

# The Impact of Psychotherapy and Counselling on the Alexander Technique

## **Abstract**

*Over the past two decades there has been discussion within the Alexander community regarding the advisability of integrating counselling and psychotherapy skills with the Alexander Technique. This article presents some of the findings of Brigitta Mowat's MSc dissertation, in which she explored the impact of counselling and psychotherapy skills on the practice of the Alexander Technique.*

*She interviewed twelve qualified Alexander Technique teachers who had also trained a minimum of two years in counselling and/or psychotherapy. The data was analysed and discussed and illustrated by verbatim extracts from the study.*

*The analysis revealed that participants' use of counselling and psychotherapy skills enhanced the quality of their relationships with Alexander Technique pupils. The data also indicated that participants drew on their counselling and psychotherapy skills to address the shortcomings they perceived in the Alexander Technique. The data indicated that participants considered their experience of personal therapy vital to both the acquisition of therapeutic skills, and the application of those skills to Alexander Technique work, in particular with regard to the management of emotions and the management of the teacher-pupil relationship.*

I have recently completed an MSc in Counselling and Psychotherapy in Health and Social Care at the University of Surrey Roehampton, in the course of which I wrote a dissertation entitled *The Impact of Psychotherapy and Counselling on the Alexander Technique*. I was interested in finding out how Alexander Technique (AT) teachers who had trained in counselling and psychotherapy (c/p) made use of psychotherapeutic interventions in their AT work.

Data was collected in one-hour-long semi-structured interviews (i.e. all the interviewees were prompted with a short list of the same questions, and they were allowed to talk at length) (Smith, 1995) from twelve qualified AT teachers who had not only also received a minimum of two years' training in c/p, but had additionally undergone personal therapy.

A qualitative approach (i.e. one that validated the interviewees' lived experiences) was considered most appropriate, calling for a method of evaluation called *Interpretative Phenomenological Analysis* (Smith, 1996) to assess the results.

## **BACKGROUND**

My experience as an AT teacher, and anecdotal evidence from colleagues, convinced me that psychological issues could, and did, arise as a result of changes in a pupil's neuromuscular system during a lesson. I was also aware of a debate within the AT community as to whether knowledge of the theory and skills of c/p would benefit the AT in general.

A series of publications have appeared in the last two decades proposing that elements of c/p could be integrated in the AT, a concept that has considerably challenged the isolationist tendency of more orthodox members of the Alexander community (Rickover, 1986; Whistler, 1987; Naylor, 1988; Rubenfeld, 1992; Rutherford, 1993; Protzel, 1994).

More recent attitudes within the AT are contained in a recent study (Atkinson et al., 2001) that explored the attitudes of AT teachers towards c/p. The study revealed that 46% of respondents had undergone c/p training or shown an interest in it. Furthermore 69% of respondents considered that their AT teaching would be enhanced by a basic knowledge of counselling skills.

The question why an AT teacher would turn to c/p theory and skills is at the root of this article. Broadly speaking, there are two main areas where participants felt that help was needed: in managing the emotions, and managing the teacher-pupil relationship.

## **MANAGEMENT OF THE EMOTIONS**

Nicholls & Carey (1991) described a central dilemma in the AT, stating that the AT work releases chronic muscular tension patterns that can lead to re-emergence of blocked-off feelings. However the AT had no theory that explained why emotions became repressed (1991:32). Rubenfeld (1992) also observed the link between bound-up muscle tension on the one hand, and bound-up emotions and their emergence through physical release on the other: she herself “crying, laughing and angry” as a result of her AT teacher’s hand contact; the connection between the body and emotions was obvious to her. She stated that if emotions could not be expressed when they occurred they would become repressed and held again as physical tension in the body. She, too, commented that the pupil’s expressed emotions were a source of conflict for the AT teacher due to the Technique’s inability to “explicitly acknowledge the emotions” (1992:351-352).

On the same topic Murrow (1994) stated that “the touch of an AT teacher has the capacity to create a space within which emotions held down by patterns of tension can surface and enter consciousness, often quite unexpectedly (...) For a release to be complete, the emotion must be fully experienced” (1994:49).

