



Albert Pesso – Part 2

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Albert Pesso, co-founder with his wife, Diane Boyden-Pesso, of PBSP, Pessó Boyden System Psychomotor and President of the Psychomotor Institute, Inc. was formerly Associate Professor and Director of the Dance Division at Emerson College, Supervisor of Psychomotor Therapy at McLean Hospital in Massachusetts and Consultant in Psychiatric Research at the Boston VA Hospital. He has conducted training programs in PBSP in the US, Brazil, Israel and in many countries in Europe. He and his work with PBSP for the German GTZ Mission in The Democratic Republic of Congo have been featured in a documentary film, 'State of Mind' distributed by Icarus Films. He is the author of many books and articles on PBSP, and a frequent lecturer at universities, hospitals and clinics in the US and Europe. At present, he continues his intensive training schedule in Europe, and also leads programs and sees individuals in Boston, Massachusetts.

Serge Prengel, LMHC is the editor the *Relational Implicit* project (<http://relationalimplicit.com>).

For better or worse, this transcript retains the spontaneous, spoken-language quality of the podcast conversation.

Serge Prengel: This is a follow up conversation with Al Pesso. Hi Al.

Al Pesso: Hi Serge.

SP: So what actually happens during a group session, what's the process?

AP: Okay. We start the group off with just a check-in. If it's a new group they'll say their name and what they do and their goals. And very often they get moved for some reason as they talk, and then I might then highlight some of the elements that we might attend to, lined up with what they just said. After that I tell them about the procedure etc and the format. And then we ask people 'Who would like to begin?', and we make it clear that while the person is working, that it is their responsibility to bring the work to a good end. Then we have a timer a 40 minute timer that goes off, which means, 'You have ten more minutes to bring it to a good end.' And that it's their responsibility, so that we don't just repeat the old stuff. And my responsibility is to be their resource and their helper to bring it to a good end.

SP: So, you bring it to a good end is an important part of this. Should we talk about it now or just keep it in mind for later?

AP: The good end means that we do reversals. That we make a new memory. That the whole feature here is not *insight* but new *memory*. Because we know we see the present through the lens of history, through memories. So we make a new memory and immediately people's perception of the present shifts. It's a startling neurological reality.

SP: So, very, very important in this process is insight in itself, not only is not necessarily good, but could be bad. The point is, creating a new experience from which a new memory can emerge.

AP: Exactly, and experience is posited as if it had happened in the past. And that's part of the ritual thing -- that we're not in a present relationship; that we touch and present the new memory to that part of the brain that contains a body image and memory of that time. So we're putting it into long term memory, I believe, and not into short term memory. And I think the *ritual factor* helps it do such a thing. I don't know if neurologically that's possible, but that is what we aim for. I also highlight then to the group that since people respond instantly to what they see and respond instantly to what they hear that the group should not speak or talk and respond during the person's work. Because then the person will start relating to the group. But the group reacts immediately to the person who's working, and they identify with it because it's so real. And sometimes they'll tear up and they'll remember their own issues, but we don't attend to it at that moment.

SP: So clearly the focus is on the person working, and everything is around that.

AP: That's right. So we don't to the group process during the procedure. Some times we do group process. So let's say we finished the work and I'll talk about finishing the work that we didn't do before. Then I'll say, 'Now it's the time for sharing.' And in the sharing, they speak about their own personal experience without directing their commentary to the one who worked. So the person doesn't feel or get interrupted from that *quality* they have from the end of their structure. They're in that other state, and are absorbing it. And then, I make certain that people don't make corrections or questions or criticisms of the work because that would really disturb the person that worked. But they have ample opportunity to say 'This is what happened to me. I saw so much what my family was like, just like his family or her family. And I remember the situation so vividly, I hadn't thought about it in twenty years...' Stuff like that comes up, and then they begin to know what they want to work on in their own work. But let's talk about the *end* of the work, which we didn't do in the earlier part. If it was in a group, some one or some two people would have enrolled as the ideal mother and the ideal father. And be placed at the client's choice, in proximity to them, so that they can get a tactile memory and an auditory, memory and visual memories. Because as the ideal parents talk, they might say 'If we had been your ideal parents..' She (the ideal mother) would be directed to say, 'Your father and I would be happily married and I would never be distressed.' And then the client would look up and see their faces. And I would direct that they would look at each other. So he would see a visual sense of *unity* instead of that gap that he saw between his real mother and father. And then what happens at that point is oxytocin starts to flow. They feel part of the whole 'nesting' thing. And they say, 'Oh, my God, if they were together like this, I could lean back.' I say, 'Well why don't you lean back then?' They would feel that and they may close their eyes. They may say, 'I could have been so peaceful.' So I say, 'Experience that peacefulness in your child image.' And that's an important thing, Serge, surprising. They feel it *now* and they say, 'That feels great.' And then the ideal parents would say, 'If we had been your ideal parents, you would have felt this peaceful with us when you were *five, six, seven, eight years old.*' And when they do, they (the clients) say, 'Oh my gosh, the *difference* between the two states ...' Just because you say the words, 'back then' and they go 'back then' in their psyche it gets planted somewhere else. And then they say, 'The world looks bright. I can see flowers.' And then the ideal parents would say, 'If we had been your ideal parents, you could have seen flowers when you were a child.' So we use their language to fulfill the dialogue as it goes.

