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How do we Embody Integration?

Abstract

This paper aims to offer some thoughts on the nature of psychotherapy integration. In particular, it considers how we as individuals and organisations might “embody” integration. It proposes that integration can be thought of as a process of integrating new experiences and knowledge rather than a bringing together of different theoretical stances. At the Minster Centre, we see this as an embodied process rather than an intellectual task. The paper goes on to propose three qualities that facilitate integrative psychotherapeutic practice: openness, a willingness to be ourselves, and mutuality. It suggests that as a profession we might also have much to gain from bringing these qualities and a sense of integrative process to our wider roles, as individuals and organisations, in the personal, professional, research, societal, even political worlds.

Introduction

The following paper constitutes what I presented at the UKAPI Conference (‘The Heart of Integrative Psychotherapy: Putting Theory into Practice’, February 4th 2017) as part of a panel of key note speakers.

The brief for the panel was, more or less, to say something interesting and thought provoking about Integrative Psychotherapy in seven minutes. We were to be a panel of representatives from different integrative trainings – so there was also something else built into the set up about our different approaches and our relationships.

It felt like a tall order and my mind was blank for a while. What did I have to offer as an individual and as the current Director of the Minster Centre? How might I take my place alongside the others on the panel?

I thought perhaps I could offer seven personal thoughts and as a whole they might be interesting and thought provoking. Below I present these seven personal thoughts in detail

1. Words and Titles

I’m interested in how we choose words and titles consciously and unconsciously- and the meaning of words. The title of this conference was ‘The Heart of Integrative Practice: Putting Theory into Practice’. The Heart made me think about bodies - viscerally, rather than metaphorically, and from that I came to think of how we embody integration in practice – both actually and metaphorically. At the Minster Centre, the body has been an important part of our training since the early days. Today, students do a very experiential module, ‘The Body in Psychotherapy’, in year 2, and in the 3rd year are working with ‘embodied relationality’.

But, often, these days I am personally thinking about how we run the organisation and how we react to others in that capacity; how do we embody integrative practice in that sense?

What do I Mean by Embody?

The online Oxford Dictionaries define embody as:

- *'be an expression of, give a tangible or visible form to'*
- *'provide (a spirit) with a physical form'*
- *'include or contain something as a constituent part'*
- *'form (people) into a body, especially for military purposes (Archaic)'*

Definitions for the body include:

- *'the physical structure of a person or animal including bones, flesh & organs'*
- *'the physical and mortal aspect of a person as opposed to the soul or spirit'*
- *'the main or central part of something'*
- *'group of people with a common purpose or function acting as an organized unit'*
- *But also, 'the trunk apart from the head or limbs, a corpse'*

And What do I Mean by 'We'?

The obvious thought in the context of this conference was individual practicing therapists, but I thought we also needed to think about ourselves in our other roles: as trainers, as part of organisations, as committee members, as individuals in society. And I was interested in we as a group of training organisations on the panel, and as part of the wider group of organisations that represent therapists and are interested in therapy. We the bodies themselves.

So two interesting questions for me were: How do we as individuals, and organisations and committees give expression to integration? And theory to practice in this context?

2. Integration

This brought me to another, maybe, bigger question: What do I mean by integration and can I articulate it? For me, and the Minster Centre tradition, I am not talking primarily about theoretical integration in the sense of bringing

two or more theoretical approaches together (which is not to say that we don't value theory; we teach our students a lot of theory and we teach it rigorously. But it is not what I mean primarily when I talk about integration). I am talking about Integration as a process by which individuals (and bodies) integrate new experiences - learning.

Helen Davis, who founded the Minster Centre, talked about this as a 'progressive' process and a 'natural process'; one where the individual is trying to integrate new experiences and knowledge (Holmes, 2005; Murphy, 1992). And when that process won't or can't work we get stuck and we get into difficulties, a situation where therapy might help facilitate the process.

3. Disintegration and Reintegration

If we are talking about integration, we also need to talk about the disintegration and reintegration. We can't take in new experiences and knowledge without dismantling the status quo. Moments of integration are followed by new states to accommodate new experiences, new knowledge, new situations. This can be a smooth process sometimes, but not necessarily. Sometimes we come up against experiences and learning we don't want to integrate, we are ambivalent about, that are too much for us, that are traumatic. And then we may disintegrate, to a greater or lesser extent and we may need to find ways to reintegrate. I believe people find many ways to do this, therapy is one.