This is the crux of the matter: could it be that the AT needs to learn from certain types of c/p to gain a deeper understanding of why pupils react as they do in a lesson? Of the gamut of c/p approaches, Body Psychotherapy and Gestalt Psychotherapy appear to have most in common with the AT, and in addition offer theoretical answers to the dilemma stated (at the beginning of this section) by Nicholls & Carey (1991:32). For example body psychotherapy theory makes the link between bound-up muscle tension and bound-up emotions. Reich (1997), founder of body psychotherapy, defined repression as defensive reactions to conflicts, these reactions being stored in various parts of the body in the form of muscular ‘holding’: “Every muscular rigidity contains the history and meaning of its origin” (Totton, 2002, cited in Staunton, 2002:13). A knowledge of body psychotherapy theory would give the AT theoretical backing, wherein a pupil’s emotional reactions could be acknowledged and understood in the context of his/her lived experience and history.

To efficiently process feelings that arise during a lesson, it is important that the AT teacher remain focused while working with the pupil. This ‘here and now’ focus is to be found in the Gestalt approach (Clarkson, 1999), which incorporates body sensations simultaneously with the words being spoken. Its founder, Perls, who had received

lessons in the AT, drew some interesting parallels between the AT and c/p. He was particularly interested in the way the AT educated self-awareness and kinaesthetic experience. Yet he was critical of Alexander's approach because he believed that the AT ignored the emotional meaning of tension and posture and encouraged a sense of split between Self and body by teaching control of the body by the ego (Perls, 1947, cited in Kepner, 2001:214-5).

Whistler (1987), Naylor (1988) and Maunder (2002) all suggested that pupils whose life development had been problematic would benefit from an AT teacher who had also had some counselling skills. Naylor (1988) thought that underlying emotional problems from the pupil were likely to surface in AT work, and that these could not be resolved by simply attending to 'misuse patterns' (1988:21-6). However, an integrated approach involving the use of the AT with c/p skills could be of advantage (Rubenfeld, 1992; Ogus, 1994) as outlined below.

Ogus (1994) stated that c/p training and personal therapy might enable an AT teacher to use a variety of personal references derived either through an understanding of psychological theories or experience of personal therapy. In the instance where a postural issue was of psychological origin, the AT teacher might have the competency to explore with the pupil thoughts and feelings related to the postural issue through psychological intervention or by "simply being present" (1994:26).

Analysis of the twelve interviews revealed that participants' use of counselling and psychotherapy skills enhanced the quality of their relationships with AT pupils. The data indicated that participants drew on the counselling and psychotherapy skills they acquired as a result of study to address the shortcomings they perceived in the AT. In addition it showed that participants considered their experience of *personal therapy* vital to both the acquisition of therapeutic skills, and the application of those skills to AT work.

The majority of participants commented on the absence of emotional processing in their AT training. This may have been one reason why they were turning to c/p, as one illustrated:

*"Because there is physical contact in the AT it raises all sort of issues about whether emotions are out in the open and talked about or not. The intimacy of the situation means that inevitably you are dealing with emotions either in a very direct way or just in a subtler way. When you have hands on, or you are standing very near the person, or you are looking at and observing them, that's when I would see the therapeutic element coming in, where I feel that I need to be thinking about the person and looking after them."*

When pupils' emotions surface in an AT lesson the teacher's attitude is crucial, as another noted:

*"People will talk about their feelings. They may get very emotional and upset and if I'm comfortable with that, and if I can just be present and stay with them through that, inhibit, direct, give them space, give them time, this enables them to really open up and be who they are in that teaching room. If I can enable someone to trust me and to trust the situation enough to really be themselves, maybe we can make changes for the better, but I think that needs to happen before we can really change. I think any other kind of change is in danger of becoming a change imposed from above while avoiding underlying issues that result in misuse and anxiety and non-breathing – all the things that people present as symptoms."*

This account suggested that pupils may feel quite vulnerable in an AT lesson, which was why it is important to create a 'safe space' where such feelings could be acknowledged by both teacher and pupil. The above teacher's response to change was to establish a trusting relationship with the pupil and engage with underlying emotional issues, as was the following teacher:

*"I've had people bursting into tears when they come for a lesson. I probably respond more as a person or a therapist than as a teacher; so if they burst into tears, I don't feel I need to have my 'Alexander' hands on their neck; instead, I put my hand on them, or hand them a tissue, or talk to them about it (...) I might then see if I could work with that as an AT teacher ('would it help to maybe lie on the table rather than sit on the chair?'), but I think my first response would be to engage with it".*

This teacher was putting into practice what she had experienced from her therapist. Both the above accounts demonstrate strategies for processing emotions within the AT framework.

