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**MSc Complementary Therapy Studies - Bodywork**

In memory of Milton Trager M.D (1908-1997),  
a pioneer in mind/body medicine.

God guard me from those thoughts men think  
In mind alone,  
He who sings a lasting song  
Thinks in a marrow bone.

(from 'A Prayer to Old Age', William Butler Yeats)

## ABSTRACT

**Aim:** To explore Trager practitioners' perceptions of the experience and effects of Trager Psychophysical Integration, with particular focus on their understanding of 'hookup', working with the mind, and what they consider to be the mechanisms of effectiveness in Tragerwork. **Subjects:** 15 practitioners, each with more than seven years' experience. **Method:** A qualitative, exploratory study, using semi-structured interviews. **Results:** Practitioners believe their ability to be in 'hookup', ongoing personal/professional development, and establishing collaborative relationships with clients are essential for effective outcomes. Common opinion indicates that 'hookup' has many levels, but might be understood as a felt sense of bodily attunement and quiet mind. Practitioners indicate they are working with the unconscious mind through the body. **Discussion and Conclusions:** Tragerwork might be understood as a form of Cognitive Behavioural Therapy, with links to mindfulness meditation. Therapeutic effects of hookup may possibly be explained by 'entrainment' and the work of HeartMath Institute. Further discussion is needed to clarify the nature of hookup and how it can be more easily taught.

**Keywords:** Trager<sup>®</sup> Psychophysical Integration, Trager<sup>®</sup>, Mentastics<sup>®</sup>, Hookup, Tragerwork, HeartMath Institute, Cognitive Behavioural Therapy, Mindfulness

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# 1. INTRODUCTION

## 1.1. Tragerwork® -- what is it?

### 1.1.1. History

The Trager® Approach, or Trager® Psychophysical integration, is a form of bodywork and movement re-education, developed by Dr. Milton Trager (1908 - 1997), who discovered, at the age of 19, an effective way of working with paralysis and chronic back pain. Trager continued to explore and develop his way of working with a great many conditions for the next 23 years before entering medical school, his primary motivation being to share the effectiveness of his work with medical doctors. He had previously received little acknowledgement from the medical profession for his success with cases that could not be helped by orthodox medicine (Trager 1986).

Milton Trager believed that, by being a doctor, he might find others who were interested in exploring the principles of his work, which was effective but difficult to explain scientifically. Papers on Trager Psychophysical Integration, which he submitted to medical journals, were returned with the criticism that they were 'too philosophical -- not scientific' (Trager 1982). He had given up the idea of being able to share his discovery, until, at the age of 65 and about to retire as a G.P., he gave a demonstration at Esalen Institute, California, and was persuaded to teach.

Trager reluctantly agreed, believing that he was not able to describe how or why he worked as he did. He transmitted his approach through touch, and through his own particular language that often sounded like poetry or Zen 'koans'. In

trainings, students would receive Trager's touch then practice with each other to find the same 'feeling' quality--no technique was written down. Trager would often say, 'I could put it all in a book and call it Trager massage, and you still wouldn't get it' (Trager 1986). He was concerned that his work would be interpreted as a technique, which is why he insisted on calling Tragerwork 'an approach'. He would also say, 'Don't look at my hands; you won't learn anything. I want you to come into the feeling of what I'm doing' (Trager 1989).

Trager also emphasized that he was working with the mind of his client and said:

My work is directed towards reaching the unconscious mind of the patient. Every move, every thought communicates how the tissue should feel when everything is right (Trager 1982).

Milton Trager continued to teach until his death at the age of 89. Many thousands of practitioners have been trained in the Trager Approach in over 15 different countries. International interest in Tragerwork highlights its capacity to transcend boundaries of language, nation, religious differences and culture. Trager believed that his work was about creating 'world peace'.

The Trager Approach is still not widely known amongst health professionals in the U.K. This may be due to the fact that comparatively little research has been done and most articles on Tragerwork have been published in non-medical journals. The Trager organisation, however, has grown considerably over the past 25 years and has clear guidelines for professional practice, code of ethics and continuing education manuals to govern training and assessment at all levels of practitioner development. Although the manuals have been updated to accommodate shifts in educational requirements and the growth of the Trager

community worldwide, the growth in understanding of Trager practitioners, many of whom have been working with the approach for twenty years or more, is undocumented.