SP: So it's really any...it's really not just a concept. But you really live it and you stay with it and you go deeper with it. So there is that sense of really absorbing it as an experience.at that time.

AP: And then it takes a certain understanding of *timing* from the therapist. They (clients) might close their eyes, they just sink into it. Or they might suddenly bounce up and say, 'Oh, that was great!' And I would say, 'You got off the plane too abruptly. I think you jumped out with a parachute.' They say, 'I don't really have enough time.' I say, 'Just finish it and see...let it have an organic, organismic end.' And then they'll go back into it and feel it and feel it. And then I just wait. Unless I have something to say. They're absorbing it and then I might repeat, 'Experience it at the age when you needed that.' And now they've got the tactile, the visual and maybe, not only the auditory, but maybe even the smell. Because I think there's such a big thing about odor. Of course it isn't their real parents, but they're breathing a different sense of air at that time. And then I'm interested in what happens while their eyes are closed, they may nod their head and you see....because it is an organismic thing and when it's over, it has a sense of closure. They'll nod their head, but I don't interrupt and then, little by little, they open their eyes and they look at me directly. They look like they are no longer in the hypothetical past. They say, 'That's it. I got it now.' And then I say, 'Are you ready for de-rolling?' They say, 'Yes.' And we start de-rolling. First the placeholders, each object and it gets removed ritually. 'This is no longer a place holder for your boss..' Oh we had to move that principal, remember?

SP: Yes.

AP: We might get then, if it's a group, we get somebody to be...we say, 'You wanna pick...' Before this I have to jump back a bit. Okay? Before we come to the ending, we need to have moved that...I'd forgotten that sequence. But I say 'Pick someone to be a principle mover.' And they pick someone. I've taught them this ritual. They stand up as if they were in some kind of chapel or setting, some religious setting. And they'll (the role-player) stand up and then they'll walk to the object, kneel down and then carefully reach forward and grasp that object. And then move it over to where it belongs. Take it off the placeholder for the boss, put it on the father. Then they'll (the clients) look at the boss and they'll say 'He's just a boss now. It's amazing. Before, if I thought of him I'd get all pissed off and everything. And now I can say, Okay, he's my boss.' So they've already shifted their perception of the boss. It seems ridiculously simple, but it *happens*, It happens, just like I said. And then we remove that placeholder, all the other placeholders, then we do the movies. They say, 'Now this is no longer the movie of your mother with an ideal husband.' Or then if they had to they might have done a movie with the mother as a little child, having ideal parents who would have supplied her with her needs. Whatever other movies that came up, we'd take them apart. And then we kind of wipe out, (makes a wiping gesture in the air) I say 'And then when we move that voice that we had.' Remember there was a voice of truth and I'll sort of wipe it out of the air and I say 'It's no longer there, and we'll wipe out the witness figure.' And then with the ideal parents I say, 'Are you ready for the ideal parents to de-role.' And sometimes they'll say, 'Yeah.' And some times they'll say, 'Wait a minute, I want a little more.' They'll go back and they'll say, 'Umm.' They'll take another taste and they'll say 'Now.' And both together, they each say 'I am no longer playing your ideal mother/father. I'm myself.' They say their name. The ideal figure isn't linked to the real person. Except they'll remember the other person having the character of that, and then they'll step away. And then I tell the people. 'In the sharing or afterwards, during breaks, talk to each other as you ordinarily would in your social sense, but don't say in a humorous way 'how is my kid doing? Don't do that. Keep separate, the ritual relationship and then your own personal/social thing. Let's not combine the two.' So I make that part of the clarity. Then the person sits down and then I say the thing we were talking about before. 'Let's do sharing now.' And then people will talk about what happened to them as they watched that. And that could be very moving. Ant it could begin to I prepare some people to do the work that they're gonna do next.

