How Do I Listen?
Applying Body Psychotherapy Principles and Skills in Manual and Movement Therapy

Sol Petersen

Abstract: This article explores the potential of applying body psychotherapy principles and skills in the context of manual and movement therapies. It discusses aspects of listening, presence and a clear contract as the foundation for this person-centered ‘Learning Team’ approach. The article asks the question ‘What are the factors for therapeutic success?’ and considers loving presence, integration, mindfulness, the capacity for self-reflection, the relationship between healing and learning, and other aspects of the therapeutic process. It concludes the embodiment of the therapist is a key factor in the development of a cooperative partnership that promotes the client’s potential for self-healing.

How Do I Listen?

How
Do I
Listen to others?
As if everyone were my Master
Speaking to me
His
Cherished
Last words.
--Hafiz (Ladinsky, 1999, p.99)

She has the dark eyes and the strong face of a woman for whom life has not always been easy. Daniella (not her real name) is lying on her back on a massage table. Her eyes closed, she takes a deep, measured breath and lets out a quiet satisfied sound as she exhales.

My fingers are reaching deeply into the soft tissue around her injured elbow joint, and she is firmly but easily pushing back towards me, like a cat slowly stretching. I soften my hand a little more and through my fingers I can sense her breathing. Around the arm bones I can feel where the connective tissues are free and supple, and the areas of toughness and restriction. As she moves, I use my touch to try to coax more space, fluidity and aliveness from the held tissues. It feels like a dance.

She stretches again. The depth and direction of resistance is quite precise and lets her explore her movement and the power in her arm. If my pressure is too strong, it will stop her; if it is too light, she will get no satisfaction from her movement. Although her eyes are closed, I can see she is very awake and very present -- and so am I.

She starts to press a little harder. Her whole body is becoming involved. Daniella smiles and, eyes still closed, says, “This feels really good.” She presses her head back into the table and slowly rolls it in my direction. She opens her eyes and says, “Can I push harder against you?” I say, “Certainly, just not too fast.”

She breathes deeply, braces her whole body and pushes her arm back slowly but harder, trembling slightly, clenching her jaw, and letting out a low growling sound.

It’s like the rumbling of a volcano. My intentions of freeing tissue and movement have quickly changed to creating a safe satisfying pressure for Daniella to interact with. I am also getting curious about her thoughts or feelings but want...
to leave her the chance to deepen into her sensory experience. She is an athlete and I am very aware of her strength. Sitting on my stool, I am glad it isn’t on wheels, and lean a little more towards her as I brace myself against the floor and the table. She pushes harder and I ask her, “Is there someone or something that you are pushing against?”

She grits her teeth and I think I will be flung across the room. I just manage to stay with her as she lashes out with her whole body and lets out a high-pitched scream.

I glance around the room to the very alert faces of the students and practitioners in the Structural Integration training class. If they had been sleepy before in this demonstration, they are definitely awake and interested now.

I hold Daniella’s arm and shoulder as her whole body softens and she curls up into uncontrollable sobbing. Then, she yells out, “Bastard, bastard, bastard!” I wait as she calms and I ask her if she wants to speak about what had just happened. A story unravels of physical abuse from her father and also later as a political prisoner. I was sitting on the same side of her as her father always sat at the dining room table. As she returns to herself, she is shocked by the depth of the “NO!” that she still needed to say to him, so many years later. Her physical strength had always helped her to feel in control and to recover from the abuse.

She sits up, wipes the tears from her eyes and smiles. A powerful, Mediterranean woman at home in her own emotions, she says, “That was very strong – thanks, I needed that.”

The students who had been riveted and held by the experience start to breathe more easily again. As she sits there, I ask Daniella if we can change gears and return to working with the movement and function in her arm and shoulder girdle. She stretches her arm out and says, “Actually I’d love to. My elbow and my arm feel fantastic now.”

The discoveries, the discharge, the satisfying extension and relief, the consequent understanding and meaning Daniella felt in this session and in the series, were largely a function of both of us listening, paying attention, being curious, following natural and spontaneous body movement, waiting, taking time and being interested, not only in the physical resolution and development but in the intimate connection between body, mind, heart and spirit. The container of the Structural Integration Ten Series was a significant safe place for the releasing and transformation of powerful issues held deeply in the body (Petersen, 2004, p.99). Daniella later reported she felt that it took her six months to a year to feel that she had fully integrated the range of structural, coordinative and psychological shifts that had happened for her in the course of the work we did together.

**Sol Petersen**

**Simple Foundations for the Almost Impossible Task of Just Paying Attention**

“The miracle is not to walk on water. The miracle is to walk on the green earth, dwelling deeply in the present moment and feeling truly alive.”(Hanh, 1996, p. 28)

Establishing positive contact and a clear contract, following the flow of the client’s experience, loving presence and mindfulness are basic foundations for the development of the healing relationship.

**I. Positive Contact and a Clear Contract - a Basis for a Person-Centered Approach**

It is significant the event in Daniella’s story took place in the third of our ten sessions together. We had by this time established a foundation in two important areas – contact, or the quality of the relationship, and the clarity of the client/therapist contract.

I had pointed out that awareness, and an attitude of self-care were essential parts of maintaining the embodiment goals for the Ten Series – and that emotional responses, while not a goal, were often an integral part of any significant physical changes. Despite the fact that her sessions were being observed by fifteen students, Daniella felt safe and quite confident. This was a result of both her sense of self and her response to the attention that the class and I gave to creating a good working/healing environment. She knew what she wanted from the sessions, had travelled a considerable distance and dedicated a lot of time and finances for her experience. In the first session we clarified the goals and intentions that each of us had, established clarity around our verbal and touch communication and communications between each of us and the class. Our initial rapport felt easy and natural. Certainly this is not always the case with clients.

