

HAKOMI INSTITUTE OF EUROPE's ANSWERS TO THE EAP's 15 QUESTIONS ABOUT SCIENTIFIC VALIDATION OF BODY-PSYCHOTHERAPY

The HAKOMI INSTITUTE OF EUROPE's answers to the 15 questions of the EAP about the scientific validation of psychotherapies:

Hakomi as a legitimate & scientifically valid form of Body-Psychotherapy

The European Association for Body-Psychotherapy (EABP) has already made a submission about the scientific validity of Body-Psychotherapy as a mainstream branch of psychotherapy. This has been accepted by the EAP and thus, according to its criteria, Body-Psychotherapy is scientifically validated. Hakomi is a modality within Body-Psychotherapy. The EAP now requires that all modalities within the mainstream also answer the 15 questions to help ensure the scientific validation of that modality. This submission does that.

Question 1. Please provide evidence that your approach has clearly defined areas of enquiry, application, research and practice.

A. Enquiry

The domain of the Hakomi Method is psychotherapy, and within that, body psychotherapy. Within this realm we focus on and enquire about various issues that are in our view involved in making therapeutic transformation possible (4). In the following we mention some of the most important concepts and add examples of techniques of our method.

The kind of healing relationship that creates a field of transformation (3, 4, 6)

Basic attitude of the therapist, i.e.

Mindfulness

Non-violence

Experimental attitude

Empathy

Diagnosis and treatment within the therapeutic relationship (7), i.e.

Transference/countertransference

Systems-view of relationship

Maps of self-organization around barriers/resistance (3, 4), i.e.

Character and barriers

Sensitivity cycle and barriers

Different options at the barriers

Concepts of and techniques for the therapeutic process (2, 3, 4), i.e.

Body/mind interface with the corresponding technique: going for meaning of bodily tensions

Hierarchy of experiences with the corresponding technique: accessing the modalities of experience

Management of consciousness/trances with the corresponding techniques

a) deepening/working with core material

b) working with child state

c) working with strong emotions

Maps of transformation (3, 4)

Dis-identification:

- supporting mindfulness, creating the witness as an ego-function and beyond ego

- dis-identifying/distancing

Depolarisation:

- working with parts of the psyche and enhance the inner dialog and communication

Changing beliefs:

- moving from symptoms to defence mechanisms - to intrapsychical conflicts - to beliefs - to corrective experience (which compares to internalisation of new inner objects)

Maps of Integration (2, 3, 4,)

Anchoring and deepening the corrective experience

Transfer techniques into every day life

B. Application

We work with various types of clients (8):

all types of psychoneurotic and characterneurotical clients,

clients with psychosomatic symptoms,

borderline, traumatised and addictive clients,

psychiatric clients,

clients, who are not mentally ill or in great distress, but wish to enhance life-skills, relationships, communication or psychosomatic functioning.

Our client population also includes children, adolescents, people being released from hospitals, accident and post traumatic stress victims, recovering alcoholic and drug addicts and people with body-image concerns such as eating disorder clients.

C. Research

There is an ongoing scientific discourse over the last 20 years about the Hakomi Method documented in the "Hakomi Forum"(9). In this journal of the Hakomi Institute Hakomi Trainers, body-psychotherapists and founders of other body-psychotherapy methods (i.e. Al Pesso, Eugene Gendlin) published their articles.

We are working on an empirical study about the efficacy of the Hakomi Method (10) in collaboration with the Psychological Institute of the Universities of Tübingen and Heidelberg.

D. Practice

A large part of the Hakomi Method practice takes place with clients in an individual and group setting in a private practice situation. Another large part of practice happens in counselling centres and clinics. In the appendix you can find a list of those institutions in Germany (11).

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Question 2. Please provide evidence that your approach has demonstrated its claim to knowledge and competence within its field tradition of diagnosis/assessment and of treatment/intervention.

The Hakomi Method is taught and presented worldwide in many countries since the end of the seventies. Trainings are being taught all over the United States, in Mexico, Canada, Argentina, Japan, in the South Pacific Area (Australia, New Zealand) and in six European countries(1).

The official curriculum matches the EABP-standards and is taught in a period of three to seven years. In Europe the Hakomi Method has been taught since 1980. In the German speaking area the Institute has trained around 800 persons who are involved in the treatment of psychotherapy patients. In the Appendix you can find examples of the counselling institutions and clinics where some of these people work. A large part of the trainees work in private practices (2,3). Because of ethical and professional reasons there is a productive skepticism in Hakomi Experiential Psychology against the labelling part of diagnostic procedures and their potentially damaging consequences. However, we do diagnose cautiously. Our diagnostic instruments are founded in depth psychology. There is a process oriented perspective of diagnosis as well, and influences from the systemic understanding. Many other body-oriented psychotherapists are also using various techniques of ours, and the Hakomi Method character charts (4,5,6,7)(See also question 9).

In the diagnostic process we refer to:

Anamnestic interviews.

Developmental psychology diagnosis (6,7,8,9).

Body reading (4,10, 11).

Characterological charts (5).

Various identifications in countertransference (12,13,14,15,16).

Process oriented diagnostics (5,6,7).

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- (2) Hakomi Institute of Europe: List of Hakomi Therapists.
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- (14) Karl König: "Gegenübertragungsanalyse". Göttingen, 1993.
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Question 3. Please provide evidence that your approach has a clear and self-consistent theory of the human being, of the therapeutic relationship, and of health and illness.

Hakomi Experiential Psychology has explicitly explained its theory on (a) the human being, on (b) the therapeutic relationship, and (c) on health and illness in various books and articles (2, 3, 4, 5, 7, 9, 14, 17).