SP: So as this is happening in the group, what is the body experience of the person who is working? How is it paid attention to?

AP: I watch that all throughout. I didn't say too much about that. I watch that all the time. I watch their posture and sometimes I might note certain kinds of actions they're doing and gestural actions. And say 'You're holding and hugging yourself. That we call a self-self interaction, 'Would you like the ideal parents to put *their* arms around you the way you're putting your arms around yourself?' So I attend to that. Or they'll say, 'I'm feeling my chest is aching.' at some point. And I'll say 'Let's explore what that could be. Sometimes it's useful to take a deep breath, tighten your muscles around the achy spot, see what sounds come, what movements come, or what emotions come.' And then they'll go, ' AHHEHOOW' And I'll say, 'What was that?' And they say, 'My God it sounds like I was in agony or that I was crying.' Then I'll say, 'See what happens if you let that feeling come out.' And then they might sob and cry and the witness might say 'I see how much grief you feel as you remember how it had been.' And sometimes I call that a relief-grief sequence. Sometimes they feel, 'Oh I feel so good' and the next moment they tear up. So when they feel the *good* they can contrast it with how *bad* it had been, and that's a better time to feel grief, than when there's no alternative. When people feel grief, because it's just empty but not the flavor of what could have been, it's a horrifying grief. And that would be the stuff like the Primal Scream where it's endless grief, because there is no alternative. So then I can say, 'We call that the relief-grief sequence. And the witness says, 'I see how much grief you feel when you remember how bad it had been.' And then they'll say 'Oh I feel like a load is off my chest. My shoulders are dropped.' And I'll tend to all the motor things, which I always do but I didn't bring it up now because I do that so automatically – from what I have done in the past.. But we pay attention to all the shifts in the body because if they suddenly say, 'That's good, I feel fine now.' And I may hear in their tone or the way they move that it isn't real. So I look for authentic reports, or 'as if' reports when they're trying to just comply with what they think you're anticipating. So depending on what they do, I'll make an intervention: if their body is loaded; if their vocal tones shift; if their facial expression shows something different from what they're saying. So I track it all with the witnessing, and sometimes I just track it by making observations.

SP: And the focus again is on the person working. But the people who are playing roles, you're not tracking but you're doing is you might be giving them some directions for some things to say or to act or do.

AP: I'll give them directions, usually just to use their phrase. I don't invent new things. If they say, 'My mother and father really loved each other this way, it feels wonderful.' So they say, 'If we were your ideal parents we would have loved each other this way.' So I make their dialogue based on **his statements**, rather than make interpretations on what I think he needs. I follow the track of where they are.

SP: So, what you're describing gives a very good sense of the room being a ritual space.

AP: Exactly.

SP: And that's something that is very much about a deep reality taking place but not an everyday reality.

AP: Exactly, I call that Kairos time. K-A-I-R-O-S. In contrast to Chronos time, which is everyday reality, it has no depth. But in the Kairos time, real things are happening that make a difference. And that's still part of the ritual thing. And sometimes some people do it as a whole, 'as-if' thing. I find there are different ways to deal with that. I look to see if they're in Kairos time, which also could be called 'structure time.' The work is called a 'structure.' Are they really in it? Or are they just kind of like having a dialogue with the therapist and not really in relationship with the ideal figures.

SP: And so through experience/intuition/observation you have developed a sense of being able to tell when a person is in Kairos time versus. in Chronos time.

AP: Exactly.

SP: So would you say a little bit more about that? What happens, either signs you pick up, effect it has on you or intuition. What is it that allows you to monitor the nature of the time?

