Interview with Dr. Aline LaPierre

BECOMING A SOMATIC PSYCHOTHERAPIST & THE IMPORTANCE OF TOUCH

THE INTERVIEWER: Arabella received her B.A. in Psychology from Stanford University. A Buddhist student and practitioner for thirteen years, Arabella has written a book on Buddhist reform that is in its final editing stages.

ARABELLA: You have studied such a breadth of somatic psychology techniques, approaches or perspectives—Reichian, neuroscientific approaches, acupressure, deep tissue bodywork, movement, etc.. How have you integrated them, and how would you characterize the personal approach to therapy that has evolved for you through your layered exposure to these perspectives?

ALINE: That's not a small question! I have a hundred things I could say on this. I'll start with how I came into this work: the first training I ever took on the body was Reichian, over 25 years ago. At that time, none of the newer, gentler bodywork approaches had really been developed. There was Reichian work and deep tissue work—these approaches followed the psychoanalytic belief that there are defenses and that the job of therapy is to break those defenses down. That's where I started because that's all there was. In contrast, I later discovered Continuum which offered a different approach: "There is no defense to break down, there's just consciousness to bring to the body." The question became how to bring consciousness to the body because when we do, the defenses dissolve—there's no longer a need to break anything down. Breaking down defenses is a war model—attack the citadel, break down the walls! When I discovered Continuum, I was exposed to a life-changing paradigm about how to think about myself and my body. Does that make sense?

ARABELLA: Yeah! Completely! And from that, it led into the newer perspectives as they evolved?

ALINE: As I heard about new perspectives, I would become curious. I'd wonder, "What is this? Why do we need *yet another* form of bodywork?" I kept going until I realized, "My God, there's no end to this. There are so many different techniques!" I finally realized that each technique addressed a different layer of tissue or system in the body: for example, massage addressed the belly of the muscles, acupressure addressed the energy meridians, Neuromuscular Pain Relief addressed the sensors at the joints, Zero Balancing talked about the bones and their crystalline structure, Body-Mind Centering felt the pulse and the life in the tissues and organs. Each approach spoke to different tissues and systems.

ARABELLA: And what have you evolved for yourself today?

ALINE: How I work has become alive in the same way that my body became alive. Each new approach brought the consciousness of a new aspect of my own body and a sense of the profound cooperation between systems. And as that new consciousness became integrated, I found that I had more capacity to read the corresponding vibrations in other people's body. So, how I work evolved naturally as I learned and became more integrated in my own body. Paying attention to the experiences of my body gave me access to understanding how everyone's body holds and remembers experiences. Now, I listen, follow, and trust the wisdom of the body and its visceral knowing—my own and my clients'.

ARABELLA: How do you weave your current perspective—living in your body and thereby gaining access—into your teaching at SBGI?

ALINE: That is the challenge isn't it—how to teach living in one's body. Every year I do it a little bit differently, but I always include a lot of experiential exercises—because for me, the teaching unfolds from experience: through each student's personal experience of their own body. I give experiential exercises that support access to the internal experience of the body, and we talk about it, and see how it informs the theories and the work. We visualize the internal anatomy of the body and the different organs. I find that when we can visualize the internal anatomy of the body, it's much easier to pay attention and be present to those areas in ourselves and in others that need help. I try to create a visual experience of the body to accompany the sensory experience. I like that synergy.

ARABELLA: How does the SBGI environment—in particular—allow you to explore and further your work through teaching?

ALINE: It's the only place available to teach on that level, and to teach that material. I don't know where else, certainly for me, that can happen within an institution. There's no better place I can think of.

ARABELLA: What have you learned from your students at SBGI?

ALINE: Each student brings a distinctive perspective. The somatic field is a developing field and each student contributes to broaden the understanding. I feel that as a teacher I learn as much from the students as they do from me. I find that each student has a depth of accumulated experience they bring to class. It informs their questions and their comments. SBGI is a learning environment on multiple levels for everyone involved. For me, it's a very rich experience because through the student's involvement and curiosity, I discover new aspects of the subject I am teaching.

ARABELLA: Your article on touch—accessible through this newsletter—is wonderful. You discuss the institution, or re-employment, of touch in therapy (see From Felt-Sense to Felt-Self *).

^{*} From Felt-Sense to Felt-Self, Psychologist-Psychoanalyst, Volume XXIII, Fall 2003. >>Read Article

I've had two experiences in adulthood that pertain to the importance of touch that will set the tone for my questions: I studied in Italy, in college. Prior to going overseas, we students were taught that we would experience elements of "culture shock" upon engaging Italian society. I didn't experience any culture shock, but wonderment at how comfortable Italians were with bodies (theirs and others'), and with physical proximity. For instance, a friend might play with another friend's hair—without feeling any romantic interest—while speaking to him/her.