(a) The understanding of a human being is expressed by three of the method's founding principles: "Unity", "Organicity", and "Body-Mind Holism"(4, 5). Organicity means that a human being is understood as a self-organizing system (Jantsch, 20) with its own internal agenda and other qualities that living systems show: stability and integrity of borders, selfhealing and selftransforming qualities, etc. Structurally it is described by a scientific formula, "parts into wholes", that was first proposed by A. Koestler (21), and later expanded upon by G. Bateson (22). Today its most sophisticated proponents are K. Wilber (23) and the Santa Fe Institute (Complex Adaptive Systems, CAS) (24, 25). The general model suggests that humans, as well as any other phenomenological unit in the universe, is made of components (Wilber: 'holons' CAS: 'agents'), and are themselves components of larger wholes. The quality of "wholes"; holons or agents, is defined by the quality of internal communication process. This concept blends well with basic structural ideas in depth psychology (Jung, Freud, etc.) and other psychotherapeutic schools (Gestalt, Transactional Analysis, etc.). Therefore the Hakomi understanding of the human being is solidly based in systems approaches as well as in depth psychology.

(b) A larger part of the Hakomi curriculum is focused on establishing and maintaining a very minutely defined relationship with a client (7, 17), which is designed to create safety for the unconscious of the client and will eventually elicit what is called the concept of "cooperation of the unconscious" (16). This relationship is based on certain attitudinal requirements on the side of the therapist ("non-violent", "experimental", "not oriented towards solutions", etc.) (5, 6.), as well as on a set of particular technical skills ("making contact", "tracking", "creating experiments", etc.) (4, 6).

In general, the "Healing Relationship" (5, 7) is understood to be essential in the therapeutic process and for the occurrence of change. The basic components to create a "healing relationship" are itemised in the institute's curriculum (see Appendix) and presented in the didactic process of learning the method. Later they are reviewed in detail via videotape evaluation.

(c) There are no absolute criteria for health in the Hakomi Method. Each human being is understood to be impaired by "limiting beliefs" to some degree (4, 5). It is the level of suffering, or the commitment to growth, that will push a person to pursue therapy, or to stop doing so. However, there are several dimensions viewed by the Hakomi Method to reflect a person's developments and achievements, among them:

The establishment and sophistication of the capacity to be "mindful" (2, 3, 4, 5), to be able to hold a position of an "internal observer", and eventually, to be able to find and maintain "Self-type states of consciousness"(15).

The degree to which the internal system relaxes polarisations between "parts" and allow the parts to find less "extreme" positions within the whole system, or even in outside relationship systems (5, 10). In a fairly healthy system, communication between parts will flow easily, without mutual repression or polarisations.

The degree to which "limiting beliefs" were able to be updated, expanded, or differentiated (3, 4, 5). Beliefs are defined as central elements of self organisation, mostly unconscious, that are intuitive abstractions from formative experiences and create a subjective vision of the self, the world, and its objects. Here we are looking at the symbolic level of self organisation, a deeply anthropomorphic capacity. Hakomi holds that intuitively held world views are responsible for the quality of experience (4, 5, 16). The less limiting, the less narrowly defined by traumatic or long-lasting repetitive negative experiences beliefs are, the healthier the person will feel.

The degree to which somatic dissociation in non-verbal, or pre-verbal processes of trauma clients is being resolved, and the person can reintegrate split-off experiences as well as the experience of survival (9).

References:

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Question 4. Please provide evidence that your approach has methods specific to the approach which generate developments in the theory of psychotherapy, demonstrate new aspects in the understanding of human nature, and lead to ways of treatment/intervention.

The Hakomi Method enhances the development in the theory of psychotherapy through integration and the use of the recently developed theory of Complex Adaptive Systems (Santa Fé Institute) (See also question 3) (1,2). The principle of "unity" (3, 4), one of the five corner stones of our theoretic structure, best expresses how we replace the old idea of linear causality and separation with a new view of interaction and holism. This principle says that the universe is ultimately a deeply connected network of wholes that do not exist in isolation (5, 6, 7).

This change of viewpoint also leads to the development of new aspects in the understanding of human nature. The Hakomi Method has expanded the depth psychology conception of the human being by a systems view that focuses on examining the self-organisation of a person (8, 9). Instead of looking for deficits or "faults" and trying to eliminate those, that means by not choosing a pathologically oriented approach that has dominated the field of psychotherapy up to now, we prefer to see the person as a unique individual who in his/her respective self-organisation has found the best possible solution to live within the existing conditions according to his/her predisposition. Because we have confidence in the inner authority and the power of self-healing of his/her internal system, a person is supported in his/her natural tendencies to keep developing all of his/her potentials when obstacles are removed (principle of organicity) (3 ,4 ,10 ,11).

This holistic understanding of humans leads to corresponding new methods of treatment and intervention: An integral part of our method is to work with different states of consciousness and the enhancement of mindfulness, holding the view that transformatory factors for self-healing and growth can be found inside the person and not outside (3, 4 ,12 ,13). Accordingly, a more and more solid position of consciousness is being built up, allowing the client to improve the examination of inner experiences in the present moment. In this delicate state of mindfulness experiences are called up that actualize inner conflicts as well as subjective deficit situations in the present. For this reason we also describe the Hakomi Method as a method of evoked experience in mindfulness (3, 4, 13).

Beyond these aspects of the general perception of human nature and its resulting new methods and strategies for intervention, our theoretical and practical approach enhances developments in the theory of psychotherapy because innovation and refinement in the following sectors have been formulated in detail and can be methodically taught :
 The concept of non-violence : This concept outlines an understanding of the healing-process according to taoistic ideas of well conceived growth processes. We often choose to go along with the symptom, which allows the therapeutic process to develop easier and with less resistance. A group of techniques which relate to this concept, allows the therapist to put this alternative understanding directly into practice (3, 4,13, 14).

