# Finding Light through Darkness Depression and Body Psychotherapy

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## What is depression?

According to the "Essential Guide for Depression" of the American Medical Association, depression is a mental disturbance which damages one's demeanor turning them inadequate and dysfunctional, not letting people conduct their daily lives. Some doctors call it "the common cold of mental disease" for being so widespread on a world scale. Depression may interrupt a person's ability to think, act and feel. It also affects their concentration at work, involvement in family and emotional relationships, as well as the quality of sleep and relaxation, making common life impossible.

Depressive people usually have negative thoughts about themselves, about their lives and their future. The lack of hope makes them paralyzed, stuck and feeling incapable of performing routine duties and responsibilities and makes it difficult to relate to other people. The depressed person visualizes their future in a negative way, using restrictive images. These images hold inside themselves negative, painful and traumatic images of the person's past.

Andrew Solomon believes that depression is love imperfection, a lost sense of vital purpose, a lack of meaning of each enterprise, of each emotion and of life itself. Untreated depression is the major cause of suicide in the USA.

Researchers demonstrated in the USA that one out of ten American adults suffer from depression and estimate that there is one depressed person in every five families.

Why is it that depression turned to be the mental disease of our time? We are living in a confused, overpopulated world, with global economies creating a huge pressure for consumption and for production, completely dependent on technology. The world attitude is fast, materialistic and based on short-term goals. The old paradigms suffered severe changes, while traditional believes and values became fragile, such as: marriage, religion, family, education, etc. In countries with great social, economic and cultural imbalances, depression may become epidemic at the same time as appropriate treatment resources present many shortcomings. This situation creates a legion of persons in constant fear of being excluded from the normal process of life.

### New visions to confront depression

In a congress about "Embryology, Therapy and Society", in The Netherlands on May 2002, Barbara Findeisen, President of the Association for Prenatal and Perinatal Psychology and Health (APPPAH) which pioneered methods to heal the effects of early trauma, began her speech describing the American Society as a plastic society. "Take your child out of plastic" this is the message she tries to pass to the young couples in her country. Babies need warm and touching (tender? physical? skin to skin?) contact from the mother's body. Babies learn how to respond to their environment before, during and after birth.

Biologically and psychologically babies develop survival patterns that later will influence attitudes and behavior. In order to survive these early wounds, defensive responses are imprinted in the psyche, creating stress and dysfunction. The impersonal practice of raising children, which is considered fashionable in our technological society, supports the idea of early interruption of bonding between mother and child. Children are kept away from the mothers' body through bottle-feeding, blankets, clothes, diapers, cradle, infant carriers, playpens and other physical objects. These children may be adapted to live an

isolated life in the urban world, with attachment for material values and objects, but pay the price of living on the edge of depression. The loss of contact between mother and child results in the incapacity of the person to seek real satisfaction of his inner needs. In a 1992 training program for psychotherapists in Japan I found myself in a reality different to the one I was used to. When I first met the Japanese group I asked them how do they live. I was shocked by the fact that everyone in this group of 30 people lived their lives alone, neither having partner nor children. On my way to Japan at a flight from Hong Kong to Narita I sat close to a young Japanese 18 year old who told me his life history and his attempt at suicide. Afterwards this young man tried to contact me by phone, not only in Japan but also in Portugal, where I lived at that time, asking me for a person to whom he could speak. This experience indicates that people are ready to confront their problems if they find out that somebody is ready to listen and who transmits the feeling that they may find a solution to their problems.

There are only few people in our society that have the possibility and are capable of accepting and being themselves. We adopt roles, wear masks and disguise our true selves. We don't believe that our genuine self could be accepted.

How can Body Psychotherapy contribute to the process of healing depression? Reich, in his vegetotherapy, studied character formation in relation to the energetic pulsations of the organism and described the blockage of its pulsation as muscular armor. He influenced new directions of Body Psychotherapy. Since 1933, Reich worked directly on the physical body in order to liberate the muscular armor and restore the energetic flow. He spoke about the unity between body and psyche.

Since emotions are embodied or grounded physically, we have to work with the body in order to diagnose and treat depression. The body of a depressed person can have different shapes, but what the shapes have in common is that in general a depressed person breathes in a superficial way and has difficulties in his/her contact with his/her body and emotions Sometimes a depressed person is hidden under a strong muscular structure, or under an inflated body, or even under a collapsed structure, etc. In Body Psychotherapy we work with breathing, muscular tonus and emotional expression connecting our somatic existence, our psychological experience and searching for our essence. When I work with my clients I look at their physical body and beyond it. I am aware of the intentionality of their movements that can be restored, thereby stimulating new embodiments of their psyche. The human qualities they present and their inner resources are emphasized as a central part of their own healing.

The subject of Depression is a black-hole topic; it's a topic about destruction. We try to be in touch with it and at the same time we want to see the opposite of Depression: what is the healing process.

In order to explain the way I work with depressed clients using Body Psychotherapy I'll present below two case studies:

Case Study 1: Moti was a 60 year old man who came to me because of his depression and loss of enthusiasm. He had also anxiety crisis and impatience with reading, lack of concentration and attention. His symptoms are anguish, difficulty breathing, stomachache, and a closed throat.

Moti lost his hope for getting better after so many attempts with different types of therapy. He looks sad and sloppy, he has dreamy eyes and his skin and body looks devitalized. He works only few hours a day, having a low production at his job, and is very critical about it saying that his work place is neurotic. He is disorganized and always arrives late for his appointments including his psychotherapy session.

