INTRODUCTION

I thought that this topic might an interesting one to students of both countertransference and bioenergetics for a couple of reasons. One, that most often the subject of countertransference is approached from the viewpoint that the phenomena is comprised of the "problems" of the therapist and that the only way to eliminate countertransference is to have the therapist completely healed. So the subject historically has had some component of anxiety attached to it since that seems almost impossible except through the efforts of a lifetime or more. A second reason is because bioenergetics is most often recognized as a series of interventions that are done with or to the client. We do have a large and very effective repetoire of techniques to work with the body that actually work lots of the time to support deep levels of change and movement in the client. But that part of the therapy is about doing something and the subject I wanted to address here is somewhat differently approached. The basic idea of the wounded healer is that we make no progress toward wholeness without problems to address in our life, and that the so-called issues of the therapist can be looked at as blessings or opportunities for learning rather than something to remove. A second aspect of this topic is that the experience of doing nothing but accepting and opening to 'what is' also becomes a vital part of the transformation process. This part of the therapeutic process concerns itself with the experience of formlessness or "space" - an important subjective experience in the reorganization of the psyche that needs recognition. Just as you are able to look at a figure in a picture and see
what the form is, the ground or the "spaces between the forms" can also be experienced. One of the ideas I would like to discuss here is how the conscious experience of space can contribute to our understanding of woundedness and perhaps help the client more easily move through difficult times. Specifically, this paper addresses five different areas involved in the process of working with a client: (1) a description of the experience of woundedness as it manifests in psychotherapy; (2) a discussion of how the experience of emptiness, formlessness, and space are important aspects of woundedness; (3) the suggestion that the emergence of a more authentic self - the CORE - depends on how this experience of space is approached; (4) a discussion of the countertransference challenges involved in this formula for change; and (5) a look at how the client responds to woundedness in the therapist. These five areas comprise the basic features of an interaction in which a therapist is attempting to guide a client through a healing or a transformational process.

THE WOUNDED HEALER

There are two major myths about the process of psychotherapy that are being continuously challenged by students of this field that still somehow reassert themselves in the psyche of both therapists and clients. One is the notion that the therapist has nothing basically wrong with him or her and that he or she is the well one in the relationship. In this framework, the client is the ill person or the one whose wounds need tending and the wounds of the therapist are minimal or need not be addressed in the interaction. The other myth holds that the client has nothing to do with the healing process of the therapist - that the healing energy or remedial interactions go only one way and that the person who has taken the role of the bearer of the illness has nothing to give to his or her healer. Both of these myths assert themselves in complex patterns of behavior and belief that both therapists and clients act out in a variety of ways like styles of doing therapy, rules about boundaries, and instances of misunderstanding and even exploitation on both sides. In their extreme positions, these belief systems overlook two important phenomena in
the process of healing and being healed that strongly affect the relationship between therapist and client....the strengths that come from facing and acknowledging woundedness in the therapist and the impulse to heal others that is a genuine part of the healing process of the client.

From the perspective of countertransference, these issues relate to the ability of the therapist to stay with and create a healing environment for clients that have deep levels of wounding and help them work through to a healing. What is important here is that the therapist have some idea of what being wounded feels like from the inside and has experiential knowledge of what the steps toward healing might be. Another issue would be how the therapist reacts to clients that wish or need to address the therapist's wounds at times in the course of therapy. I think that these issues relate to rather generic levels of countertransference in that they are not necessarily related to specific character patterns of the therapist, but fall into the category of how does one human being with a certain pattern of incompleteness relate to and work with another individual with a different pattern of incompleteness.

The image of the healer having wounds or being wounded is an archetypal form that exists in mythology and in practice back to earliest recorded stories and literature (Halifax, 1982). In Shamanism, one of the earliest forms of healing interactions, the journey and call of the shaman specifically includes a period of sickness and withdrawal in which the individual is out of commission for some months or years, sheds his former identity and is introduced to experiences and knowledge from other parts of the self that give him or her a renewed sense or purpose and direction among the tribe or social group. In many of these societies, one does not become a shaman without this fundamental sickness and withdrawal experience. This aspect of the transformation to become a shaman is quite separate from the training given him or her by other teachers and from the "call" itself. The call might come in a dream, or in some encounter with spirits or ancestors or some subtle aspect of the self that is not usually part of ordinary consciousness. It sets the shaman separate from the physicians, priests, the tribal
leaders, and other leadership functions in the society by his or her connection to the spiritual aspects of the group's existence.