The model of therapeutic relationship : The Hakomi Method teaches building a precisely fashioned therapeutic relationship, up to details, like a particular choice of words and intonations in the therapeutic communication. This interpretation of relationship aims at creating safety for the unconscious and places the authority of the client's internal system higher than the authority of the therapist (3 ,4 ,14).

The experimental attitude : The Hakomi Method has developed its own way to replace a solution-oriented approach with a purely exploring attitude, while still supporting strategies for relatively fast solutions. A vast array of techniques are designed to support the a curious-experimental attitude of the therapist. The main point of the greater part of the therapy is to explore the organisation of experience in great detail (3, 4 ,13).

States of consciousness : Hakomi therapists learn as one of their main tasks to constantly observe their clients' states of consciousness and to manage them. Entire sets of techniques are designed to help shifts into certain states of consciousness and to utilize them for possible contributions in the healing process. The contribution of the Hakomi

Method lies in the development of very precise concepts regarding states of consciousness and respective managing skills (3, 4, 13).

The Hakomi Method has added important enhancements and sophistication as well as its own unique contributions to these and other aspects of psychotherapy.

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Question 5. Please provide evidence that your approach includes processes of verbal exchange, alongside an awareness of non-verbal sources of information and communication.

The Hakomi Method is explicitly based on verbal as on non-verbal communication, both diagnostically and therapeutically. Building on the work of Reich (12), Lowen (13), Keleman (18), and the whole tradition of somatic character analysis, Hakomi works with the perception and the experience of the physical aspect of defence mechanisms. The non-verbal therefore expresses itself in the diagnostic aspect of the work (1, 2, 6) as well as in its typical interventions, like "active" and "passive" "taking over"(2, 3, 4, 5).

The process of therapy usually deepens around a somatic experience, which is seen as the source of new information initially unconscious. In this way Hakomi uses the nonverbal realm to enter into, and then uncover, unconscious material (2, 3, 4, 5, 6), and defines itself as depth psychology. As in other schools of body-psychotherapy, this process is guided by verbal interactions with a set of specific Hakomi techniques, like, "making contact"(5, 7) or "probes"(3, 4). One of the main emphases of a Hakomi psychotherapeutic process is to actually manoeuvre the interface between experience (non-verbal) and meaning (verbal), where pieces of the emerging somatic experiences are translated into the symbolic realm, which is seen as a uniquely anthropomorphic possibility to create consciousness (3, 4, 5). As expressed in one of the five basic principles of Hakomi Experiential Psychology, namely "Body-Mind Holism"(5), one of the founding assumptions of body-psychotherapy is that therapeutic work should help to heal body-mind dissociation (9) by integrating from both ends.

Typically for Hakomi, transformatory processes are viewed to happen with the help of the symbolic (verbal) realm. Like some modern forms of behaviour modification, we assume, for example, that "beliefs" (behaviour mod: "cognitive schemata", "belief systems") determine the quality of experience and can be modified (4, 5). Therefore, the core therapeutic process must involve verbal interaction (4, 5).

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Question 6. Please provide evidence that your approach offers a clear rationale for treatment / interventions facilitating constructive change of the factors provoking or maintaining illness or suffering.

The Hakomi approach works from the understanding that there are three basic factors which cause illness and suffering: Identification or absorption with certain inner parts or emotional states. Thus an inability to maintain a neutral position on a higher level of consciousness. Isolation or polarisation personality parts that are in conflict with each other. Thus loss of communication between these parts. Limiting core beliefs that are built on early experiences and result in restrictive behaviour and belief patterns. The transformation model of the Hakomi Method is based on three corresponding factors of change:

1) Dis-identification:

Through training of mindfulness (1, 2, 3, 4, 5) we gradually support the establishment of an increasingly stable position of consciousness that we call the "internal observer". The growing ability to witness the experience from this observer's non-judgemental point of view improves the capacity to maintain some distance to painful experiences and to interrupt circular processes of suffering. Unconscious guiding forces are brought into consciousness, and ego-reflexive functions are strengthened. Therefore Hakomi therapists systematically build up more and more mindfulness during the therapeutic process and support the resourceful "states of the self" (6, 7). Techniques (3, 4, 5): I.e., accessing, deepening.

2) Depolarisation:

Another focus of the Hakomi Method is to bring into communication different aspects or personality parts that are in conflict with each other (i.e., adult and internal child) or have been isolated from each other (shadow parts and managing parts)(3, 4, 5). This approach is inspired by the depth psychology model of conclusion of conflicts between the super-ego and ego or the it and adds the idea of a self-state which can communicate with, and relates well to, all parts. Similar ideas with different emphasis are found, for instance, in Gestalt therapy, Psychosynthesis and Transactional Analysis (6, 8, 9). Techniques (3, 4, 5): - working with parts

- inner dialogue

- working with the internal child

- externalisation

3) Reformulation:

Through process-oriented, body-oriented and experimental proceedings we explore therapeutically which emotions and interpretations the client produces with regard to certain stimuli, that is to say, how he/she organizes his/her experiences. This process allows for increasing consciousness about automatic organisation of experiences, and about limitations of the underlying beliefs. By offering missing, or corrective, experience in deep states of consciousness, those core beliefs can be renegotiated, including a decline in limitations. Negative self- and object-representations can be changed and reorganized through internalisation of new objects; New resources are created (3, 4, 5, 10).

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Question 7. Please provide evidence that your approach has clearly defined strategies enabling clients to develop a new organisation of experience and behaviour.

