



# Body psychotherapy, trauma and the Black woman client<sup>1</sup>

JOANNE ABLACK

*Body psychotherapist (UKCP), psychotherapy teacher and supervisor, Training & Development Consultancy*

---

**Abstract** *This article explores the intersections between culture and trauma. In particular it focuses on the Black woman to Black woman client and therapist relationship. The roles of diversity and synthesis are explored in the therapeutic relationship, highlighting the author's approach as a body psychotherapist to working with the somatic trauma of the client and the somatic resonance of the therapist. Particular attention is paid to different ways of working with rage and the client's need to establish enough internal ground to face the trauma. The article allows the reader to share some of the experience of both the traumatised client and her journey, and the therapist's journey, in supporting the client towards health. The article also explores the meaning and working with ancestry as a necessary part of the therapeutic process. Additionally, the article provides some key points of learning for psychotherapists, trainers and supervisors about working with clients, trainees and supervisees different to oneself.*

My ancestry is mixed, ranging through African, Kashmiri, Carib, French/Creole, Spanish and Celtic. Like most West Indians, I do not have factual information about parts of my heritage and I may be unaware of others.

The nature of such a diverse heritage was inevitable as an influence on who and how I am in the world. I spent quite a lot of my childhood in constantly changing environments, moving schools and countries, often being one of the 'different' ones; the 'don't belong here' group that exists in most cultures, both formal and informal. As a consequence of this experience, when I completed my training as a body psychotherapist I found myself working with Black women who feel displaced/fragmented/cut off from who they are inside and full of rage. My therapy practice attracts clients from a diverse range of ages, classes, physical abilities, sexualities and cultural heritages. In this chapter I am concentrating on the Black to Black experience with women.

Body psychotherapy integrates analytical and humanistic approaches whilst focusing on the relationship between therapist and client. In it we look at the integration of 'person' and 'role' (persona) including splits in the psyche, for example, 'inner' and 'outer', 'body', 'mind' and 'spirit', feminine and masculine. By paying attention to the body—both the client's body and the body of the therapist—awareness can be significantly expanded. This allows an increase in perception and understanding and affects choices and the development of creative awareness.

The whole area of diversity has become an important part of my contribution to counselling and psychotherapy teaching. I am particularly excited to explore across cultures—not just race but gender, sexuality, class, religion, physical and mental ability, etc. I am fascinated by the diversity and the synthesis we share within each of the groups we identify with. What

kind of Black woman am I? What kind of Black woman are you? What does it mean if you are male, I am female and we are Black?

My client work includes Black women who have been trans-racially adopted, brought up by relatives, and/or separated from their own parent(s). As a therapist, trainer and supervisor and as a training consultant, I am frequently reminded of the profound effect these experiences can have on how people view themselves and hold themselves in society.

There is no one response, as if we all come out of some predestined mould called 'Black living in Britain'; rather, there is a range from balance to deep disturbance that is determined in part by the level of support both inside and outside the person.

In this chapter I am going to draw upon my work with those clients who have shown the least equilibrium/most disturbance.

If the experience of Black people from early on is a lack of physical, mental and spiritual safety because of what they see happening to Black people in the streets, schools, their neighbourhoods, then everything can feel unsafe/unreal or an actual threat to the person's well-being. In light of this, we may make a choice (often unconscious) to 'split' away from what we are experiencing. In other words, in order to survive, I, as a Black person, disembodied myself as a way of keeping some hold on my core self. This core self is who I am at the core of my being and needs to be protected, so I hide it, maybe even from myself, then I feel unreal, not truly a part of the world, like there is always something between me and the majority culture.

This experience of having to isolate different parts of myself will also have an effect on how open I can be with my own cultural/family group. 'Splitting', I can feel evil, bad, unloveable, and consumed by feelings of wanting to hurt/kill others and often myself. The longer this goes on the more I drive these feelings underground until they start to manifest as 'problems'-overweight/underweight, illnesses that affect the immune system, habitual/ritual self-harming behaviour. Living in a world of betrayal and lies, I lose sense of my own truths.

