

Focus-Oriented Art Therapy – Accessing the Body’s Wisdom and Creative Intelligence

By Laury Rappaport

Foreword by Judith Rubin

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Reviewed by Di Gammage

How would it be for you to be invited to learn a simple yet profound method that can be incorporated seamlessly into your dramatherapy practice which will deepen, enhance and enrich the work, leading to more effective therapeutic change for your clients? Welcome to Focusing.

In her book, 'Focus-Oriented Art Therapy', Laury Rappaport, whilst acknowledging how each discipline is a complete practice for self-awareness, growth and therapeutic change in its own right, eloquently shows how the Focusing method can be wedded to this expressive arts therapy to form a 'rich, transformational alchemy' (p.16).

Judith Rubin in her foreword describes Dr Rappaport's approach as falling within the Humanistic field (although the Focusing method is equally applicable to other orientations including psychodynamic, cognitive and behavioural (Gendlin, 1996; Purton, 2004)), I found the author's clear, personal and at times, gently passionate manner made the book not only person-centred but also extremely reader-centred. Rappaport invites the reader to engage with the material on a deeply experiential, embodied level, and there are bountiful rewards in store.

Rappaport has written the book with several audiences in mind – professionals from each of the two disciplines wishing to integrate the other into their current practice and mental health and healing arts professionals who have an interest in both disciplines but are trained in neither one. An ambitious task, but one which, I believe, she achieves with intelligence and sensitivity. I found the book's organisation worked particularly well for me. It is divided into four parts: Part I - Focusing and Art Therapy covers the history and concepts of Focusing, Gendlin's Focusing Method, Focusing-Oriented Psychotherapy and finally, the history, concepts and practice of Art Therapy. Part II brings the two disciplines together and explores the basics in Focus-Oriented Art Therapy. Part III deals with clinical approaches including clearing a space with art, Focus-Oriented Art Psychotherapy and individual pieces of work with specific client populations. She enquires into health and wellness, working with trauma, spirituality and psychotherapy and how Focusing might be incorporated into the other expressive arts. The book concludes with guided exercises in Part IV.

A rich and vivid tapestry of clients' images are woven throughout the book as we are taken on different journeys of healing. All the images are in black-and-white rather than colour which strangely enhanced their magic for me. I felt I was invited to imagine the tones and hues for myself. I was especially attracted to the image on page 77 of a young girl and her

dog set against a dark, turbulent sky. The image has a Munch/Van Gogh feel about it. I was intrigued by Rappaport's intention to 'fuse' case examples so that 'one particular client's suffering does not have to continue in its original unhealed form' (p.19). I wondered how difficult and uncomfortable it is for any therapist to stay with our clients' often meandering, non-linear healing journeys. Is the author trying to protect the reader here, trying to meet our human need for resolution, a happy-ever-after-ending?

Although careful to stress the limitations of an individual untrained in art therapy using art, she encourages the use of art as a creative endeavour that is basic to 'our humanness' (p.72). Rappaport's openness and generosity around her chosen art form resonated strongly for me; just because we are dramatherapists, or play therapists, or dance movement therapists, we do not have sole claim to these expressive media. Nor, as we discover, can Focusers assert exclusive possession of their approach.

Focusing had an auspicious beginning. It was developed in 1960s by Eugene Gendlin, a colleague of Carl Rogers, at the University of Chicago. Gendlin, a philosophy graduate, was curious to understand what led to success in psychotherapy and so began the scrutiny of hundreds of transcripts from psychotherapy sessions. In this current time of evidence-based research it is good to know that Gendlin and Rogers were the first researchers to record and transcribe actual therapy sessions. The conclusion was this – the therapist's theoretical orientation, technique, or the actual content of the client's life seemed irrelevant. What was crucial was the client's relationship to the content of their life, *how* they spoke about the material. Clients who could hear how they were 'inside', as opposed to talking *about* themselves, were the ones who demonstrated progress in therapy.