Now if we look closely at this process of the formation of a healer, it is very similar to some of the truths we in Bioenergetics believe about what makes a good therapist. We feel it takes lots of training by good teachers who have been through the process themselves; that there is some kind of a "call" involved, namely, the individual believes that doing depth psychotherapy and working with the body is really the right thing for them. The trainee needs the strength of that call to leap all the hurdles of the curriculum...the cost and length of training, the supervision and therapy requirements, etc. Last, and perhaps most importantly, the student has faced his or her own woundedness. The therapy requirement is supposed to provide the frame for that experience. After having more or less continuously faced some of my own problems for 15 years now and still finding myself very conscious of my wounds, I have to laugh at my earlier feelings that 100 hours seemed like such a big requirement and couldn't I get credit for this workshop and this lecture, to lighten the load. In the shamanic form, you really don't have a shaman without the period of sickness and withdrawal, only a hollow shell of a role, and in a similar vein, this holds for therapists as well. The period of sickness and withdrawal forms the core of the experience that makes the healer. From this experience comes the knowledge, wisdom, strength, energy and commitment to assist the client in finding the connection to those parts of themselves that actually do the healing.

One of the questions it is helpful to ask is how and why this experience of therapy (or the shamanic equivalent of sickness and withdrawal) is such an important aspect of the training. While most training therapists will agree that it is so, the full realization of the potential of this healing journey is very difficult to orchestrate during the period of the training program. Again the shamanic literature provides a comparative model, since the training is quite separate from the call and the period of sickness-withdrawal, and in no case do they seem to overlap. It is possible that for some students we are asking the impossible in requesting that they do both processes in the same time frame.
Hopefully, each therapist continues to pursue his or her journey into woundedness long after the initial training experience is over. This continued commitment to therapy is very necessary to encourage since there are so many levels to woundedness.

LEVELS OF WOUNDING

One place to start is to look at the nature of wounding and see that there are a couple of levels or kinds of experiences that we might describe as a wound. Certainly one level is the number of painful feelings and memories that rise to consciousness as part of the therapeutic process. A large amount of therapeutic work is devoted to the process of completion - bringing to consciousness and expression the memories of earlier times and/or helping the client express feelings that had been suppressed or never even developed. Emotional pain does qualify as one kind of wounding. As we also experience it in our own lives, it teaches us compassion for others and a sense of being together with the client in the soup of life. It is one aspect of the development of heartfulness and embodiment and a very important goal in bioenergetic work.

Other kinds of experiences that would qualify as a wounding are the levels of vulnerability experienced as defensive structures disassemble and the individual feels open and unprotected. Again there is lots of personal pain, a sense of inadequate barriers between them and the world, and the distinct feeling that they have no responses to control the incoming hurtful experiences. This wound accompanies the historical process of rebuilding the "feeling child" within and is usually a part of each client's therapeutic journey.

Another level of wound that is encountered when we work with the physical and emotional bodies of our clients is the experience of feeling that something has been broken. Like a bone or a wound in physical tissue, it is possible for an individual to have a broken heart or damage to other energy centers of the body. That is, the function is not only inhibited or blocked, but broken or cracked. I have had clients with histories of drug abuse or an early environment in which it looked like the actual intent of the parent figure was to break the spirit of the
person, have to work with and live in a body whose capacity to heal was greatly diminished. The physical illness that often accompanies post-traumatic shock would be an example of this as well. If you have experienced this in your own structure and life you know how slow the healing process is and how important the issue of "keeping the wound clean" is for knitting the body together. Keeping the emotions open and running is important here, but respecting the timing of the body and its ability to heal is the most important factor. For this kind of wound, the experience of accepting and working with a limited body becomes the challenge of the client.

But, feeling emotional pain or recognizing the limits of the body are not the only wounds that have to be addressed. Once the emotional and memory base of early experiences have been touched we are still left with the next phase of the healing work - how to feel and assist in restoring what was lost in those early experiences that will help the client not repeat the cycles of deprivation, abuse or self-destructive behavior in their current life. That is to say, the next level of wounding below the emotional pain is the experience of incompleteness of self that emerges into consciousness.

I'd like to venture the idea that this sense of incompleteness as an experience of the body and the self-identity is actually the true wound referred to when we talk about the transformational possibilities in facing our woundedness. This is the level of woundedness that really yields the most returns, and the ability to experience and work with the various dimensions of incompleteness in ourselves will give us what we ultimately seek in terms of feelings of wholeness and psychophysical integration.