In the Black to Black therapeutic setting the client gets to explore and find these truths without having to educate the therapist about racism/discrimination/what it means to be 'minority'. That is, the client does not have a disproportionate role of teaching when they are there to learn about themselves and how they relate. As in all therapy, the client will be showing the therapist their unique experience as an individual person who is Black. There is diversity and synthesis in any relationship. The issue in the psychotherapeutic relationship is the therapist's ability to embrace a sense of these and to make themselves available as a means by which the client can explore feeling different and feeling similar to another person.

So far what I am describing are some of the common threads that emerge when working with clients who are suffering from somatic trauma, that is, people who are traumatised to a level where it manifests at a mind, body, heart and spirit level. When a part of life experience is also a message from society that they 'do not belong' because of who they are in terms of heritage/race/culture, this somatic trauma is deeply compounded.

Then I (client) am holding in my body and in my spirit feelings and experiences that are so overwhelming that they have to come out in some form of illness, disintegration of the self, and creation of a false self just so I can continue existing. However, somewhere deep down inside the client is enraged, full of the anger that has been turned inwards on the self.

This then is the nature of the experience for the Black client. In the work I am going to describe I am drawing on my own and other Black women's experiences of carrying somatic trauma and finding ways to heal. Included in this healing journey is the significance of being with a therapist who reflects some aspect of the clients heritage/race/cultural experience. Same part of the world, similar family displacement scenarios or simply also coming from a family where the children are differing shades of colour; all these are vital parts of the mirror Black to Black therapy can offer.

Let's go back to the concept of disembodied. A client arrives for the session and sits as near to the door as possible, the very walls of the room representing a threat. She shakes and sweats profusely, her face changes colour around the eyes and nose, her breath is coming only from the top of her chest and though she is looking right at me there is no light in her eyes. Just step away from the text for a moment and feel how your body is as you read the description of the client, your breath, your temperature and your emotions-there may be some 'somatic resonance' in your body, mind, heart or spirit.

My job is first to be aware of my resonant response, then to use it to inform me of what might be happening for the client and at the same time hold onto my own separate sense of self. By being aware of her but keeping a sense of myself I provide a ground in which the client can begin to emerge and find herself.

So the client seems engulfed in a wave of remembered trauma, unaware of her body, speechless, and I need to get her back, now! Anything said that is complex or longer than a few words will not be heard. I find a way to get the client to simply feel some physical sensation in her body. I don't care how small or insignificant this is; anything that gets the client to be in the present and aware of herself is very important right now. It might be that I ask the client to tell me what colour clothes she is wearing, to count how many of a particular object are on the shelf or anything else that supports her attention back out into the here and now.

A common stereotype of therapeutic work is that the therapist will always go hunting for the trauma, when in actuality the client needs to have a good enough presence in the world before she can take that journey to the past. If a client is pushed when she has not got enough sense of self in the present there is a great risk of pushing the trauma deeper and causing greater psychological harm.

In order for that presence in the world to be good enough a lot of checking out needs to happen for the client. I have to be prepared to be hated, mistrusted, adored, put on a pedestal, knocked off again and all this will only happen when the client feels safe enough to not be aware of the door (escape/possible invasion by dangerous others) every second of the session. This kind of somatic trauma work can be long and painstaking. I know there will be times when I feel lost because the client tells me in her different ways of being that she is lost/unsure/scared and may feel so sucked in by it all that she wants to die.

This work is in a place of contracts and agreements, from week to week sometimes. Often the most important thing is to get the client to show up for the next session. I must acknowledge the huge amount of trust being shown in me by the client choosing to be there, even if she needs to spend the whole session telling me all the different ways in which I am not trustworthy for her.