This research project focuses on gathering information from experienced practitioners, both of a personal nature as receivers and professionally as practitioners, to explore their understanding of the effects of Tragerwork and what they perceive to be the mechanisms of effectiveness.

### **1.1.2. What does a Trager session involve?**

Observing a Trager session, one would see the practitioner moving in an attitude of relaxed, focused attention, using their own body weight to engage the client in gentle stretching, compression and rhythmical rocking movements. The practitioner would take pauses regularly to focus their attention on their own body usage, releasing effort with simple movements, called Mentastics (short for mental gymnastics). Mentastics<sup>®</sup> movements have no formula; they are an expression of the practitioner's present-moment awareness of what is needed to release tension. However, they may involve gently shaking an arm, stretching, breathing more deeply, or shifting weight. There is an understanding in Tragerwork that tension on the part of the practitioner will be transferred to the client, therefore the practitioner needs to work in an attitude of relaxed attention to their own comfort.

Dr. Trager emphasised that the effectiveness of his work was dependent on a state he called 'hook-up'. He has described its effects thus:

When one hooks-up with the energy force that surrounds us all, then one comes into a finer state of being. It is a feeling deeper than relaxation. The feeling is peace.

When asked to describe how to experience hook-up, Dr. Trager would emphasise that everyone knew this state:

You have already experienced hook-up at one time or another...you see a rainbow, a landscape, a seascape, or a new-born baby's face. You are struck by the beauty, leaving you practically speechless.... At that moment you are in hook-up. (Trager and Guadagno 1987)

Orthodox medicine of the 1950s was unable to accept the value of any approach that could not be explained scientifically. Developments in mind/body research over the past 50 years may offer ways to understand the mechanisms of effectiveness within Tragerwork. This study is geared towards producing data and considering hypotheses that may enhance understanding and communication of the work for myself as well as within the Trager community and with other health practitioners.

## **1.2. An Overview of the Study**

This is an exploratory, interpretive study, with a phenomenological perspective (Valle and Mohs 1998), using semi-structured interviews, focusing on Trager practitioners' experiences of Tragerwork, uncovering their understanding of 'hook-up', 'the mind', and what they credit as mechanisms of effectiveness in Tragerwork.

The study is intended to:

- Draw out tacit practitioner knowledge (Meerabeau 1995)
- Investigate practitioner understanding of Trager concepts
- Develop language and theory to assist communication
- Develop new concepts through studying practitioner narratives

It is anticipated that the study will:

- Deepen reflective practice for myself and others (Schon 1983)
- Highlight areas that need clarification
- Stimulate discussion and further inquiry
- Provide information for teaching of students and clients
- Draw together a body of practitioner knowledge that validates personal experience, uses everyday language, and serves as an educational tool for practice development, and appropriate use of Tragerwork.
- Lay the groundwork for further inquiry into clients' experience of the Trager Approach.

A number of specific objectives were identified:

- Gain insight into the way Tragerwork is practised
- Develop the basis for an educational resource
- Develop a procedure for undertaking a subsequent study into client's experiences

## **1.3. Reasons for undertaking the study**

### **1.3.1. The changing face of medicine**

The UK Market and Business Research Report (UK MBRR 2005) into usage of Complementary & Alternative Medicines (CAM) indicates that 95% of users of CAM therapies and 75% of the general public support access to CAM via the National Health Service (NHS); provision of CAM in the NHS is reported to be increasing, with some 40% of NHS General Practitioners (GPs) referring patients to CAM therapists for treatment. The Market Forecast for 2005-2009 predicts the increased integration of orthodox medicine and CAM therapies.

Often referrals to complementary therapists are driven by patient demand and dissatisfaction with the results of conventional medicine (van Haselen et al 2004). Serious failures in Healthcare were documented in an NHS report: An Organisation with a Memory (Department of Health 2000) and indicated that in NHS hospitals alone, adverse events occurred in 10% of admissions, or at a rate in excess of 850,000 cases a year, with a cost of £2 billion a year in additional hospital stays. However, a potential for harm also lies in many treatments within CAM if inappropriately or incorrectly applied.

Referring to their study of CAM use by cancer patients, Molassiotis et al (2005) conclude that there is an urgent need to educate/inform primary care health professionals about CAM, and state that it is imperative for health professionals to explore potentially beneficial therapies and work towards an integrated model of health-care provision. Peters et al (2002) stress the importance of CAM research that is informative as well as demonstrating scientific rigour to provide GPs and patients with user-friendly literature and self-help information that can

clarify the potential use of complementary therapies as well as allay fears and unrealistic expectations.