What happened was that I experienced culture shock coming back. Americans stood at such a distance from one another and apologized profusely when they touched one another, as if it were a grave error. I was saddened by the fear of touch I observed; by contrast to Italians, Americans were seemingly detached and unaware of their bodies and their interconnection.

And now the question: How can we effectively address cultural barriers to touch; how do we re-educate ourselves—as a society—to the benefits of touch?

ALINE: That was beautifully spoken!

ARABELLA: Oh, thank you.

ALINE: This last question is exactly the question those who feel that touch is critically important are asking. How can we re-educate ourselves to the benefits of a touch that is caring and conscious? Because, the problem is, some touch is harmful. Not all touch is good. Physical and sexual abuse are disorders of touch. I don't think the way to do it is clear yet. It's in process, and that's what makes working with touch both frustrating and exciting.

Overall, there is a great deal of fear about what touching might mean. There is much confusion about touch and sexuality. As a result, the discussion about touch is still focused on whether *to touch or not to touch*. You saw how, in Italy, that's not such a problem. For them, touching is integral to relating. We're still wondering if we should even open the door to discussing touch and that keeps us on the periphery of the subject. Do we dare really explore what touch is all about? I'm using 'we' as if I knew who 'we' are....I should rather say that this is my impression based on many conversations I've had with psychotherapists and people in the work place.

I want to address the deeper question: When we do open the door to touch, then what happens? So much happens in the body's tissues when they are touched. Our skin is covered with thousands of receptors that feed the experience of touch directly into our nervous system and our brain. That makes touch powerful and it's understandable that we would hesitate to enter that territory without significant education. As therapists, we would never think to say, "You're going to see these clients, but don't look at them! Whatever you do, don't look at them!" But we do say: "Don't touch them! Whatever you do, don't touch

them." Why do we think that being touched is not as important as being seen? Or as being heard? After all touch is the first sense to develop in the womb before all the other senses.

It seems to me that only through embodying ourselves can we reconnect with our sense of touch. When you described the Italian scene of a friend playing with another's hair... I related to what you said because I'm from a French background. In my family, touching meant togetherness, sharing the experience of being in our bodies, but more important, touching each other was pleasurable in a comforting way. Again, I have to be more precise: the *right* kind of touch goes a long way toward letting us know we are loved, cared for, accepted. When we are touched with heart-centered love, we exist! The body thrives on tenderness. Our taboo against touching reflects our disconnection from the body, our levels of dissociation, and the confusion about the appropriate boundaries of healthy sexuality. So much trauma comes through physical contact. Reconnecting with our bodies and with touch is an important way to bring physical tenderness back into our relationships. And often, it's critical to healing trauma. Now, that's a challenge.

ARABELLA: (Laughs) Yeah!

ALINE: "How do we re-educate ourselves?" I'm glad you're asking that question rather than asking legal questions such as: "If you touch, aren't you afraid you are going to be sued?" I've answered that question dozens of times. That question keeps us outside the deeper subject, focused on our fears.

ARABELLA: Now, the second experience. For several years I volunteer-visited a convalescent hospital. I spent time with the elderly and observed how starved they were for caring touch—old age being a time when people commonly revert to memories and feelings of their childhood. It occurred to me that excellent therapy for them would be to be held afloat in a pool; since water is sufficiently buoyant, they might re-experience the joys of their infancy, and have the sense of being cared for by their mothers. I then worried that this practice could raise ethical problems, which—again—made me feel sad.

As a fellow advocate of touch in the client-therapist relationship, I wondered: How do therapists find solutions to the human need for, and benefit from, touch while addressing the ethical issues that can (and do) arise, as well as the potential for touch to cultivate excessive attachment (resulting in inevitable "hurt") in the therapist-client relationship?

ALINE: I think about that question a lot because it's such an enormous issue and there is no quick and easy answer within the therapist-client relationship. Here is a little story that pointed me in a different direction in terms of your question. Some years ago, I was working with a couple who wanted to have a deeper intimacy and didn't know how to do it. I asked this question to each partner: "Do you like how your partner touches you?" And each one said, "No, he/she doesn't touch me the way I want to be touched." Here they were, wanting to deepen their intimacy, and yet they hadn't ever thought that they could learn to enjoy each other's touch. It led me to see that all the problems you just mentioned are

connected to some of the limitations of psychotherapy, and it made me wonder why we aren't teaching families and couples to touch each other in the intimacy of their everyday lives. They're not limited by 50 minute therapy sessions. They have their whole lives to touch each other! I thought that this could bypass much of the problem you mention.