After Daniella’s strong emotional response it was important for me to demonstrate to the students that it is possible to move fluidly and gracefully from one facet of the work to another; that is, from being present and interested in a very strong emotional and physical response to returning the focus to a simple range of motion exploration, and soft tissue manipulation in a different area. An integrative session spans so many dynamics, from soft tissue and joint rebalancing, exercise and movement exploration, being aware of perceptual and emotional responses, to investigating the attitudes and embodied awareness that will enable a client to carry on this work for his or her self. A person-centered approach means listening to all levels in both the client and yourself.
II  Following the Flow of Experience During a Session

Figure 1 charts the flow of therapist interventions and client experiences in a session. In fact, it could represent either the flow of an entire session or just one segment of a session. It begins with the therapist and client meeting in ordinary consciousness. The therapist, through empathy, wisdom and skillful dialogue, contact, touch and movement (as appropriate) guides the client in the present moment to deeper awareness states of learning and experience. In these states, the therapist maintains a safe working space and manages the explorations and new experiences. The therapist allows him/herself to be touched personally by the work but has the responsibility to “hold” the safe, healing environment for the client to explore their bodymind consciousness. The client is guided to new understanding and, on returning to ordinary consciousness, is assisted to integrate the new experiences. The therapist also passes through different states and activities throughout the session.

In the portion of Daniella’s session described above, she moved through the U-shaped flow of the chart [Fig. 1 or Fig.1A-1], from ordinary consciousness to being present in her body with more awareness, to light physical and sympathetic arousal, to stronger activation and physical and emotional expressions, to calming and relaxation, parasympathetic response, insights, joy, relief and a return to ordinary consciousness and bodywork with light awareness. In the rest of that particular session she remained wakeful and interactive through the integrative stage but did not return to those deeper states.

Different Flows for Different Folks. Every session has a different flow, rhythm and feel. Every client has a different style, speed and capacity for learning and healing. Some clients may not deepen at all through a session or for a number of sessions [fig.1A-4], and yet may have strong related experiences at home. Some engage immediately and others will not deepen until there is very little time left in the session, which can be challenging [fig.1A-5]. Some only ever dip in lightly [fig.1A-2]. Each client is moving and responding at his or her own speed to the container and the work that is being co-created [Fig 1A].
As therapists, we can never absolutely know what the needs of a client are and therefore need to become comfortable and even enjoy a state that will arise regularly in our sessions -- the state of not knowing -- of “mmm, if I am honest, I realize that I don’t really know what should happen next. I am going to go slow and see how I / we are led.” True listening brings a humility and an understanding that there are too many parameters for any therapist to be absolutely confident of exactly what the next right step is -- and from the wisdom of that insecurity, each therapist does the best they can.

III  Loving Presence, Mindfulness and the Healing Relationship

There was a story from the psychotherapist, Carl Jung, of his self-doubt and self-criticism concerning a client that he felt he had failed. He felt he had never been able to reach or help him. One day the client left for a distant country, never to return. Years later, Jung received a letter from the client. It was a letter expressing overwhelming gratitude. The client knew Jung had felt frustrated in the therapy and wanted to reassure him that he had gone through many changes and now felt whole and healed, and attributed much of it to the care, support and understanding he felt from his esteemed therapist.

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Ron Kurtz, the founder of Hakomi Experiential Psychology, calls this caring therapeutic state loving presence – a compassionate state of aliveness and embodiment.

Hakomi Psychotherapy is a process of discovering and studying mindbody patterns and core beliefs as they are experienced, and developing alternative options and satisfying choices. Based on the principles of Mindfulness, Non-Violence, Unity, Organicity and BodyMind Holism,
Hakomi is a synthesis of modern body-centred approaches with its own unique form and artistry. Hakomi uses mindful awareness to shed light on our organizing beliefs and sees the body as the door to understanding character.

According to Kurtz, through loving presence we become the right context for learning and healing to unfold. Loving presence leads us beyond the usual limits of our character, yet there are many factors that can distract us from this state; our automatic reactions and counter-transference, need for results or experiences for the client to validate our own adequacy, our own constant inner talk and plans and our need to know or be certain.

Ron Kurtz says (Kurtz, 1997),

The way I have conceived of and talked about the healing relationship was always in terms of method and technique. It was about creating safety by going slow, by adjusting to the unconscious needs of the client. It was about getting the cooperation of the client’s unconscious by letting it know that I was following the flow of the experience and that I understood and accepted what was going on for the client. All that was done as a method, as therapeutic tasks. There was not much said about what state of mind a therapist would have to be in to do those tasks. And so I looked upon it as an activity, as something we do, not something we are.

Now I realize that all these actions can also be the natural outcome of the state of mind of the therapist. Instead of something we are doing deliberately in a planned way, our actions can flow freely and easily from our state of mind. I call this loving presence. If we are calm, if we lower our internal noise, we become more sensitive. Being present with high sensitivity, we are very aware of what the other is experiencing. When we put our personal agendas aside, we see through the surface manifestations of the other person, to the strength and suffering at the core. Touching that core, we are moved to compassion. From compassion, right action emerges. Our state of mind begins this process and is in turn sustained by it.

For me therapy is no longer mostly about tools and theories. I’m still trying to be a good therapist. I still have to know and use my therapist’s craft. But all of that is not enough. I need to be a loving presence, to come from my heart and spirit. In my opinion, this loving intimate connection with each other is the ground and purpose of our living, and the source of the healing that we do.

As a Structural Integration practitioner and teacher I have always been fascinated by the at times surprising transformational nature of the work. In 1989 I experienced my first Hakomi workshop and became excited by the possibilities of applying the method in movement and manual therapy.

I went to visit Ron Kurtz in Oregon, USA, and began many years of training in the method and even more years of discovering how to apply it to my own evolving work. The skills and perspectives I learned have been invaluable in inspiring me to a holistic and person-centred approach to bodymind integration. Most of the charts in this article are based on my study of the Hakomi method.

The Surprising Power of Mindful Touch and Movement

When Balancing the Soft Tissues Isn’t Enough

Structural Integration and many other schools of manual therapy have a concept that if you just get the tissues, joints and coordination balanced, that is to say, if you get the body balanced, the innate self-healing mechanism of the body will be activated. Ida Rolf (Rolf & Feitis, 1978, p.31) said, “When the body gets working appropriately, the force of gravity can flow through, then spontaneously the body heals itself.”

