

The physical body of a person, his biological organism, is the basis of all life processes, and thus it makes sense for the purposes of our discussion to turn to the richer concept of the "phenomenal body", for body pictures are concerned with a person as he "lives and moves and has his being".

These are pictures which persons paint of "themselves" in the context of their therapy, as *sujet incarné*, the person in the flesh. This concept, drawn from the work of Merleau-Ponty (1966), implies that in the course of human development the body takes in the world by virtue of its capacities of perceiving and recalling, of experiencing and living through.

The body is made to take in the world, and what reaches it from the environmental and the social field and is perceived and internalised by it will have a formative effect on it, including its specific posture, facial expression and body gestures. The body takes in more than just words, touch and glances, tenderness and blows, attention and rejections, care and injury - it also takes in atmospheres, it stores images, words, sentences, stories, scenes, sequences, im-pressions which have a formative effect. Thus the organism, i.e. the living physical body, is formed in such a way that it grows beyond its biological reality. What has been moulded and engraved through socialisation makes it into a phenomenal body, making it conform to our culture. The enculturation of the child (Fend 1970) means that he assimilates facial

expressions, body gestures, postures, forms of movement, patterns of feeling and thinking which are characteristic of our culture (Eckmann 1985). The phenomenal body is socialised; it is built up through socialisation. Roles are given to it which it embodies, which have become "flesh and blood" - sometimes they are "written all over" a person (Petzold, Mathias 1983). Socialisation also takes place through the body. It involves the phenomenal body taking in the surrounding social and ecological world. All these influences, im-prints and im-pressions are retained in the "archives of the body", in the "body memory" (Petzold 1981, 1989), in the "me-morative body" (idem 1988n). These concepts of Integrative Therapy draw on Gabriel Marcel's (1974) notion that "my body is my opportunity of having a world; my body is my history". In "body charts" these theoretical concepts are taken up and put into practice. They constitute a means of gaining access to the "archives of the body" so as to make what has been shut away become evident, so that impression can lead to expression: the good and the bad, beautiful and ugly, the lovely and the horrid alike - whatever the person has physically experienced in the course of his life. Here we gain access to regions which had often been left out in the linguistic exploration of verbal therapeutic discourse, indeed which must remain closed, because they are located in "speechless space", in the internal space of the body, in which proprioceptive experiences, body atmospheres of well-being or unease, mis-sensations, physical states and moods reside as sensations of "unspeakable horror" or of "speechless joy". What the physical body has taken in, in the course of a whole lifetime, and what has enabled the development of the phenomenal body, is often located in the sphere of atmospheres and moods. Atmospheres can be defined as a "concerto of sensory impressions which the total sensory organ, the phenomenal body, takes in" (Petzold 1970), a concerto which tunes up the body and in the emergence of early atmospheres evokes "gripping powers of feeling" (Schmitz), which can seize and overwhelm the entire person. The influential factors of a scene - space, light, colour, shapes, smells - create the atmosphere, together with the resonance of the phenomenal body (which in turn affects the scene).

Prior experiences from the "archives of the body" take effect in an intermixture of internal world and external world, past and present. Thus there is a permeation of experiences: these elements do not merge; they are not homogenised, and thus they make inklings and intimations amenable to sensation, scarcely graspable changes in the sensations of a person's own body, yet also in the communicative atmosphere of a social field. Forces which strive for shape and form. These are moving impulses, originating as a reaction to external impressions, or entothetically from the internal space of the body, emerging from its secret depths, or being a mixture of both - inner and outer, conscious and unconscious - clamouring for expression and form. These expressions are manifestations of what in Integrative Therapy we term the "phantasmatic body".

The tendency of the impulse towards expression of the emotional, towards manifestation, the necessity for the atmospheres of the personal history which are stored in the body to find expression, shape and form - so that they can be apprehended and grasped and so that a person can learn to understand and to get to grips with himself in this way - is the basis for our mode of working with body pictures. They are maps for the "topography of the unconscious", for the unknown, rough terrain of the "corps phantasmatique", which still needs to be traversed and explored, because it is one's own territory, the appropriation of which helps one to reach mature personality and which forms the basis of our identity.

