

Commentary on *A Preliminary Inquiry on Rosen Method and Mindfulness: What We Notice*

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Julia Cousins LUDDA, CSTD
Performer and writer
Oxford, England
julia.cousins1@ntlworld.com

This has been a very interesting article to read from the point of view of someone who has read a little about Rosen Method bodywork and heard both a practitioner and participants talk about it, but never experienced it directly. Mindfulness, on the other hand, has become a part of my life since doing a standard eight-week course two and a half years ago.

The authors mention that mindfulness in the U.S.A. is to be found everywhere and that is equally true in the U.K., since it is used in Clinical Psychology to combat forms of depression, as well as to deal with stress in Members of Parliament. It is also offered for pain relief, and as a way of teaching school children to deal with difficulties and as an aid to a more relaxed lifestyle.

The system that Jon Zabat-Zinn and others have evolved uses ancient spiritual practices and (in the U.K.) elements of Cognitive Behavioural Therapy. A typical mindfulness course has no religious or spiritual connotation; it is taught as a series of techniques for dealing more skillfully with oneself and life in general. At the end of the course the participant should be able to judge which things are helpful and can be used or adapted to suit their own practice. This allows it to be regarded as a practical tool, regardless of the individual's particular beliefs.

The authors of the article chose to conduct their survey among those with experience in both Rosen Method and other forms of mindfulness, including meditation. Practitioners of a wide range of practices observed that meditation had become so interwoven into their everyday lives that it was difficult to decipher how they operated in their working lives. The participants used language which was very familiar from my experience of applying mindfulness and spoke of such things as "mind chatter," "dropping away," and "anchoring themselves" when difficult things arise, resisting the urge to "fix" or move away from painful emotions, "re-centering oneself in the body," being "kind and non-judgmental" to oneself and by extension to others.

From my perspective, there appears to be three possible areas of overlap between the practice of Rosen Method and mindfulness: one is the centrality of the mind/body interface; a second is that the work is done through physical sensations (touch), which arise though not directly through the thought or emotion (which are causing the problem); and focus is on the body and the breath. This leads to the third similarity which is perhaps the most striking: both are experiential and only such direct experience will lead to change.

From a philosophical and spiritual viewpoint this makes total sense because human substance is spiritual/corporeal and soul (that elusive principle which gives us our individuality as selves) moves between

the two, using the physical body as its vehicle in earthly life. It is said that everything the soul experiences will eventually be expressed outwardly in the body because we hold deep in our tissues and cells all the 'knots' caused by emotions and thoughts we cannot, as yet, easily express.

Mindfulness might be described as a form of self-healing. It gently changes one's attitudes to things, particularly in relation to difficulties. These are addressed not through mental problem-solving, but by increased awareness of where physical or mental tensions arise, and concentration on breathing into these areas of pain and constriction. This allows a softening which leads to a process of acceptance and greater compassion for oneself and others. This seems akin to Rosen Method where the work is done with attention on the body and breath, the physical dimensions of the person, rather than focusing on the thought or emotion, which may have led to the problem experienced by the client. That the practitioner is an integral part of the client's experience sounds self-evident but there is actually a subtle symbiosis occurring. Rosen Method practitioners spoke about their enhanced ability, through mindfulness, to be present during a treatment with whatever was going on and simply holding space for it; not trying to change anything, but allowing it to be. The greater the Rosen Method practitioner's ability to be present in this way, the deeper the client can go.

The obvious synergies between the two practices have the authors wondering whether meditation or mindfulness techniques should become a standard part of early Rosen Method training. It is clear that there would be great benefits from this approach; however, the authors also raise an intriguing question as to whether those drawn to Rosen Method training might already be on a spiritual path, seeking healing as a process relating to the whole person. This process not only facilitates the growth and development of the client, but also depends on the practitioner being equally open to the healing expansion of being which can occur. The two seem inseparably intertwined and I look forward to more discussions on this.