Participants felt that orthodox AT lessons, though physically and mentally liberating for the pupil, did not give pupils the space to express negative emotions. This may suggest that the issue is inadequately addressed on AT training courses.

One teacher felt that little space and attention was given during his AT training to the expression of emotions, making it very difficult for him to improve his well-being:

*"You can't say "I'm feeling terrible" on the training course. No one wants to hear that. You just say: 'I'm fine', or 'I'm not so good today', but you don't get the opportunity to really explore things that are going on in your life, and if you are not able to explore those emotional issues, how are you going to make them better? (...) I just felt it was plastering over the surface the whole time, it isn't allowing me to go deep and really change".*

Kepner (2001) said that unless the change of habit came about by addressing its reasons for existence, it could only be mastered, not undone.

## **MANAGEMENT OF THE TEACHER-PUPIL RELATIONSHIP**

In this, the second of the main areas where participants felt 'outside' help was needed, the data from the interviews revealed four sub-domains: issues relating to transference, touch, boundaries, and the therapeutic relationship. There is an additional section that covers specific skills drawn from certain c/p approaches.

### **Teacher-pupil issues: transference**

In the context of the AT, transference could be defined as the pupil's conscious/unconscious perceptions of the AT teacher, and the wishes, needs and feelings they bring to the lesson that originate from the past. One teacher described how her understanding of transference, derived from her c/p training, helped her to manage her emotions and those of the pupils by interpreting transference feelings as projections from the pupils:

*"The counselling and psychotherapy informing my Alexander work was a huge impact for me. Transference and countertransference isn't addressed on training courses, and it's cropped up in my AT work. I've had a couple of pupils who have fallen in love with me, and I really dealt with it as a transference issue. I wasn't discussing it with them in those terms, but my behaviour dealt with it in those*

*terms. I might have found it very much harder to deal with if I hadn't done the therapy training".*

It seemed that her knowledge of therapeutic processes prevented her from getting drawn into her pupils' unresolved conflicts from the past.

### **Teacher-pupil issues: boundaries**

In c/p, boundaries play a vital role in the therapeutic encounter. They are an agreed set of parameters (a 'holding structure') within which the c/p takes place, helping the client to know where he/she stands within the relationship. Boundaries can include agreements about the time and place where the session is to be held, what happens if the client cancels at short notice, the therapist taking holidays, the length of time of the therapy (e.g. ten sessions, or open-ended), and so on. Boundaries also include non-tangibles: working with friends or family is considered to be unethical; the therapist, as a rule, never self-discloses details of his/her personal life; session is not allowed to degenerate into a chatting session: too much chatting negatively impacts the teacher-pupil relationship as it overwhelms, and diverts attention away from, the pupil.

A 'working contract' between therapist and client is negotiated at the outset: the client pays the therapist to be there for him/her on a regular basis; the therapist expects the client to respect the agreed terms.

There is no reason to think that these boundaries cannot apply to the AT setting: establishing the correct infrastructure from the outset avoids all manner of confusion because everyone knows where they stand.

One teacher commented on the fact that AT teachers were not taught how to deal with boundaries. Instead they were taught friendly manners:

*"We are trained to be friendly (...) the problem being friendly is that it's quite difficult to hold boundaries: for example if someone is late, if you are a good friend, you are not going to complain about being ten minutes late, are you? Good friends don't do that".*

### **Teacher-pupil issues: touch**

The psychological dimension of physical proximity and hand contact is another under-researched topic in the AT. There are few references discussing this in the available AT literature (e.g. Rubinfeld 1992; Murrow 1994). This is in stark contrast to c/p, where the topic has been extensively researched.