AP: I'll do it this way. When people are supervised in this work, they are supervised via a videotape. They bring in a video. And then I'll see, if it's in a group the way we used to do it. There would be the client and around the client are the ideal mother and father. Somewhere in the room is the real mother and father. Somewhere in the room is brother and sister. Somewhere in the room is maybe the boss. And they're paying absolutely no attention to the figures. They are just talking endlessly with the therapist. Then that's telling me. So if I'm leading, I wonder if they're only attending to me... or are they really *in* that situation and in that age and relating to those figures. And I think that that's the dancer/dramatist in me that's looking 'are they in the play or are they just talking about it.' And so I tend to that, and I couldn't tell you specifically what I do because I would do different things at different moments.

SP: So what I'm hearing is that there's a quality of sensing that the person is involved with the figures of their past in such a way that they become very real for them at the moment.

AP: Absolutely. Even when they're looking at the placeholders...here we're doing a movie. You have one shell being the mother as a young woman, another shell as the mother's ideal husband, not a second husband, ideal first husband. Then I'll do a little (hand) pantomime. I'll pick up the one (shell) of the ideal husband and I'll move him like he's talking. He says, 'If I had been your ideal husband, I would love you.' Now they're looking at these shells rattling at each other. They don't see shells anymore, they're seeing their mother with an ideal husband. So when you use the words and when you use the pantomime, they're seeing very powerful images and I'm tracking what I think is going on in their brain while they are gazing. I think I've gotten some awareness of that, I'm tracking their interior, not just the external. I'm tracking what I think is going on in their brain. Whether they're in that state when they're seeing vivid things, and not just looking at these little objects in the room.

SP: Yeah, but so very much in a way that is what's happening is that the correlation to the experience you're describing is a mind state where there is a certain level of waves, of things that we may or may not at this point be able to measure with instruments. But that corresponds to a certain functioning of the brain where it is in a receptive mode for resetting.

AP: Perfectly said. Absolutely. And I can look at that kind of condition, and see it from their face and in their expression, and make that assumption that they're in that state. Yep.

SP: So in a way what we're talking about is that you're not going to be able to make people -- to help people -- change something that's been a profound experience, unless they're brought in a place where the functioning of the brain is in that more malleable state or that more magma/volcanic state where there is a possibility of reshaping.

AP: I wish to God I knew how to teach people to note that. Because some people don't see that at all. Let me give you a little example, (laughing) it's a funny example. We used to have a very big estate up in New Hampshire with a lake. It was Baba Ram Dass' father's estate and he had his Ashram there. ...anyway we had a beach on the lake and I never learned how to swim. And I had someone from Holland who brought their two children there, and they were swimming like crazy. And the mother was trying to teach me how to swim. And the kids would watch and I would do it, do it, do it. And then they came up to the mother. They say, 'He does all the right moves but he doesn't swim!' (laughter) So I've learned to see that some people do all the right moves, but there is no swimming going on. And somehow I've got the flavor. I look for that. For some people, they don't get that sense of drama, or whatever it is, or that other state. And they do externals. They know all the steps...and how to get...I mean the ones who really do this stuff they tune right into that. It makes a world of difference, and that's one of those un-teachable things.

SP: Right. So the ability of the person to put themselves into Kairos time, whether they're gonna be in a way, in that mode, that is going to enable the perception of that state.

AP: And the therapist has got to be aware of that and join them in that ritual fashion. The therapist is a teacher, is a ... I don't know maybe has to be a little bit of a priest in a way, too as well. So many things, so many different roles are going on simultaneously in the therapist actually.

SP: Yeah, so the part of priest, this might be that sense of that deep knowledge of what Kairos time is. That you know it enough, that you're able to draw people into it.

AP: Yep. And that's something that's in some people automatically, and some people slowly develop it. But that's essential in the training of this work.

SP: So for you, if you think back about your process over the years. You know, do you see stages in which that own part of you has developed? I mean is it a part that you've always been aware of and existed?. Is there a part that you've become more and more conscious of it? How can you trace your own history with it?