For many years he doesn't find pleasure in life. His wife mistreats, disqualifies and humiliates him. Moti's friends are worried about this fact, but he has no reaction against it. Of course the situation also affects the couple's children. The eldest daughter became revolted with the father's passivity, became involved with drugs and is accused by her mother of being like her father for not having a purpose for her life.

Moti sees himself as a destroyed man. In order to survive he depends on fluoxetin, the famous Prozac. He is in depression for so many years he is now addicted to chemicals in order to manage his life.

In order to treat depression we need an integrated participation of mental health

professionals, and also social and familiar support. In the last years I feel more and more the need to work as a team with psychiatrists to diagnose and treat the more complex and severe cases of depression.

Moti is the youngest of his family and has two sisters. When he was young his mother was his teacher at school. She was very tough on him, beating him with a ruler on his legs and arms. He felt his heart heavy as lead. It was full of fear. He wanted to die. His parents fought between themselves and he felt himself guilty (responsible?) and bad about it. His mother suffered from anemia and bleeding. He imagined and desired unconsciously her death. He remembers his childhood home as a place of sorrow. He lived in a small town, where all the children after finishing primary school must move to a bigger town in order to continue their studies. He lived his adolescence years as a "shout of freedom", living far away from his parents in an apartment where he was spoiled by his eldest sisters and the family maid. During those years his mother died and he started to feel quilty for that and also for not saying goodbye to her. In his inner ghosts he needed to hurt himself in order to survive. When he is mistreated he accepts it because he is use to it, in his words "he knows how to act". When his wife treats him well he doesn't know how to react and he becomes anguished. This also happened between us. Since he doesn't support being well treated he always arrived late for his appointment, only enjoying half of the session.

Where do we start to work with this client suffering from depression for so many years? We work with the motor fields: in the depressive person some patterns of movements are missing and we try to find the unused movements. Our state of mind affects the shape of our body, our muscles express our psyche, and our external postures express our deepest feelings. Depression, in particular, tends to fix our body language in rigid body postures. Body Psychotherapy aims to introduce body movement as part of the understanding and treatment of the human being. For instance, screaming, crying deeply, and activation or rotation of the body can be ways of helping to bring people back into suppressed movements and the embodied feelings.

My option was to start the bodywork with activation as an antidote to paralysis. For this purpose I used a song that he told me he used to dance with sticks in his hometown.

This dance gave me the feeling of participating in a kind of martial fight in biblical time. This is an extreme initiatory dance, masculine, yang, active, and an antidote to his paralyzed state.

Moti sung and danced using his legs and voice in a very energized way, remembering the adolescent sensations of a potent young man for whom the young girls fell in love with because he knew how to sing and he was a poet. At this moment he felt happiness through all of his body because he felt alive and excited; from impotent arms and legs to strong and creative legs and arms; free hands available for strong and potent gestures and strong legs for good grounding on the earth and in life.

In Body Psychotherapy we aim at integrating and mobilizing existing resources. In this type of work we do not impose any emotion. These emotions of happiness and hope that Moti felt had been buried inside of himself all these years since his adolescence. He had inside of himself two separate matrix of knowledge: paralysis and activation.

The task of the therapy is to link these two matrixes of knowledge. The act of creation belongs to the client. The therapist is only a facilitator and for that reason his work has to be very careful. We help the client to find his healthy part in order to take care of his wounds. It is an individualistic healing process.

Case study 2: Ana participated in one of my workshops as a client. She was a 42 year old woman that suffered from depression. Something kept pushing her down and didn't let her have a good life. She spoke about a car accident, a serious disease, an emotional and financial crisis, and her impotence in general. While she exposed her problems, she made dancing movements with her arms and I followed her and encouraged her to continue until these movements became a cheerful dance. Here, we can see the dance and happiness as an antidote for her impotence and depression. Her experience converted from shrinking herself around her problems into an extension and openness in the direction of the unknown. During the session, I asked her what was the opposite of

impotence and she answered with the dance movement. In that kind of work, the therapist pays attention to new movements that are unfolding. I felt myself working on the "unconscious of the movement". Ana had inside of herself the happiness and the movement and she only needed a little help to make them unfold. Boadella calls it the "loosest thread of the yarn" (the movement of the arms). We catch it and stimulate it when it begins to unfold. This loosest thread is the easiest part. I didn't want to work with the origins and reasons of her depression as it is more transforming to not only confront the defenses, the character, but work beyond these limitations. We look for a place within the person that life still pulsates and from that point may come the healing. From my experience there is always this place in the person and this gives me hope and motivation to continue my work with depressed people. Body Psychotherapy is only recycling old knowledge. When the Jews were decimated in Ukraine by Cossacks and the people began to loose all hope, a wise man, the Baal Shem Toy, went to the people and said that there are many ways of contacting god, and that you may well serve him and keep hope alive, and this is through dancing and singing. The depressed person is closed within his body and his perception of the world. Rather than becoming preoccupied and focused on the person's obsessions we need to help him to perceive differently, to go beyond his world, to indicate that is possible to break his restrictive, circular vision of life. To do this we should be open to all possible ways of expression: body and language. Body Psychotherapy shall use all the means of communication, allowing the therapist to witness the physical, emotional and mental labyrinths of the patients and to act upon them in order to enable the patient to find their own way out of depression.

In enabling our patients, we could succumb to a sense of immunity from life's challenges as our therapeutic office becomes a sanctuary for those in despair. But we are neither the priest nor the sacrifice, and we know that we don't have a direct link to god. But patients may feel so and sometimes the suffering involved in our work may lead us to believe that we are part of a separate cast. We need to protect ourselves from this feeling, as we know well that the condition of being a therapist is the knowledge that all of us participate and share the suffering and joys of human condition.

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