Joan (not her real name) had received the Structural Integration Ten Series one year before and was a model for an Advanced Three Series practitioner training class. Joan had a lovely sense of balance, uprightness and groundedness. In fact at first glance one might say “what kind of work will we do here?” The way she held her shoulders interested me. The arms were slightly internally rotated. The shoulder blades were slightly elevated and protracted. It looked a bit protective.

I asked her if I could use some light touch and movement awareness to explore the shoulder posture with her. She said certainly. I put my hands gently on both arms to support the posture as it was and then took the weight so that she could stand without holding her shoulders in any way. She felt her breath coming more easily and was more aware of her shoulders coming “in”. I asked her if we could explore taking the shoulders more forward or back. I very softly turned her shoulders a few millimeters inward. She said “Oh, please stop there.” Although the movement was imperceptible from the outside, it was obviously enormous to her. Joan began to speak about her relationship with her partner, the father of her children, what still wasn’t working for her and what she needed to do to feel okay.

When she felt complete exploring her awareness, sensations, thoughts and emotions, we returned to her original posture and I asked if we could try a new position. Still supporting the arms and shoulders, I slowly externally rotated them to a more open position. Open was just how she felt. Maybe even too open. But it was good. She felt here like she was claiming herself, her own body, her life, her future. It was exciting and it was scary.

We went on to assess the shoulder and arm function. There was definitely no soft tissue restriction to hold the shoulders in this position. We could have worked forever on the soft tissues to “adjust this problem” and never achieved the de-
sired outcome. We turned our focus to strengthening a new balance in the arm-shoulder-chest function, and she found this very empowering.

Over our three sessions together the theme of claiming herself and returning to herself became clearer and stronger. She became increasingly aware of how her shoulder position was an unconscious reflection of deeper meaning. Six months later, she left her partner and claimed her new life.

When we touch the core patterns (core beliefs, core postures, core structures, core movements) in consciousness, it is possible to change those deep structures. Old patterns can lose their power. New patterns can be established and strengthened. In order for transformational work to stick we must learn to stay present and curious, to study our experience. This takes practice.

In the therapeutic container, you may use the mindful state for only a minute or less to deepen, access and bring core material to consciousness. When core material is conscious, we can begin to learn about significant missing experiences, hidden hurts and important meanings.

**Listening Touch**

*Beautiful Hands*
*This is the kind of Friend*
*You are-
Without making me realize*
*My soul’s anguished history,*
*You slip into my house at night,*
*And while I am sleeping,*
*You silently carry off*
*All my suffering and sordid past*
*In Your Beautiful Hands*

--Hafiz (Ladinsky, 1996, p. 26)

**The Language of the Tissue**

In Judith Aston’s approach to soft tissue therapy she emphasizes a fine level of awareness in touch that meets and matches the tissue and doesn’t force but follows. “All tissues have a language for us to discover but, to really listen, our touch must be three-dimensional, not linear. When we follow the spiraling grain of the tissue it feels smooth and it affects the whole fascial area” (Aston, 1994). If we don’t learn to listen to the tissue we may override resistance and cause pain to the client.

Franklyn Sills, in his book *Craniosacral Biodynamics*, speaks eloquently about the possibilities and the role of listening touch in manual therapy.

Truth is found in the depths of our listening. Perceptional skills are the ground of this work. Presence, contact, grounding, and the quality of space you hold are essential for success. Listen, don’t look. Listening expands, looking narrows. The purpose of this work is not to release resistance or to process issues, but to liberate the health inherent within the resistance or the disturbance.

Healing occurs in this eternal present. Attention and intention are of key importance in the therapeutic relationship. Listen, listen, listen. Let images come, but don’t narrow the looking down. Have a spacious sense of listening (spaciousness and patience). What is the patient’s system saying to you? Can you allow the inherent treatment plan to arise in its own time? The treatment plan lies hidden within the very fulcrum organizing the disturbance within the system. If you are silent and maintain a wide field of listening, the treatment plan will begin to express itself. Let your hands be buoyant and go beyond the bounds of palpation to truly listen. Listen with a caring interest and space, not with need.

Listen for expressions of health. It is relatively easy to palpate resistance and disorder. But can you sense the Health that centers it all? This is your challenge (Sills, 2001, pp. 431-434).

**Listening with your Eyes**

‘Looking’ of course does have its place in body therapy. Blind therapists show that they can listen and see from another place, but for most bodyworkers visual bodyreading is a significant assessment tool. In fact, as soon as the therapist sees the client, the bodyreading begins. Ida Rolf explains how we listen with our eyes. “For me, he [the client] is not something different. When I am Rolfing, he and I form one for at least the time that I am working. Look and feel. A guy walks in displaying all kinds of things that talk to you (Rolf & Feitis, 1978, p. 96).”

**The Role of Mindfulness in the Therapeutic Process**

What is mindfulness? Varela, Thomson and Rosch in *Embodied Mind* say, “... the foundation of mindfulness practice is the cultivation of awareness through a relaxed focusing on the arising of every moment of experience, whether during sitting practice periods or in daily life (Varela, Thomson, & Rosch, 1991, p. 103).”

Listening in the therapeutic process reflects our capacity to listen in the moment to moment experiences of our daily life and to become aware of the constant stream of our automatic reactions.

**The Ringing of the Telephone Guides Me to my own True Self**

It is very difficult to escape the sound of the telephone these days; on a bus, in the street or even on a remote island, mobile phones have become ubiquitous. Next time you hear...
the ringing of the telephone, yours or another’s, try this little awareness exercise from Thich Nhat Hanh. “Breathe in and out consciously, smile to yourself, and recite this verse: Listen, listen. This wonderful sound brings me back to my true self (Hanh, 1991, p. 37).” Allow the phone to ring two or three times, deepening your breathing and inner smile. This little exercise over the years has transformed for me the incessant and at times annoying sound of the ringing telephones into a sweet reminder of the possibility of continually returning home.

As Thich Nhat Hanh says, “Find joy and peace in every step, in every moment. If you cannot find joy or peace in these very moments of sitting, then the future itself will only flow by as a river flows by, you will not be able to hold it back — you will be incapable of living in the future when it has become the present (Hanh, 1991, p. 37).”

