

Zero Balancing

Therapy without talking
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Anxiety, Depression, PTSD & Yoga

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Ayurvedic Tradition

*Find out about the world's oldest
healing system*
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Peter Edge

Reclaiming The Body

“Body Awareness not only anchors you in the present moment, it also strengthens the immune system and the body’s ability to heal itself”

(Eckhart Tolle - A New Earth, 2005, p 53)

An important assumption in body psychotherapy is that the more embodied we are the closer we are to our natural state of healthiness. So what does it mean to be embodied? Have you ever spent a full day walking or cycling? Maybe you climbed a mountain and reached the limits of your physical stamina. You return home at the day’s end and sink into a hot bath or a comfortable chair...ahhhhh, and you experience the satisfying ache of your whole body which somehow feels heavier and more palpable than usual. In such moments the activity of the mind seems to impinge less and there’s freedom to just enjoy the experience of living in a body.

“Embodiment is about having the direct experience of being in a body, its sensations, feelings, pleasures and pains. It is not the same as having thoughts about our body. We might spend a great deal of time thinking about our bodies, but without leaving our heads”

(Reginald Ray - Touching Enlightenment, 2008, p 28)

Recent years have seen a growing interest in disciplines that help us to reconnect with the body, e.g. yoga, Tai Chi, Qi Gong and mindfulness meditation. These are of course Eastern practices but there are others. For example I was interested to learn that in Norway physiotherapy has for many decades been seen as an integral part of psychiatry. Today a discipline called psychomotor therapy (which involves massage) is practiced in Norway. In general terms however cultural influences have for a very long time taken us in the

direction of our disembodiment. We live in a hurried age, where seemingly speed is what matters most. Thinking is privileged over feeling and certainly doing is valued far more than being. But all of our hurrying and ‘efficiency’ doesn’t seem to make us very happy. It’s a way of living that keeps us operating at the speed of thought rather than at the speed of feeling, which is considerably slower. With slowing down and inhabiting our body comes more contact with feeling, sensation and emotion. After all, the body holds the feeling. Of course this isn’t necessarily comfortable, especially in the beginning if we’ve been a stranger to ourselves for many years. But healing doesn’t happen without feeling, and it pays us to visit the hurting places. When we do so something remarkable can happen; life can open up in unexpected ways with a new depth and richness. We can be surprised to find that we really are bigger than the space between our ears, and the body can become a place of rest and nourishment.

Body psychotherapy supports embodiment by bringing awareness to thoughts, feelings and sensations as they arise in the moment. It places the highest value on the relationship between client and therapist, with method and technique being secondary. The approach stems from the work of Wilhelm Reich (1897-1957), a medical doctor and psychoanalyst who worked alongside Freud in Vienna. Reich became interested in the relationship between mind and body. He pointed out that in sudden fear we all catch our breath for the moment, and that a child raised in fear has a lifetime of catching its breath, and holding it. In a similar way a child forbidden from crying will suppress its tears by tensing the diaphragm and throat. Modern neuroscience has opened up the possibility of exploring our emotional experience in unprecedented ways. We now ‘know’ through scientific

UP FOR IT? ER, NO ACTUALLY

investigation that thought follows feeling. The brain creates a story to make sense of the feeling. Often our most 'insane' thoughts are attempts to make a legitimate feeling into something meaningful.

"Our rationality, which science from its inception prized so highly, is built on emotion and cannot exist without it."

(Sue Gerhardt - Why Love Matters, 2004, p 5)

So within a culture that is "possessed by thought" (Tolle), it is encouraging to find that more and more people are engaged in the task of reclaiming the body and its feelings, and in the process discovering for themselves that we are so much more than the sum of our thoughts.

by Peter Edge

References

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Peter Edge lives in Norwich and is training as a body psychotherapist in Cambridge.

The associate magazine has been getting a bit racy lately. Men's edition, Women's edition and last month one with you know what all over it. All written by experts. Time for something from the end users point of view, anonymously of course, because this is a subject no one wants to talk about.

To set the scene the subject has serious depression, anxiety and panic attacks but is determined to overcome these and return to 'normality'. He meets a very nice lady, gets on well with her, enjoys her company, long walks, drinks and dinner dates. Things are going well to the point when, after a splendid meal and a rather good bottle of wine, one thing leads to another and both parties are, to coin a phrase, 'up for it.'

