

Feeling and action are different

Feelings and actions are different! Feelings are internal events that take place within your bodymind, while actions are things that you do (or someone else does) in the external world. Feelings may suggest particular actions (sometimes quite strongly), but it is always possible, in principle at least, to have the feeling without taking the associated action.

You may have grown up not knowing this. You may have learned, instead, that scary actions — your own or somebody else's — came with scary feelings. Your molester may have told you that "I can't help myself because you make me feel so good." You may have known anger only from a violent parent who beat you without reason. You may still fear anger, in yourself or in others, because you believe that anger can be expressed only through violence. You may still fear sexual feelings because they might bring unwanted (and perhaps out of control) sexual acts by you or whoever else is present.

Even if you came from a well-adjusted, functional home, the distinction between feeling and action may still have been blurred by well-meaning parents who did not understand it themselves. Parents need to teach their children to control actions that might be dangerous or socially unacceptable — not to climb up on the kitchen counter to explore the cabinets, for example, or to rub your genitals in public. These actions can be triggered by identifiable feelings (e.g., curiosity leading to climbing on counters, or sexual feelings leading to rubbing the genitals), so your parents might have found it easier to teach you to repress the feelings (e.g., by labeling them "bad") than to teach you to control the action in spite of the feeling, especially if they did not understand the distinction very well themselves.

But *feelings and actions are different*, and no feeling *necessarily* leads to any particular action. Understanding this, and learning to separate feeling from action, will allow you to feel what you need to feel, without fear that those feelings will trigger unacceptable actions (by yourself or by others).

The inner child

The "inner child" seems to be a trendy concept right now, but it does describe a real, and very common, phenomenon. One way of handling trauma as a child is to break off a fragment of yourself and assign it the job of dealing with the trauma. You encase the fragment in a protective sheath of muscular tension, walling yourself off from the traumatic experience she took on. Years later, when that sheath of tension is relaxed, that fragment and her experience can come into your consciousness as an inner child.

Mary⁴ habitually held her chest and ribcage stiffly, restricting her breathing and creating recurrent upper back pain. She lay now on her side on my table, as I sat behind her gently probing her spine and ribs, encouraging her ribcage to soften and her breathing to deepen. I moved around the table to the front of her body, pressing gently on her sternum, encouraging her to exhale more deeply and relax into a fetal position. This would help reduce her rigidity, I knew, and diminish the stiffness in her spine. Her chest softened, her face relaxed, and her breathing became more regular. She began to whimper softly, and her face took on the look of a young child.

"How old are you?" I softly asked.

"Five," she replied, in a much younger voice.

"That's fine," I said, "just notice what it's like to be five." I rested my hand on her ribs, gently monitoring her breathing, encouraging her to be with her experience. She lay quietly, whimpering softly and occasionally twitching slightly. After a few minutes I asked "What's it like to be five?"

"It's scary," she answered, "I don't like it when Mommy hits me."

I asked the child if it was all right for me to be touching her, and assured her that if it felt scary she could tell me to stop. She said she liked my touch; it made her feel safe and cared for. She usually felt like she was all alone, and it was nice to have someone to talk to. I encouraged the child to feel the presence of the adult Mary and encouraged Mary to feel the presence of the child.

Many people have "inner children" like this. Some people have many, embodying experience encapsulated at different ages. The adult has sometimes been in touch with the child before, but often never realized the child was there until she surfaces during our session.

And yet, the child has often been a very real presence all along, experienced by the adult as fear and free floating anxiety. It is as if the child had been locked in a dark and lonely closet, able only to dimly sense what is going on outside. When something frightens her, she can only communicate her fright by yelling and screaming and pounding on the door. The adult experiences this as unfocused fear, suddenly and inexplicably flooding her system. The rest of the time the child is quiet, lying there unnoticed, or perhaps felt as an ongoing mild anxiety.

Once the child comes out, I encourage the adult to maintain regular contact and to develop better ways of communicating with her. Bring her to the

⁴In case examples the names and some of the details may be changed to protect the privacy of the individuals involved.

surface in the midst of pleasant experiences like walking on the beach or watching the clouds on a beautiful day, I suggest. Think of her as someone who was locked up in a closet for years. She now needs to learn that the world is bigger than that closet, and can be a source of good as well as bad experience. As she does she will be frightened less often, and as she and the adult learn better ways of communicating she will no longer need to flood the adult's system with fear in order to get attention.

Learning to communicate with your inner child, and to provide the support and love she has been missing all these years, can be a major source of healing. As the communication between adult and child improves, the muscular barriers between you are no longer needed and you can reclaim the parts of yourself those barriers walled off. Dismantling those barriers further aids your access to and communication with your inner child (or children). In this aspect of healing, as in others, the psychological and the somatic heal together.

Empowerment

Emotional trauma is often accompanied by a significant loss of personal power. When you cannot protect yourself from molestation, rape, or other abuse, you feel helpless, victimized, and disempowered. If this happens repeatedly, you can develop a permanent sense of yourself as a powerless victim. Reclaiming your competence and personal power plays an important role in your healing, so your healing process needs to support your empowerment.

I stress from our first session that you are in charge of what goes on, and that you can (and should) stop me if anything feels painful, threatening, or invasive. That does not mean that we will avoid threatening areas, but that we will enter them only when you are ready, and at a pace and with an intensity you can handle.