This research project is focussed on providing information that may be used as a basis for the development of informative literature for both Trager members and the general public.

### **1.3.2. Exploring real-life application of Trager**

Previous research into Tragerwork has been of a quantitative nature and measured Trager's physical effects (Foster et al 2004, Duval et al 2002, Dyson Hudson et al 2001, Witt and Mackinnon 1986, Witt and Parr 1988). Although this research is useful in indicating the effectiveness of the Trager approach with certain conditions, many questions as to what Tragerwork involves remain unanswered. For example, is it the hands-on contact with the practitioner within the framework of the session that brings about results? Or is it perhaps something that clients are learning in sessions that they then apply to everyday life? Dr. Trager emphasized that he was working with the mind and that the state of 'hook-up' was vital to the success of his work. How do practitioners understand 'hook-up'? How do they feel they are working with the mind?

Lewith (2004) says that establishing an evidence-base for complementary therapies involves accepting that clients choose therapies for their effectiveness, even if efficacy remains unproven. Perceptions of effectiveness take into account a broad range of patient-centred outcomes, which are not easily measured in randomised controlled trials (RCTs). Kane (1999) says that orthodox medicine is beginning to recognise that research provided by qualitative data has much to offer in understanding real-life situations, where

many factors govern effectiveness, with patient participation vital in the implementation of any treatment. It is therefore important for a deeper understanding and validation of complementary therapies to have a balance of research methodology, recognising that optimal medical management and the selection of therapeutic strategies also rely on the information provided by qualitative research (Lewith et al 2002).

This Trager research study is stimulated in part by the government's recent acknowledgement of the many aspects of healing, and the need for research into the mechanisms of what supports well-being. Three recently funded NHS research projects, following qualitative interview study formats, acknowledge the importance of naturalistic inquiry in investigating the real concerns of clinical practice (Corner et al 2003; Evans et al 2004; Tovey et al 2003). A recent paper, put out by the NHS Modernisation Agency, suggests high impact changes are needed in the NHS in order to 'see the service through the patient's eyes' (Fillingham 2004). This paper emphasises provision of care that is not just physical, but 'emotional, psychological, spiritual and encompasses the needs of the whole person'. This would involve the physician in recognising the relevance of feelings, beliefs, life experiences, meaning and faith to the relationship with patients (Kligler et al 2004) and shifts the conventional boundaries of the physician/patient relationship to a more patient-centred model. The Marylebone Health clinic in London provides a working model of a well-established Integrated Practice, where GPs and CAM practitioners work together on meeting the needs of the whole person (Peters et al 2002).

It is hoped that the results of this study will be informative not only for myself and members of the Trager community but also provide information for clients and

healthcare professionals about the possible benefits of Tragerwork and its value within an Integrated healthcare system.

### **1.3.3. Personal Reasons**

#### **1.3.3.1. Translating the inarticulate speech of the heart**

I trained with Milton Trager in the United States of America (USA) and have been a Trager practitioner for 17 years. I also teach workshops in the Trager Approach, and as a Tutor Supervisor, I oversee assessment and continuing education of students, practitioners and tutor trainees. Like many others, I was taught by Milton Trager and other instructors to observe, feel, sense and find the contact with my clients. There was little in the way of explanations for the effectiveness of the work that could be easily understood or communicated by scientific theory.

Trager, whose medical training was in Spanish, used the language of poetry or metaphor when speaking about his work. Disappointed in the dismissal of his work as too philosophical, he would say, 'Until you've experienced it (Tragerwork), it's only words. Once you've felt it, who needs the words (Trager 1982).'

However, public demand for greater knowledge about complementary therapies indicate that the words of experienced practitioners can offer much in the way of valuable information. What was once dismissed as anecdotal evidence is now recognised as being of value in providing data that expands our understanding of the bigger picture of healing, and how people make sense of illness.

Trager was heartened by a comment from author Dr. Peter Levine, a friend and early Trager student: ' If a phenomenon cannot be explained scientifically, it is because science is not yet sufficiently refined' (Trager 1982).