If we look at how the individual might experience his or her incompleteness, we see several possibilities. As I mentioned earlier, one manifestation would be the inability to do something- to be unable to make a necessary response to a situation to solve the problem at hand. I stress here the inability, not the unwillingness. People truly are unable to make certain responses. The victim sometimes cannot come into cause without learning all the small steps that others have mastered. The individual with a broken heart cannot love. Some people cannot fight back, others cannot receive, forgive, love themselves, surrender.
All of us have these missing pieces, not because we want them, but because we have not yet worked through the steps to their development. It is certainly true that some are larger and deeper than others and many are unconscious. It is also true that they have an impact on others in relationship to us.

A second characteristic of the experience of incompleteness is the deep expression of grief that occurs when we become aware that parts of ourself have been missing from consciousness and have not been available for us to use in our lives up to now. The deepest loss we can experience is the loss of our authentic self to our defensive structures. It can precede or accompany all other losses early in childhood and set up later problems of loneliness, isolation or deprivation.

A third aspect of this experience is that with or below the inability to respond or the feeling of grief is a sense of emptiness or void. Some part of us seems to be missing. For some clients, the usual fixed sense of their self-image is not present, yielding instead to a sense of dissolution and dread or a marked formlessness. The result can be an experience of emptiness, loneliness, inferiority, weakness, depletion. For others, the sense of dread is not so strong, but instead they feel a sense of space...an experience of having no fixed identity or form that is familiar. It can be positive or negative, and they can experience this for a minute, an hour or months. Usually, these are difficult personal experiences, and the question we are addressing here is what is the value of touching these places in ourselves? Is that experience something you pursue or is it limited to those individuals who fall into it by virtue of an incomplete personality integration? Is there something beyond the sense of emptiness that makes it worth exploring? The answer of course is yes, and relates directly to that phenomena called the CORE in bioenergetic analysis.

Now if we go back and look at the anatomy of these incomplete spaces, several things are apparent. First they are both in the body and the mind, that is they involve thinking patterns and belief systems as well as the areas of the body involved...the heart, the belly centers, the genitals, the legs. They are often experienced by the individual as areas in which there is no energy or the energy present is stagnant. That is, the initial physical contact with those spaces is one of deadness,
numbness, tension, or pain. In addition, there will be an accompanying lack of expression or consciousness about the behaviors associated with the area. For example, the inability to bond and engage in loving relationships might be related to the inability to feel anything around the heart area or to surrender into softer flows of energy in the body. Also, thinking patterns and imagery will reflect this block and might rationalize or deny the problem or picture men or women as primarily sexual or power objects. The incompleteness, like all energetic blocks, is then reflected at all levels of the psyche and body—physically, energetically, and emotionally.

Secondly, there will be a set of behaviors that attempt to deal with the problems, but they will often be an indirect and only partial solution. They are what we do to fill the empty spaces. Compulsive sexuality, isolation, or overworking might be attempted or utilized to stay away from the experience of being unable to love. In fact, there is always some personality or character pattern that serves as a structure around the incompleteness. The success of this structural pattern in keeping anxiety at bay can be quite high, and even last the lifetime, but the functional arrangement still is there....every area of incompleteness of self has some set of behaviors - some character structure - that serves as a substitute for the experience of the core that lies underneath. We are all wounded, all incomplete....therapists and clients alike ....and all of us utilize the same mechanisms for retreating from the experience of those incomplete spaces.

Now incompleteness is certainly not always directly experienced. For one thing, it is regarded by most people as shameful or as a weakness. In our personal and social cultures, it is often very difficult to speak about what we lack or are not able to do or do not understand. Children are taught to be strong, to hide their faults, to not show confusion or weakness. So these basic experiences are not usually identified or explored much. Since the ego structure and the self-identity is experienced as WHAT IS rather than WHAT IS NOT, we tend to focus on what we can do and what we do feel. That is, our identity is based on structure and boundaries and we tend to hang onto those identifications for dear life. These crystallizations form our sense of self and any dissolution of these is resisted. Only when they break down
through illness, stress, spiritual openings, relationship challenges or
direct therapeutic work on the defenses do we realize that they are only
temporary holding patterns and we try once again to organize around
the more expanded sense of the self that emerges. Now if we look
more closely again at those transitions from one self-identity to the
next, what we see is that a part of each of these changes is an
experience of a void or emptiness. Sometimes it is the painful deficient
emptiness of the acutely wounded client; sometimes it is a feeling of
dread with a void; and sometimes a different experience of expansive
and light space (Almaas, 1987a). Some kind of an opening, a lack of
definition, a formlessness of which the incompleteness we have been
speaking of is one example. The thesis of this paper is that an
appreciation of these experiences of space can move the fear of
incompleteness and deficiency from a negative, judged one to one
accepted and worked with. This different perspective will result in an
approach to woundedness that will foster its' strengths rather than
suppress its' presence. Another important factor is the ability of the
therapist to both tolerate and appreciate the need of the client to
consciously live in those voids as long as necessary to complete the
connection with deeper and undeveloped parts of the self. I have found
that in myself and in those students that I supervise a strong tendency
to push the client forward to make responses because we could not
tolerate the lack of form in their ego structure. These premature
efforts to put
form where there was none often came from a lack of ability to
recognize the need to live in and with formlessness. It also stems from
a lack of appreciation for the healing potential of the experience of
space. I'd like to talk about some ways we encounter and work with
space in our therapeutic work and help to make these points more
concrete.

