental period (Lewis 1986, 1998).

Psychotherapy will have a lasting effect in proportion to the degree in which the client's change finds expression not only in his behaviour and awareness, but also in his body. (Lowen 1980, 1981, Mahr 1994, 2001, Koemeda 2002 B)

14. Please provide evidence that your approach has theories of normal and problematic human behaviour which are explicitly related to effective methods of diagnosis/assessment and treatment/intervention.

The concept of character structures with their compensatory function and their personality shaping aspect is opposed to an unambiguous classification of normal and problematic behaviour. What proved to be useful and normal for a long time in a person's behaviour, can turn out to be a nuisance in changed circumstances when the person develops new needs and has to face new demands.

In his therapy the client has to become aware of this discrepancy and to notice that he attempts to achieve his goals by means of habitual but inappropriate measures. Clarifying the traumatic situation helps very much in this process for it shows how different are the conditions of life between his history and the actual situation.

Bodywork can both help the client to relive the traumatic situation and strengthen his self-confidence by increasing his aliveness and improving the perception of his own body.

The degree of autonomy reached by the client (which means acting according to his interests and protecting himself against threats endangering himself and his environment) becomes the yardstick for efficient therapy. (Lowen 1980, 1981, Schwieger 1998, Koemeda 2002 A, Mahr 2001 A)

15. Please provide evidence that your approach has investigative procedures which are defined well enough to indicate possibilities of research.

15.1.Theoretical inquiries: Differentiation and elaboration of basic concepts, their specific applications and possible links to other scientific disciplines

The literature of Wilhelm Reich (e.g. 1933; 1942; 1948; 1961), founding father and predecessor of most contemporary body-psychotherapies, and that of Alexander Lowen (e.g. 1958; 1967; 1975), founder of Bioenergetic Analysis (BA) and initiator of the International Institute of Bioenergetic Analysis (IIBA) provided us with concepts which continuously stimulate reflecting, criticism and further discussions and inquiries into their validity and possibility of practical applications. Thus many members of the IIBA have felt a need or desire to express their views or practical experiences in form of publications. Such publications can be found first of all in journals published by local societies such as the "Forum der Bioenergetischen Analyse" (German Societies), or "Körper und Seele" (Swiss Society) and the equivalents "Le Corps et L'Ame" or "Anima e Corpo" (French and Italian Societies respectively). For an international audience we have the following platforms available: the IIBA journal "Bioenergetic Analysis", "Energy and Character", the "USA Body Psychotherapy Journal", not to mention the possibility of publishing in established journals of

various psychological or psychiatric societies. To list all would go beyond the scope of this chapter.

Each volume of “Körper und Seele” of the Swiss Society for Bioenergetic Analysis and Therapy (SGBAT) is devoted to a specific theme, one of these volumes defining basic concepts of Bioenergetic Analysis (Ed. Koemeda-Lutz 2002). Here an attempt is made to link BA to current concepts and results of psychological, neurobiological, sociological, linguistic and medical theory and research.

Recent book publications have explored extended realms for specific applications of Bioenergetic Analysis (Ventling 2001; 2002).

Several authors have tried to connect neurobiological findings to body-psychotherapeutic concepts and techniques (Resneck-Sannes 2003; Klopstech 2004; in press; Lewis 2004; Koemeda-Lutz and Steinmann 2004; Koemeda-Lutz 2004; in press; Ventling 2004). Finally attempts to connect the bioenergetic concept of energy to concepts and models of modern physics have been undertaken by Mahr (1997; 2001), Carle (2002) and Madert (2004).

During the past few years theoretical (elaboration of basic concepts) and clinical inquiries (single case studies – see separate list; development of new techniques, e.g. Lowen & Lowen 1977; Dietrich & Pechtl 1990) were supplemented by quantitative empirical studies.

15.2. Quantitative Research Studies.

15.2.1. Evaluation of the effectiveness of Bioenergetic Analysis

Four studies have been carried out to evaluate the effectiveness of Bioenergetic Analytic Therapy. Three of these studies were retrospective (Gudat 1997; 2002; Ventling and Gerhard 2000; Bertschi et al. 2003), one is prospective (Koemeda-Lutz et al. 2003 a + b). All studies yielded clearly positive results. Presently the Swiss Charta for Psychotherapy (currently comprising 22 institutes teaching psychotherapy and representing different methods) is planning another prospective study, naturalistic in its design for evaluating outpatient psychotherapies in Switzerland, comparing different methods of treatment. Bioenergetic therapists will participate in this study.

In addition to this general question of overall effectiveness of the method, several areas have been investigated in more detail:

15.2.2. Evidence for “Character Styles” – a psychosomatically based model of personality

Quantitative empirical studies have been carried out by Fehr (1998 a; 2000), inquiring into the validity of the bioenergetic theory of character structures. Fehr (1998 b) developed a questionnaire (Bioenergetische Prozessanalyse BPA) in order to assess characterological profiles of patients and how they change during therapy. By factor analytical computations Fehr (2000) explored the interrelatedness between bioenergetic characterological and other well established personality dimensions, namely the Big Five (Goldberg 1990).

15.2.3. Investigating the Validity of “Body Reading” as a Diagnostic Tool

Body reading has been an important diagnostic tool in Bioenergetic Analysis (Lowen 1958; Bäurle 1988; Kurtz & Prester 1976; Rank 1994; Sollmann 1999). One study was carried out to test whether trained therapists can reliably gain valid information from their patients’ bodily appearance. They can (Koemeda-Lutz and Peter 2001; 2002). A second study was designed to derive a screening skid for “Body Reading” from therapists’ verbal accounts of what criteria they base their judgments on (Koemeda-Lutz et al. 2003 c).

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