Participants' talked about the handling of intimacy, and pupils' expressions of vulnerability or dependency:

*"The lying down bit has to be regressional – babies lie down and they can't stand (...) I keep realising what a journey we are going together on each time".*

*"I take up people's heads. On the table I say, I want you to let me have your head (...) and the fact that they are giving up control (...) I frequently think to myself: I wonder when was the last time you did this? I guess we are back to when they were three months old, whenever a baby develops its own neck muscles, going a long way back, and I think touch is taking us into that place".*

Both teachers observed that the physical work in an AT lesson could lead the pupil into a regressed state and evoke developmental issues. They felt that the physical movement in an AT lesson, when accompanied by the pupil's muscular releases,

needed to be met by reassurance from the teacher. This can be communicated through sensitive hand contact and a 'therapeutic relationship' (see next section): surrendering habitual control can be, as one teacher put it, a frightening experience for a pupil.

### **The therapeutic relationship**

An AT lesson can, arguably, be conducted by the teacher 'at arm's length': a successful outcome simply requires a teacher to use acquired AT skills on the pupil. The focus is on the pupil's Use; again, arguably, the personality of the teacher, or the quality or otherwise of the relationship between the protagonists is irrelevant.

By contrast, the focus in most c/p approaches is on the dynamic between the therapist and the client: to a large extent, the relationship *is* the therapy. The therapist is not simply applying a set of skills, but is emotionally engaged with the client.

One teacher commented on the fact that AT teachers were not taught how to conduct themselves in a therapeutic relationship:

*"We are not trained as AT teachers to consciously attune from the minute they walk into the room to the minute they leave, and watch ourselves as we are entering into that relationship."*

Participants commented that the lack of awareness about the value of establishing even a simple therapeutic relationship led to premature terminations of courses of AT lessons, or did not allow a deepening of the AT work. On a positive note, their knowledge of the relevance of the therapeutic relationship brought many benefits to their teaching. Participants learned to recognise and understand experiences with clients as part of a relational process by means of c/p training and personal therapy. They also learned to be aware of and use their own emotions, thoughts and reactions in the service of understanding the client, and in creating a rapport with the pupil that allowed them to go beyond the conventional learning contract:

*"I think one of the things I can do is pick up more clues about what they are saying and I can be less frightened of running with them, so I'm not frightened of going into a really frightening place".*

*"Very quickly I can kind of psychologically assess the pupil by just having my hands on him. I could quite quickly assess his psychological state. I could make some guesses and image how he is in his life and in his relationship, so I'm sure that, because of my psychological understanding, I can pick up more information from someone's body because I know about defence mechanisms in the body and how things are held in the body, how people respond to touch. I guess it helps me to be quite sensitive to what people need in terms of how to approach the lesson (...) it also helps me to cope with difficult students".*

### **The integration of psychotherapeutic skills in the AT**

Participants identified a range of therapeutic skills that, over time, had become part of their approach to their AT work: these included listening without interrupting, accepting without passing judgment, selecting a response carefully rather than reacting habitually, being aware of boundaries, and adopting different roles for different situations.

*"A Gestalt therapist looks at your body as well as the words that are being said, so that there is an enormously rich display that is going on all the time and that is something that I use a lot with the AT. This isn't to say that I necessarily addressed*

*it specifically with a client, but I would notice it and use it in part to design or suggest that they try something (...) they might try and exaggerate a movement and of course this links with the 'use of the Self' completely (...) When I understood more about the AT I became totally fascinated by the interface between these two methods".*

This teacher drew from her Gestalt training, where physical expression is viewed as an expression of the whole person. She also talked about the importance of learning the meaning of what is expressed through body gestures. This relates to Gestalt theory, where human activity is viewed as people's needs to give meaning to their perceptions, experience and existence (Clarkson, 1999:5).

Another teacher described how her knowledge of body psychotherapy (Reich 1997) informed her about developmental issues, which were a reflection of the pupil's life experience:

*"It's a mixture of some theory with knowing about development of fetuses, babies, children and adults; the Bioenergetic theoretical model is very helpful in terms of seeing the different developmental stages and what can go wrong, but then translating it into how movement gets fixed in any particular stage when I'm working hands on with somebody, or when I'm looking at them, looking at their structure, and relating it back to what may have gone wrong or may have gone missing in their growing years. I think about that on some level every time I see somebody, just because that's what gets defended over and over again all, those early places. It's a very enriching thing to be able to know".*

## **CONCLUSION**

Overall, two topics emerged from the database as being of consistent and significant importance to participants: the first of these was the issue of emotions.