Except this is the occasion when the word 'up' disappears from the english language. School dinner custard was stiffer. Trotting out the excuse that this has never happened before, must have been the extra glass of wine, seems to cover it. Further opportunities arise, without the wine, all with the same effect. Now this is an embarrassing problem so what can be done about it? Time for some research.

The problem may be a side effect of anti-depressants, but this is ruled out as I don't take them. It may be a physical problem with the mechanics, such as arterial narrowing or the result of surgery. This is probably not the case as is evident some mornings on waking up. However, since the body woke up ten minutes before the brain, the result is short lived, leading to the conclusion that this is all in the mind. The anxiety causes the problem, this increases the anxiety, vicious circle starts.

So what to do about it? Who do you turn to? Can't exactly stand up in the pub and say 'Excuse me chaps, but...'

First port of call is the GP, who turns to page 1 of Doctoring For Dummies and writes a prescription. Four little yellow pills, not blue ones, at a cost of £45. Not inclined to test them unless there is a guarantee of needing them. The next avenue to explore is the enormous amount of information on the Internet from the NHS and various societies. Most seem to suggest that psychological problems are the likeliest cause and can be treated with various therapies such as CBT. Having done CBT before I've been applying it to this problem.

So how am I getting on? Well the lady in question is still the lady in question. She's very understanding, patient and supportive. Neither of us is in the first flush of youth and we've both done our bit for the survival of the species, so neither of us is actually really that bothered. As she says 'When you're ready, you'll be ready'. It is possible to have a perfectly satisfactory relationship without horizontal gymnastics which has relieved the pressure to perform. And that has led to a gradual improvement. Not enough yet for amorous activities but it's getting there, and the mere fact that things are improving helps to remove the anxiety. In effect the vicious circle has become a kindly one.

Naturally the only people who are aware of my problem are the lady in question and the GP. I don't know anyone else who suffers either and don't ever expect to. If you do suffer, go to your GP, insist on some therapy, and most of all be patient.

by Gargravarr

ZERO BALANCING: THERAPY WITHOUT TALKING?



Joe Church

In the 1970's Dr Fritz Smith, an inspired medical doctor, osteopath, and acupuncturist, combined his understandings of these Eastern and Western traditions with insights he gained from his extensive experience of meditation. Out of this he came up with a hands-on method of healing the body through touch that, to his surprise, also had profound and far-reaching positive effects on the mind.

As a practising Zero Balancer and psychotherapist who is trained in the Person Centred Therapy, a humanistic talking therapy developed by Carl Rogers', I am struck by how Rogers' Person Centred Theory so clearly reflects the principles behind Zero Balancing, and vice versa. Essentially, they both offer the client, in different ways, the 'conditions' for activating and supporting what Rogers called the Actualising Tendency – a person's natural and innate tendency towards healing, growth and well being.

The difference is, whereas Person Centred Therapy works mainly on the level of the conscious mind, Zero Balancing works at the level of the Unconscious. And this is one of the reasons why they compliment each other so well.

In this article I would like to outline how Zero Balancing touch, or 'interface' touch, can be argued to be an embodied version of Rogers' Core Conditions of Empathy, Congruence and Unconditional Positive Regard – qualities that he says are both necessary and sufficient for a therapist to bring to the therapeutic relationship in order to facilitate positive change. I would like to explain how the Zero Balancing practitioner offers the client an embodied, and largely unconscious, experience of being met in this

way, through the medium of touch, and what some of the therapeutic benefits of this can be.

I trained in Zero Balancing fifteen years ago after having experienced it myself. I will never forget my very first session. I arrived feeling anxious, stressed about issues I had been carrying with me for many years, and quite lost to myself. Half an hour later, and no talking, I got up off the couch, and although none of my issues had been resolved, I experienced what I can only describe as peace. I felt a tangible sense of ease and well-being that pervaded my whole mind and body, right to my bones.