**What Works in Therapy? It’s All About Relationship**

**Four Dimensions in an Integrative approach**

Greg Johanson, co-author of *Grace Unfolding*, once described in a lecture four aspects of effective therapy as: 1. care; 2. counsel or advice; 3. therapy; and 4. transpersonal. In bodywork both our warm presence and our touch can be seen as care. We may advise our clients to follow a regime of exercise, or avoid certain activities, or to drink water to hydrate their system. Healing and therapeutic transformation happen in sessions — even with colleagues of mine who say “I am a bodyworker — I don’t do therapy.” If as therapist, you have an intention to create or co-create an environment for healing, you can be sure that at least some of your clients will be touched on both psychological and spiritual levels . . . even if you are not aware of it.

**Four Factors to Create Therapeutic Success**

In *The Heart and Soul of Change: What Works in Therapy*, (Hubble, Miller, & Duncan, 1999) the authors list the following as the four factors research has found common to improvement in clients. Although this research pertains to psychological modalities, we, as movement and body therapists, can learn from the inherent implications.

1. **Client Factors** — the largest factor at forty per cent of therapeutic success relates specifically to what the client brings to the relationship. This includes their life circumstances that aid in recovery — client strengths and supportive elements in the environment such as a new job, supportive friends.

   I would highlight the importance of the therapist’s capacity to encourage the development of responsibility and motivation, and suggest that anything we can do that will engage the client in the importance of their taking responsibility for their own self-care and circumstances, self-healing and self-development will be a major contribution to this largest factor and to the overall success of whatever therapeutic modality. This factor should bring a sense of humility to the therapist, as well as recognition of how much happens in a client’s life that the therapist is unaware of and unable to influence.

2. **Relationship and the Person of the Therapist** — the second factor, at thirty percent of success, correlates to the unique impact of the character and energy, the wisdom, warmth and empathy of the therapist, and relational factors such as mutual affirmation.

   It’s important for us to realize that our state of heartmind as therapist is a primary factor in our therapeutic success. Quite simply, who we are may be the greatest intervention in our therapy, and the part of the therapeutic process that we are most capable of changing.

3. **Hope, Expectancy and Placebo** — the third factor, at fifteen per cent, recognizes that in successful therapies both client and therapist believe in the restorative power of the treatment and have positive outcome expectations.

   Again, as in factors one and two, we see that the attitudes of client and therapist may be the most significant element in successful therapy.

4. **Model and Technique Factors** — on a par with expectancy, at fifteen percent, we have the different techniques in a psychotherapeutic approach. Each has their own attention to method and commonly prepare clients to take action to help themselves.

   It may be surprising to many that technique only rates as high a factor as hope and expectancy. Certainly, it should capture our attention that eighty five percent of client improvement was attributed to factors relating to the relationship. I hope this research is enough to make us pause and consider the questions: How do I use my modality successfully? Moreover, in the field of movement and manual therapies, how much of the success is actually attributable to the technique?

**The Cooperative Therapeutic Relationship**

We live in the information age. New and often contradictory health research is instantly available on the internet to both professionals and their clients or patients. This information availability, as well as ethical concerns of informed choice, propels practitioners and potential clients alike into a need for clearer and more cooperative contractual relationships.
The Learning Team
and the Magical Rescuer

I believe that the optimal practitioner/client relationship is a cooperative partnership, or what I refer to as the ‘Learning Team’. This is a significant shift from the historical relationship of the ‘Magical Rescuer’. Whether it has been the shaman, the doctor or the psychologist, the relationship has tended to be a “top-down” one where the practitioner has the expertise, the knowledge, and the position of power to decide the terms of the relationship. On the other hand, the patient is often vulnerable, embarrassed, uncertain or anxious, and may or may not understand their problem or their options. A tragic example of this was a woman who presented with back pain. “I’ll do whatever you think is best,” is what she told the doctor. Her doctor referred her to a specialist, who recommended surgery. Due to a medical mishap in the surgery she was paralyzed from the waist down and it is uncertain if surgery would have benefited her back pain anyway.

The ‘Learning Team’ approach is based on fundamental principles that recognize human beings as unique, creative, self-organizing, self-regulating and self-healing systems, inter-dependent cells in a universal energy field. The therapist, guided by principles, not techniques, and recognizing the bodymindheartspirit nature of the human being, is touched by what Godard calls kinesthetic compassion, and becomes a facilitator who manages a cooperative learning and healing partnership to attain the client’s goals. This of course implies that to achieve the best results, the partnership requires careful listening for both partners and a motivated and engaged client. This introduces a potential problem. We would not have a Magical Rescuer unless there was someone to rescue and our cultural conditioning has encouraged our to become just that – a Helpless Supplicant – a person who gives up their responsibility for themselves and puts their blind faith in the magical rescuer to take care of them.

In the previous example, since the situation was not life threatening, the doctor and patient could have taken more time to investigate the whole range of traditional and complementary options and current research. The empowered client could then have made a conscious, informed choice with her expert partner, rather than giving the responsibility away.

The Learning Team – A New Synergy for Healing and Learning

The Magical Rescuer model has evolved over many centuries (the “bedside manner” of the family doctor is a legend). Due to the possibilities of modern wisdom, skillful techniques, and the enormous therapeutic impact of hope and placebo, it can contribute to a successful outcome. However, due to the power differential, the Magical Rescuer model is too open to the possibility of abuse. Clearly it is dependent for its success on the wisdom and moral integrity of the practitioner.

I believe that the Learning Team concept offers a new educational model for the healing relationship. Of course, there are practitioners who naturally implement this approach. It is important to remember that the Learning Team still requires the practitioner to be a skillful technician with a balanced perspective, and the warmth and empathy to give confidence to the client.

For this cooperative therapeutic model to work there needs to be a shift in the consciousness of individuals as well as in societal attitudes. Clients and patients need to take more responsibility and therapists need to get off their perches, and work as team members. Each partner needs to listen to the other with respect.