As I often find it difficult to express myself verbally, I empathise with Dr. Trager's difficulty in articulating his understanding of an approach that is primarily about sensing. This research project is my personal contribution in honour of my teacher: a decoding of the understanding of those whom he taught, whose first language may not be English, but whose rich experience of using Milton Trager's approach prompts the outpouring of their hearts. It is my hope that at the beginning of the 21st century, scientific developments will assist us in understanding Tragerwork, and orthodox medicine will be more open to hearing what Milton Trager had to say.

#### **1.3.3.2. Continuing Education**

Great emphasis is placed on continuing education for Trager practitioners. Advanced practitioners also need to document further learning, with trainings, which need not necessarily be only within the field of Trager; other bodywork approaches such as Craniosacral Therapy, Mind/Body Centering, Continuum or therapeutic practices such as Hakomi and Neuro-Linguistic Programming are considered to be of benefit to deepening practice.

Like many other Trager Practitioners, I have participated in some form of continuing education as a participant or assistant every year since my first training in 1985. This, however, has never been onerous for me, as Tragerwork involves not just the development of technical skill, but a growing awareness of self, a deepening of present-moment kinaesthetic sense, which can be

integrated into everyday life. I have had many opportunities to observe changes in myself and others through the work. Dr. Trager would often comment on the changes in people's faces as they explored his work, and he emphasised that nothing was more important to him than his own self-development: 'I'm becoming a better person all the time,' he would say (Trager 1986). My interest in this research is part of my continuing education, in an attempt to understand more deeply what does happen through both practising and receiving Tragerwork.

## **1.4. Assumptions**

a. There are certain assumptions in naturalistic inquiry, which I also adhere to:

- It is not possible to separate the outside world from one's perception and experience
- Knower and knowledge are inter-related and interdependent
- Human experience is complex and cannot be understood by isolating the parts
- Meaning in human experience is derived from studying individuals in their natural environments (Depoy and Gitlin 1994).

b. I am also assuming that -- to borrow a quote from Einstein-- 'Something deeply hidden has to be behind things' (Oschman 2000). I understand this to be an as yet mysterious unifying principle, impossible to define, but accessed in moments of heightened perception.

## 1.5. Glossary of terms

**Mentastics:** a short form of 'mental gymnastics'—a term coined by Dr. Trager to describe the process of self-questioning while moving with conscious awareness of the body. Questions such as, 'What could be freer?' or 'What could be lighter?' invite a shift in feeling perception in the body, enabling the questioner to discover easier ways of moving, developing responsiveness and integration in the body/mind.

Trager said, 'Mentastics...

- Are not exercises; they are mentally-directed movements.
- Do not consist of a technique, method, or routine.
- Are an approach of mind and motion perfectly synchronised.
- Are done with the feeling of how light, how beautiful, how free, how complete the movements can be' (Trager and Guadagno 1987).

**Hookup:** Trager described the state as, 'a natural and harmonious state of being,' where one, 'connects with the energy force that surrounds all living things' (Trager and Guadagno 1987). Hookup is also supposedly a basic requirement for Mentastics, as well as being an integral part of effective bodywork, allowing the practitioner to work on the client with sensitivity and without fatigue. Trager emphasised that hookup is the key to promoting positive change, and personal development in psychophysical integration.

**Unconscious mind:** Anything that is not in conscious awareness at any particular moment.

**Self:** An expanded state of awareness that recognises itself as something other than personality.

## 2. CONTEXT OF INQUIRY IN LIGHT OF EXISTING LITERATURE

### 2.1. Shifting paradigms

There have been no previous qualitative research studies into Tragerwork, due, I believe, to the fact that research has been heavily influenced by Descartes' ideas that whatever cannot be formulated mathematically cannot be real (Bortoft 1996).

The inquiry paradigm underlying conventional medicine and mainstream medical research is Cartesian, and underpinned with dualistic thinking (Heron 2001). The positivist, objectivist viewpoint states that there exists a world of objects, independent of our minds, which can be understood through observation of how those parts work together. This type of thinking is prevalent in our society, our education system, and inherent in modern medicine's use of drugs and surgical procedures that provide physical solutions to presumed physical problems (Heron 2001). We are, for the most part, entrenched in the idea of separation -- subject and object, body and mind. Milton Trager, on the other hand, emphasised that mind and body are interrelated 'in the whole electro-magnetic force field that is living matter (Trager 1982)', and that the state of 'hook-up' or connectedness was vital in his work (Trager and Guadagno 1987), but this has not been highlighted in any previous Trager research.