In the ensuing days and weeks, although life's challenges continued to cause me acute stress, something of this peaceful experience remained with me, and from it there emerged a renewed confidence and humour that seemed to arise from being rooted in my body and being rather than having anything sorted out in my life. From this new perspective the issues and worries in my mind seemed to have less hold on me. I began to discover my inner resources, make more creative choices, and my life began to change for the better.

In this as yet little known therapy the client lies down, clothed, in a relaxed position. The practitioner places held stretches and gentle but focussed pressure with the fingers, called 'fulcrums', into key areas of the bones and joints, using a particular kind of touch called 'interface' touch.

To touch a person at interface, I have to embody empathy, congruence and unconditional positive regard. Inherent in interface touch is an instinctive awareness of the client's psychological and physical boundaries, and an ability to meet them there without interference or distance. I don't need to know the content or story of the person's experience, but I must sense the person on an essential experiential level, exactly as they are, without imposing my own ideas or agenda.

From this place, I must sense how they would like to be met through touch, both on the level of their physical body, and on the more subtle level of who they are. I do not work this out with my mind. Rather, if I allow my own body to intuit, one might say 'empathise with', exactly where and how the client would like to be touched, in a way that also feels good to me and my body, then the client instinctively knows that it is safe to trust and let go into the experience and the relationship.

With interface touch it is essential that I am absolutely clear where I 'end' and the client 'begins', so that we do not 'blend' and lose our boundary. The result is that the client has an enhanced experience of themselves in relationship and at a clear interface, and as I work I simply bear witness to the client's experience. It is not personal, but rather an essential meeting at the level of instinct and

COMPLEMENTARY AND ALTERNATIVE THERAPIES

being – a deep, honest and very real, or as Rogers might say, 'congruent' meeting, but with no 'content' in the form of talking or conscious communication. It is as if our busy minds have got out of the way and our unconscious bodies are having an instinctive conversation.

As I work I evaluate the clients skeleton with my hands, picking up on where the client is 'holding' pain or history in the tissue. I then touch the person there at interface for a few seconds. Interface, as well as clear boundaries, requires very clear focus and no judgement at all. There is no message conveyed by my touch that the person should let go or change in any way.

Instead I am simply acknowledging what I sense and 'showing' it to the person – shining a clear light on it if you will. The soreness or stuckness or numbness, or whatever it is, gently comes into the person's awareness as they are put in touch with themselves on an instinctual level. The result is that they have a deeper experience of themselves in relationship to another without any judgment whatsoever. I see this equating to an embodied experience of Rogers' Unconditional Positive Regard and Therapeutic Presence.

Being touched in this way allows tension, emotions and other residues of personal history held deep in the body to be let go of, usually without catharsis. Directly releasing 'holding' from the body's energy field in this way can, with regular sessions, help address all manner of personal issues, ranging from every day stress or chronic anxiety to early childhood trauma or a lost spark for life. It also helps with many stress related physical symptoms, such as sleeplessness or tension headaches.

Some people choose to just have Zero Balancing. Others find it beneficial to have talking therapy too. I have noticed in my practice how people who have Zero Balancing along side their talking therapy tend to move more quickly through their issues. Coming from a more embodied place, and more rooted in their being, there is often more perspective and humour with which to engage with the emotional terrain and the issues being tackled.

It has been beyond the scope of this short article to elucidate all the theory and explain exactly how this happens, but I hope that I have at least highlighted some parallels between this mode of bodywork and Person Centred Therapy, and how they complement each other so well.

Joe Church practices in Norwich. For more information go to www.counselling-norwich.co.uk or www.zerobalancing-norwich.co.uk.

In this edition of The Associate we've decided to cover Complimentary and Alternative Medicine (CAMs) which leads us to ask the question, "What exactly are CAMs and are they right for me?" Anyone who has attended our MHFA course will know how passionately Central Norfolk and Norwich Mind advocates using a variety of approaches when managing our mental health and we encourage people to explore all opportunities.

National Mind describes complementary therapy as one that can be used in addition to, or instead of, conventional western medicine. Alternative therapy on the other hand claims to be a complete system, which can be used instead of conventional western medicine. CAMs share a belief in the body's ability to heal itself. Many treatments are non-invasive and they rarely cause the sort of unpleasant or long-lasting side effects associated with medication. The practitioner commits more time to the client than a GP is usually able to do which in itself can be extremely useful.