When the two participants learn to act as partners on a mission, they will appreciate both the evidence-based research available, and the emerging evidence of their work together. As they explore the mystery of the healing nature of the human being, there is a sense of unity of purpose that cuts the roots of blame. The synergy created opens up new possibilities in the individual’s search for meaning and healing. In a cooperative therapeutic model it is the responsibility of the therapist to guide the client into the role of self-care and self-responsibility.

A Challenge for Therapists –
On Becoming a Whole Human Being

Chogyam Trungpa, in an article entitled “Becoming a Full Human Being” said, “the task for health professionals in general, and of psychotherapists in particular, is to become full human beings and to inspire full human-beingness in other people who feel starved about their lives (Trungpa, 1983).” What a profound, simple and complex notion with so many implications. In most of our therapeutic modalities integration is seen as an important stage in the healing process, and becoming a well-integrated individual a place to work towards. The Chambers Dictionary defines integration as “the process of unifying or making whole,” and in terms of psychology “the formation of a unified personality.” What is it that we are trying to unify? It may sound a little trite but the basic elements we have are body, mind, heart and spirit [for those who are uncomfortable with spirit, I would suggest the mystery or the energy].

I think many people are drawn to the healing professions out of a desire to experience an approach to life that is more whole, heart-centred and accepting of the body, touch and whatever spirituality means to us. This holistic intention naturally leads a therapist to a more person-centred and integrative approach. In manual and movement therapies, at times the person and the meaning can easily be forgotten as we aim to straighten out the body, reduce pain or retrain.
movement. We have to remember the therapist cannot ‘fix’ the client but by working together in an integrated way, paying attention to mind, body, heart and spirit, we can facilitate healing.

Ron Kurtz, put it well when he said, “We fix a washing machine, but one human being cannot fix another – we can only help or hinder the person’s process. The client’s growth, unfolding and healing are all within. The therapist can only facilitate what is already there (Kurtz, 1990, p. 160).”

To work in any aspect of the field of healing and health is to labour in the world of mystery. We may observe that connective tissues are stress-responsive and that bones heal, but we don’t understand how. We are complex self-healing, self-organizing and self-regulatory systems – cells of life itself. As a therapist we have many roles – from manager of our accounts to cleaner of the therapy room, from secretary to someone who delicately manipulates the myofasciae and skeleton, from teacher and a listening ear to a magician whose very presence and touch seems to facilitate a healing process in the client.

Figure 2 suggests three primary roles for the person-centred therapist – the Skillful Technician, the Holistic Practitioner and a Resonant Presence. Each role is required at different times and in different amounts for the practitioner to be able to respond appropriately.

I think it is easy for us as bodyworkers to be seduced by the skilled technician and the Magical Rescuer roles, and from that position to not sense the whole person of the client, or fulfill all of our potential as a facilitator. In the IASI 2004 Yearbook, Schleip discusses this process as a shift from hero technician to humble midwife: “Usually, it works better to assume the more humble role of a facilitator, who is curious and interested in learning and whose personality is more comfortable to deal with uncertainty principles. In the context of a bodywork session, practitioner and client then work together as a ‘learning team. (Schleip, 2004, p. 80)”

The Skillful Technician has a perceptive awareness of patterns, systems and diagnostic possibilities and can create effective procedures and moments of magic. The Skillful Technician who is not person-centred may become detached or arrogant and see a client as a ‘knee’ or ‘back’ problem; may focus on symptoms rather than the whole person, or...
hold a narrow view. Beware the syndrome, ‘if the only tool you have is a hammer, every problem looks like a nail’.

The Holistic Practitioner holds a wide perception of the healing process and looks beyond symptoms to core causes, creates a Learning Team, a cooperative therapeutic alliance and works with the person to achieve the best result. If the Holistic Practitioner is not person-centred, he or she may become arrogant or hold an extreme view that doesn’t take the client fully into consideration. In the more active roles of Skillful Technician or Holistic Practitioner the practitioner may be more likely to think that they are doing the healing.

The practitioner as Resonant Presence holds a soft, awake, heartfelt and spacious attention, learns to become comfortable with ‘not knowing’ and waiting for inspiration. He or she is able to listen and respond to the being and energetic level of the system, and to use their own being to sense or resonate with the client. Healing is more about being than doing. The Resonant Practitioner who is not person-centred could get lost in their own experience and perspective and lose meaningful connection with the client.

I was presenting a Communications Skills class to a group of osteopaths some years ago. I asked each of them to speak a little about their rapport and relationship with clients, their successes and challenges. They were clearly unused to, and uncomfortable with, this sort of sharing in a group situation. There was a theme that was summed up by a male osteopath in his fifties, “What works best for me, is to tell jokes or stories that keep the client distracted while I work, so they don’t really notice what I am doing.”

This style may be effective in certain situations but doesn’t encourage any input from the person receiving the manipulation and the lack of a flow of information and responses can lead to situations where practitioners override pain or the client’s feeling of safety. At its worst, the therapist as unconscious storyteller is dumping baggage and may even try to extract support or comfort from the client. To tell stories simply to fill the space while one re-adjusts the soft tissues and bony relationships, maintains the Magical Rescuer role. It does not realize the enormous potential for healing in manual therapy.

Although specific bony or soft tissue adjustments can create great relief or connection, most often to empower a client out of chronic physical challenges requires great awareness. It could require changes in many areas and on many levels. This may include changes to daily activities and habits through to movement and coordination training and nutritional changes. Changes may include as well, new ways to respond emotionally and perceptually from daily habits and activities to the emotional, meaning, nutritional, perceptual, coordination and motion training. It is working in these areas that we have the richest potential to empower our clients. It is not necessary to be a psychotherapist to be a good listener or to help our clients to be more aware.

We should remember that the mature therapist has many roles, and dances gracefully from one role to another without becoming identified or thinking that they do the healing. Each role has its own unique importance.

The Body Brain is Always Listening

I was fascinated by an experience I had in 1989 in a Hakomi Psychotherapy training course. The group was divided into two parts. One half formed a line shoulder to shoulder and stood with their eyes closed. Individuals from the other half then stood silently in front of a partner about a metre away. The eyes shut partner’s instructions were to blink, that is to look at the partner with a quick open/close of the eyes, like the body was taking a snapshot. Then, with eyes still closed, to notice what the inner response was and then share it with the partner.