Hakomi Experiential Psychology systematically supports three basic strategies towards transformation of experience and behaviour (See also question 6):

(A) "Dis-identification". By introducing and continuously enhancing certain states of consciousness, like "mindfulness"(1, 2, 3, 4, 5, 20, 21, 22), a Hakomi therapist works towards establishing what is traditionally known as an

"internal observer", a quality of consciousness that is less "identified" with changing experiences (5, 8). This is an ego-reflexive skill supported by developing brain functions (11). The process liberates the sense of self from the absorption by regressive perspectives. Mindfulness eventually provides a person with a much wider range of behavioral options. (B) "Depolarisation". The Hakomi method holds a view of multiplicity of the psyche, similar to Assagioli, Perls, Richard Schwartz. Certain "parts", at the same time bodily and psychically present, are seen to form a sensitive inner ecology (10, 15). This perspective is expressed in one of the five basic principles of the method, namely the "unity" principle (2, 3, 4, 5), which is based on systems thinking from A. Koestler to G. Bateson, from K. Wilber to the theory of Complex Adaptive Systems (see question 3). The theory holds that "parts" can be highly polarized, creating extreme internal tensions and irreconcilable contrasts that lead to self-suppression, dissociation, etc. A vast array of Hakomi techniques are designed to reconcile polarized "parts" (i.e., "working with the child") and harmonize the overall system (2, 3, 5).

(C) "Reformulation". A classic Hakomi approach to transformation of experience and behaviour can be found in the attempt to provide "missing experiences" in certain deep states of consciousness (2, 3, 4, 5, 14,).

In other methods comparative interventions are called "corrective experience", or "resource-orientation". Here the therapist creates situations in which the client's belief systems are cautiously exposed to the environment and can absorb new experiences that seem to contradict their limiting beliefs. Often the body, as well as words, are used to alter their sense of reality. Since the organisation of experience, as well as behavioral patterns, are seen to be based on those beliefs, the whole self-organizing system (of beliefs, body, emotion, thought, and behaviour) are expected to reorganize according to changing core beliefs (2, 3, 4, 5). In certain kinds of processes integrative techniques may support transfer from transformed beliefs to behaviour (5, 19).

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- (6) Deepesh Foucheaux, Halko Weiss: "The Almost Impossible Task of Just Paying Attention". In "Psychotherapy in Australia", Collingwood, Vic., Australia, Vol 2, Number 1, Nov. 95
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- (16) Ron Kurtz: "The Organisation of Experience in Hakomi Therapy". In: Hakomi Forum, issue 3, Boulder, Colorado, 1985.
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- (20) Nyanaponika Thera: "The Power of Mindfulness". Buddhist Publication Society, Kandy, Sri Lanka, 1976.
- (21) V. F. Gunaratna: "The Satipatthana Sutta". Buddhist Publication Society, Kandy, Sri Lanka, 1970.
- (22) Mark Epstein: "Thoughts Without a Thinker". HarperCollins Publishers, NY, 1995.

Question 8. Please provide evidence that your approach is open to dialogue with other psychotherapy modalities about its field of theory and practice.

Hakomi has always been in an open dialogue with other schools of psychotherapy.

Research projects: Currently we are engaged in research projects at the University of Tübingen and the University of Heidelberg in the field of scientific psychotherapy research. We purposely decided to include other schools of body psychotherapy in the study, like Unitive Psychology, Biodynamic and Bioenergetic Analysis. The studies explore the effects of the body centred psychotherapy and psychotherapy outcome (1,2).

Conferences and congresses: Since many years we regularly present at international conferences and congresses in central Europe, such as "Lindauer Psychotherapie Wochen", the EABP congresses, the DGK congress in Berlin, hypnotherapy congresses, the body centred psychotherapy congress in Dresden, as well as at international congresses worldwide, i.e., in the USA, Australia, and South Africa .

Interdisciplinary discourse: We are looking for an interdisciplinary discourse in different ways. Especially important is for example the close cooperation with Prof. Dr. Richard Schwartz (IFS: Internal Family System Therapy), Al Pessó (Pessó Boyden Psychomotor Therapy) and with Dr. Max Schüpbach (POP: Process oriented Psychotherapy). (3) Well known psychotherapists of other psychotherapy schools present their therapeutic approach in our training "Foundations of the Psychotherapy" (3), for example:

- Behavioural Therapy, Dr. Serge K.D. Sulz
- Bioenergetic Analysis, Richard Hoffmann, HPG
- Family Therapy, Dipl.-Psych. Barbara Brink.,
- Gestalt Therapy, Dr. Bärbel Wardetzki
- Hypno Therapy, Dipl.-Psych. Bernhard Trenkle
- Psychoanalysis, Dr. Tilman Moser
- Psychodrama, Dr. Jürgen Klingelhöfer
- Transactional Analysis, Arlene Moore, M.A.

And last not least we regularly arrange interdisciplinary trainings for our therapeutic training staff.

References:

- (1) Hakomi's Science Group: Manual for Efficacy Study. 1998
- (2) Hakomi's Science Group: Questionnaire. 1998
- (3) Hakomi Institute of Europe's Information Broschure, 1999/2000

Question 9. Please provide evidence that your approach has a way of methodically describing the chosen fields of study and the methods of treatment or intervention which can be used by other colleagues.

Our field of studies and the methods of treatment and intervention all derive from the principles of unity, mindfulness, organicity, non violence and body mind holism. They are well and described in many publications (2,3,4,6,9), and can therefore be easily adopted by other colleagues.

