Working with the Breath in Psychotherapy

Michael Soth

For leading body psychotherapist Michael Soth, the main regulator of the intensity of feeling – for both client and therapist – is the breath. But how much do most of us really know or understand about breathing? And how can we navigate the myriad existing traditions and techniques of breathwork? In preparation for a groundbreaking CPD weekend in May, here he outlines the importance of an integrative approach to working actively with the breath.

The significance of the breath in therapy

How much of the time, when you are with clients, are you having awareness of their breath and their breathing pattern? How much emotional significance do you attach to your clients' breathing, and how relevant do you think it is to their self-regulation and wellbeing? And what about the therapist's own breathing – how much attention are we paying to that?

In your experience and opinion, to what extent does psychotherapy as a discipline recognise breathing as the main regulator of the intensity of feeling, for both client and therapist?

Although the influence of modern neuroscience and interpersonal biology has put affect regulation centre stage in the therapeutic endeavour (both in terms of interactive and auto-regulation, see Schore 2017), the crucial role of breathing in regulating bodymind arousal is significantly underestimated. The 'window of tolerance' can be pictured across a spectrum between panicky overwhelm to vital engagement with life to comfortably numb to dissociated frozenness, then the overall quality of the breathing pattern is the most immediate indicator and manifestation of a person's experience on that spectrum.



Would you know what instructions to give to help your client breather in a way that calms a panic attack? Or to change the breathing pattern of a client in a frozen state in order to vitalise their experience?

If we want to bring the two bodies constituting the therapeutic relationship fully into the consulting room, we need to not only *understand*, but learn to *actively work with* the breath - the client's and our own, and the connection between them - as part of the emotional, psychological and intersubjective embodied encounter. In this learning, we can draw from a wide range of different – and quite contradictory - traditions, both Eastern and Western, many explicitly holistic, some psychological as well as a wide range of complementary therapies and bodymind practices, which have been exploring and using the breath, some of them for several decades, some of them for millennia.

Diverse traditions, contradictory principles, a multitude of techniques

But in our eagerness to validate somatic experience, the inherent differences and contradictions between these traditions can get ignored. We then end up with a smorgasbord of techniques that are all presumed to work towards a common goal, but are actually profoundly contradictory, and end up pulling the process into different directions. The client's bodymind then feels uncontained, confused and fragmented, not sure whether it is coming or going. If you're interested in reading more about the tensions and contradictory principles between the diverse traditions of different kinds of breath work, you can read my detailed article here.

Eastern breathwork traditions

Generally speaking, the Eastern traditions – including yoga, meditation and the martial arts – focus on belly breathing, and mindful centeredness in the 'hara' (the centre of the body, just below the navel). They are therefore oriented towards a calming, unifying, steadying effect. They were never designed to deal with the degree of disembodiment, traumatised dissociation, repressed feelings, and general neurosis of the modern *psyche* and its fragmentation. But as holistic practices affecting not only our body, but also our state of mind, they can have profoundly beneficial and therefore therapeutic effects.

Western breathwork traditions

In contrast, the more recent Western traditions of working with the breath, starting with Reich's vegetotherapy in the 1930's, were focused precisely on addressing disembodiment and repressive 'character armour'. They primarily emphasised catharsis in order to counteract chronic tensions, inhibitions and restrictions of the breath. Many humanistic approaches descend from that origin, or at least pull in the same direction – for example, primal therapy, rebirthing, Grof's holotropic breathing and other cathartic methods. Being focused on losing control, these techniques constellate fears of regression, and have generated both valid concerns and uninformed prejudice.

The unexplored tension between Eastern and Western approaches to the breath ('mind'-ful, calming, centering versus charging, 'mind'-less expressive, cathartic) is pervasive across the body-oriented therapies, but it is not the only contradiction pervading the field of breathwork. All the different traditions, of course, each have their wisdoms and gifts, and these days of course many hybrid forms have developed. They each have their usefulness, but we cannot just arbitrarily mix and match them without switching paradigms in a way which disturbs the 'relational container' and provokes ruptures in the working alliance.

The crucial relational ingredient in breathwork

When a therapist is giving *any* kind of instruction or suggestion, a key question is always: whom does the client experience this intervention as coming from in the transference? So before I deliver *any* kind of intervention – however 'right' I think it is in terms of the client's current bodymind process – I first want to ask: *who* is intervening in relation to *whom*? Or in other words: how is this intervention also being experienced as an enactment?

Having some fantasies and ideas about this helps me understand better the non-verbal feedback I perceive in response to any kind of intervention, and therefore constitutes a crucial ingredient in any kind of embodied-relational breath work.

About Michael Soth

Michael is an integral-relational Body Psychotherapist, trainer and supervisor, living in Oxford, UK. Over the last 34 years he has been teaching on a variety of counselling and therapy training courses, alongside working as Training Director at the Chiron Centre for Body Psychotherapy. Inheriting concepts, values and ways of working from both psychoanalytic and humanistic traditions, he is interested in the therapeutic relationship as a bodymind process between two people who are both wounded and whole.

He trained in the breathwork technique Rebirthing in the early 1980's (before studying psychotherapy), and swapped peer breathing sessions with Nicholas Albery, the founder of the Institute for Social Inventions and author of the book: <u>How to Feel Reborn</u>. Since then he has also experienced Holotropic Breathwork and, of course, breathwork in the Reichian tradition. His first therapist, Rainer Pervoeltz, taught a particular integration of breathwork with Gestalt, based on training with Jack Lee Rosenberg in the US (the author of <u>Body, Self &</u> <u>Soul</u>, for many years one of the main textbooks of the Chiron training). Rainer called his integration 'Charge', and when Rainer went back to Germany in the early 1990's, Michael took over Rainer's 3rd-year module of the training 'Charge in the therapeutic relationship' and taught it until the closure of the Chiron Centre in 2010.

For further information, see the <u>event page</u> on the INTEGRA CPD website. You can read more of Michael's writings at integra-cpd.co.uk, or find him on Facebook and Twitter (INTEGRA_CPD). He is co-editor of the Handbook of Body Psychotherapy and Somatic Psychology, published in 2015.