Although it is widely accepted that valid research may be divided into two broad categories, namely experimental-type research, and naturalistic inquiry, experimental research in the form of randomised controlled trials (RCTs) has been regarded as the 'gold standard', the ultimate proof of efficacy of treatment. Consequently, Trager studies have focused on attempts to measure the physical

effects of the work in order to demonstrate its worth. However, in doing so, I believe they have fallen into the trap of attempting to fulfil the criteria set by the 'methodological tyranny' of orthodox medicine (Lewith et al 2002), that is based on a limiting worldview.

In his emphasis on hook-up, Trager, without ever naming it directly, was speaking from his experience of what might be called 'the participatory worldview'. Bohm, the noted physicist, supports this worldview when he calls for a movement away from 'literal thought' that aims to be technical and unambiguous (1996) to a different way of perceiving and thinking that is more innate, a way that predominated in early human cultures, and is still observable in some cultures today. Bohm calls this 'participatory thought'-- a worldview, which creates no separation of object and subject, but focuses on a sense of connectedness where 'everything partakes of everything else'. Peters (2001) suggests that complementary therapy (CAM) practitioners are possibly more attuned to the participatory worldview that does not assume the separation of mind and body, but is made up of 'relationships which we co-author'. Problems arise when we try to apply a process that involves participatory thought to the predominantly literal world of the Cartesian paradigm that governs evaluation of what constitutes good medical research. Peters (2001) states that within CAM research the practitioner is inextricably bound up with outcomes. To facilitate the resolution of this dilemma, Heron (2001) presents a new paradigm for medical practice and research that is holistic, systemic, relational and experiential, based on an understanding of the participatory worldview. However, Heron stresses that only when there is congruence in four forms of knowing—experiential (that received through empathic resonance), presentational (through expression),

propositional (grounded in mastery of theories and concepts) and practical, demonstrated in competence, can there be a claim to validity.

This study is my attempt to fulfil those criteria and establish grounded knowledge of experiential phenomena.

## **2.2. Previous research into Tragerwork**

- a) A small-scale randomised controlled trial was carried out into the effects of the Trager approach on chronic headache (Foster et al 2004). 33 volunteers were randomised into three groups: medication only group, medication and 15-20 minutes weekly attention from a physician group, medication and 1-hour Trager treatment group. The main outcome measures included self-reported frequency duration and intensity of headaches, medication usage and headache quality of life (HQOL) obtained at baseline and after a six-week treatment programme. This study described Trager as 'part manual approach and part cognitive/behavioural approach that emphasises mind/body interactions'. It also mentioned the quality of touch--gentle and not pushing through resistance-- which is so characteristic of the Trager approach, with the practitioner working within the client's unrestricted range of motion.

Results indicated that both the Trager and physician-attention groups had a significant mean decrease in headache duration, with a greater reduction in the Trager group (27.5%) as compared to the attention group (3.7%). Results also showed improvement in HQOL scores ( $P=0.045$ ) in the Trager group with mean medication usage decreased by 44% ( $P=0.035$ ).

Overall, this study is thorough, scientifically rigorous and at the same time inclusive of the sensitive, feeling nature of Tragerwork, including references to working with the unconscious mind. It makes no mention of 'hook-up', however, presumably because of the difficulty involved in integrating that concept into a scientific paper, and evaluates Tragerwork as a technique separate from the 'presence' -- or hookup -- of the practitioner.

b) An unblinded randomised study (Duval et al 2002) of factorial design was carried out into the effect of Trager on evoked stretch responses (ESR) in the most rigid arm of patients with Parkinson's disease. Trager was described as a 'manual therapy based on the assumption that the therapist is able to establish communication with the unconscious mind of the subject.' It is possible that this is a reference to hook-up, as hook-up could be considered a pre-requisite for such communication. The researchers also emphasized that the practitioner enquired regularly into the comfort level of the patient in order to maintain a feeling of relaxation. The study produced data, which supported the effect of the intervention, although those clients who were seated and receiving the work on the non-rigid arm showed little effect. It is possible that, as the trial was unblinded, these patients experienced dissatisfaction on receiving treatment on their less rigid, therefore less needy, arm. The expectation of therapeutic gain or lack of it can influence the outcome of a trial (Mason et al 2002), leaving patients disappointed or frustrated with treatment. A case study, supporting this trial, would have set up mechanisms to record patient preferences, essential in real-life situations, as preferences will almost certainly influence the therapeutic outcome (Lewith et al 2002). This highlights the point that

true research needs to be both systematic and focussing on questions that are of interest to practitioners and patients (Kane 2004).