If you look at the field of body psychotherapy you can notice an increasing interest in, and use of a variety of concepts and techniques which were provided by the Hakomi Method. Three of many examples:

The concept of "mindfulness" in psychotherapy: Body oriented psychotherapists of different schools use the Hakomi "accessing-" and "deepening-" techniques as well as creating and using "probes" to evoke core material on the background of the concept: "Hierarchy of experience" (2,3,4,6).

The concept of the "internal child" and the "magical stranger": Body oriented psychotherapists of different schools use Hakomi strategies and techniques such as it's own specific style of "working with the child", "inner dialogue", "magical stranger", "working with parts" to study and integrate traumatic childhood experiences on the background of the concept: "States of consciousness and the process chart" (2,3,4,7,8).

The concept of body-mind unity: Body oriented psychotherapists of different schools use Hakomi techniques such as "accessing", "going for meaning", "making voluntary", "mirroring" "peace with gravity" at the interface of body and mind to deepen the therapeutic process in the present experience on the background of the concept: "Body styles of character" (1, 2, 3, 4,).

References:

- (1) Ron Kurtz, Hector Prester: "The Body Reveals", New York , 1976.
- (2) Ron Kurtz: "Körperorientierte Psychotherapie", Essen, 1985.
- (3) Ron Kurtz: "Body-Centered Psychotherapie", Mendocino CA, 1990.
- (4) Ron Kurtz: "Hakomi", München, 1994.
- (5) Ron Kurtz, Greg Johansen: "Grace Unfolding", New York, 1991.
- (6) Dyrian Benz & Halko Weiss: To the Core of Your Experience, Charlottesville; Virginia, 1989.
- (7) Jon Eisman: The Child State of Consciousness and the Formation of the Self. 1989, in: Hakomi Forum, Issue 7, 1989.
- (8) Halko Weiss: Storytelling for Hakomi Therapists. 1987; in: Hakomi Forum, Issue 5, 1987.
- (9) Hakomi Institute: Hakomi Forum - 10 Year Edition (from 1984 to 1994), Boulder, Colorado, 1996.

Question 10. Please provide evidence that your approach is associated with information which is the result of conscious self reflection, and critical reflection by other professionals within the approach.

Critical reflection of the Hakomi Method within the institute takes place in several types of teaching staff and practitioner meetings: The Annual Hakomi Conference in the USA, where Hakomi practitioners, teachers and trainers exchange their experiences, present new developments and discuss contents. Around this time the international staff meets for 2 - 4 days of exchange and consultations. The different international Hakomi teaching teams also have their own meetings and conferences, for instance: Nine meeting days per year are scheduled each year for the Hakomi of Europe teaching staff (currently 12 teachers and trainers) that are centred around discussion and critical reflection of the method and the curriculum.

A special emphasis is taken in the Hakomi Institute to base all evaluation of students and of staff on video tapes of therapy sessions which are viewed to provide critical, practical self-reflection and mutual checking of standards.

There is an internal critical and inspirational dialogue through the Hakomi Journal "Hakomi Forum", published since 1984, listed in the "Psychological Abstracts". As examples we listed a few articles in which typical Hakomi Method subjects are critically examined:

The discussion of internal adult leadership and the concept of "self", which relates to a long standing discussion in the institute about one perceived weakness of the early method, namely, an overemphasis on regression: "Our multiple Selves", by Dick Schwartz (1).

A critical expansion of the former understanding of the Hakomi Method as being "intrapersonal": "Emergence of the Other", by Halko Weiss (2).

New Hakomi concepts about group therapy: "The Hakomi Method in Therapy Groups", by Martin Schulmeister (3).

The innovative Hakomi approach to working with Post Traumatic Stress Syndrome, and the limits of working with "developmental" clients: "Hakomi Integrative Somatics", by Pat Odgen (4).

References:

(1) Richard Schwartz: "Our Multiple Selves". Hakomi Forum, issue 10, Boulder, Colorado 1994.

(2) Halko Weiss: "The Emergence of the Other". Hakomi Forum, issue 12, Boulder, Colorado 1996.

(3) Martin Schulmeister: "The Hakomi Method in Therapy Groups". Hakomi Forum, issue 6, Boulder, Colorado 1988.

(4) Pat Odgen: "Hakomi Integrative Somatics". Hakomi Forum, Boulder, Colorado 1998.

Question 11. Please provide evidence that your approach offers new knowledge, which is differentiated and distinctive, in the domain of psychotherapy.

The Hakomi Method has developed - compared to other methods of body oriented psychotherapy - conceptual extensions of strategies and techniques within the frame of the therapeutic process. Hakomi has made some important contributions to consciously creating a therapeutic relationship and the attitude of the therapist. In the Hakomi training these attitudes are specially important.

A) For example the therapist systematically creates a therapeutic relationship where the client feels as safe as possible, based on a set of trained attitudes and skills. The attitudes can be expressed through the matching skills of the therapist, for instance in the case of the attitude of non-violence:

The skills involved in not working against the resistance of the client but to explore it in a respectful, supportive way.

The skills involved in moving flexibly between the orientation towards the process and the goals.

The skills involved in inviting the cooperation of the unconscious.

The principle and attitude of non-violence therefore leads to innovative techniques like the different forms of "taking over", and these techniques in turn support the safety of the client (2, 3, 4, 6).

B) The Hakomi Method has developed a unique style of a slow, and extremely precise process that is experimental, explorative and curious. The connection and interaction between body and mind as well as the interdependence of thoughts, breath patterns, body postures, sensations, and affects are taught to be studied in great detail until meaning emerges. This kind of process is carried by an extended set of our own Hakomi techniques (2, 3, 4, 6). The development of precise experiments to explore relevant experiences, and the way to apply those are described in Ron Kurtz's books (evoked experience).