Focusing is a body/mind practice that allows us to listen to what is happening within, giving space and time to be with whatever might arise (the Felt Sense) and bringing an attitude (the Focusing Attitude) of friendliness towards this. Such spaciousness and presence in the moment prevents us from defaulting to habitual patterns of thought and behaviour. Focusing is 'a process of honouring the wisdom that you have inside of you, becoming aware of the subtle level of knowing that speaks to you through your body' (Cornell, 1996, p.3). Focusing allows us to access the body's innate wisdom, to listen to that core within every one of us that, despite all our wounding, remains whole, and healthy.

Rappaport leads the reader through the six Focusing steps of clearing a space (background feeling, all fine place), choosing an issue and felt sense, finding a handle or symbol (which could be a word, gesture, image or sound), checking out whether that handle feels right, asking and finally, receiving. Once the steps are embodied, the therapist is encouraged to play with them in order to best meet the client's needs in the moment. The author shows, through her many case studies, the flexibility and applicability of this approach.

For me, Focusing is a subtle spiritual practice for it supports the cultivation of universal transpersonal qualities including loving kindness, equanimity, compassion and generosity. It encourages us to open to our authentic beings that lie beneath our conditioned, habitual selves, and as Rappaport reports 'serves as an entry into spiritual dimensions of living' (p.26). Although I found the chapter on Spirituality and Psychotherapy quite brief, I felt Rappaport succinctly conveys the spiritual dimension of Focus-Oriented Art Therapy. She is

keen to make the distinction between spirituality and religious belief and tradition and to caution the therapist against imposing their own spiritual views onto clients. These universal qualities, so supportive to the healing process, go way beyond particular religious beliefs yet so often we can feel fearful and mistrustful of them because of our own oppressive experiences of religion. By cutting ourselves off from our own spiritual essence, I believe we restrict our own potency as human beings. Dennis MaCarthy, an American psychotherapist recently speaking at the Play Therapy Conference posed the question, how do we support our clients to be the bigness that they are? Adding that as therapists we cannot be in a superior place because we also struggle with this dilemma. The spiritual essence permeates the writing throughout this book and I often found myself affected on many levels by its content.

I also learnt a lot about art therapy and thoroughly appreciated the author's extensive knowledge and experience of her discipline (for instance, when not to invite clients to use their non-dominant hand in image-making) and the distinctions she makes between art therapy and art psychotherapy (prompting my thinking about dramatherapy and drama psychotherapy).

Gendlin has consistently maintained the opinion that Focusing lends itself beautifully to being integrated into other therapeutic approaches and will serve to enrich the other approach. He writes, 'Focusing is an entry into a crucial mode of sensing. Every other method works more effectively when Focusing is added' (1991, p.65). Rappaport offers a very convincing argument for bringing Focusing and art therapy together and it would be easy to substitute dramatherapy in place of art therapy in the table on Interconnections (p.88 – 90). Moreover, I suspect many dramatherapists already engage in aspects of Focusing both in our personal and professional lives without necessarily knowing this as Focusing. Gendlin is the first to say there is nothing new about it. He does not claim to have invented it, only to have had the curiosity and taken the time to understand and identify the process. Rappaport describes how she happened upon the combination of Focusing and art therapy as a teenager herself. Hinterkopf describes the Felt Sense as inhabiting the territory between the conscious and the unconscious, 'the Felt Sense is something before mind, body and spirit are split apart' (1998, p.19). The creative arts therapies give voice, or gesture, or image or movement to whatever is arising from within. They are the external manifestation of the Felt Sense.

The author makes many references to safety in the therapeutic relationship, reinforcing throughout the book the fundamental need for this condition stating, '[I]n my own experience as a therapist, when I encounter resistance in a client, I attend to how safe the client is feeling' (p.50). She describes the necessity for the therapist to act as witness for the client and to model the Focusing Attitude when it is challenging, or disturbing for the client to do so for themselves. For this, Rappaport urges the therapist to practise being friendly, accepting, kind and compassionate towards their own inner experience (p.53).

Although this book is designed to be dipped in and out of, especially the exercises, I would really encourage a full reading of it. This is a gem of a book and I cannot recommend it highly enough. I am indebted to Dr Rappaport's for her wealth and generosity in the

therapeutic field and I look forward to the forthcoming addition in the series, Focus-Oriented Dramatherapy.

Bibliography

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