

## **Moving beyond Ambivalence and Fear to Embodied Relationship: Group Psychotherapy Informed by the Principles of Somatic Experiencing®**

Peter J. Taylor, PhD, SEP, CGP, FAGPA

Roger Saint-Laurent, PsyD, SEP, CGP

We've been invited to present this year's LGPS Spring Institute on the topic of "Moving beyond Ambivalence and Fear to Embodied Relationship: Group Psychotherapy Informed by the Principles of Somatic Experiencing." We will present a set of principles adapted from Somatic Experiencing (SE) that we find invaluable for deepening the work of group psychotherapy, and demonstrate their application.

For those of you not familiar with SE, we thought it might be useful to share a little about it and forecast what you might experience if you join us for a taste of its application to group work. Please bear in mind that as our work has evolved, we have ourselves moved beyond the resolution of trauma per se (which for many is the focus of SE) and towards the resolution of what stands in the way of deep and authentic relationship—obstacles that live at a deep, physiological, "survival-brain" level. Because this work develops out of the principles of SE, we're interested in sharing some of those with you and then demonstrating how they can illuminate group processes and guide interventions in ways that foster transformative growth and deeper and more meaningful relationship.

But first a word about ***how we'll be forming the demonstration group***. In keeping with what might be called good nervous system hygiene (and what happens in the real world, in terms of entering and leaving groups), we try to avoid the unnecessary arousal spike (for participants *and* for us) of either jumping into a demonstration group with no preparation or ending the group with no completion. Thus, we arrange, prior to the conference, a video conversation with anyone interested in being in the demonstration group to answer questions and confirm the person's interest and appropriateness for the group. Then, we begin the group as one of the many experiential groups on Friday morning, so that members can join as a group and begin their exploration of this way of working in private. We continue our work in public as the demonstration group, for three sessions, with a second private experiential group in the middle of those and a final one after the third demonstration group. Conference participants who are not part of the demonstration group will similarly meet in experiential groups three times—before, during, and after the demonstration groups—with other group leaders, who will undoubtedly have their own approaches to the conference theme of seeking deeper and more embodied relationship. It is our hope that this schedule, and this way of forming and holding the demonstration group, will allow for a rich and authentic group experience for all.

If you would like to consider joining the demonstration group, please contact us at either [peter@drpetertaylor.com](mailto:peter@drpetertaylor.com) or [roger@drsaintlaurent.com](mailto:roger@drsaintlaurent.com) to discuss your interest. We look forward to meeting and working with you!

### ***About SE***

"Trauma is in the nervous system, not in the event," writes Peter Levine, PhD. Through forty-five years of observation, research, and clinical application, Dr. Levine has developed Somatic Experiencing®, a body-based approach taught throughout the world, which offers a new and hopeful perspective on trauma, recognizing that, like all mammals, human beings have an instinctual capacity to heal.

Under perceived threat, most mammals react almost identically. They automatically mobilize a tremendous amount of energy to enhance their chances of survival, releasing chemicals and hormones that increase strength, perception, stamina, and pain tolerance. Once the threat has passed, or the animal has successfully escaped, the system returns to the pre-threat state. Wild animals allow this organic process to occur without interruption. They reset the homeostasis in their bodies through gentle shaking or trembling, sweating, panting, or bucking. Younger animals discharge by replaying the trauma, often many times, by play fighting, tumbling, and chasing.

Although humans possess regulatory mechanisms virtually identical to those in animals, these instinctive responses are often overridden or inhibited by our complex neo-cortices, our developmental histories, and our socialization. This inhibition keeps the survival arousal trapped in the body, together with normative impulses for specific defensive or protective motor acts. Since the organism is designed to respond to threat by fleeing, fighting, or freezing, when these impulses are interrupted, the sympathetic nervous system stays primed and ready to react. The body responds as if the trauma is still occurring and keeps the person in a state of constant readiness and unnecessary reactivity, leading to a constellation of familiar symptoms, including anxiety, panic, hyper-vigilance, flashbacks, emotional lability, depression, pain, patterns of bracing and collapse, cognitive dysfunction, behavioral problems, addictions, and an ongoing sense of intrusion and overwhelm.

