

## BODY-MIND INTEGRATION IN JUNGIAN PSYCHOTHERAPY FOR CHILDREN

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### Body-mind integration – Calatonia – Subtle touch Emotional Resonance – Transformation

This paper is dedicated to the physicians, psychologists, and other professionals who care for the health of children and their families. It prompts reflection on the importance of Pethö Sandor's Subtle Touch technique as a resource capable of promoting body-mind integration. By helping restore ties and bonds, it facilitates development of the child's body, mind, psyche, and anima.

In the 1980s, in Brazil, many psychotherapists who based their clinical practice on the Analytical Psychology of C. G. Jung called into question the utility, meaning, and place of bodywork in child psychotherapy. This questioning attitude specifically concerned the adequacy of some approaches, particularly for those therapists whose work did not focus solely on children with neurological and psychomotor disorders.

Born in Hungary, Dr. Pethö Sandor (1916–1992) emigrated to Brazil a few years after World War II and settled in the city of São Paulo. While still in Europe, he worked as a physician in hospitals and refugee camps, treating patients with neuropsychiatric and psychological complaints during a period of massive shortage of painkillers and other therapeutic resources. At this time, he began to systematize and substantiate his method: the first subtle-touch sequence of what would become Calatonia, based on the tenets of Psychology and Neurology.

He devoted himself mainly to study and practice of Body-Mind Integration, i.e., the relationship between the body and the development of consciousness; to the study and understanding of the symbolism of symptoms and diseases from the perspective of C. G. Jung's Depth Psychology; and to the implications of traumatic experiences for the physical, psychic, and etheric bodies.

Dr. Petho Sandor played an active role in adapting Calatonia as necessary to respect the unique characteristics of children and the specificities of child therapy. Thus, he developed brief sequences of Subtle Touch, targeting specific areas of the body, which are more appropriate for child psychotherapy.

The origin of the word Calatonia is the Greek verb *khalaó*, which indicates not only a state of relaxation but also a turning away from states of anger, rage, and violence. It also means opening a door, untying the cord of a wineskin, letting go, forgiving one's parents, and removing all veils.

Research on the reticular formation, vegetative representations in the cortex, and peripheral proprioception were the earliest foundations of scientific evidence for

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the method of Calatonia.

Gentleness, the core characteristic of Calatonia and of other Subtle Touch sequences, is a stimulus that is qualitatively unfamiliar to nerve endings; when picked up by the sensory receptors in the skin and conducted by afferent neurons, these stimuli operate at different levels in the nervous system.

The skin and the central nervous system share the same embryonic origin: the outermost of the three embryonic cell layers, the ectoderm. Besides being the largest organ of the body, the skin is unique in that its constituent elements are extensively represented in the brain. Their shared ectodermal origin may explain the wide-ranging phenomena sometimes observed with Subtle Touch stimulation. The skin, since its earliest stages of differentiation, remains in close connection with the central nervous system.

It has become increasingly important for physicians and psychotherapists who treat children, to gain awareness of Calatonia and Subtle Touch, in light of the knowledge provided by new neuroscience research.

In recent years, many studies with infants (Schore, 2003) have pointed out that the brain is a social organ, capable of constant adaptation, and that the child is already born ready for subjective exchanges. These studies support the importance of primary relational connections, emotional exchanges, and the different qualities of interaction as capable of promoting or hindering the maturation and differentiation of the brain, the mind, and the psyche, since birth. The interaction between inner neurophysiological processes and interpersonal experiences is perceived as being responsible of overall child development. A relationship that provides the child with new possibilities and maturational stimuli is able to transform ways of seeing, feeling, and acting (Cozolino, 2010).

Research on mirror neurons (Gallese, 2008) has contributed to our understanding of the ability to read mental states and intentions, providing a neurological basis for emotional resonance.

The neural resonance circuitry that codifies intention is involved in the construction of human empathy and emotional resonance, and is the result of minds being attuned with one another.

At all stages of human development, but particularly in childhood, the continuously developing mind and psyche cannot be understood without reference to a body in continuous maturation; their subsequent interactions constitute an important interface for the self-organization process.

The suffering of children for whom psychotherapeutic care is sought is often the result of insecure, ambivalent, and disorganized attachment.

For a child, emotional denial, failure to protect, physical neglect, emotional unavailability, the absence of a real relationship, biparental failure, and abuse (whether emotional, verbal, or physical) all constitute traumatic experiences. They produce defensive symptoms and structures, such as paralyzing phobias, depression, anxiety, obsessions, compulsions, and aggression, and often hinder the development of cognitive functions.

