

Amplification – where massage and psychotherapy meet

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In this article I want to write about the interface between biodynamic massage therapy (BMT) used as massage and BMT used as body psychotherapy.

The immediate common boundary that occurs to me is touch. Touch provides a rich source of feedback for the client (1). On a proprioceptive neurophysiological level, it lets the client know where their body is in space, where the edges of their physical boundary are and how it is to receive touch of a certain pressure on one area or another. However, I have also

experienced how touch can grow to become richly evocative of past emotional experiences and can be a link to psychological healing.

In my experience as a therapist, this growth has occurred in relationships with clients over quite a long time. Consequently I have cause to feel that a certain amount of ‘sea change’ is likely to occur over time. Time combined with therapeutic intention seem to me particularly powerful.

So, length of time of therapy and the regularity of sessions will have an impact on process. I think this

impact is one of allowing for coming to a verbal and somatoemotional level in the work where that is appropriate for the client. My

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experience of this taking place is in the context of BMT contracts with clients but where I feel more of a psychotherapeutic process occurs or emerges as a possible direction in a session. This change, or opening, will not always be the result of consistent sessions taken over time. It may be that the work remains at a visceral, vegetative level.

Vegetotherapy, psychotherapy and massage all work towards completing the vasomotoric cycle and self-regulation, all working from secondary to primary personality.

A further interface is therefore the completion of the vasomotoric cycle. In my work with one client over the past four years, sessions have been consistent. For this person, the prospect of any strong emotions rising to consciousness causes her great anxiety. She has panic attacks and tries to ‘control herself’ so that the process of being more expanded and acquiring a sense of inner space that feels good to her in sessions and afterwards is gradually squashed over a period of days following her BMT. It would be inappropriate for me to intend, provoke or stimulate anything other



Image: Damon Hart-Davie/DHD Multimedia Gallery

than on a vegetative level at present. At times I wondered whether the sessions had lost their momentum or invitation towards greater life.

However, the client was surprised (and not too shocked) to find herself bursting into tears on getting home after a session to find a familiar disappointment confronting her. She would usually overlook this regular situation. On reflection, the incident seems to represent a primary impulse being followed and suggests to me that there is an emotional and psychological melting of armour taking place. Without ever being named in the session, psychological needs come to consciousness and through a physical, non-verbal process something psychotherapeutic happened. This example would seem to support the idea that to work on the body is to work on the mind.

I have also experienced how working with the body works with the mind within some brief six session work I did with NHS staff through an occupational health department. Perhaps the effects seemed marked because of the brevity of contact with the client.

One person came for BMT following gynaecological problems and stress at work. She had frequent sore throats and feared that she



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After six sessions, she felt more separate from her mother and no longer had the same level of preoccupation about her throat. My sense is that the nature of the touch in BMT and its ability to support the client in defining him or herself can contribute to the kind of change I have outlined.

At the other end of the scale of my work, I would like to describe some work I did with a client over a

Michaela Boening (2):

For the massage therapist to experience his or her clients' going through moving life changes through the process of weekly massage brought into question the clarity of boundaries between massage therapy and body psychotherapy.

For two or three years, my client accepted all touch as 'okay' or 'nice' with little discrimination of sensation possible. Where the work was in reality 'not okay' I realised he withdrew or dissociated, feeling the touch was 'nice' at the time but later feeling angry or upset at home. He was often hurt because inevitably I was not able to provide the perfect, all-knowing and need-anticipating contact he desired.

Over time it became more possible for him to put this into words and actions. Or, rather, it is over time plus consistency of sessions, boundaries and therapeutic approach.

Through supervision I have received guidance in eliciting greater discrimination from him in BMT sessions. Sometimes my

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could have throat cancer despite negative test results. At 48 she had reached the age at which her mother had died from throat cancer. Very little verbal exchange took place in her BMT sessions, just a fairly brief reporting in and out.

seven year period and where I feel consistency, regularity of sessions and length of time of BMT led to a hazier boundary between massage therapy and psychotherapy. I was interested to read Lorna McNeur's report on a discussion facilitated by

attempts to do this have provoked him, but overall the impact was to deepen the process. I think there was a willingness on both parts to bring into consciousness what had formerly been inexplicit. Along with his consciousness of sensation came greater consciousness of relationship, memories attached to body sensation and the ability to verbalise the effect of memory and sensation in the therapeutic relationship. I believe that all of this made change possible at a conscious psychotherapeutic level.

While I have written of time bringing about such transitions, the therapist's own intention, experiences and breadth are an equal factor. For example, I remember one massage 'practice' during my training where as 'client' the trainee massage therapist was working on my chest and arms. I received contactful touch that neither rejected nor invaded. I said something of this to my 'therapist',

The amount of my self I have available as a therapist has its own influence on my work and what can be achieved. As I hold more layers of depth, texture and nuance in myself, and allow existence to what is shadowy, murky and painful, so it becomes possible for me not solely to catch and 'notice' the updrift to consciousness in the client, but also where it is fitting, to follow and support it into whatever it will become.

whose response was a deep 'holding' glance. I believe that the considerable experience the practice therapist had as an already qualified psychotherapist deepened and made transformative the moment in my 'session'. Somehow the 'therapist' was able to encompass a depth of psychotherapeutic experience though the intention was to work with massage.

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The idea of time in relation to process may also involve the growing solidity of a therapist's familiarity with and belief in what BMT can do. Clover Southwell (4) said:

I believe that how much psychological repercussion the massage has for the client depends tremendously on the attitude of the therapist.

... and in the same article:

If the therapist is utterly convinced of the body process and who you are, and feels that they are using biodynamic massage as a particular means of access to you, then it will have more psychotherapeutic effect.

These elements of conviction – the receptive, deep attitudes of the

therapist's ability to facilitate the emotional process, a process which is moving into the area of psychotherapy.

There are obviously many forms this amplification could take. Following curiosity and asking questions that open out a process that feels (peristaltically, energetically) like it wants to come to a conscious, verbal level is one way of working at the interface between BMT and body psychotherapy.

Staying with a BMT session, I might accept what comes, let it stay at a vegetative level, not challenge the client. At a body psychotherapy level, I feel there's more a process of drawing out and elucidation. A sense of light coming into what has been shadowy and held back.

References

- 1 Ros Carrol (1999) Massage and Psychotherapy; mapping a landscape. AChP Newsletter No.13.
- 2 Rosie Bell and Lorna McNeur (2002) Boundaries between Biodynamic Massage Therapy and Psychotherapy. The Journal of the Association of Holistic Biodynamic Massage Therapists Vol.5, Issue 1.
- 3 Clover Southwell (1996) The Psychotherapeutic Force of Biodynamic Massage, AHBMT Newsletter No.5.
- 4 Bernd Eiden (1999) The Use of Touch in Psychotherapy. The Journal of the Association of Holistic Biodynamic Massage Therapists Vol.2, Issue 1.

therapist – are not always an explicit force in the therapeutic relationship, though they may be implicitly, intrinsically active. Some more explicitly active elements can bring touch – the 'interface' – more to a body psychotherapeutic way of working and fall under the umbrella term 'amplification'.

Bernd Eiden (5), writing of the capacity of touch to reduce pain, bring about biochemical changes in the body, soothe or nurture the recipient, says:

Some of these touching methods can facilitate a somatoemotional experience amplified by the