Many people with mental health problems use CAM and find it useful. It is important to acknowledge though that for some people experiencing distress the promises of a 'cure,' especially if symptoms are particularly difficult, can make them vulnerable. As with western medicine, we can protect ourselves and our recovery by following a few pointers that can ensure we get the best support possible.

- *Choose a qualified practitioner who is a member of a recognised society*
- *Ask about their qualification and experience*
- *Ask about side-effects*
- *Talk to your GP or health advisor to make sure the treatment complements any medication or interventions you may be using*
- *Tell the professionals involved in your care, including your CAM practitioner, about all your treatments and medications*
- *Tell them if you are pregnant, plan to become pregnant or breast-feed*
- *Tell them about your physical health and allergies*
- *Discuss your concerns about treatment and*
- *Seek medical advice if you experience unusual symptoms*

The Complementary and Natural Healthcare Council (CNHC) is a government-sponsored regulator for complementary health care. It has been set up to ensure public protection and acts in the interests of the public. Practitioners register with the CNHC and go onto a public register. GPs are encouraged to recommend CHNC registered practitioners to their patients (www.cnhc.org.uk or www.hpc-uk.org).

The key element to any treatment, western or not, is that you feel the benefits regardless of what you are told by the practitioner; usually 3 -5 session is enough to begin to feel the impact.

Robert Black



Anecdotal evidence is often disregarded due to its unresponsiveness to statistical analysis. There is a tendency to be skeptical of potentially useful activities that mitigate illness if there is no evidence or endorsement from scientific models, but how can we ensure the baby is not thrown out with the bath water? Recently, various complementary and alternative therapies have come under media fire as numerous pieces of western research concluded that any benefits patients experienced were down to the placebo effect. There are those in the world of research however collating findings into a more cohesive body of evidence in an attempt to provide balance to the argument.

Yoga is a particularly good example of a practice that seems to benefit many people but has little western research focused on it. Brought to the west by Hindu monks in the late 19th century, Yoga became popular in the 1980's as a physical system of health exercises and has had numerous healing claims leveled at it. Yoga practices vary from gentle to strenuous and challenging; people choosing the style best suited to their physical ability and personal preference. Hatha yoga, the most common type of yoga practiced in the UK and United States, combines three elements: asanas (poses); breathing practices and deep relaxation or meditation. Many of the studies evaluating yoga's therapeutic benefits have been discredited due to small test groups and poor design however a 2004 analysis found that more recently there is an increasing number of randomized controlled trials — the most rigorous standard for proving efficacy.

From these trials it seems yoga is useful at reducing the impact of exaggerated stress responses and therefore beneficial in the treatment of anxiety and depression. Working to reduce perceived stress and anxiety, yoga appears to modulate stress response systems which decreases physiological arousal. There is also evidence that yoga practices can help to increase heart rate variability, an indicator of the body's ability to respond to stress more flexibly. In 2008, researchers at the University of Utah conducted a study on pain response and found that yoga

practitioners had the highest pain tolerance and lowest pain-related brain activity during the MRI. The study demonstrates techniques like yoga can help manage stress and in turn pain response.

In a German study published in 2005, 24 women who described themselves as "emotionally distressed" took two 90-minute yoga classes a week for three months. The control group maintained normal activities and did not undertake any new regimes during the study period. At the end of three months, women in the yoga group reported improvements in perceived stress, depression, anxiety, energy, fatigue, and well-being. Depression scores improved by 50%, anxiety scores by 30% and overall well-being scores by 65%. Initial complaints of headaches, back pain, and poor sleep quality also resolved much more often in the yoga group than in the control group.

The evidence also suggests that yoga works on maladaptive nervous system arousal which could mean it's a viable complementary treatment for people managing post-traumatic stress disorder (PTSD). One study examined the effects of yoga and a breathing program in disabled Australian Vietnam veterans diagnosed with severe PTSD. The veterans were heavy daily drinkers, and all were taking at least one antidepressant. The five-day course included breathing techniques, yoga asanas, education about stress reduction, and guided meditation. Six weeks after the study began, the yoga and breathing group had scores that dropped from averages of 57 (moderate to severe symptoms) to 42 (mild to moderate). These improvements persisted at a six-month follow-up. The control group, consisting of veterans on a waiting list, showed no improvement. One unexpected benefit seemed to be that yoga is less stigmatizing than traditional psychotherapy.