- c) A prospective clinical trial into the effect of Tragerwork or acupuncture on wheelchair user's shoulder pain in individuals with spinal cord injury (Dyson-Hudson et al 2001) followed a randomised format where subjects acted as their own controls with a five-week pre-treatment baseline period. Eighteen subjects had ten acupuncture or ten Trager treatments over five weeks, and showed significant decreases in pain with both acupuncture (53.4%) and Tragerwork (53.8%). The reduced pain scores were maintained throughout the five-week follow-up period.

This trial was useful in that it demonstrated the value of both acupuncture and Tragerwork compared to baseline. The research team gave their interpretation of Trager's theory that, 'the mind, through the nervous system, contributes to pain by maintaining the muscles and other soft tissues in a chronically contracted and inflamed position.' There was no mention of any other important factors in the practitioner/patient dynamic other than the physical manipulations that might affect outcomes.

- d) A Physiotherapy case study, n=12, showed the effects of Trager on improving chest mobility with patients with chronic lung disease (Witt and Mackinnon 1986). Although the team were careful to convey the message that it was not possible to standardize the treatment protocol, as repetitions, speed, range of movement would all vary according to client needs, the focus was very much on the physical aspects of the work. However, as a case study, explicit contextual details were given, the study procedure and

inclusion criteria were well defined, with subjects acting as their own controls over a baseline two-week period, but it is unlikely to have been given much credence outside of physiotherapy circles, as the language was very specialised and not user-friendly.

### **2.2.1. A research strategy in tune with its subject**

Whilst honouring the tremendous dedication of these researchers, I recognise that there is much more to understand in Milton Trager's work than merely measuring the physical effects. Accepting that 'the primary purpose of research is to generate knowledge and test theory using systematic strategies in which the thoughts and actions of the researcher are clearly specified so that they are logical, understandable, confirmable, repeatable and useful (Depoy and Gitlin 1994)', I undertook this qualitative study to examine more fully what is involved in the practice of the work. In so doing, I used a phenomenological approach, which I feel is more aligned with Tragerwork.

Abram (1997) cites Husserl, the father of phenomenology, in recognising how scientific reductionism has become estranged from direct human experience, resulting in an impoverishment of language. The true task of phenomenology, he says, is to show how science can be supported by the 'forgotten ground of our directly felt and lived experience'. Gathering practitioner anecdotes and experiences for this study has produced data that will hopefully assist the expression of Trager concepts and deepen understanding of what is involved at a grass-roots level in learning, receiving and practising Tragerwork.

## **2.3. First and foremost an approach**

The only book which Milton Trager was willing to put his name to was 'Trager Mentastics: Movement as a way to Agelessness (Trager and Guadagno 1987). He was afraid that his work might be interpreted as a technique (Trager 1986) -- that people might read and copy what he was doing but miss, entirely, the essence of his approach, a way of being in relationship to the client. He repeatedly stressed to students and practitioners that they could only genuinely share what they had developed within themselves. Although he never actually said what that might be, I understand it to be a quality of presence, a heightened awareness, coupled with a deep level of relaxation. The following research supports this. Certainly, these are qualities that one cannot learn from a book.

### **2.3.1. Touch as language**

Deane Juhan, Trager instructor and author of *Job's body: A Handbook for Bodywork* (1987b) suggested that Milton Trager's greatest achievement as a practitioner, scientist and artist was, 'raising the sophistication of touch to the stature of language (1992).' Using the science of psychoneuroimmunology as a backdrop to this understanding, Juhan suggests that 'mind is everywhere' throughout the body, 'the entire soma is, in a genuinely functional sense, brain (2002).' Trager practitioners are therefore communicating information through the manner of their touch. He quotes Trager as saying, 'Every shimmer of the tissue is sending a message to the unconscious mind in the form of positive feeling experiences. It is the accumulation of these positive patterns that can offset the negative patterns...(1992).' Juhan's work has done much to educate

the Trager community as to how discoveries in psychoneuroimmunology may explain Trager's assertions that he was working with the unconscious mind.