In the Black to Black relationship this may be the first time the client has allowed herself to express strong, hate-filled negative feelings towards another Black woman/person. Remember she feels betrayed by all; the betrayal of racism is the familiar story and may be the place of most comfort because the client sees and hears others also being treated badly/discriminated against. What can be more frightening are the demons of hatred/fear felt for her own kind. Part of my work as her therapist is to stay with her and be okay with her expressing these feelings towards me. She needs me to be there to project her self-hatred onto, as well as having a safe enough space where she can be negative about her people and not be condemned by another Black person (i.e. me, the therapist) for the feelings. These feelings need to be expressed, acknowledged and owned by both the client and by the therapist.

This period of time is about feelings, hurts, damage and overwhelming emotions. It is a place on the journey that has to be gone through in order for the client to find the more balanced place in herself. When the client starts to find this more balanced place she is able

to face the story/stories of her trauma and retrieve the parts of her soul that have been lost/hidden/frozen until now.

For many Black people a key defence against the impact of trauma is their dignity; this is true whether the trauma is the day-to-day living with racism or trauma of a more disturbed nature. This defence of dignity is often mistaken for a lack of willingness to explore. I, the client, need to know you, the therapist, are respecting me before I feel anywhere near safe enough to disclose how and in what ways I am hurting. This sense of being respected includes the therapist having done enough self-exploration about who they are and understanding their relationship to their own identities. The client can not be expected to explore or disclose in an environment where the therapist has not done this work on themselves. This is also true in the different teaching environments where Black counsellors and therapists are trained.

I want to say something at this stage about what can happen for Black people in therapy groups/therapy trainings. Sometimes Black clients and/or trainees will be criticised for being unreal, not disclosing enough, being cold or holding themselves aloof in these situations.

From my experience-as a trainee, a therapy group client and as a trainer who teaches other therapists and trainers about working with diversity-there can be a lack of awareness of how different communities work and how trauma can impact different peoples differently. There are questions that I believe must be considered when working with self, client, supervisee or trainee:

- Is the culture of the client (supervisee, trainee, participant) a community-based culture? Is this similar or different to my own culture?
- What are the cultural norms of the client's culture, heritage, religion or spiritual practices? What are mine?
- Where does matriarchal and patriarchal power lie in the clients cultural/historic heritage? What is the picture of this in my own culture?

These are some of the basics I will consider as I start to work with a client, supervisee or trainee. Therapists, counsellors, supervisors and trainers need to be supported in this journey for themselves as a fundamental part of their trainings.

As a therapist I need to be aware of the possibility of making conscious and unconscious impositions and judgments on the lives of my clients. What are the judgments I find difficult to let go and (through supervision) what judgments am I not even aware of having/using in my work? Am I willing to learn from the client without having/putting out an expectation that the client will want to teach me? As a therapist, counsellor, supervisor, teacher or facilitator, I must be willing to have an awareness and understanding of the power dynamic in each and every relationship and, I would add, an ability to work with the dynamic.

In the Black to Black therapy relationship the client can hold the image of the therapist as a possibility of the reclamation of the more healed Black self. The alienation that is a part of the experience of Blackness is addressed not only in the words of the therapy but also in the energetic resonance of confirmation by just being with another Black person who will stay with me, the client, as I feel my need for attachment and my paradoxical need for autonomy.

In the trauma work with Black women clients I am encouraging the experiencing and expressing of these paradoxical needs to happen at all levels. We may work with dreams, using Gestalt re-enactment by telling the dream in the present tense whilst keeping reference to the client's body responses as she speaks; there may be a repetitive movement that can be explored further or the client and I make physical contact where she can push and be pushed, that is, received and receiving. The more the client starts to embody herself, the more ground she creates in herself to face and learn from her trauma experiences.