ARABELLA: *Explain how it bypasses the problem.*

ALINE: Teaching families and couples to touch each other bypasses the limits of the therapist-client relationship. At the root of things, people often don't know how to touch each other and how to touch a partner in the specific way that feels good to that person. People come to therapy because they feel disconnected, have either been neglected or abused, and their difficulties often involves some misuse of touch, either through sexual or physical abuse or neglect. Working in therapy with one person at a time may be very healing to that one person, but it still doesn't give that person an important aspect of what he or she is looking for in everyday life: a partner with whom to experience the bonding and nurturing that comes with intimate touch. As therapists, we do a lot of beautiful repair work. In addition, if we could help couples learn to touch, they could take that skill into their relationship, into their families, and feel more comfortable touching their children. I love teaching people how to touch each other. There is a limit to what I can do one-on-one as a therapist, but those limits open up when a couple takes the knowledge of loving touch into their lives, or when a mother takes the knowledge of nurturing touch to her children, or friends take their knowledge of healing touch to each other.

ARABELLA: When, in their histories, clients were abused—sexually, through physical violence, or through neglect of caring touch—how does the therapist provide the safety to initiate contact with them in order to repair the physical neglect, rejection, and/or damage?

ALINE: First, we work with re-establishing ruptured boundaries. This relates to trauma and how it affects the nervous system. When there has been abuse, there has been a violation, a breach, some kind of destruction of the integrity of a person's boundaries. So much of touch happens in the implicit nonverbal realm because touch bypasses language. Actually, touch is its own sensory language. So, a therapist works implicitly, exploring the distant boundary first—having the person look around and see where they feel comfortable looking, where they don't feel comfortable looking. This begins to reveal where the breaches in the boundary are. This kind of information from other senses can then guide the approach to the more proximal breeches at the skin. We can work with positioning oneself at different distances from the person and tracking what kind of responses happen in the felt sense. What happens in the felt sense as we move closer. We can work with the eyes: is the person comfortable being seen, not being seen, closing their eyes in the presence of another? Simply slowly building the capacity to look into another person's eyes can be incredibly powerful. It's slow work because it's work that addresses implicit memories and seeks to help the nervous system reorganize.

ARABELLA: Can you give us an accessible explanation for the term "neuroaffective touch"?

ALINE: I was looking for a term that would focus on what it is that we are touching. We're not just touching the surface of the skin! So what is it that we are touching? There are thousands of sensory receptors in the skin, and these receptors connect directly to the nervous system which is a direct road to the brain. Through the skin, the nervous system give us direct access to the brain. That's why I used the term "neuro"... and the term "affective" because to be touched has a strong emotional impact. I have heard clients say quite often during the touch work: "It's like you're touching my emotions." Nervous system and emotions are intertwined.

ARABELLA: I found your closing line—in the article we've linked to the newsletter—to have immense implications. "...the touch taboo and resulting touch illiteracy limit our psychotherapeutic horizons and rob us of effective, perhaps critical, forms of clinical reparative interventions and interactive couple and caregiver education." Would you respond to your own statement.

ALINE: Well, yes...let me see. What comes to mind is this: we have sight, smell, taste, hearing, and we have touch. So, why is it that touch is perceived to be less important, and more dangerous, than the other senses? Why do we so mistrust it? We most often don't know how to make sense of the information we get from our sense of touch. I think that if we don't develop our sense of touch, both from the receiving and giving sides, we are missing so much in terms of how we relate to each other. It is like not using our ears, or not using our eyes even though they work perfectly well—to my mind, not using our sense of touch is equal to that. We get a tremendous amount of valuable information from touch, but we tend not to pay close attention to that information...except when it comes to sex which we can't ignore. And so, the discussion about touch is skewed by our ignorance of the many dimensions of touching. Particularly missing is the knowledge of the non-sexual nurturing and healing potentials of touch.

ARABELLA: I spent eleven years in Buddhist training with the intention to become monastic—a Buddhist monk. I was alarmed by the degree to which the monks and nuns I knew had become disconnected from their bodies, as though their bodies could not provide a passageway to spiritual experience and/or higher states of consciousness.

I noted two of your statements in response to this issue: a) "From blushing, to goose bumps or hives, the association between mental states and the skin is quite direct." b) "When we 'lose touch' with cutaneous sensations, we become unfamiliar to ourselves. To be numb to touch is to live in a world in which the body feels strangely deadened and endangered in its capacity to interact with its environment." Could you discuss the link you perceive between human touch—sexual and non-sexual—to greater spiritual truths?

ALINE: Oooh! (Laughs). Can I think about this for a minute? Actually, what I need to hear from you is what you mean by 'greater spiritual truths'? I'm not sure I know what that means.

ARABELLA: Well, o.k., I'd be curious as to what that evokes for you. Whatever you think that is.

ALINE: Whatever I think that is. Well, I'm going to keep it on the level of the body.

ARABELLA: Sure.

ALINE: Let's see....(Long pause).