THE EXPERIENCE OF SPACE

Much of bioenergetic work with the body concerns itself with the
experience of a particular kind of space - the experience of spaciousness
and expansion in the physical body. We assist our clients in experiencing
space to breathe, space to feel, space to express feelings. In breathing work we work with the spaces at the top and bottom of the breath cycle to help clients become more conscious of their bodily process. To be 'in your legs' instead of 'on them' is to make more space. We do this with the belly, the heart and the head. In actuality, the primary effect of lessening muscular tensions and facilitating energetic flow is to radically change the individuals experience of bodily spaces and their boundaries. Where once there was only numbness, tension and a feeling of contraction, there is now a feeling of movement and a sense of more spaciousness. Thinking and feeling processes can change radically. As the reduction in compulsive negative thinking occurs, there is more room for creativity and spontaneity. Thoughts, images and creative solution to problems come out of the inner mind and demonstrate to the client how intelligent they can be about their own process. These are the positive experiences of space as reflected in the term "the creative void"...that sense of those formless places from which all creation stems. This kind of space has a feeling of movement to it....and requires of the client and the therapist an appreciation and tolerance for change and sometimes radical shifts in consciousness.

It is important to note here that the experience of space that accompanies the lessening of tension in the body and the disidentification with character patterns is a sense of space that comes with more, not less, contact with the body. The space felt here is not a disembodied disassociated experience...not space-y, but spacious. An opening to lightness and expansion. So on the one hand, we have a deeper experience of the body...both in its form and movement patterns...and we have a sense of more spaciousness. It is as if the sense of space co-exists with the experience of the body so consciousness can flow from one to the other. It has been noted that for each level of self and body-image that is consciously contacted and moved into, there is a different experience of space that accompanies the transition. Almaas (1986a) writes of these different experiences of space that occur as the individual moves through different levels of self-identity and the body.
The formula here is most interesting... it seems we always go through some experience of space before some different level of identity emerges. There is always a surrender of form - of what we thought was permanent and fixed, of our self-identity of the moment - before we experience what lies beyond. As we drop from the mask to the core, each of these transitions is accompanied by some experience of space. This movement from structure to space, from form to formlessness becomes a rhythm of growth. To leave out one half of the process is to stop the progression. These experiences help us understand and appreciate the fundamental polarities of life; how action depends on space; how masculine depends on feminine; how foreground depends on backround; and how the development of discriminating awareness forms the basis for enlightened activity. This is the type of space we try to develop and nurture. We love it when we feel it in the psyche and body since it allows us a feeling of freedom and expansion.

There are other ways in which the experience of space touches our lives. Each of us has gone through periods of months or even years in which we could describe our state as being relatively formless. That is, we have found ourselves in some kind of a prolonged "transitional" period in which our usual sense of direction or goal directedness was missing. This could be an actual developmental step as in the progression of life stages or a time in which we can go no further unless we back up and pick up some missing developmental pieces. Stanley Keleman (1979) has referred to something like this as the "middle ground". Often these stages can be quite lengthy and contain a kind of an identity crisis with questions like "who am I and where am I going?" coming up. For some individuals this is experienced as a deep level of wounding in which what is revealed is a lack of self-identity. Indeed for some, the basic roots of the self-identity (that is, the internal and external body-image) has pieces missing and the process of formation must go very far back and very deep. In these cases, the sense of formlessness and space is one of not having certain structures of the self available for use. Clients who are in the middle of this experience find themselves unable to invest in anything. Motivation is lacking, creative energies do not flow easily, attachments
do not form with people and their former sense of being able to do things is sharply curtailed. They may swim around in certain feelings like despair and loneliness with no sense of how to resolve the crisis. This formless period has to be endured and experienced and it seems that the more focused and goal directed you were before the period, the more difficulty you will have with this formlessness. This is a time when space is in your life and psyche and the more crystallized you were around your identity or behaviors, the more uneasy the formless times are at first. In this experience of space the individual is sometimes conscious of having no psychic structure to mediate the flows of energy. The process of formation that is taking place in these periods is slow and deep. Vision, choices made and inner dialog are important parts of the reformation task. For the therapist, the support of the formlessness and the ability to help the client name the experience and work with it is most important. If you push to fast and violate timing, one of the most direct results is a familiar phenomena in bioenergetic work....half the energy contacted and released goes into building healthy structures and choices and half once again goes into reinforcing the character patterns.