In particular, the atmospheres of early childhood and their precipitate in bodily impulses strive to acquire form. In archaic cultures since Neolithic times, such basal impulses have found expression through the body, e.g. in body painting for hunting and war, for fertility rites and rituals of mourning. In addition to facial expression and gesture, the colours on the body exhibit its impulses of anxiety and anger, love and hate. Body painting shows what is inside. In painting for war, the anxiety which comes over the body is painted on to the skin - a mask which induces fear: the skin becomes the surface for projecting one's own fright - and here the shape and colours can have a terrifying effect. Body painting, masks and costumes in more primitive cultures have functions which are similar to those of the tattoos (Vivel, Lenars 1979; Oettermann 1979) which we sometimes find in the case of patients from the milieu of drug addicts and punks. Here the body truly becomes the mirror of the soul, the organ of expression, showing fantasies of power, images of desire, symbols of violence, often a sign of averted fear. A kind of

psychogenic rash, an "outcrop" of something which "got inside" at some point in time and which produced tremors which could no longer be contained and held, yet acquire form and can be held in this way.

When we get patients to draw pictures of their body, to fill in outline drawings with forms and colours, then this particular kind of externalisation is involved, the "revelation of the repressed", whose atmospheric power finds form. In the picture, a symbol is actualised, thrown together, lumped together. This is "a sign with content and effect, as the condensed precipitate and expression of a complex atmospheric and scenic reality, of its network of sense and also its field of influence". A condensation of life history set down on paper as bodily event. Colours and shapes point to what the body of the patient has experienced, suffered, borne, what it had to feel and was allowed to feel - its happiness and sorrow, pain and well-being. We prepare the patients for their body pictures, encouraging them to sense their body, to perceive the impulses of their own body, to let themselves be moved by body atmospheres and to shape what they have sensed, felt, found and discovered into a picture. The narrative quality of such pictures and picture stories makes experienced history, life history, accessible, bio-graphy, inscription on the body, the living flesh. Then it is sometimes possible for what has been depicted and symbolised to be captured in words, to be defined, to given a language, sometimes using artistic forms, in poetry (Petzold, Orth 1985). The ungraspable can thus be grasped and raised in dialogue. Schemes become salient, the flickering shapes can

thus be recognised and identified, and they lose their "elusive terror". In this way chaos becomes ordered, what was confused finds sense, and the ungraspable acquires meaning.

Body pictures are often extremely expressive. What has been forced in comes out with great force. Repressions and, in their train, depressions, i.e. impulses which have been held back and blocked, are freed in expression. Atrophied, cramped forms, colourless, dull parts of life become colourful again, polychrome, bright and lively. Thus it is not only the projective potential which makes body pictures so fascinating for therapy, for the therapist as well as the patient, but the fact that unconscious material is made conscious, the repressed is manifest, and the unsayable and the unsaid is articulated. It is the therapeutic quality of the formulating itself which - for instance in the process of drawing - goes beyond the externalisation of bad introjects, leading to a metamorphosis (Orth, Petzold 1990), a transformation and reformation of the phenomenal body (Petzold 1990; Orth, Petzold 1990). The picture on the paper is by no means simply an expression: it is an effect, one which has its own effect in turn. Whatever I encounter in colours and forms, in symbolisations, my male or female nature, my strength or my weakness, my injuries or my weaknesses - all this has a transforming influence on my body. Body charts do not merely serve as a diagnostic instrument to show what is missing or what has been disturbed or injured: they also have a therapeutic effect, for they bring change. They allow me to perceive, to recognise, to understand the history of my body, and in the emotional