C) The method provides a clear description of several different states of consciousness, how to induce them, and how to work within those states (2, 3, 4, 6). The state of mindfulness in particular allows for a differentiated access of various levels of experience and memories. Hakomi cultivated a special way how clients learn to verbalise while being in a state of mindfulness without losing their present experience (2, 3, 4, 6). While mindfulness has become increasingly important in the wider field of psychotherapy in the last ten years (for instance Linehan, 8), it has been a core ingredient of Hakomi since the late '70-ies. Other methods of body-psychotherapy have also started to make use of the concept.

D) Further original techniques of the Hakomi Method are, among others:

The different techniques of "taking over".

The verbal technique of "probes".

A non-focused, non-linear, intuitive way of body reading, called "tracking".

A unique body of knowledge about touch in psychotherapy, that includes concepts about timing, place of touch, intention, response, experimental framework, attitude, precision. (2, 3, 4, 6)

E) Recently, Pat Odgen (5) developed a unique Hakomi procedure of treatment of the post-traumatic stress syndrome and got special attention in the field of trauma therapy and science, for example from Alan Schore (7) and Bessel van der Kolk (9).

References:

(1) Ron Kurtz and Hector Prester: "The Body Reveals". Harper and Row, New York, 1976.

(2) Ron Kurtz: "Körperorientierte Psychotherapie". Synthesis Verlag, Essen, 1985.

(3) Ron Kurtz: "Hakomi. Kösel Verlag, München, 1994.

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(7) Alan N. Schore: "Affect Regulation and the Origin of the Self", Lawrence Erlbaum, New Jersey, 1994.

(8) Marsha Linehan: "Cognitive-Behavioral Treatment of Borderline Personality Disorder". Guilford Press, New York, 1993.

(9) Bessel van der Kolk: "Psychological Trauma". American Psychiatric Press, Washington DC, 1987.

Question 12. Please provide evidence that your approach is capable of being integrated with other approaches considered to be part of scientific psychotherapy so that it can be seen to share with them areas of common ground. Since Hakomi Experiential Psychology was inspired by, and built on, the knowledge of other forms of psychotherapy, it is evident that we share common ground with them. Most obvious, Hakomi is a form of depth psychology in that it is striving to uncover and work through unconscious material (2, 3, 4, 5, 8). It's whole basis in character theory, going back to Freud, via Lowen and Reich, attests to that (10, 11, 13). The core Hakomi concept of working at the "barrier" (3, 4) is really a refined strategy of dealing with the defence mechanisms.

Hakomi also shares common ground with the behavioral/cognitive approaches; i.e., the idea of transforming human experience through changing "beliefs", corresponds with changing "cognitive schemata" (3, 5). The same is true for some hypnotic methods, like NIP.

The understanding of a human being as mostly "automatic"(2, 4, 5) is the same basic idea expressed in traditional behaviour modification literature as learned behaviour.

We also hold a lot of common ground with Readjournal therapy with its non-directive stance (Hakomi: "non-violence"(2, 3, 4, 5)), and its emphasis on relationship (5, 7). Many more of these examples could be provided. It can be said that some of the core understanding of human nature and what it is that can solve its predicaments are shared with the most widely accepted forms of psychotherapy.

Practically, the method's capacity to integrate, share common ground, and to be in discourse, as well as its willingness to do so, can be demonstrated by examples, like:

The fact that the Hakomi Institute of Europe is actively engaged in a research project on body-psychotherapy with the universities of Tübingen and Heidelberg, where it actively included other methods. A first report on results was published at the EABP conference in Travemünde, Germany, in 1999.

That the institute has provided main speakers at conferences outside its immediate field, for example the 2nd World Conference on Psychotherapy in Vienna, July 1999 (Ron Kurtz), the International Congress for Hypno-Therapy in Munich, October 2000 (Halko Weiss), the Congress on Trauma in Boston, April 2000 (Pat Ogden).

That university credits can be obtained in the USA by studying the method, and that the Hakomi curriculum was approved as an official national training for psychotherapists in New Zealand (Eastern Institute of Technology, Napier, NZ), etc.

That the institute's own scientific publication, Hakomi Forum, which is listed through Psychological Abstracts, has published articles by numerous authors from other schools (14).

There have been several publications that were co-written with authors from other schools (1, 8), or were part of a publication with authors from other schools (7, 8, 9, 12).

References:

(1) Ron Kurtz, Hector Prester: "The Body Reveals". Harper and Row, NY, 1976.

(2) Ron Kurtz: "Körperzentrierte Psychotherapie". Synthesis Verlag, Essen, 1985.

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(13) Stanley Keleman: "Dein Körper formt dein Selbst". Kösel Verlag, München, 1980.

(14) Hakomi Forum, 10 Year Edition, Boulder, Colorado, 1996.

Question 13. Please provide evidence that your approach describes and displays a coherent strategy to understanding human problems, and an explicit relation between methods of treatment/ intervention and results.

(In addition to questions 6 and 7:) Hakomi is basically a depth psychology approach. A map of character with different dimensions of experience prepared this material didactically. This map is a Hakomi development based on Alexander Lowen, who goes back to Wilhelm Reich and to psychoanalysis (10).

There is a particularly close relationship in understanding human problems and their treatment to the self-psychology approach of Heinz Kohut and Sándor Ferenczi (1, 2, 3, 5, 6). As in depth psychology, changes can be understood as a result of insights. Those result from a precise exploration of the present transference and countertransference or from working in an experimental way by bringing evoked experiences of the client's life to the here and now.