It is the ability of the therapist to not take responsibility for the clients progress during these periods that will yield the most healing. To resist acting out "the omnipotent healer" syndrome here is most necessary. Support for the clients process and a knowledge of the level at which structure is being reformed are the best tools we have to guide an individual through these periods. The paradox here is that when the absence of identity is faced through embracing the experience of void or space, some new experience of identity emerges. Identity itself is remarkably fluid. If they walk through it however, the potential benefits are enormous. A new sense of direction, a different sense of self-identity and another level of consciousness about life can be the reward. How to walk through it is always the question, since it is a time when many questions are asked, but few are answered. If you can be still with the experience of space itself, again you have an advantage over those who rush in to fill it too soon.

We began this discussion of woundedness in the therapist by tracing it down to a sense of incompleteness about the self and then to the
experience of emptiness and space. We saw that the same experience of space could be felt as light and expansive, as a kind of royal road to the inner self or its opposite...a sense of emptiness, loneliness, deficiency and disintegration. Both, of course are possible and often both are experienced as different parts of the same journey. But there are some major factors that contribute to whether the experience is positive or negative. The level of personality organization is one major determinant. As you know from your work, the borderline or schizophrenic client often has the experience of space as a major part of their formlessness and boundary fragmentation. But instead of this feeling being light and expansive, they fall from hole to hole and constantly struggle to maintain some stability and sense of self-integrity to keep from always feeling distegrated and alone. This is the most difficult experience of space with the highest degree of deficient emptiness. As Joseph Campbell has stated, "....the schizophrenic is drowning in the same waters in which the mystic is swimming in delight" (Campbell, 1972).

Another factor is the rapidity with which the crystallized patterns of the personality (or the self-identity) were challenged or disintegrated. I am thinking here of drug trips, sudden illnesses, certain kinds of psychic or spiritual openings in which there is a sudden loss of ego control and a rush of new personal information into the psyche that challenges all the old assumptions of self and direction. In these cases, the sense of space can be awesome and terrifying. So we know from these experiences that the movement into openness and the letting go of identifications has to be a gradual and voluntary process. Then the sense of space can be opened to and not so feared.

So we have now come through a discussion of incompleteness in the personality and how this lack of body and psychic structure represents the deepest kind of wounding. We also saw how the experience of space might manifest itself as this process unfolds. First, we talked of space as an experience of lightness and expansion in which the normal psychic contents were suspended in favor of new movements and less familiar structures. The more that the experience of this kind of space is valued and developed, the richer the new content that can emerge. We also discussed the experience of space as
void and emptiness. This aspect of the process being more frightening and less tolerable, but still a necessary transitional experience that, if supported and understood by the therapist can yield rich results. At this point I would like to discuss those supposed "results".

CONTACTING THE CORE

All along, there has been the implication that something emerges out of this process. That is, it seems the primary characteristic of space is that it allows. Actually, it is the experience of ALLOWING. From the ground of nothing, everything is possible. The many things it allows and the many forms that emerge make it universal and individual at the same time. In the metaphorical sense, space itself heals. Anywhere its presence is found, movement is occurring and change is happening. From the perspective of the heart, it is the process of ACCEPTANCE. As space is tolerated, acceptance grows and the emergence of different energies and states in the individual can occur. It is the nature of these energies that is the next area of discussion.