Participants held the view that their responses to pupils' emotions were crucial; they considered it important to reassure their pupils that emotional reactions in a lesson were natural and healthy, and part of the process of freeing the Self. This concurs with Reich's declaration (1997) that emotions surfacing as a result of physical release need to be re-integrated through expression within the relationship with the therapist. There was clear evidence that participants worked with emotions as an integral part of their AT work, either through direct intervention in the relationship, or by being present in a holding capacity.

The data suggested that the pupil's internal conflicts that surface as a result of AT work were to a large extent left unprocessed, which limited his/her ability to release physical holding (Bouchard & Wright, 1997). Some participants felt strongly that the implied need to refer emotions to a third party (e.g. a counsellor or psychotherapist) invalidated the AT's claim to be a psychophysical method. In other words the AT might actually be reinforcing a body-mind split if emotional or developmental issues could not be addressed as an integral part of a lesson.

These findings indicated that emotional habits need to be addressed and understood by the Alexander community, without which it misses out on the opportunities that cross-fertilisation have brought c/p as a whole, such as growth, dynamism and expansion. Emotions should not simply be ignored, nor can they be wished away.

The second topic that emerged from the database as being a consistent and

significant issue for participants was the management of the teacher-pupil relationship.

The data indicated that the focus of the work in a traditional AT lesson was on the pupil's physical use, physically directed and verbally instructed by the teacher. The quality of the teacher-pupil relationship came across as being of secondary importance. On the whole participants considered physiological and psychological processes as aspects of one, integrated, organism; they wished to relate to the pupil as a whole person, not a body, which meant that the relationship with the pupil acquired a special significance: pupils were therefore given the space in the AT lesson to express and work through emotions if they wished to do so.

Whilst participants conceded that this signified a departure from the traditional educative approach of the AT, most participants strongly felt that it was not in opposition to it, although a small minority expressed concerns that the direct use of c/p skills would turn the AT lesson into a counselling session and dilute the essence of the AT. According to the data, all the participants integrated therapeutic elements within the AT framework to a greater or lesser extent, using various aspects of the therapeutic relationship and a range of therapeutic skills to meet the needs of the pupil and to facilitate psychophysical changes in him or her.

These findings supported Ogus's (1994) contention: "Postural issues can very often have psychological origins. If we can create a space to look at these feelings (...) we begin to make real steps towards psychophysical harmony" (1994:26).

Participants used c/p skills such as listening and reflecting to create space to talk through and explore issues within the AT framework, where this was deemed appropriate or necessary. Other participants drew from the Gestalt model to relate to physical symptoms as an aspect of the unity of body and Self, whilst others found the body psychotherapy model useful to understand pupils' presenting problems in developmental terms.

The teacher-pupil relationship can also be impacted by boundary issues, and the data revealed these to be of significance to participants. Whereas the participants received no AT training in the management of boundaries – teachers may even be unaware that such things exist and that they can easily negatively impact the relationship – all the participants were aware of them by virtue of their c/p training and personal therapy. Boundaries are part of a holding structure; in the case of c/p they play a vital role in the therapeutic process by facilitating a professional environment within which all parties know their roles. Individual accounts in the data revealed that participants addressed and implemented these in their AT lessons.

Hand contact and close physical proximity are a *sine qua non* of the AT teacher-pupil relationship, but participants' accounts revealed that the AT offered little or no theoretical underpinning of the psychological implications for the teacher or pupil; nor was there much practical guidance regarding the intense feelings (e.g. developmental issues) that touch could evoke in the pupil. This is where a knowledge of the transference relationship (Clarkson, 1996) would greatly benefit an AT teacher. The pupil's range of feelings, wishes, fantasies, fears and so on, remain unexplored in a conventional AT lesson, and therefore unmet.

The overall conclusion suggests the inclusion of therapeutic relationship skills in the training of AT teachers would help resolve the shortcomings in AT training discussed above. Such cross-fertilisation would require much thought and care to avoid diluting the essence of the AT, a unique and highly beneficial psychophysical method valued



internationally. Any changes should be directed towards enhancing the popularity and value of the AT by making it more flexible, open, teacher and pupil-friendly.

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