### **2.3.2. Noticing and questioning**

Blackburn (2004b), another Trager Instructor, recently wrote a series of articles on Tragerwork, one of which gave the first in-depth description of the tablework, but with such emphasis on feeling and presence that nothing of Trager's essence was lost. In speaking of the Trager approach, Blackburn (2004a) draws parallels with Gendlin's approach to psychotherapy in developing the 'felt sense' of the client. In 'focusing' this way, drawing attention to sensation in the body, and listening with a 'friendly', non-judgemental awareness, positive changes occur (Cornell 1996).

Inherent in both Tragerwork and Focusing is the attitude of not-knowing -- an idea familiar in the eastern practice of Zen. Trager would emphasise that whenever he came across resistance in the client's body, he would instantly do less, and question, maybe silently or maybe in a gentle manner, 'Well, how should it be?' 'What could be easier here?' (Trager 1986). He suggested that by merely asking the question something would begin to move, even on the subtlest level; he would feel the tissue change under his hands. It was for this reason that he knew he was working with the mind. I had the opportunity on several occasions to be 'scribe' during the trainings -- moving around the room with him, jotting down things he said. In emphasising the importance of questioning, he once said, 'Just ask the question, and the client will be in a state of creativity. No one can argue with that (personal communication 1989).'

Enigmatic as many of Dr. Trager's sayings appear to be, this research attempts

to highlight their purpose and deeper significance for the current community of Trager Practitioners.

Liskin (1996) shares an anecdote, which demonstrates Trager's ability to bring about perceptual shifts in his students. Not-knowing is such an important aspect of Tragerwork that Trager would emphasise that clients were the real therapists: they were the ones who made the changes. Practitioners were merely there to enquire and invite change through moving the client's body in new ways. Once, a student asked, 'I keep bumping up against resistance in my client's body. What should I do about it?' Trager replied instantly, 'Say excuse me'.

### **2.3.3. Enhancing the feeling of well-being**

By employing the principles of respectful inquiry and effortlessness, Trager practitioners are encouraged to move out of the role of 'fixing' the client, to a more harmonious state of relaxed awareness where they become partners in the journey towards well-being. This aspect of the work is beautifully portrayed in the book 'Breast cancer: One illness, Two women, Four seasons', a diary of a woman with breast cancer and her Trager practitioner (Harvard and Openlander 2005). Both women emphasise the relief of staying in the moment with felt experience, to offset fear of disease progression. Coupled with this is the recognition of pleasurable feeling, and recall of pleasure to shift the experience of the body/mind. Using recall of pleasurable movement leads Harvard to say, whilst undergoing chemotherapy with all its resultant nausea and anxiety:

I have learnt what a beautiful, healthy body I have; its movements are musical and magical. The way my body moves in space is a wonder to me. This is particularly helpful at night, when my imagination tends to work

overtime (...) that is when I am most able to lie quietly and remember what my body felt like during the Trager session.

### **2.3.3.1. So, is it all hypnosis?**

Since the time of Mesmer, hypnotism has generally been associated with quackery and charlatanism. Latey (2001) suggests that non-verbal hypnosis is part of every bodywork session: practitioners gradually take over clients' movements, directing them to walk or stand in particular ways, using changes in tone to soothe or enliven as necessary. Although Trager asserted that nothing changed in the patient's illness until the 'mind' was reached, he was greatly disappointed when his work was dismissed as hypnosis (Liskin 1996). However, from my part, in order to make the transition from massage therapist to Trager practitioner, where I was required to speak to the client in a state of 'hookup', I felt the need to take a hypnotherapy course. I have since been very curious about Tragerwork's links with hypnotic states. Gathering practitioner understandings has helped to illuminate this.

### **2.3.3.2. Remembered wellness**

Recall of positive feeling states or 'remembered wellness' (Benson and Friedman 1996) is an important aspect of self-empowerment within Tragerwork. The client is encouraged to practice recall throughout the day, inviting what Evans et al (2000) refer to as 'a physical response to a psychological effect, the power of psychoneuroimmunology in everyday life'. This has often been labelled the placebo effect and viewed with suspicion by orthodox medicine.

Developments in the science of psychoneuroimmunology offer new ways for us to shift our understanding away from the separation of mind and body, towards an appreciation of 'the living matrix' of the body as a communication system,

where structure and consciousness are interwoven throughout the whole (Oschman 2003).

#### **2.3.4. Delighting in movement**

The opening paragraph of Trager Mentastics (Trager and Guadagno 1987) states:

The only purpose and value of all the words in his book is to stimulate your desire to explore through movement a unique approach to self-development and psycho-physical integration.