If you are thinking of trying yoga it is important to work with a qualified practitioner and to listen to your body. Norfolk has a rich supply of practitioners and styles, a simple search online will show classes in your area.

Simon Barker

BREAKING THROUGH THE SILENCE



In this article I outline a few insights into my work with clients with eating disorders, mostly with anorexia, using Voice Movement Therapy. The 'Explore Your Voice' group, which I co-facilitate with my colleague Lilith Perkins, is run in an inpatient clinic for eating disorders. Voice Movement Therapy is offered in the clinic alongside other therapies, including systemic therapy, CBT, creative writing, art therapy and yoga. Patients usually stay a minimum of 6 weeks but their stay is often extended to 12 or 18 weeks.

Working with the resistance

One of the challenging aspects of working with anorexic patients is the resistance they have against what they perceive could threaten their fragile sense of self. Their ritual of self-creation is based on controlling what is coming into their body and into their world, which inevitably impacts on their ability to let go and let their voice out, as their whole sense of self, and body, is so tightly held together. Inviting them to engage creatively with their bodies, to pay attention to their breath, use imagination and, most importantly, their voice, is asking them to let some of their inner guard down.

The most important thing for these clients we realised was that the resistance needs to be voiced, moved, enacted, heard and expressed again and again in many different creative ways. John Rowan (Rowan, 1983) talks about letting the resistance speak and have its day. So in the early stages of the making of the group or when the group reforms and there may be many newcomers, we give a lot of space to the expression of resistance.

We are very aware that the participants were not always in the group by their own choice. We heard how disempowered and confused they felt about being admitted to the clinic in the first place. Having to obey to the rules of the clinic, the regular feeding times and other intensive treatments is a very

challenging experience for the patients. Furthermore on admission to the clinic they had to leave behind their lives for a minimum of 6 weeks and to put on hold their belief that they were 'fine'. We are aware that our group may be perceived by them as another 'feeding' experience, 'the poison' to be digested, invading their space and undermining their already weakened sense of self effectiveness. It became clear that giving participants ownership of the group was important in order to build trust and safety in the group and to promote a culture of permissiveness and acceptance, which would ultimately give rise to expression. Expression of resistance, doubt and confusion was something that balanced the lack of free choice they perceive to have in the clinic and in life in general.



A small example of how we have worked with resistance is by working with movements that spontaneously emerged during a participant's check-in at the beginning of the session. Lilith noticed an expressive gesture of an arm and asked the participant to amplify it. Engaging the imaginations, it looked as if it was throwing something against the wall, with the feeling of frustration and the voice 'I want to get rid of this'. The whole group was invited to join in this movement and add sound to it. Having all identified with this feeling on some level and doing the movement together gave them an experience of shared collective expression, which ultimately felt supportive and empowering to them.

As they begin to find and develop their voice over the weeks they gradually reduce their resistance to the work and their ability to be creative is growing.

To find out more about Norfolk Voice Movement Therapy Centre visit: www.norfolkvmt.co.uk

ASSOCIATE POEM- HELP ME

HELP ME

*Will you be my friend
And guide me on my way
We can share this heavy burden
I will listen to what you say
You are the one who knows me best
Seeing every time I falter
Understanding what I'm going through
The things that need to alter*

*Before and after is how it is
One second of fate tore us apart
It broke us up and tossed us around
Our heads divided but only one heart
Please help me I need you now
I know your there so please don't hide
Lend me your shoulder for just a little while
We can be together side by side*

*It's me and you in it together
After all I am you and you are me
Like it or not there's no other choice
We need each other I hope you see
Without me you have no future
And without me you have no future
And without you I have no past
So let's help each other to get on
Joined again at long last*

*I can remember when I was once you
All those plans I had in my mind
I was just an ordinary person
Then I left you far behind
But did you ever really leave
Perhaps just lurking waiting for my call
Confusion reigns inside my head
Is there two or just one Paul*

*You're the one with all the answers
My life was good when I was you
I need it back enough is enough
Then I will know what to do
To take each problem when it comes along
Not feel the anxiety tugging away
Stepping back for a clearer view
Able to cope every day*

Where am I

I have been struggling to find the real me following a very bad motor cycle accident in 1979. I was left disabled by this, and even more so have found it very hard to express my mental and emotional feelings to others around me. I took to writing poems as this to me was the only way that I felt I could portray my true feelings that were pent up inside me. This poem expresses who I was and who I am at the moment.