In my blink was a tall, strong-looking woman, yet when I absorbed my impression, all I could see was a small fragile girl. When I shared this, the woman was shocked, deeply touched and was tearful, saying ‘but that’s not me anymore’. Another person in the line-up said that they were aware of who was in front of them before they opened their eyes. The teacher said that with a fast blink the cognitive part of our brain function doesn’t have time to engage. We were more likely to access right brain, intuitive, body impressions than when we look at someone, and think about the visual information. That experience gave a new listening dimension to my own body-reading practice, and to how I taught students. It is clear that there is a lot in the blink of an eye.

In the book Blink by Malcolm Gladwell, he describes an experiment that highlights how our bodybrain, our gut feeling, may understand well before our cognitive brain.

Imagine that I were to ask you to play a very simple gambling game. In front of you are four decks of cards – two of them red and the other two blue. Each card in those four decks either wins you a sum of money or costs you some money, and your job is to turn over cards from any of the decks, one at a time, in such a way that maximizes your winnings. What you don’t know at the beginning, however, is that the red decks are a minefield. The rewards are high, but when you lose on the red card, you lose a lot. Actually, you can only win by taking cards from the blue decks, which offer a nice steady diet of $50 payouts and modest penalties. The question is how long will it take you to figure this out?

A group of scientists at the University of Iowa did this experiment a few years ago, and what they found is that after we’ve turned over about 50 cards, most of us start to develop a hunch about what’s going on. We
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**A Journey of Awakening**

**The Potential in the Process of Integrative Movement and Manual Therapy**

The path of a facilitator of the healing or learning process is a continual journey of awakening. The two page chart, Figure 3, has evolved over the last five years. It is the product of many sleepless nights and long, inspiring conversations with a few of my very patient colleagues as we considered the possibilities of a truly integrative approach. The chart describes a series of stages for therapists and clients and the work they do together as an integrated team.

The chart presents the Dedicated Therapist passing through stages of understanding and embodiment in order to have the capacity to create the Healing Space and the Learning Team. The therapist manages the Healing Process from Assessment and Planning to Application of Methods and Completion. The client enters the relationship seeking change or relief from suffering and in turn must develop and grow in order to participate fully in the Learning Team. The words healing and learning are at times used almost interchangeably. Healing is a kind of learning in the system or parts of the system, and optimal learning is also functionally healing.

The successful outcome of the Healing Process is an experience of embodiment and satisfaction, a fully embodied awareness, for both the therapist and client. Each are traveling the spiral path of the Cycle of Effective and Healthy Action [Figure5.]

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Don't know why we prefer the blue decks, but we're pretty sure at that point they are a better bet. After turning over about eighty cards, most of us have figured out the game and can explain exactly why the first two decks are such a bad idea. That much is straightforward. We have some experiences. We think them through. We develop a theory. And then finally we put two and two together. That's the way learning works.

But the Iowa scientists did something else, and this is where the strange part of the experiment begins. They hooked each gambler up to a machine that measured the activity of the sweat glands below the skin in the palms of their hands. Like most of our sweat glands, those in our palms respond to stress as well as temperature - which is why we get clammy hands when we are nervous. What the Iowa scientists found is that the gamblers started generating stress responses to the red decks by the tenth card, forty cards before they were able to say that they had a hunch about what was wrong with those two decks. More important, right around the time their palms started sweating, their behavior began to change as well. They started favoring the blue cards and taking fewer and fewer cards from the red decks. In other words, the gamblers figured the game out before they realized they had figured the game out: they began making the necessary adjustments long before they were consciously aware of what adjustments they were supposed to be making (Gladwell, 2005, p. 8)

So, our body brain really does know how to listen to many levels and this may account for what we call 'gut feelings' and much of intuition. Even the simple act of unconsciously massaging our neck or head when we have a headache usually happens before we think of it.
The Potential in the Process of Integrative Movement and Manual Therapy

The **Dedicated Therapist** approaches the healing process.

The **Heart** awakens with a genuine experience of heartfelt gratitude for this precious life and the potential for awakening and healing. This natural, overflowing, generous spirit is deeply touched by the suffering of others, experiences a unity in spirit and is drawn to study to become a channel for healing.

The **Mind** awakens and the heartfelt mind has the insight to see the necessity of healing and desires to serve selflessly. The spirit of the Bodhisattva is awakened with a powerful intention to midwife the healing and awakening of the radiant human spirit.

The **Body** awakens. Powerful physical sensations touch the heart, mind and spirit. The awakened body expresses instinct, primal movement, the unconscious, our uninhibited emotions, the pain and ecstasy of our heart, mind and spirit.

The **Spirit** awakens. Following the silence beyond movement and stillness we discover that we are not only a cell in the game but we are the game and begin the dance from our personal experience of spirit to a unity beyond experience.

**Universal Principles**

- We are one living field of energy
- Aliveness expresses itself as movement
- Human aliveness expresses universal wisdom as:
  - Our bodybeing is a creative, self-regulating, self-healing system
  - Energy flows in patterns which is expressed in our bodybeing
  - Our posture and habitual movements reflect culture, attitudes, emotions and body use
  - The body is shapable
  - Touch is an essential nutrition
  - Loving presence is healing
  - Specific factors promote optimal function, healing and transformation
  - Awareness reveals the inseparability of body, mind, heart and spirit

The **Motivated Client** approaches the healing process seeking change and relief from suffering.

The client may be seeking healing or change from physical, mental, emotional pain or more self awareness, self knowledge, wholeness, embodiment, energy and vitality.

The client may be disconnected from their embodied potential, may be lost – numb – may not feel the pain.

The client is vulnerable and may be anxious or fearful, even if it is not apparent to therapist. The client carries the impressions, conditioning and wounds of: family, authority, childhood, learning, education, success, failure, sexuality, relations, injuries and trauma.