Increasing somatic awareness plays an important role in your empowerment. Feeling the ground under you brings a greater sense of capability and physical security. Sensing the volume of space that you occupy, and acknowledging your right to occupy that space without always pulling yourself in and making room for others, can be tremendously empowering. Realizing that you now occupy an adult body big enough to protect yourself against the people who abused you as a child can be a wonderfully empowering insight to an inner child who still thinks of himself as too small to protect himself effectively.

Sense of self

You are a unique individual, worthwhile for who you are, capable of meeting and coping with

life's problems and opportunities as an independent, autonomous being. Many survivors do not experience themselves that way, but only sense themselves reflected in their relationships with others. Depending on these relationships for their sense of self-worth, they constant seek approval from others. They lack an autonomous *sense of self*.

Many things contribute to your sense of self, but among the most basic is your somatic awareness of yourself as a physical being who lives and breathes and takes up space in the world. This somatic sense is centered, in some important way, in your lower belly — area below your navel that the Japanese call the *hara* and the Chinese call the *T'an Tien*. People who have a solid ongoing proprioceptive awareness of that part of their body generally experience themselves as stable and well-grounded, while people who do not have this awareness often experience chronic anxiety and a poor sense of self psychologically.

Emotional trauma diminishes that somatic sense of self in at least three different ways. First, it diminishes your overall ability to feel, and specifically diminishes your proprioceptive body awareness. Second, because your belly is close to your genitals, the repression of sexual feelings that accompanies molestation or simply comes from growing up in a sexually repressive family will interfere with awareness of your lower belly as well.

Finally, if you grew up in an abusive and dysfunctional environment your abusers may have routinely attacked your psychological sense of self directly, as a means of exerting power over you. These attacks may have included belittling you, telling you how stupid or worthless or ugly you were, and otherwise not treating you as a worthwhile human being. You may have responded by tightening your belly and your pelvis to protect your self, but the walls you put up to keep the others out shut yourself out as well, diminishing your ability to feel that part of yourself.

Psychosomatic reintegration supports you in reclaiming your sense of self, by helping you to relax the muscular blocks to awareness in your belly and pelvis, and to bring that area back to awareness.

Self acceptance

The bottom line is *self-acceptance*. Whatever caused you to cut off your feelings in the first place, part of what keeps them cut off is the idea that you are not OK as you are. If those feelings surfaced and anyone saw them, you think, they would certainly find you unacceptable and reject you. So you keep the feelings down and out of the way, hidden from yourself as well as from everybody else. Then you can pretend you do not really have them, and are not really "like that."

Somatically, this lack of self-acceptance manifests as a constriction of proprioceptive self-awareness, as you block information from parts of yourself you cannot accept. But as your proprioceptive self-awareness grows, those parts come closer to consciousness, and the need to acknowledge and accept them increases. I facilitate your self-acceptance by being very non-judgmental and accepting of you. When you find that I can accept parts of you that you thought were totally unacceptable, you have a new benchmark against which to evaluate yourself. If someone else can accept you, perhaps you are not as bad as you thought, and self-acceptance becomes easier.

Debbie's father died when she was six, of a heart attack while he was in the act of molesting her. Her (somewhat unstable) mother blamed her for her father's death, calling her a "slut" who stole her father's affections. Her mother punished her brutally for this, both at the time and during years of subsequent physical and emotional abuse. Convinced that she was an utterly "bad" person who had killed her father, Debbie kept her past hidden from everyone she knew, including her therapist.

When she came to me in her late 30s, ostensibly to work with movement, Debbie held herself quite stiffly. As she began to soften and become more aware of herself, memories of the molestation and subsequent abuse began to surface. Initially, she fought to keep them down, believing that I was sure to reject her if I found out. I supported the feelings that came up in our sessions, and encouraged her to tell me as much about them as she felt comfortable with. Bit by bit the story came out (over a period of years, actually), and my continued acceptance in spite of her revelations allowed her to recalibrate her image of herself. Debbie is one of the most severely traumatized people I have worked with, and this process is still ongoing, but she is making progress.

The hardest things to accept about yourself, sometimes, are the things you wish most desperately to change — the fact that you drink a little too much, or feel scared whenever someone shows an interest in you, or cannot seem to take control of your life. So you deny you are like that, hoping that somehow the denial will change the reality. You are afraid that accepting how you really are means continuing to be that way forever.

But acceptance is not approval, and acknowledging the way something is does not mean giving in to it. Paradoxically, acceptance is often the first step to change. If you deny *what is*, then you cannot take the steps necessary to change it. Accepting *what is*, on the other hand, is the first step toward making things different.

My description of psychosomatic reintegration has been general and incomplete, as it must be. It is difficult to write in a linear, intellectual way about what is essentially a nonlinear, experiential process. These themes, and others like them, unfold in unique and personal ways for each individual. Some of the experiences described, like rediscovering a sense of the ground or realizing that it is all right to take up space in the world, may sound trivial when recounted verbally. But they can be lifechanging when they are experienced at the right time and in the right context. Emotional trauma is an experiential process, with somatic as well as psychological dimensions, and healing must ultimately involve all those dimensions as well.

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Ralph has worked extensively with survivors of many forms of emotional trauma, including childhood sexual, physical, and emotional abuse; dysfunctional family background; war experiences (both military and civilian); and rape and other forms of physical assault. He has written about this work in *Somatics* and *The Feldenkrais Journal*, and has presented workshops on it for both lay and professional audiences.

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