This embodiment will often include working with ancestral information. I encourage clients to find out as much as they can about their families of origin, to know as much as they

can about who they are and where they come from. This can be a huge area of distress for those clients who have been physically separated from their biological parent(s). If the information is not available factually, it is sometimes possible to retrieve a sense of ancestry from the dreamscape, through visualisation, guided fantasies as well as through voice, movement and art work. It is important that I (therapist) have walked these ways myself if I am effectively to guide and support my clients there. I have found the ancestral path to be a vital part of reclamation of my lost bits of soul; somewhere and when in the past there was an ancestor who had a fuller sense of what it means to be of a particular heritage.

I am often awed, but not surprised, by the way that just acknowledging ancestry somehow brings a fuller sense of the self. Clients have told me they feel as if formerly empty parts of themselves have substance and meaning when they start to be open to the sense of ancestry in themselves. This sense of opening is facilitated by having a grounded awareness of their body in the now, so that they can feel the impact of then.

One of the things my trauma clients have taught me is that the rage is literally unbearable. If we as Black people walked around feeling the rage engendered by our her/history, the world

- could not hold us. Yet, we need to find some way to come to terms with the rage or it will consume us. If I carry somatic trauma, be it through violence, abuse, torture and/or deprivation and add that to the cauldron of existing as a Black person in this society, it is volcanic. But the volcano is not allowed, so I turn it in on myself or act it out destructively.

The area of exploration with my clients is their internal world of violence, mayhem, and murder.

Many of my trauma clients have told me that the only way they could hold onto some semblance of sanity was to imagine killing others or themselves. But this imagining comes with some heavy-duty prohibitions which also have to be faced and owned by the client. I sometimes get them to draw the different 'voices' in the dialogue of rage; to find body postures and phrases; to move/dance/walk their rage and their fear of their rage. Rage is not easy for anybody; it is particularly difficult for those of us who have experienced the stereotyping of the least expression of our anger, usually in the classic criticism 'you're so aggressive'.

There is truth in this, but the aggression perceived on the outside is a small hill of the bigger mountain that is held in/turned in/frozen over. The question the therapist needs to be asking (internally/externally) is, if this is what is showing, what may be hidden AND if the client shows this to me, what is it that they want me to understand about what it is like to be them?

This of course only gives a flavour of the rage work. It is a vital ingredient towards overall health. The fire of the rage may be part of how the client survived. As an artist/actor/poet/client and therapist, I have found the energy of my rage to be a huge creative tool. If I as therapist can hold a space where you as client are able to explore your rage and make a healthy relationship with it, then you as client will be provided with fuel for your recovery towards health.

In holding the space for the client to be enraged without getting sucked into my own material, the client has an experience of a time when she can say what she needs without having to look after/give attention to the other person and their feelings. This can be exhilarating and frightening, both need holding and acknowledging. The fact of being able to do this with another Black person provides a sense of safety that the client may not have felt ever before. In Black to White therapy relationships this level of safety is hard, perhaps impossible to achieve if the White therapist has not been on a journey of exploration of themselves and the diversity of their heritage and their relationship to it AND has started and learnt from the journey of looking at their racism.

One of the issues for Black clients is being able to experience the reclamation of heritage/self in relationship with another Black person. For some clients this may mean working in one

therapeutic setting e.g. a training, with White trainers but having access to therapeutic support from a Black person, e.g. having a Black therapist who may not be of the same approach as the training or doing groupwork with a Black therapist/counsellor or having a Black supervisor.

The experience of working with a therapist or counsellor who can reflect some aspect of the clients heritage in relation to race/colour/culture is a vital part of retrieving a healthy sense of self. Black clients are healing displacement and alienation that is bone deep and cellular; I need to feel, experience and relate to my sense of synthesis as well as to my sense of diversity. Before ending my chapter, I want to address one other area. One of the things that can happen for all clients as they start to reclaim themselves is the rejection by others who are very uncomfortable with the client's truer self. In a society where many belief systems operate to prevent people from being themselves and where discrimination is used as a tool to further this oppression, Black clients will often experience this to a greater level than their White counterparts.