4. How do we Embody Integration?

In one sense, we can't avoid it. We are all bodies and these processes all occur in our bodies. We know this and can think about it in terms of what we understand today about trauma and what we know about neuroscience. I am personally particularly interested in how we embody integration (and disintegration, and reintegration) as organisations and institutions- as bodies corporate. And in how we can consciously do so. Because, good as I think we are at some of this as individual therapists in our therapeutic practice, we are often not so good at it outside of the therapy room. I want to suggest that we would benefit from consciously bringing integrative thinking and being, outside of the therapy room, and into the rest of our professional lives.

I want to suggest below as my final three thoughts, three qualities that facilitate integrative psychotherapeutic practice that we might bring to our thinking about (and to our actions), in the broader, personal, professional, research, societal, even, political worlds.

5. Openness

By 'openness' I mean our willingness to say with unknowing. Helen Davis talked about being interested in many points of view (see interviews in Holmes, 2005; and Murphy, 1992). At the Minster Centre, we ground our trainees in many theoretical frameworks. Have you noticed how, if you read an interesting clinical article, the next week all of your clients seem to be expressing aspects of it? When we have a framework, we tend to think about things within that framework, we see through that lens. When we know about more than one framework then we can think about things with more than one conceptual framework. We can develop different theoretical languages to talk about different experiences and stories. We can wait a little longer to see how we might frame an experience, whether there is an alternative way of approaching it, if another point of view might offer something we can integrate.

There is of course a potential pitfall here if it leads us to think everything is of equal value; that anything goes. Although I am advocating for intellectual and emotional openness I also believe we must not abandon our capacity for critical thinking. We need to be rigorously critical and thoughtful and open to alternative ways of thinking, feeling and being.

And that means perhaps that we have to be open to difference, to holding and tolerating tension and difference within our organisations and between them.

So as a panel representing different organisations, with different histories within an integrative family, we might think about how we can, as siblings, both play and create and be with our rivalries and differences. It would be easy for the reality of personal and organisational competition to be unspoken at such a conference or glossed over to leak out unacknowledged. I was glad that there was banter about which organisation had been offering integrative training longest. I ventured that as the Minster Centre approaches

40 years (2018) we might be the eldest. I reflected that, if I was going to claim, even in jest, the place of eldest sibling, something personally familiar to me, that could be uncomfortable and stuck, but it might also be fluid and fun.

6. Personal

As therapists, we go into the consulting room, ultimately, with what we know - our knowledge of theory, our experience and skills, our unique histories, our self-awareness and, or perhaps in, our bodies. That is what we have to offer our clients. This reminds me of sometimes anxiously revising on the train on my way to teach or when I spoke at the UKAPI conference, but then ultimately, I have to go in there and work with me, with who I am and what I bring. So, I also find myself thinking about how I bring the personal to my work as a manager of staff, a leader of an organisation, a member of a community. How do I consciously embody the personal in these roles?

7. Mutuality

Increasingly, we recognise in therapy the importance of relationship. Many of us have come to think more about the relational dynamic between client and therapist in 'two person' terms - two vulnerable people. At the Minster Centre, as elsewhere, that leads us to work with students to explore deeply their own histories. What Shoshi Asheri (2015), one of the tutors, calls an, "...archaeology of relational patterns and habitual internal positions," (Asheri et al. 2015, pg. 19) as an essential preparation for engagement with clients. So, I am asking myself how I, we, also bring that personal awareness and that mutuality, that intersubjectivity, that awareness and engagement with co-creation to our work, our practice, and outside of the therapy room.

Conclusion

*I want to go back to the heart
and to some definitions:*

*- 'A muscular organ that pumps blood
through the circulatory system'*

- 'The centre of a person's thoughts and emotions, especially love and compassion'
- 'One's mood or feeling'
- 'Courage or enthusiasm'
- 'The vital part for essence'
- 'The condition of agricultural land as regards fertility'
- 'A close compact head of cabbage or lettuce'
Mmm that may take more thinking about!

(Oxford dictionaries, on-line) It was an interesting choice for the title of this conference.

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