Paul

(Paul is working with IAPT therapist Kate Hayes)



Workshop on Confidence and Improving Self Esteem

Dee Bell and Viv Lincoln, two qualified counsellors with complementing yet differing approaches, will run a workshop looking at issues around confidence and self esteem. There will be opportunities to get involved and optional group tasks.

The workshop will explore what it can feel like to lack confidence and the effects this can have in everyday life. It will also develop suggestions on how to build confidence levels and ways to boost self-esteem. You will not be expected to talk in front of everyone and the workshop will be held in an informal style.

Date: 21st May 2013

Location: Norwich City Centre

Time: 7 - 9 pm

Booking Details: please call 01603 496387

THE AYURVEDIC TRADITION - BALANCE FOR WELLBEING



Ayurvedic medicine began in India thousands of years ago as an oral tradition and was recorded more than 5,000 years ago in Sanskrit in four texts. It is considered to be the world's oldest healing system. The term "Ayurveda" combines the Sanskrit words ayur (life) and veda (science or knowledge). Thus, Ayurveda means "the science of life."

The essential philosophy of Ayurveda is 'the art of living wisely', and that means balance. This is nothing new and we all know that balance in our lives is essential, who hasn't heard the phrase 'all things in moderation'? A balanced diet, exercise and relaxation: you've heard it all before, because it's true.

In Ayurveda the idea is to put the three "doshas", or bodily humors, in balance. Each dosha is made up of two of five basic elements: ether (the upper regions of space), air, fire, water, and earth, and has a particular relationship to bodily functions and can be upset for different reasons. Every person has a unique combination of the three doshas, although one dosha is usually prominent. Some people could have two dominant doshas. Doshas are constantly being formed and reformed by food, activity, and bodily processes.

Each dosha has its own physical and psychological characteristics, and if they are out of balance different forms of bodily or mental distress can emerge.



Vata is composed of air and ether and is the energy responsible for movement, circulation, the transport of nervous impulses and prana- the life force. People who are born with high amounts of Vata tend to feel spacey, anxiety-ridden and isolated. They have a hard time managing their energy levels. They are prone to dry skin, constipation, pain, panic attacks, anorexia, addictions, and sciatica among other things when they are out of balance. When

they are in balance, they are creative, clear, spontaneous, funny and always planning a trip somewhere new. Regularity, relaxation, warmth and sleep help to keep vata in balance.



Pitta is composed of fire and water and is the energy responsible for metabolism, the digestive fire, enzyme production and heat. People who are born with high amounts of Pitta tend to feel irritated, jealous, critical, self-critical, competitive, impatient and bitter when they are out of balance.

They are prone to inflammations, skin, liver and eye disorders, heartburn, and sensitive teeth among other things. When they are in balance they are highly intellectual, leaders, brave, teachers and love to be the centre of attention. They manage their energy well.

Kapha is composed of earth and water and is the energy responsible for storage, protection, lubrication, mucus and the production of fats and oils. People who are born with high amounts of Kapha tend to be greedy, apathetic, slow, heavy, and cloudy-headed when they are out of balance they are prone to hypothyroidism, obesity, clogged arteries, oily skin, and diabetes among other things. They tend to hoard and store their energy. When they are in balance they are compassionate, steady, articulate, healthy, sweet, and reliable, and love food, sleep and laughter. Letting go, embracing change and activity as well as avoiding too much routine helps to keep Kapha in balance.

There are many ways to go about balancing your doshas, including specific diets and exercises, as well as some forms or massage.



Ani Barker is a massage therapist specialising in Ayurvedic techniques, working in Norwich.

Please go to www.lizardtherapies.co.uk for more information.