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**THE DEDICATED THERAPIST** approaches the healing process

The Heart, Mind, Body and Spirit awaken

The therapist is motivated to become a channel for healing

Therapist studies to embody Universal Principles

**THE LEARNING TEAM**

Based on positive contact and rapport and the development of a cooperative therapeutic alliance

This team approach creates safety for the cooperation of the unconscious, and a mutually responsible contract for the therapeutic process with clear goals and timeframes.

The embodied therapist discovers with the motivated client and is not the source of all knowledge. Teaching from a YES, the process is alive and wakeful, without forcing.

Meet and match, rapport, safety, clear boundaries, awareness of transference issues.

Establish a team approach to the process.

Motivated client recognises the possibility of healing and relief

Motivates client to seek relief from suffering

Physical, Mental and Emotional suffering

**THE MOTIVATED CLIENT** approaches the healing process

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Figure 3
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**THE EMBODIED THERAPIST**
Dedication to the healing process creates a humble, inspired, embodied therapist in awe of the spirit of healing

**THE HEALING PROCESS**
Completion of a Healing/Learning Cycle
Is the sense of more integration in body, mind, heart and spirit
- Release restriction and pain, align, co-ordinate and strengthen a new balance in body, heart, mind and spirit – dare to transform yourself!
- The client develops physical, energetic and emotional resilience and the tools to enhance self-healing
- The client and therapist are aware that each healing/learning cycle is one more step on the journey of life
- Alignment is a multidimensional consideration and an evolving theme for all levels of our being – there is no ‘alignment retirement’

**Application of Methods & Techniques**
Therapist facilitates the client to be aware and active in the therapy process and to take this into daily life through self-care by:
- Recognising that awareness of core postural, movement and attitudinal patterns and transformation of un-supportive habitual patterns is an essential task
- Using touch consciously to bring awareness, to release restricted tissue and bone and to guide movement
- Awakening and enhancing movement and coordination to develop core integrity and aliveness – motion, flexibility and strength training
- Exploring meaning through perceptual, emotional and mental understanding of experiences and challenges
- Accepting emotional and energetic responses (shaking, temperature changes, etc) as natural in body and movement transformation
- Assisting the client to new levels of life experience by establishing resources and creating achievable challenges

**Interpretation and Planning**
Therapist develops in conjunction with the client a treatment and education programme to:
- Bring awareness to core patterns and beliefs
- Recognise that the healing process is a cycle with ups and downs
- Facilitate new and more functional life patterns

**Assessment and Discovery**
Therapist assesses in conjunction with the client for resources and core limiting patterns in:
- Tissue and structure – dimension and alignment
- Movement coordination patterns
- Character patterns, mental, emotional attitudes, perception

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This page and the previous one form the entire process chart portraying the potential in the art of integrative manual and movement therapy.
In the Hakomi Method, Ron Kurtz refers to the Sensitivity Cycle (Kurtz, 1990, p. 166-75) as a way of understanding the stages of life experiences. Each experience has its own unique rhythm and pace. We begin with insight and awareness, a gathering of information about what we are doing and how we will do it. With that knowledge we respond, we act to fulfill our goal. When we respond effectively, we feel satisfaction and allow ourselves to be nourished by our success. Satisfaction allows us to feel complete around the insight or need that we were initially responding to. We may feel happy or sad. We rest and restore ourselves for other journeys. As the need is satisfied, we relax our efforts, and this allows us to be more aware and more sensitive. And so the cycle begins again at a more sensitive level, from clarity, to action, to satisfaction, to relaxation.

**The Stages of an Experience**
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**The Sensitivity Cycle**

- **Clarity** → **Insight Barrier** → **Action** → **Nourishment Barrier** → **Satisfaction** → **Completion Barrier** → **Relaxation** → **Response Barrier** → **Clarity**

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**Sometimes We Get Stuck – Barriers on the Cycle**

Sometimes we just can’t see or understand what is in front of our eyes – we don’t seem to be able to get clear. Love can keep someone in an abusive relationship and become a barrier to insight. At other times we see only too clearly but get stuck and either don’t respond or do so ineffectively and are challenged at the response barrier. At times we are very effective, but remain dissatisfied, and never experience the out breath of satisfaction. We have a barrier to receiving nourishment. A deep satisfaction allows us to let go, complete and enjoy, yet at times it seems that we will do almost anything to avoid or abort the relaxation phase. We may feel anxious and fling ourselves straight back into action. The barriers are outlined in Figure 4.
Each of us will have tendencies and habits that get us stuck at certain barriers. Understanding this helps us to appreciate the complexity of our character, how those tendencies affect our relations with others and the relevance to healing and education.

**The Cycle of Effective and Healthy Action**

Any experience is just one step along the path of our life. Figure 5 shows the cycle as a spiral of increasing sensitivity and effectiveness. We are aroused with insight and action, and the satisfaction and completion phase brings a relaxation response to our physiology. Insight and clarity lead to intuition and wisdom. Coping and effective action lead to confidence and mastery. Satisfaction leads to fulfillment, joy and ecstasy. Relaxation leads to integration, surrender and inner peace. The entire spiral completes itself in fully embodied awareness. This spiral could be seen as the journey that therapist and client share.

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**Figure 5**

Insight about new possibilities and core limiting patterns. Hope and motivation arise. There is a tendency towards an arousal response (sympathetic nervous system dominance) in the insight and effective action phases.

Fully embodied awareness leads to unity, inner peace, vulnerability and surrender to the "Tao" of the body. A sense of completion and ease, new perceptions, trusting the process, the possibility of integration.

Relaxation: stillness, spaciousness.

Satisfaction: nourishment, the taste of freedom and possibilities.

Effective action: managing, coping.

Increasing competence and confidence leads to embodied self-expression.

Embodied mastery leads to intuition and wisdom.

New opportunities and new meaning increase motivation.

Fully embodied awareness leads to unity, inner peace, vulnerability and surrender to the "Tao" of the body. A sense of completion and ease, new perceptions, trusting the process, the possibility of integration.
George Sweet in *The Advantage of Being Useless, The Tao and the Counselor* (Sweet, 1989) says:

> What I need to know most of all is; for this client, What Is? To observe, to be aware of What Is, without giving it any slant or interpretation. To recognize without judgement, condemnation, justification, agreement, disagreement. To follow What Is, calls for a still mind, a pliable heart, a tranquil energy, a Body in Tao. Because What Is is constantly changing and moving.