SE offers a variety of gentle, somatically-based techniques designed to re-regulate these deep-seated disturbances in arousal. Focusing not on content or story but instead starting with awareness of bodily sensation, individuals begin to access restorative action patterns, allowing the highly aroused survival energies to be safely and gradually neutralized in the neuromuscular and central nervous systems. Thus, rather than changing behavior, SE works with the *physiology*, accessing the “motor” that drives these debilitating symptoms.

### ***SE and Group***

Over the last ten years, we’ve conducted many SE-related workshops and Institutes both privately and at AGPA and several of its affiliate societies. Workshop participants have been uniformly impressed by the power of SE, and we’ve identified three major themes of SE-informed group psychotherapy.

We find that normalizing the inevitability of physiologically-driven survival responses can be enormously healing, even life-altering, for people who previously thought there was something wrong with them when their bodies inevitably, under threat, do what bodies do—and now discover that help is available when their bodies have gotten “stuck” in patterns that are no longer necessary. So, rather than encouraging immediate interaction that can flood the system, we support group members as they recognize and honor the subtle signals of danger they have previously ignored or overridden—and then, after appreciating the body’s capacity to signal danger, inviting assessment as to whether and to what degree *this* particular situation is actually dangerous, *now*?

In addition, we notice that one person’s traumatic history can be more easily held and renegotiated in the interpersonal field of a reasonably safe, respectful, and concerned system of fellow group members; that work by individuals on their own traumatic patterns enables vicarious healing of similar patterns in other members; and that the capacity to manage arousal simultaneously increases both in the focused-on member and in others.

Finally, we are constantly struck by the value of watching, from an SE perspective, as activation and overwhelm ebbs and flows in the here-and-now group interaction, at all levels: the dyadic, the subgroup, and the group-as-a-whole. Members come to recognize the immense value of tracking their own internal states and those of others, and of taking these cycles of activation and settling into account prior to attempting a piece of interpersonal work. Coming out to meet another from a place of increased internal resiliency allows much more deeply-felt “moments of meeting,” of great value both to those directly engaged in the interaction and to those touched by the meeting of others, as can happen in a group. As group members practice what can be understood as good autonomic nervous system hygiene (compared to simply “being nice” or “avoiding conflict”), they develop more secure attachment patterns, attachment patterns that are genuinely embodied rather than “performed” under the perceived demands of social or group norms, while the physiology, inside, is quaking in its boots.

Thus, in the SE-informed group, members begin to understand what supports the development of resiliency for each person and to take great satisfaction in each other’s growth—and in discovering that healthy interpersonal engagement can be among the most self-regulating and joyful of all human experiences. We look forward to offering you the opportunity to discover the healing power of this work at the upcoming LGPS Spring Institute in May.

(A deeper exploration of these issues can be found in our recent article for the *International Journal of Group Psychotherapy*, “Group Psychotherapy Informed by the Principles of Somatic Experiencing: Moving Beyond Trauma to Embodied Relationship,” which can be found online at <http://www.tandfonline.com/doi/full/10.1080/00207284.2016.1218282?scroll=top&needAccess=true> or at <http://www.drpetertaylor.com/SE-Informed%20Group%20Psychotherapy%20for%20Int'l%20Journal%20of%20Group%20Psychotherapy.pdf>

*Peter J. Taylor and Roger Saint-Laurent are clinical psychologists, Certified Group Psychotherapists, and Somatic Experiencing® Practitioners in private practice in New York City and Westchester County (NY). They have assisted at thirty-eight SE trainings throughout the US and Canada and they offer an ongoing training group in SE-informed group psychotherapy as well as frequent workshops and Institutes at AGPA and its affiliate societies. They have both served on the Board of Directors of the Somatic Experiencing® Trauma Institute, and Peter is past-president of EGPS and a Fellow of AGPA. More information about their work is available at [www.drpetertaylor.com](http://www.drpetertaylor.com) and [www.dr saintlaurent.com](http://www.dr saintlaurent.com). Thanks to SETI and to Ariel Giarretto, SETI Senior Faculty, from whom some of the “About SE” part of this article is adapted.*