AP: I think to some small degree I always had it. I think. Well here's what comes to my mind. I'd go to the synagogue every Friday and every Saturday with my father. And as one of the uh,..I don't know what the word is (Mitzvahs)...things that you do to you make choices, to be part of the ceremony with the Torahs in the synagogue. And you select to do that honor. And he (my father) very often would have me have the honor of carrying the little baby Torah. They'd (the rabbis) bring out the big ones. And then we'd have this ceremony, walking around the synagogue. And people would reach out with their Tallis, the (prayer shawl) scarves, and then they'd touch the Torah and kiss it. So I was part of that ritual of sanctity, and I think I got that quality there, at that time. And I think I got it also with Martha Graham. She was like a.....I moved from Judaism to Martha Grahamism, I think. And that thing of the ritual, where you're touching the deepest...she would do the Greek tragedies and things like that, in The Errand into the Maze and some of her other pieces. She

was right in there and she did it in the dance classes, you could capture it. And little by little I think I learned to do it on the stage and little by little I learned how to do it with the work. When I first started doing the work, I think I was in an altered state. I felt like it wasn't me doing it, I'd get out of it and I'd just be my ordinary self. But I think during it I was in an altered state. Now, doing it in another way, I can do that, but I'm in a much more relaxed state and I'm feeling like I'm having an exquisite sport or game or art that is just appealing and relaxing. So I'm not drained from it. And everybody who's trained in this work talks about feeling more relaxed and it's almost like play except you're not laughing and you're not making it kind of meaningless. It's an art thing, so I think I've had that kind of transition. To first knowing sacred things when people are really believing they're in touch with the spiritual, and the quality that that gives. And then I found that in theater, I found that in dance, and I find that with artists. And I guess I automatically bring that to the work. And very often it's people who are artists or who are psychiatrists who really play an instrument. One of my top people plays the violin, Dr. Lowijs Perquin. He's a top psychiatrist in Holland. And it's his musicality, and his father was a director of theater, so I think that some people bring that, but other people don't. but they cultivate it. I find out where their heart is and I help them awaken the metaphors to where they're really *touched* and somehow bring that to bear. So the therapist's heart has got to be there, but not *in* the possibility sphere as the player, but as the supporter of that state. And to make sure there's no breakage of it. And not to be the supplier of healing but the supporter of the healing process with the role players who are doing it.

SP: Yah. The supporter of the healing process. The person who leads them to the space, who supports the space. So that feels like a very moving sense of what the experience... the role of the therapist, and the experience of the therapist.

AP: People who have been leading traditional groups, they get exhausted, they tell me. Then when they learn to do this they say 'What a relief it is to do this!' That they are now outside, someone else is doing the healing, and they say 'I go home relaxed.' So I'm finding people who learn how to lead, and there are many hundreds now who do this or maybe thousands. And I hear that report over and over again that it doesn't exhaust them. Because they're no longer in a transference state where they have to be the one that is holding the person together. Now the ideal figures are doing that.

SP: Right, right. So you're holding the space.

AP: That's exactly right. And then I'm using....I have to say another thing. When I'm working—of course I've had 50 years of experience and I can trust my intuition—but I call it the boys and girls in the back room. While I'm working I'm open to all my own associations. And suddenly the most ridiculous possibilities come to my mind. And I kind of filter them through some part and I might use what comes up. And I think that every human being has incredible creativity back there that they have to learn how to be in touch with. Because that part of the brain is working all of the time, day and night, without strain and organizing things that we have learned, and to look to being in touch with that I think is important.

SP: So that is describing what happens in a group. So now what happens when you don't have people in a group, physically taking on these roles, what's the work like?

AP: It's surprisingly effective. And let me tell you, I also do this over the telephone where I don't even see the people. So I'm tuned into their vocalizations as they speak. And they'll say. 'Oh, my mother did this or that,' and I say 'Well, pick an object to be a placeholder for your mother.' I'd say,

'What'd you pick, where'd you put it?' And then I say, 'Let's make what we call a bookmark and imagine right over your right shoulder is an ideal mother who would.bup, bup, bup bup...' And they'll get that feeling, and they say, 'That makes me lean back in the chair.' And I say 'Why don't we use the part of the chair to role play ideal mother?' So I'll try to use objects. Or they'll say, 'I really need to be held.' And I say, 'Get a shawl, put it around your shoulder, wrap it in front of you. And we'll have that shawl as your ideal mother with her arms around you.'" So I try to be creative depending on what would be believable with what's on hand with them. And I do pretty much the same kind of thing. And I'll witness based on their tonality. So I've learned very much how to witness on the very, very minute shifts in the expression. But I've learned, I suppose, without trying how to hear in the volume of the voice and the tonality. Because emotions come through the right hemisphere and affect the tonality. That's part of speech. There is speech that is purely cognitive, in the left hemisphere, but then there's the right hemisphere that goes oohaaooOO and animals have that. And I've learned to hear in the tonality, the emotional qualities that might be there. And I'll name that.