There has been in bioenergetic theory some discussion of the different layers of expression that accompany the working through of these periods of wounding into more consciousness. In Reich's work, he talked about three basic levels in the human character, referring to these as the mask or superficial defensive layer, a second layer of emotional flows both positive and negative that constitute the shadow parts of the self, and a third CORE layer made up of the deepest aspects of the self. John Pierakkos has called this layer the CORE (Center of Right Energies). There has always been reference to the idea that this CORE pattern lies beneath the characterological positions and is something more than even the deep emotional flows that run through the open, unobstructed body. In his monograph, Pierakkos places the location of these energies in the heart centers (Pierakkos,1974). John's concept of the CORE seems to refer to a group of responses and energies that constitute a kind of authentic emotional self in which the individual lives from and in the heart center. Freedom from fear, compassion, and a sense of unity with other living beings constitute some of the experiences of contacting this center. This level of living,
loving and knowing has been the most "spiritual" level discussed in the traditional bioenergetic literature and is the highest level of integration recognized in our work. In other disciplines, ranging from Psychosynthesis to Sufism or Theosophy there are similar notions that there are "higher or deeper" levels of being that can be reached and opened to as we let go of our character identifications and move through the experience of space or formlessness. These concepts refer to a wide range of energetic and transpersonal experiences. So I would like to leave some space for whatever concept you hold in these areas and refer to those levels, in general, as the CORE of man. What we are discussing here is what emerges when wounding is experienced and opened to and how we as therapists can support or sabotage it.

To begin with, I am in basic agreement with the proposition that an important goal of a depth psychotherapy process is for each individual to find what it means to experience their CORE. I also believe that this experience is deeper than simply being an emotional person or having feelings, but involves a more subtle dimension of experience that is best described by the term "states of being". That is, I believe it ultimately includes but goes beyond just the heart level of functioning. These experiences are more subtle than the energy flows usually worked with in bioenergetic analysis, such as aggression and the movements of grief or tenderness, but will sometimes come through during such work with the body. They are traditionally described as energies or "qualities" and represent basic human values and traits...strength, value, love, compassion, clarity, certainty, courage, will, joy, peacefulness. They are those states that make up the foundation of all our behaviors and from which we move outward. They certainly involve the operation of different centers in the body...e.g. love and compassion from the heart, clarity from the head centers, certain kinds of strength from the hara and solar plexus, etc., although their ultimate source may not be from these regions. They seem to be more enduring in their quality, being more steady state energies as contrasted with the fluidity of the emotions and moods. So they are much deeper than the emotional flows and the quickly changing physical sensations of the body. The words used to describe these states of being reflect this relative permanance...words like CORE, PRESENCE, ESSENCE, BEING and SOUL.
Now in bioenergetics we are very used to detecting the presence of energies both of the body and of other dimensions of the person. We usually can tell the difference between bands of energy that are negative and positive, i.e. the difference between resentment and revenge, between despair and sadness, between fear and anger, between joyfulness and contentment. Each of these energy bands has a different feel, a different quality, even though they are expressed quite differently by each person showing them. We also go much further in being able to tell the difference between the energy of the body and of the person. At the extremes, we know when the body vitality is low, but there is a strong and alive individual facing us and the reverse, when the bodies vitality is strong and vibrating, but there is "no one home in the vehicle". No "person" there to address and own the body. So we already have some sense of the difference between the energetic experience that we call the body and that one that we call the PERSON. Often that sense of the person is what we might call a spiritual one, that is we detect SPIRIT rather than just physical vitality. Most people in therapy present us with a blend of these energies, but our own senses with experience can often tell the difference. What can happen as the result of therapy or personal growth is that more and more of the person emerges...and along with the behaviors that show more choice and consciousness...are those energy bands that reflect these enduring states of being that support the behaviors. The presence of the person is felt and experienced as these many qualities. The person not only shows more strength and value in his or her behavior, they ARE strength, they ARE value...there is a different energetic band emerging that was not there before. It is not that they can do more, it is that they actually are more. It is not about doing, but actually about BEING. In short, the CORE states that emerge in this process are intimately tied to the idea of states of Being.

The prerequisite for the expression of these states is a body that has the characteristic of flexibility and emotional depth. The most important feature is the ability to be spontaneous. These core energies emerge and are strengthened in childhood in play behavior and are often further developed in adult equivalents of play. We all have had times, projects or passions in which more of who we were came out. Often,
these activities felt more like play than work and enhanced rather than depleted our energies. People will say "I really feel like myself when I'm doing such and such!". In the body, the absence of chronic muscular or organ contractions and open emotional expression allows these states to emerge. That is, the more you are in your heart, the more of these states become possible. The general principle is that any blocks in emotional systems such as aggression or receptivity also block the emergence of particular corresponding states of being. For example, strength, will and certainty would not be present in individuals in which there were strong blocks to the expression of anger. Similarly, understanding, clarity and awareness would not emerge in individuals in which blocks in the neck, eyes and face prevented the flow of energies into and out of the head. Bioenergetic work with the body becomes a path by which the energetic flow is opened and core states can emerge.