Considering body-mind unity we work with the present experience and deepen it by passing through different experiential realms (thoughts, body sensations, meaning of body sensations, feelings, meaning of feelings). Usually memories arise and clients may experience themselves in the child-consciousness. In this and in other states of consciousness corrective experiences ("missing experiences") are possible in a particularly powerful way. This approach can establish new ways of experiencing and new "core beliefs"(4, 8, 9, 11, 12).

A typical Hakomi therapeutic process can also be described as similar to cognitive behavioral intervention as it addresses "beliefs" as a core of transformation (4, 8, 9, 11, 12).

As in other body orientated approaches it is an basic assumption, that the body posture interrelates with experience and emotions. Hakomi explores precisely this issue. Bodily interventions lead to expanded beliefs which, in turn, allow for different forms of experience and it's self organisation, including thought, affect, as well as body posture and bodily experiences (4, 8, 9, 11, 12).

Resulting effects therefore are directly related to the specific forms of intervention and strategy, for instance:

Through working with mindfulness clients experience a strengthened ego function which is slightly different from most depth psychology approaches because of the emphasis on the "internal observer" and "self states" (9, 12).

A more coherent and integrated sense of self is also created by the special qualities of the healing relationship between therapist and client in the Hakomi Method.(9, 13).

Improved internal communication processes (on the base of principle of "unity" and its resulting strategies) and better self objects (on the base of the Hakomi concept of a "healing relationship") also allow for a more highly integrated sense of self and a wider range of affect, thought, and body experiences (4, 8, 9, 11)

References:

- (1) Sándor Ferenczi: "Weiterer Ausbau der aktiven Technik in der Psychoanalyse". Fischer, Frankfurt 1921
- (2) Sándor Ferenczi: "Die Elastizität der psychoanalytischen Technik". Fischer, Frankfurt 1928.
- (3) Sándor Ferenczi: "Relaxationsprinzip und Neokatharsis". Fischer, Frankfurt 1930.
- (4) Greg Johanson and Ron Kurtz: "Grace Unfolding". Bell Tower, New York, 1991.
- (5) Heinz Kohut: "The Restoration of the Self". International Universities Press, 1977.
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- (7) Ron Kurtz and Hector Pretera: "The Body Reveals". Harper and Row, New York, 1976.
- (8) Ron Kurtz: "Körperorientierte Psychotherapie". Synthesis Verlag, Essen, 1985.
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- (10) Alexander Lowen: "Language of the Body". Collier Books, New York 1958.
- (11) Halko Weiss and Dyrian Benz: "Auf den Körper hören". Kösel Verlag, München 1987.
- (12) Ron Kurtz and Kekuni Minton: "Essentials of Hakomi Body-Centered Psychotherapy. In: Christine Caldwell (ed): "Getting in Touch", Quest Books, Wheaton, IL 1997.
- (13) Gustl Marlock and Halko Weiss: "In Search of the Self". In: Michael Heller (ed): "The Flesh of the Soul: The Body We Work With". Verlag Peter Lang, Bern 2000.

Question 14. Please provide evidence that your approach has theories of normal and problematic human behaviour which are explicitly related to effective methods of diagnosis/assessment and treatment/intervention.

Referring to the relation between our theory of normal vs. problematic behaviour and methods of diagnosis, we assume, that the respective symptoms and the connected elements of self organization are actualised in the therapeutic setting.

There is (See also answers to questions 2., 3., 6., 7. and 13.)

1. A method of body diagnosis for character styles (1, 2, 3, 7).

2. A diagnosis of the therapeutic process by using information that we are able to abstract from the analysis of the specific transference and counter-transference processes. In the Hakomi Method this specific intervention is called "jumping out of the system"("joots", 5). This intervention includes the steps of noticing and diagnosing an interpersonal system between client and therapist, the step of mirroring and confronting this system in an acceptive way, and the step of offering ways to the client to watch this interpersonal system and experiment with new possibilities of relating.

3. And we can get diagnostic information by looking at character strategies on the level of behaviour and beliefs (1, 2, 3, 4, 5, 7).

Referring to the relation between our theory of problematic behaviour and effective methods of treatment, we are oriented towards the character theory of the body-psychotherapeutic tradition, in which models of normal and pathologic behaviour are seen very skeptical and sensitively used.

We assume that traumatic, or long lasting repetitive, negative experiences will create limiting beliefs about the own person and/or the world around. So the possibilities to build effective and appropriate behaviour on these foundations are rather limited. Helping the clients to become mindful and to develop capacities to consciously study their self organization, including all the limited parts and characterological strategies, they are set up to incorporate new experiences in the present moment of the therapeutic setting.

Missing, or "corrective" experiences are expected to transform core beliefs, which, in turn, interrupt circular neurotic processes. More expansive new beliefs can be formed and affirmed with the help of the therapeutic relationship. A more effective behaviour and more choices will become possible (3, 5, 6, 7).

Particular Hakomi treatment strategies related to diagnostic results:

A special quality of Hakomi is a elaborated method of a character-specific treatment: while working with a client the method proposes specific interventions and strategies that vary with the mix of character styles involved in the session. These engage the work with the body, with behaviour, mental or affective processes, including all levels of self organisation and belief systems.

For instance, if a client is in the oral character process the therapist can draw the conclusion that typical attitudes may be dominant intrapsychic and on the relationship level which will have some expected effects on transference and countertransference. At this point, Hakomi suggest specific strategies in: addressing the relationship (interpersonal interventions), and typical interventions at the "oral barrier" (intrapersonal interventions).

This also includes perceiving the various identifications of countertransference, creating therapeutic interventions from it, and balancing automatic character responses on the side of the therapist.