resonance to what has been portrayed and seen in the picture they also have the effect of easing tension, and a "point of least resistance" is transformed into a "point of strength", for instance when the patient is able to draw something to fill a gap in the body picture (such as a big white space in the region of the lumbar vertebral column). Or perhaps a traumatised zone (denoted by a grey-black shape in the region of the neck, perching there like terror and fear) can be altered with bright colours. With colours of anger and annoyance - at everything that has brought shame or fright, transformation and reformation are made possible. Such transformations either remain on the symbolic level, for instance in painting over with colours which have a different symbolic value, or they crystallise, with old scenes surfacing from the life history in pictorial form; they can be modified and changes can take hold. In addition to change through the alteration of body pictures, there are further possibilities of verbal and medial working through. Events in the life history thus take on a different valency and colour.

In the body pictures, pictorial form is found for feelings and atmospheres, and this is often symbolic. This form needs to be understood in terms of content; what has been condensed needs to be dissolved, explained and dispersed, and thus made accessible. By painting further explicative "enlargements" (Orth 1990), by changing the medium, through intermedial cross-linkage, e.g. by moving over into dance or mime, and also by writing texts, in associations, verbal or actional interpretations, Gestalt therapy techniques of identification, as in work with dreams, the symbol can be

deciphered. The forms and colours gain in significance. They release biographical scenes which have had an effect on the body, which have formed it, indeed sometimes deformed it. All that the spectator sees in the body picture acquires a sense, which is shared with the co-spectator, the therapist, the members of the group, taking on meaning, whose fullness of sense can be enriched by the interpretation of the therapist and the associations of the group members in a joint hermeneutic process. Body pictures make a person more comprehensible to the spectator, for his history leaps out towards us, and if this history is understood and if the person is thus apprehended in his essence, then he might succeed in becoming more self-evident, in understanding himself and in acquiring a fuller access to his past, his present and his future.

As "self-images", body pictures show the person who makes them ways to himself: "ways of healing", where before there were privations and injuries, and over and above this, "ways of promoting", for self-insight, self-discovery and creative self-fulfilment.

In conclusion, I should like to illustrate the concepts presented here in a brief case example, in which we use a specific technique developed in Integrative Body and Movement Therapy: the "relational body picture" (Petzold, Orth 1991):

Case example

Hermann, 30 years of age, a social scientist, is happy in his marriage and the proud father of a one-year-old son. He suffers from vague symptoms of anxiety and occasional attacks of panic in the night coupled with a fear of death. Then he is unable to move or say anything.

At work an older female colleague causes trouble for him, disconcerting him with her frequent attacks of criticism. Then he feels anxious, small and threatened, feelings which can go as far as fantasies of resigning - which he himself finds improper and undignified.

A few details from his life history:

After his first year, in which he is supposed to have suffered a great deal, his overburdened mother (his father is chronically ill) gives him to two aunts who look after him lovingly; he now considers the two of them as his "real mothers".

At the age of six he is fetched by his mother without prior warning, and he says that this is the end of the best part of his childhood. He is punished for anything loud and colourful and is frequently hit, in blind rage, for instance when his clothes get dirty in playing. He says that he always found it extremely unfair. This can be seen in a sculpture (Plate 1) which was made when the group was working with clay. The theme was to express something oppressive inside one's body. This is his first approach to his night-time anxiety. He calls this model "Silent scream of an old baby". Hermann made it with intense concentration, without saying a word. In one of the following group sessions, the participants are asked to make a "body chart", so that they can gain a clearer impression of the particular spheres of life in which they are relaxed, full of vitality and movement, and the ones in which they are restricted by

heaviness, rigidity, tenseness, insensitivity. Hermann draws a picture (Plate 2) of a vigorous, lively man reaching out expansively into the surroundings. The colours red, yellow and orange symbolise vitality for him. Yet there are also parts of the body in the picture - marked in a strong blue - which express tenseness and strain: the shoulders, neck, breastbone and upper stomach region. These rather small areas (in comparison with the overall picture) weigh on him "like a shadow". The association forms a contrast with the expressive tendency of the picture as a whole.