The concept of the CORE has not been easily assimilated into psychological studies of the personality, primarily because in many writings on the subject there is an antagonistic relationship between the personality and the CORE. Somehow the personality or ego has been regarded as an enemy of these other dimensions of the self. We have gotten the impression that the ego is bad and the "true self" is good and that only one can survive in this ultimate battle for domination. The middle position seems more likely to me in that the following seems to be true...that in order for certain states of being to emerge in the individual, characterological positions have to be surrendered and rendered less rigid and that the CORE does not emerge in the absence of such surrender and acceptance of the feeling states and woundedness under the defenses. In other words, the characterological positions must yield to these energies, but not be pitted against them. For more discussion of this subject I would refer you to Almaas' work (1987 b), but for now I would offer these notions about the CORE: (1) It is that essence or experience of self that we seek in our woundedness...and that in the most positive sense, the doorway to a deeper self is through the wound; (2) that it does exist contrary to and beyond character as identity and it is experienced as our identity even more deeply than the characterological positions were; (3) that it's presence in our experience and consciousness can assist us in dissolving
characterological positions (it has a healing force); (4) that the deficient emptiness and grief so acutely felt when we touch our incompleteness results from the felt loss of this CORE and not just loss of the old identifications and psychic structures that have dissolved; (5) that it is an energy band...more subtle than physical vitality or the emotions and can be identified by its qualities; and (6) that it emerges in individuals through the process of problem solving and struggles with consciousness. That if we seek life - the life of the body and the life of the spirit, our reward will be the emergence of this experience called our CORE.

What we have come to in this process of pursuing and experiencing our woundedness is a look at the process of transformation....it begins with conscious awareness and expression of the emotions and memories around the early losses and traumas; it moves to a process of disidentification with those parts of the psychic structure that developed as substitutions for the absence of the states of Being (surrendering the characterological position); it becomes the experience of deficient emptiness and incompleteness; and if it can be fostered and allowed to be the experience of space; it can result in the emergence and awareness of states of BEING or the CORE.

Countertransference issues arise when for whatever reason we cannot tolerate or recognize certain aspects of this process of transformation in our clients. All throughout our work as a therapist, the handling of certain feelings becomes a primary issue....how to tolerate their levels of rage or grief or sexuality without shrinking or interfering with the process in order to handle our own fear. Often these intense client feelings are directed at us, either consciously or unconsciously and our bodies react strongly. Being able to resonate with those emotional levels or become non-resistant to the directed expressions without disconnecting from our own heart or from the client becomes an important learning in how to work with people. I have come to believe that one of the most important features of maturity in a therapist is the ability to face any level or kind of energy in a client and not disconnect with my heart. Not that I have to agree or participate in that energy, but that I not remove my connection from them as they act in ways that are characterological for them.
Further challenges come in working with the process of disidentification...how to tolerate in our own bodies the energies of disintegration and the fear that arises when an individual is losing their sense of self and moving into formlessness. In those moments, we as therapists become their ground or anchor to reality. The ways in which they might cling to us for their grounding or demand that we control the entry into space for them challenges us to be able to hold our center in the midst of strong energetic demands on our body. It can be difficult to stay present if our own sense of center is hesitant or unstable. This is where our own physical vitality lets some limits on what we can handle. The sense of emptiness presents another challenge...how not to rush in and present the client with our solutions or allay our fear of feeling the emptiness in ourselves. Finally, the ability to sense the emergence of states of BEING...those CORE to CORE experiences of just being with a person as they experience themselves being different, touching their truth and identifying another way to be with themselves. How to support and identify the many ways in which the CORE emerges like a new sprout and not overlook or crush the new growth.

So as a final summary of the positive effects of the ability to experience space on the countertransference process, I think it gives us these strengths: (1). We can make space for others to be....if we drop back it allows the client to come forward...our withdrawal from form allows others to be, but requires that we be able to touch our own spaces. This is acceptance. (2) The experience of space and emptiness is the transition from the characterological position to the experience of being.....allowing space permits us to drop from the mask to the shadow to the core, and to give our clients permission to do the same. (3) We know from experience how to live with woundedness and incompleteness. Our own weaknesses are not shamed, but allowed. (4) We understand that completeness comes from going through incompleteness...that is, the conscious recognition of where we are incomplete gives the client the feeling of completeness in their healing matrix...there are fewer hidden agendas, fewer unconscious areas in which projection can operate. In that sense, knowing our incompleteness makes us complete. Finally, (5) we know in our core that we are more than what we have so far become...we can give by our
presence a sense of hope to our clients...that what they are is more than they are currently experiencing.