The work of the therapist then is also to provide a space where the client can explore and discover how to protect themselves at a mind, body, heart and spirit level. I believe it is important that the therapist is able to acknowledge the realistic concerns of the client. In the Black to Black therapy relationship I have found an important part of the work is the supporting of the client to really know what is and is not in their sphere of influence. As a Black therapist, I will at some point in the therapy be challenged about my choice of work, accused of selling out, not being 'Black enough', of working in a very White profession, etc. It is very important that my clients are able to say these things to me, and at some point it is equally important that they address what it means for them. I am one of a handful of Black body psychotherapists in Britain; I am working in a very White profession and I am doing this as a woman who is Black.

The statement of these truths are an important part of me holding my separate identity and being with the client at the same time. I am doing what I do-this does give the message that you can do what you want to do.

### Note

1. Editor's note: *This article is a chapter from a larger book context, as becomes quite clear in reading it. The references to the book context have therefore been left as they stand.*
2. Joanne holds a Diploma in Body Psychotherapy from the Chiron Centre for Body Psychotherapy (London).

### Suggested Reading List

1. *Race, Culture and Counselling*. Colin Lago and Joyce Thompson. Open University Press, Buckingham-Philadelphia 1996.
2. *The Body Remembers- The Psychophysiology of Trauma and Trauma Treatment*. Babette Rothschild. Norton Press, November 2000.
3. *Advances in Body Psychotherapy*, ed. T. Staunton. Routledge 2001.

**Resume** *Joanne Ablack explore dans cet article, les intersections entre culture et traumatisme. Elle se concentre en particulier sur la femme noire et sur la relation de la femme noire et du thérapeute. Les rôles respectifs de la diversité et de la synthèse sont explorés dans la relation thérapeutique, mettant en valeur son approche de thérapeute du corps, qui travaille avec le traumatisme somatique du client et la résonance somatique du thérapeute. Elle s'interroge particulièrement sur les différentes possibilités de travail avec la rage et sur le besoin des clients d'établir suffisamment d'espace interne pour faire*

*face au traumatisme. Cet article permet au lecteur de partager certaines expériences de la cliente traumatisée et de son voyage ainsi que de celui du thérapeute qui soutient la cliente dans son voyage vers la santé. Ablack explore aussi le sens et le fonctionnement du lignage comme partie intégrale du processus thérapeutique. L'article fournit en plus certains points pédagogiques clés pour les psychothérapeutes, les formateurs et les superviseurs en ce qui concerne leur travail avec des clients, des gens en formation et en supervision, qui sont différents d'eux.*

**Zusammenfassung** *In diesem Artikel untersucht Joanne Ablack die Schnittpunkte zwischen Kultur und Trauma. Sie konzentriert sich speziell auf die schwarze Frau und das Verhältnis Patient schwarze Frau und Therapeut. Die Rollen von Verschiedenheit und Synthese werden in der therapeutischen Beziehung unter Hervorhebung ihrer Annäherung als Körper-Psychotherapeutin an die Arbeit mit dem somatischen Trauma des Patienten und der somatischen Resonanz des Therapeuten untersucht. Spezielle Aufmerksamkeit erhalten hierbei die verschiedenen Wege der Arbeit mit Wut und das Bedürfnis des Patienten nach genügend innerem Raum, um das Trauma anzugehen. Der Artikel erlaubt es dem Leser, einige der Erfahrungen sowohl der traumatisierten Patientin und ihrem Weg der Heilung als auch die Unterstützung des Therapeuten auf diesem Weg zu teilen. Ablack untersucht des Weiteren die Bedeutung von und Arbeit mit Abstammung als einen bedeutenden Teil/des therapeutischen Prozesses. Zusätzlich enthält der Artikel einige Schlüsselpunkte betreffend das Lernen von Psychotherapeuten, Ausbildern und Vorgesetzten über die Arbeit mit Patienten, Ausbildern und Vorgesetzten, die anders als man selbst sind.*