When he is confronted with the blue areas, the feeling of strain connected with the clay model resurfaces and also anger at the "shadows of the past" which are weighing on his life. He ventures to investigate these dimensions more closely, and using the "amplification technique" (Orth, Petzold 1990c, p. 752, 1072) he draws the blue areas in more detail. Beside or behind the representation of his body rises the shadow figure, like a great bird. The "wings" show its huge oppressive potential. In contrast to the outstretched arms and legs, the "pinions" are bent turned downwards. Supports pressed tightly together bear a body confined by red rings. In another sequence of drawings, Hermann is asked to make a new picture out of the "resonance" of this contrastive portrayal (Plate 3), to listen to himself, in order to find out what atmospheres emerge, whether and in what way they condense, and whether a picture, a scene will surface and crystallise. After a while the client starts to draw. He depicts himself: the red outline fades to an ochre, and the expansively outstretched posture has turned into a dejected

one, an inverse figure. The arms are resting helpless, lifeless on the thighs, the legs are crossed. The feet have no firm contact with the floor - all signs of decarnation. The head is drawn in between the shoulders which, like "blue bulges", are trying to ward off threatening impulses. Behind the figure a shape is looming, a black pedestal, on which Hermann depicts his mother: she towers above him, oppressing him with her glance. From her eyes, domineering beams shoot out, beneath which his body is bending; these beams also reach his heart, which is still alive, red and clearly visible. In the picture the powerful effect of the glances is unmistakable and thus he can physically sense them (perceiving) - he was not previously allowed to "notice" their force. In terms of form, the legs of the shadow picture are similar to the legs of the mother on the pedestal. Hermann comes across an atmosphere in his drawing which he recognises and which enables him to apprehend a typical childhood scene. It shows the kind of "intercorporeality" between him and his mother, her domination over him, watching over and oppressing him. In another picture (Plate 4), the development of this constellation is pursued further into adolescence and into adulthood. The mother has turned into a compact figure - black and dark blue are her colours now. She is hurling black and red-blue arrows at her son, who nevertheless is now stronger and bulkier, and he finds ways of demarcating himself (the boundary line right through the middle of the picture); the price of which is hardening. He acquires armouring: in particular a blue shield on his left side, and in front of his chest a square steel plate. It

protects his heart, but it is heavy and weighs him down. Hermann can ward off attacks (blue arrows), but he has to maintain an "en garde" stance, to be prepared for counter-attacks and threats. The muscles of his shoulders, and those of his arms and legs, are emphasised in bold black and blue thick lines, pointing to the chronic strain and the armouring. The sequence of pictures illustrates the genesis of what Wilhelm Reich described as "character armouring". Hermann still has to delimit himself, even now; he has to be on his guard, although in the meantime he has acquired the ability to take the initiative, and when his mother visits him he can control the situation to a greater extent, for instance by limiting the time.

The sequence of pictures does not just mark a development from the point of view of diagnosis, a progressive self-exploration; it shows that the creative production itself can help in working through; it has a narrative quality, an interpretative element. Iconic narrations of this kind point to "non-linguistic hermeneutics" (Petzold 1991a), in which gestures are explained in gestures, sounds in sounds, images in images, etc.

I hope that this example has shown how the theoretical concepts of Integrative Therapy presented here are exemplified in the practice of treatment. The body pictures release a whole host of projective material, and also go beyond diagnostics towards therapeutics, in which the ungraspable can be grasped and the unseizable takes on form and can be named. The formulative powers enable the patient to find strength for shaping his life. The pictures are

worked through verbally and actionally. They lead into exercises for movement and expression, are fathomed in the group discussion for unconscious elements. In this way, insight into the connections in one's life, emotional experience and bodily experience can work together so as to heal and transform, and they can promote personal integration and a creative way of leading one's life.