THERAPEUTIC STRIVINGS IN THE CLIENT

There is one more subject that I would like to include in this discussion of woundedness of the therapist that relates to the times when the client addresses these areas in us and needs, for various reasons, to work toward healing us. Usually, the therapeutic frame has no room for these attempts. The client is there to be worked on or with and not vice-versa. Movements like these from the client are sometimes met with rebuff and defensiveness, and with statements like "we're here to work on you, not me" or "my problems have no place in this work, I'm here to help you".

While I believe it is true that the therapists problems should not be the focus of the therapy, there is a movement here from the client that is an important part of their own therapy. That is, the therapeutic strivings of the client form an important part of their own healing process and need to be recognized.

Harold Searles, an man whose perceptions of this process have been refined by years of working with very wounded patients, has ventured the hypothesis that the cient is ill to the degree that his or her own therapeutic strivings have been repressed. And further, the more ill the client, the more he or she needs to be acknowledged as a healer to the therapist (Searles, 1979). So here we have a movement from client to therapist that directly addresses our own woundedness, and the struggle we have is how to make space for this process and integrate it into the ongoing process of working with the client.

Some things that might help are to understand how such therapeutic strivings come about and how they work in our history. First, it might help to understand that to heal others or to have therapeutic strivings are basic parts of our humanness. That is, they are a part of the natural and genetic equipment we have to make connections with others and bond correctly. They are part of altruistic behavior patterns built into us; like the seemingly universal patterns of protection of infants
and risking one's life to save a friend. How often we need to call upon such behaviors varies of course with how safe, secure and protected our environment was, but for some individuals this mechanism was called into play to help provide an environment that could meet basic needs of survival for themselves. That is, some people as infants and young children had to use their therapeutic strivings, not to help others from a secure place, but to try to construct for themselves an environment in which they could survive. They used these energies to try to construct a matrix in which they could grow and develop and get loved and nurtured...and most often they tried this by fixing or shoring up or supporting their own parents. They had to actively intervene to help the parents get rid of some neurotic trait or compensate for some basic weakness or literally make the environment workable. Since survival depended on it, these behaviors became a basic part of the bonding experience and could not become separate from the later processes of individuation and separation. For some clients then, to complement the ego of the nurturing person by some active process of helping is a natural outcome of their early experience. In these clients, the therapeutic strivings have that curious mix of altruism and selfishness that are not well differentiated. Their intense interest in our wounds and incompleteness carries with it a spirit of resolution that certainly does not match our willingness to work on the problem on their timing. It is difficult not to disconnect from the client at these points in order to protect our own timing and limits (e.g., "We are not here to work on me!"). If the therapist denies his or her woundedness in these situations, the wound of the therapist once again becomes inextricably linked with the ego of the client and the client cannot progress any further in this area. In addition, it is denying a major source of focused energy in the client that can be utilized and redirected for their own healing.

Now for healthier (i.e., better and more differentiated ego structures) clients, there are other levels where these strivings take hold. The need to have the therapist set better limits, be more compassionate, let go of some neurotic trait, be a more adequate identification model, or to show that the client really can have an effect on him or her are some of the goals of these movements. For each
child, to be able to change and effect their early environment to help make them more safe or more whole was important. As children we tried to change our parents, our teachers, our girls and boyfriends...all of which failed and left us with more or less a sense of hopelessness and defeat. To have some control over how the relationship is constructed and how time and energy is shared is also natural and healing. It is not selfish, in the sense of only being good for one individual, but recognizes that a shared space is more productive than accommodating to only one person's frame.

I believe there is a third level to these strivings as well. If you begin to love someone, you want the best for them. This form of giving is seen in the client's striving to help the therapist fulfill his or her psychological potential....to become more - not just for yourself but because you would like to see a person you care about function as a healthier and happier individual.

So we have a whole group of complex multi-level strivings or movements on the part of those we work with that are directed at our incompleteness, and the success of our work with them depends in part if we can acknowledge that incompleteness and allow acceptance of both our having those unfinished parts and the clients desire to heal them. As we know more and more from experience, there are very few transference reactions that are not based in part on the reality of the psyche of the therapist. So again, we work the paradox - to acknowledge our wounds in full acceptance is to have them not work against ourselves or the client. In this sphere, completeness is more related to truth than to perfection. Also, to acknowledge in our own minds our clients willingness and need to heal us is to make the circle complete.

In finishing, I leave you with two blessings. First, that you can find somewhere in your head a space that looks with compassion and gratefulness on all your voids and weaknesses and that you can find that space everytime you are in difficulty, and second, that you someday have a client who feels that for them to become healed they have to take care of your problems first. Both of these are challenges that can teach you much.
REFERENCES