Spontaneity, imagination, and creativity – three elements essential for development and realization of the Self – are all paralyzed.

The psychic systems of the psychotherapist and of the child, in an intimate, mutual exchange between conscious and unconscious, create a wide-ranging communication network capable of promoting reparative processes. The relationship between the therapist and the child provides the possibility of rebuilding the bridge between awareness of an affective state and its experience at a structural level; an

opportunity to build new meanings in the child's bodily emotional experience (Wilkinson, 2006).

By including Subtle Touch in Psychotherapy, we create a resonant psychic space whose organizing and reparative effect has repercussions on the child's physical, psychic, and etheric bodies.

According to Dr. Petho Sandor, careful, in-depth observation of the processes that take place through Body-Mind Integration work constitutes an important aspect of the wider of this method: restoring the connection between body and spirit – *Religare*.

The resonance between the therapist and the child helps the latter overcome isolation, builds a path toward restoration from painful states stored in the body and psyche and, in our understanding, in the etheric body as well.

The psychic energy released through Body-Mind Integration work vitalizes the child. It supports an affect capable of promoting transformation and restoration.

By empathizing with the child's feelings, the therapist also becomes attuned with mental and bodily states that often go unnoticed by the child. This provides knowledge not only through objective external observation, but also through an opening of the therapist's Self to the Self of the child.

Both mind and body are required for such attunement. Emotional communication between the therapist and the child depends on subtle aspects of posture, gesture, movement, facial expressions, rhythm, pauses, and silences.

Dr. Petho Sandor emphasized the importance of the therapist synchronizing her own breathing with the child's breathing rate. Thus, many subtle touches also follow the respiratory rhythm, so that the stimuli provided will be attuned to the patient's inner experiences.

Subtle Touch in psychotherapy creates openings that lead to expansion of self-perception, sensitivity, self-confidence, and self-awareness of oneself as a being that exists beyond a physical body. They provide openings for experiences of elasticity of the spectrum of consciousness, which we believe are vital for development and restoration of health, as they enable unique gains in creativity, intuition, and adaptive capacity. They also potentiate many cognitive functions, such as attention, concentration, memory, and reasoning.

The experience of some psychotherapists highlights the importance of obtaining parental consent before incorporating Subtle Touch techniques into therapy, despite their noninvasive nature. By informing the parents, siblings, and other family members of what Subtle Touch is about and the evidence which substantiates it, they will also develop a willingness to work on this form of nonverbal communication, which in itself constitutes a multiplying effect and, consequently, a restorative effect on family ties.

Many families become more aware and more capable of rebuilding ties based on respect for differences and unique characteristics, mutual trust, and emotional resonance, thus enhancing and enriching affective communication.

Some children seek out painting, doll play, or clay modeling immediately after Subtle Touch has been performed, which suggests that channels of expression and communication have been opened. The development of symbolizing capacity ensures the transition from a primary awareness of inner states to a functional awareness.

Some mental functions, sacrificed to defensive positions of the ego, open up toward a possible restoration of the essential ego-Self axis. We believe that, just as the physical and psychic bodies, so too the etheric body has suffered ruptures and

tears in its energy fabric. Body-Mind Integration work through subtle touch provides new resources with which to establish new connections, thus allowing inner reorganization and recovery of the subtle or etheric tissue.

We believe that restoration of the energy tissue of the etheric body and strengthening of the ego-Self connection are vital preconditions for a child's development path to be oriented toward individuation and fulfillment of their potential – the Self.

By enabling an exchange between mind and body, Subtle Touch techniques spontaneously lead to an altered state of consciousness, which allows the patient to overcome categories of thought, feeling, and sensation conditioned by prior experiences of attachment and by representations constructed as a result of paralyzing traumatic experiences. They create a dialectic field which interchanges, integrates, and transcends, constellating a synthesis arising from the unconscious, which we call the transcendent function (Jung, 1984).

Our experience of many years has shown us that, by contributing to the development of attunement and empathy, the incorporation of Subtle Touch into child psychotherapy creates a living space within which emotional resonance prevails. By restoring the child's possibility of building a secure, positive attachment within psychotherapy, Subtle Touch becomes a way for significant transformations that repair and strengthen development.

They provide the child with experiences and information that can promote restoration of more positive responses in the child's relationships with others and with the world as a whole. In our view, Calatonia and Subtle Touch are living symbols of transformation that contribute to and expand the sacred work of psychotherapy.

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