ARABELLA: I'll tell you what, I'm going to help you. I'm going to put in another question, in tandem. I'm skipping one question. In fact, in your chapter in Sex, Love, and Psychology ** you speak of the body's own internal interconnectivity. Might the body not be seen as a representative sample of our larger human—or sentient—interconnectivity, as a representative sample of the larger picture?

ALINE: (Calmly) Yes. Yes. Thank you.

(Both laugh.)

ALINE: You know, I am realizing right now that I rarely have the opportunity to talk about touch on this level. I'm thrilled by the questions you're asking me because usually, the discussion stops at the concern about whether or not to touch and how touching is a slippery slope to horrible transgressions. And so these questions you're asking me about the body, spiritual truth, and relationality feel like being invited into a Garden. It's as if the body had been kicked out of the Garden...and somehow, touch is a way to welcome it back in. Back into our bodies to experience the lost Garden.

From a spiritual perspective, your question connects me to what happens when we look at reality with wonderment...when layers are peeled away and we 'touch' the mystery of nature that we are, and the incredible complexity and beauty of what we are experiencing. I have no words for this! To be present to, and curious about, the body from a place of wonderment. To be open to every sensation. To be curious: "What is this movement that my body is doing?" To be really present to what the body can do, feel, and to the sensory information it gives us—to invite the brain to fully engage. With awe. The deeper we take our attention into the body, the more wondrous it becomes. I see this as a sensory experience of spirituality.

^{**} Touch as the Primary Element of Sensual and Erotic Expression, in Sex, Love, and Psychology: Sexual Health, Vol. I. Psychological Foundations. J. Kuriansky (Series Ed.), M. S. Tepper & A. F. Owens (Vol. Eds.). Westport: Praeger Publishing, 2007. >>Read Excerpt

ARABELLA: My comments and questions that follow pertain to many religious or spiritual groups that value meditation. I've noted that meditators from many traditions—although wanting to foster the highest sense of interconnection of beings—seem unable to entertain simple human love. They often behave with interpersonal disconnection, rather than vast connect. It seems that our vast connection as sentient beings cannot be exclusive of our interpersonal interconnection. Could you discuss the relationship between meditation and touch, in your view or experience?

ALINE: What you just asked brings to mind the relational wounds in the attachment and bonding process. When there is no attachment or bonding—and touch is such an important part of that process—then there is a disembodied flight into the mind. It's a schizoid place that leaves a person is unattached. And then....can I say this...?

ARABELLA: You can say anything!

ALINE: Think about all that we are now learning about the importance of attachment and bonding. To me, many forms of meditation, spirituality, and bodily transcendence offer a way to create meaning in a world devoid of human attachment. Some approaches seem to draw people who have been wounded in their attachment process. We need to feel attached, and when we don't have the sense of being attached to a physical person—we attach to non-physical beliefs, or to physical object rather than to people. I'm not implying that doesn't have value. I'm just saying that touch is an essential component for the embodied experience of bonding to a physical person—bonding comes through the contact of the baby's body to the mother's body—first inside the womb, then belly-to-belly at the breast. All of that is part of, can I say, the spirituality of our physicality!

ARABELLA: Mmm hmmm! I found your comments fascinating, and I'm glad you said what you said, "Can I say this?!" Because I have really thought about these kinds of issues quite a bit. I perceive that there's a need for a reintegration of this mind-focused spirituality with the body-focused spirituality—you know, as though the two were ever separate in the first place! And the hierarchical approach, as though the body is on a lower level and the mind is theoretically on some higher level!

ALINE: Exactly. If we use our attention like a microscope and turn our attention to the internal landscape of our bodies, if we travel into the inner world of sensation and its associative imagery—what being in the body triggers in the brain—then I think we enter spirituality from a different door. I learned this from Continuum and Body-Mind Centering. Going into the micro levels of awareness, into our internal feedback systems, witnessing the body in its microscopic parts—the cells for example—becoming curious about how the intelligence of the cells in the kidney is different from that of the cells in the stomach, different from that of the cells in the heart. My experience is that if we give our cells focused

attention, the brain becomes conscious of incredible information about life. We can become so much more present to our own being, healing, to our own growth...and to each moment.

ARABELLA: Does any of what we've covered speak to the work that is currently closest to your heart?

ALINE: Yes, I think this touched the heart of it. It touches the core of so many issues of intimacy between couples, and relational issues between parents and children. That's what most draws me to this work and why I find it so immediately interesting. Touch is at the center of our sexuality—right at the core of our most intimate moments. This is precisely why it is frightening to many. But independently of sex, there are caring, nurturing, and healing touch intentions that are so very immediate to our experience of connection and closeness. Touch is essential to our feelings of connection with each other, and to our expressiveness in all types of relationship.