SP: So definitely what's happening is the emotional qualities are very present, but what I'm hearing in addition is a sense of even in the work when the person is one on one, and even when it's on the phone, a sense of using placeholders. And take this little thing, or take the armchair or part of the chair. So what's it like, what's that experience of actually something to be a placeholder, what happens with that?

AP: First of all the placeholders are chosen for the real figures. And then the ideal figures I don't call placeholders, I would call it a bookmark. Bookmark means it's in the air, for the ideal mother. And then the chair wouldn't be a placeholder, the chair would be role playing the ideal mother. So then they'll tell me the sensory thing as they lean back and what happens.

SP: So then it gives you an experience of interacting.

AP: Absolutely.

SP: It's not something... in a way you move it from the as-if quality. But by giving it a physicality by saying it's there. Then you have to face it and relate to it.

AP: Exactly. But let me tell you something that is an absolute contradiction to that which happens a very small percentage of time. I'm remembering a group that I led in London recently, with therapists. And it was a large group and we had all people needed. And most of the time (in her structure) there were no people there, just objects. And she had really, really... was moved with the idea of the ideal mother. She felt her in the air around her. She had enough of a sensori-motor memory to feel a sensory reaction to just her thoughts and the words. Then I said, just to enhance things, I said, 'Would you like to have an actual person?' And she said, 'No, I'd rather not.' So for that particular person, they felt it strongly enough and if we had a person there, some part of her, she said, would no longer believe it. Which is: maybe she needs some more work to believe in real people and all that.

SP: But what I'm hearing there, is really that very accentuating that sense of what this process is about is giving an area for people to feel more intensely the presence of these people, actual people or missing people.

AP: The reason they could have that and believe it is because our genes are anticipating...you remember our genes are anticipating just that. And you give it the right vocal/verbal message, which translates into a motor message. The genes say, 'Yes!'. They can imagine leaning back; they can imagine snuggling in the neck of. And we're not just making fantasy we're making genetic expectation explicit. That's what makes the uh...., there's something else that's coming in that. What was I thinking? No I can't get it at this moment. But there's an internal receptivity and anticipation of all these things and I found ways to awaken that. I know what I was talking about. I know. Okay. Sometimes I say well you know, you don't believe it you know, in the ideal parents. And they say, 'Well, if it was a dog. My dog I would believe it. So I put a place-holder for the dog, and I put the principle of ideal mother on the dog. And the ideal mother says, 'If I was your ideal mother I'd be as faithful and caring of you as the dog is. So we link it up sort of that way. Sometimes it's a tree. Sometimes it's a mountain. Because I look at what they already are ready to believe in a transferential/projected way but not in a human interaction way, where the answers would be. And very often people have spiritual answers. We'll have an image of God in the air. And they say 'God hears me, God attends to me.' Because when we don't have people as an answer we get/seek a spiritual answer. But I'm saying that our basic human needs have to be with a human interaction. So I then make the principle of the ideal parent in God and somehow we can move those around. Anyway, these are some of the complex steps.

SP: Yes. But These are complex steps but also what I'm hearing is while they're complex, they're also very grounded because you made the point, this is not fantasy. This is not somebody else's vision of reality.

AP; That's right.

SP: This is about helping somebody, we all have some things that are very powerfully stored inside and you're giving an opportunity for these things to be present in the room.

AP: Exactly, exactly. And then we work with it and move it finally/hopefully to human interaction, which is what our genes are anticipating. And when we don't get it, people start putting these.... they store that wonder in different banks that have not collapsed like their real mother or their real father. Those (human) banks have gone bankrupt so they put it where it's safe. Some people put it in horses, some people put in God, some people put in the atmosphere. So I have to look at what they really believe in, and what they really trust. And then I try to imagine with them what the essences of that are.