Typically, Hakomi offers very specific ways to deal and work with the phenomenon of resistance, with barriers, with transference, behavioral patterns, etc., according to the various character processes (3, 5, 6). These can include the use of the time frame, speed, wording, choosing the type of interventions, addressing certain issues, shifting to a meta-level, managing the countertransference, etc.

References:

- (1) Ron Kurtz, Hector Pretera: "The Body Reveals", New York , 1976.
- (2) Ron Kurtz, Hector Pretera: "Botschaften des Körpers", Munchen, 1979.
- (3) Ron Kurtz: "Körperorientierte Psychotherapie", Essen, 1985.
- (4) Ron Kurtz: "Body-Centered Psychotherapie", Mendocino CA,1990.
- (5) Ron Kurtz: "Hakomi", Munchen, 1990.
- (6) Ron Kurtz, Greg Johanson: "Grace Unfolding", New York, 1991.
- (7) Halko Weiss, Dyrian Benz: "Auf den Körper hören", Munchen, 1987.

Question 15. Please provide evidence that your approach has investigative procedures which are defined well enough to indicate possibilities of research.

The Hakomi Institute is actively involved with the Universities of Tübingen and Heidelberg in a scientific research project on the effectiveness of the Hakomi Method and other body psychotherapy methods. This outcome study was created and is headed by a group of Hakomi therapists. First results were published at the EABP Congress at Travemünde, Germany, September 1999.

The study uses as criteria for a successful outcome: Extended parts of Zerssen's "Beschwerdeliste", the Beck Fear Inventory, the Beck Depression Inventory, a symptom check list, and an inventory for the survey of interpersonal problems (Horowitz IIP).

Yet his particular study is only the beginning (since 1997) of a huge field of possible further research. Just like other forms of psychotherapy, and similar to psychoanalysis, an appropriate way of researching questions in the humanities sciences is still to be developed (quite in contrast to quantitative biometric procedures in the natural sciences). Here, scientific research procedures still need sophistication. Possibly the new operationalized psychodynamic diagnostics will be of help. Certainly randomizing will hardly work in a field where methods used in hospitals and practices are explored (15). (The above mentioned project is one of the first extensive ones to research the results of body psychotherapy in private practices.)

The following hypothesis can be assumed: That body psychotherapeutic methods, Hakomi Experiential Psychology in particular, offer a special set of tools that enhances the unity of our psychosomatic experience with its physiological and affective aspects.

Useful research would be to explore how the Hakomi Method integrates the results of the neuroscience and infant research. Infant research shows that early childhood experiences are stored as impressions of the early object and as a sense of self of the child along with the affective colouring of these experiences (17).

Neuroscience shows how our experience is formed through memories and that all stimuli recall memories. The brain creates analogue affective psychosomatic kinds of experiences. Additionally, it is a proven fact that this experience is modulated in the present. Experience is formed through the past, but constantly reshaped freshly in the moment. In the neuronal structures with its synaptical linkage as well there is permanent novelty, possible through newly forming physical organisational patterns of the brain and its correlating extension in the experiential realm. This correlation could be studied with appropriate methods of research (1, 5, 12, 16)

The praxology of the Hakomi Method has developed some very precisely described procedures which are extremely fitting for future research. Here are some of the most general practical concepts that lend themselves particularly well for scientific studies.

The creation of the therapeutic relationship where the attitude of the therapist is precisely defined. The basic value of understanding the emotional fitting between therapist and client for the effectiveness of the therapy has already been shown. Now the respective instruments of research could be used to prove the effects of the creation of a Hakomi

version of a therapeutic relationship. Within this context the micro processes can be researched that form the split second exchange processes in the relationship, as well as their impact on the experience of the client (6, 10, 11, 18). Another area could be the nonverbal interventions of therapists which are strongly emphasized in the Hakomi Method. It would be helpful to research their value for the overall therapeutic process. As an example, the techniques of "taking over" could be explored, and their effectiveness to access meaningful experiences as well as insight (6, 10, 11, 18). In the Hakomi Method, the state of consciousness called "mindfulness" is precisely defined and could be studied for its contribution towards strengthening ego functions, or self-states. Within the research project at the Universities of Tübingen and Heidelberg mentioned above, this particular topic has already been addressed: There is an instrument among the inventories, especially created for this study, that can evaluate the clients' capacity to be mindful (6, 10, 11, 18).

Another area would be the technique of "probes", and their effectiveness to address and explore internal conflicts and issues in a differentiated way (6, 10, 11, 18).

The techniques of "integration" could be studied for their effectiveness to transfer key session results into every-day-life (6, 10, 11).

In general, as for most body-psychotherapies, the relation between body structure and key internal conflicts is also an interesting issue (9, 10, 18).

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- (2) Sandor Ferenczi: *"Weiterer Ausbau der aktiven Technik in der Psychoanalyse"*. Fischer, Frankfurt 1921.
- (3) Sandor Ferenczi: *"Die Elastizität der psychoanalytischen Technik"*. Fischer, Frankfurt 1928.
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- (17) Daniel Stern: *"The First Relationship"*. Harvard University Press, Cambridge 1977.
- (18) Halko Weiss und Dyrian Benz: *"Auf den Körper hören"*. Kosel Verlag; München 1987.

Appendix (only sent by mail)

In the appendix you find:

a latest brochure of Hakomi Institute of Europe. You can see the world wide activities as well as an curriculum, teaching staff, etc.

a so called "Selbsteinschätzungsbogen" that Hakomi students use to get a clear sense about their competence in the therapeutic field. You can find a variety of dimensions that characterize therapeutic being and doing.

a list of clinics and counselling institutions in Germany where the Hakomi Method is applied.

a certificate for Hakomi students that shows the part of depth psychology in the Hakomi training (themes and theory hours).