To develop as a therapist is to grow and develop as a mature human being. In order to be a guide for others, we must also learn to be a guide for our self. At times for those in the ‘helping others’ profession this may be one of our greatest challenges. Here are a few suggestions which may help develop your self-awareness.

**Work on Your Self – Self-study and Self-care**

1) Develop the quality of your personhood – your empathy, acceptance, compassion and wisdom.

2) Develop habits of self-care, self-study, self-healing. Travel through the entire cycle of effective and healthy action. Rest. Let your embodied awareness be an inspiration to others.

3) Learn to recognize your own core limiting and core expansive patterns.

4) Do some volunteer or service work.

5) Learn something about body wisdom from animals.

6) Practice mindful awareness. Use awareness arts such as Vipassana, Tai Ji and Yoga to support you. Become a presence for yourself and your being will allow others to stop and deepen.

**Professional Development**

At a recent movement training I attended, one of the participants shared with us her definition of humility: “Humility means that you are teachable”. As a professional, am I really willing to be open and look from a new place? Am I really willing to learn?

1) Contemplate and write about your personal vision of healing and integration.

2) Study psychotherapeutic skills to develop the person-centred nature of the work.

3) Get supervision that covers both technical and relational skills.

4) Practice self-reflection and self-supervision.

**How Can I Assist the Healing Process?**

**Self-Reflection and Self-Supervision**

Many years ago a manual therapist colleague mentioned that he would, with his clients’ permission, record their sessions to deepen his understanding of his use of language during sessions. Later he would listen to the tape and analyze the quality and the appropriateness of his conversation throughout the treatment. It was a valuable experience for him, and made me think more deeply about my own dialogue. As a Structural Integration trainer many of the sessions I have demonstrated for students have been recorded on video. Observing myself, as well as getting feedback from the students, has been incredibly instructive, and at times surprising and humbling. This process has helped me to become more aware and sensitive to many levels of unconscious patterns. This experience prompted me to add a requirement into the Mana Integrative Therapies training programme, that Structural Integration students submit critiqued videos of themselves working as a way of deepening their insight.

We also offer the following Session Self-Evaluation questions during the training to develop self-reflective skills. You may find these useful in your own practice.

- How do I think the client felt? – any important experiences?
- How did the client feel?
- Did the client meet their objectives?
- Did the client feel during or after the session?
- How was the quality and pace of my touch?
- Did the session build on the previous work?
- Did I over treat?
- Did I get the techniques on paper or did I feel?
- Did I deeply understand the client’s needs?
- Did I go through the previous work?
- How do I think the client felt? – any important experiences? 
- How was the quality and pace of my touch?
- Did the client meet their objectives?
- Did the client feel during or after the session?
- How was the quality and pace of my touch?
- Did I over treat?
- Did I deeply understand the client’s needs?
- Did I go through the previous work?
- How was the quality and pace of my touch?

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**Sol Petersen**

**Hakomi Forum**
**Sol Petersen**

**Listening to the Wisdom of the Body**
This article has explored many dimensions of the healing relationship as it applies to manual and movement therapies. Yet it is a starting point rather than an end point. It has focused on a mindful approach, on listening, learning and responding to what arises in the container of the treatment process.

Research indicates that the person of the therapist is of primary importance in the success of any therapy and as George Sweet says, “I cannot teach my client more than who I am (Sweet, 1992).”

In order to remain “teachable” these are some reminders that I use in my practice:

- Create good contact and a safe healing container
- Clarify the contract and goals that you are both working towards
- Look for resources that the client already has to build resilience
- Create a Learning Team – promote self-study and self-care
- Bring a quality of wakeful awareness to the session, to sensation, thoughts and emotion
- Humor can be healing and bring insight
- Take care with how you observe clients – How can I create more safety?
- Recognize different paces and styles of learning as well as a character differences
- Touch with respect, elegance and care
- Don’t force
- Learn to listen
- Get curious about your responses and reactions, learn about projection
- Appreciate the power of your words to a client when you are the therapist
- Don’t overload the client with too many experiences or too much information
- Learn to recognize core limiting patterns and core expansive patterns in your and your client
- Be curious about meaning and assist your client in their discovery of meaning
- Learn to recognize and take care of trauma, get advice, and refer
- Know your skills and your limitations
- Develop your loving presence and compassion – we are all travelers on a journey together
- **Remember the body language and the being of the therapist is powerful medicine!**

There is enormous potential for healing in the field of Manual and Movement Therapies. It is possible to be incredibly effective as a skillful technician in the areas of soft tissue and joint re-organisation and movement coaching. But greater healing is possible. When a person-centered practitioner embodies the Learning Team perspective, and brings their skills to bear in the container of loving presence, the ultimate magic of healing can happen.

Everyone is longing for a deeper connection. If we take our time and listen to what’s really there, we can touch the core. It doesn’t need to be difficult.

As a psychologist and yoga therapist on a workshop on Psychotherapeutic Skills for Bodyworkers said, “I learned that when listening becomes effortless, the body and mind return to the wisdom of love and loving.” This is healing for both therapist and practitioner.

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Sweet, George (1989). **The advantage of being useless, the Tao and the counselor.** Palmerston North: The Dunmore Press Ltd.

**Recommended Reading**

Benz, Dyrian & Weiss, Halko (1989). To the core of your experience. Contact Mana Integrative Therapies.
MIT@theradiantbody.com.

1 I would like to thank Ron Kurtz and all my Hakomi trainers for their teaching and inspiration. For enormous patience and input in late night conversations: Robert Schleip, Hubert Godard, Mark Gray and Carrie Tuke. For unending work on chart design: Mark Gray and Sarah Tuke. For the process charts concept: Ron Kurtz. For some welcome fine-tuning to the article, Halko Weiss. Original spiral chart: Marilyn Morgan. For her tireless reading, support and editing: Penelope Carroll. And to all my clients and students who are of course my greatest teachers.

2 Mana Integrative Therapies training materials, contact MIT@theradiantbody.com.