SP: Yeah, so again, you know, I'm struck as you're describing this, of what people believe in or what they trust. And what happens in your own lifetime but also in terms of parents. You know, the presence of ancestors, the beliefs. So again, how consistent it is with thinking of it as a ritual and something that puts you in touch with these things that are larger than the everyday perception of things.

AP: You're hitting that point over and over and very, very importantly so. Because I'm not sure how many therapists are working on a ritual base. They're working on a here and now base and say 'I'm gonna help you.' It's not a ritual anymore, it's happening in the here and now.

SP: And what strikes me again, is to make the point as you are talking, that it's a ritual space. But it's not ritual as a way of saying bypassing reality or bypassing varied presents. It's deeply anchored in reality.

AP: Absolutely, absolutely. And the fact that it being a ritual, means we can condense and collapse time and put that event that's happening now in the past. And put it where it had been anticipated. Without that ritual setting, I'm not so sure it goes back there, it becomes a healing in the present. And they learn (in some other forms of therapy) how to overcome something in the past by getting strong in the present, which is good, sometimes that's the best. That's a coping system. So I'm not teaching you so much to cope, but to change history. So that they have the energy to deal with all the imperfections of reality.

SP: So it brings to mind what you said before at some point in the conversation about having that quality without having the dogma. So it's kind of finding the strength of transformative healing that all ancient traditions have.

AP: You're putting that so beautifully, okay so go on again.

SP: So there's the strong sense of connecting with the deep need that we've had, from way, way back when, probably in the caves. Of finding that ability to go at a level of the human experience that is healing in a transformative way. But anchoring it in an observation, paying attention to what happens in a world-view, that is not limited by dogma and fear.

AP: That's true, and right in the midst of all that is touching the element that is so profound in people, the longing for meaning. And we then stay that this is a meaningful universe, where everything counts. Because when people are living a life of disaster, they say, 'God has abandoned me and that there's no meaning on earth.' And you get that whole other way of looking at the world. And when we connect, I think the longing for meaning is genetic and innate. And I try to tap in on that and there are different ways that people find ultimately meaning.

SP: So in a way it brings me to the question that we had alluded to before in the pre conversation. It's a sense of, what's it like for the therapist to do this kind of work. And as I'm hearing you I have a sense that in a way, the therapist is a person who is affirming the possibility of meaning.

AP: Yes, yes for sure. And it enriches in myself and in the therapist. But the other thing is, it is peace-giving inside. People say over and over again, 'I'm so glad I learned this training because I can do this work without being exhausted.' I say that over and over again, because I'm told that over and over. That says there's some important shift between the way they learn to do therapy and where they're learning to do this particular form of therapy. It feels more like play and some of them say they have more energy at the end than they had at the beginning. So I don't know how to describe that in any other way.


SP: So maybe that part, in a way having the experience of being in that space, is a space where you can feel flow and a nourishment. Instead of fighting and struggling.

AP: Exactly, flow is exactly it. Struggling comes when you've got resistance going on, and you got that negative transference. And now I know how better to work with that, I say, 'Who did you take care of?' Because as soon as there's resistance I know there has to be a Holes in Roles topic. So I

sidestep all the attacks and stuff like that. I remember telling one person. He says, so vicious and nasty at me he says 'Can you handle that?' And I say 'Sure, sure. I've met your relatives all over the world.' They think they're the only angry person, that's part of the Messiah complex. When you fill holes in roles you're the only. And then you think you're Satan. You're the only killer in the universe. And it was a bit of a come down sometimes for them to feel 'Oh there are other killers out there?' That's just a bitter humor. But I've learned how not to take it so personally when all the stuff is shooting at me when that does happen, when they tell you 'What are you trying to do, this fairy tale fantasy stuff?' And all that, and then I just go for the holes in roles part. So I guess what I'm saying here, some of it has a play element. I feel like somewhere, I'm playing, I don't know how to put that any other way. Separate from the sacred, there's something about play in it.

SP: And maybe it's not so separate, because in a way it's not a place where you're holding the world on your shoulders. But, playing is possible. You don't have to do that.

AP: You don't have to be Atlas carrying the universe. Right, right, right. Exactly, Exactly.

 *This conversation was transcribed by Alex Curtis.*

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