Through Tragerwork, I have learned to be more fully 'inhabiting' of my body, aware of the support of my feet on the ground, and the organisation of my physical structure. I had been practising massage previously and developed a back problem. Learning how to stay aware and comfortable as I was working with others was an important motivation for learning Tragerwork. However, there were other payoffs, which were linked to the growing sense of body awareness.

To stay present in everyday life, it helps to be deeply rooted within yourself; otherwise, the mind, which has incredible momentum, will drag you along like a wild river (Tolle 2001).

By focusing on my feet, and moving with awareness using Mentastics exercises, I found a way to quieten my mind. I had previously done a lot of meditation in India, however, I associated meditation with sitting silently with eyes closed. My focus was either 'inner' or 'outer'; Trager movements created a bridge between these two senses of self.

For Milton Trager, practising Mentastics movements in an attitude of effortlessness brought feelings of pleasure, and a sense of agelessness. Recent research (Li et al 2005) indicates the value of Tai Chi Chuan, a meditative movement form that is similar to Mentastics, in supporting better balance and reducing the number of falls in the elderly. Other studies have also indicated wide-ranging benefits from Tai Chi that include enhanced immunity (Kobayashi and Ishii 2005), improved attitude in dealing with chronic conditions (Wang et al 2004), a beneficial effect on cardiorespiratory function, mental control, flexibility, and balance control (Li et al 2001).

Although Trager movement and Tai Chi differ in that Mentastics have no form, there are similarities: moving with a sense of effortlessness, and present-moment awareness of the body in relationship to its surroundings. Tai Chi master, Chungliang al Huang, author of 'Embrace Tiger, Return to Mountain' gave a gift of calligraphy to Milton Trager. It represented Chungliang's recognition of the feeling state in his body after receiving a Trager session. Trager instantly recognised that this calligraphy had captured the essence of his work. It became the official Trager logo. Translated, the characters read 'dancing cloud'.

Whereas, at one time, science was unable to recognise personal experience of movement as scientific data, functional magnetic resonance imaging (fMRI) is now showing how the brain registers movement. A recent study into the effects of long-term practice and task complexity in musicians and non-musicians indicated that practice induces plastic changes within the cortical motor system (Meister et al 2005), and demonstrates that 'practice makes perfect'. Like any other artistry, what one focuses on then becomes a skill. Is it possible that the

quality of lightness in the body translates to an emotional state of 'de-lightedness' in the brain? And could it be that by exploring such movements, we begin to change those areas in the brain that are associated with those feeling states?

Another recent functional MRI study focussed on heartbeat perception (Pollatos et al 2005). Whether or not this translates to better health is not indicated in this study. However, it raises questions about the value of awareness practices such as Tragerwork. Do they help to increase control of and attunement to the body? Such practices have been part of yogic disciplines and eastern forms of meditation for millennia.

Milton Trager describes his Mentastics practice (Trager and Guadagno 1987):

Mentastics was a quiet discovery in my life.... The subtle feelings of these simple movements are so pleasurable that I have continued to move and develop this approach for over sixty years. The awakening process, which allowed me to be aware of my body, was initiated with the taking of one deep breath.

### **2.3.5. Humour and healing**

Lightness in touch, movement and attitude are cultivated in Trager trainings. Humour is often used to dissipate anxiety in students who are trying hard to get it right. The reason being that they need to develop the antithesis of performance anxiety -- a state of relaxed attention -- in order to be effective.

Provine (2000) refers to laughter as the universal language, a 'speaking in tongues' recognized by people of all cultures, where we are moved by an

unconscious response to social and linguistic cues. Laughter bonds us through humour and play.

Milton Trager was a master story-teller and mimic. He used gesture and non-verbal communication to create rapport with his clients and students, mirroring their movement, 'trying on' different ways of being, with the greatest of respect for differences. Playfulness became an important aspect of what was passed down to the Instructors, which he trained, and an intrinsic aspect of the Trager Approach. A personal interest within this research project is geared towards exploring how important practitioners consider playfulness to be within Tragerwork.

### **2.3.6. Learning a new way of being**

Having lived for nine years in countries where English was not the first language, I relied on movement and gesture to both express myself and understand others. Just as a child learns through imitating, I began to communicate, not only through other languages but through other cultural perspectives, experienced and expressed in movement. Abram (1997) says, 'When we attend to our experience as sounding, speaking bodies, we begin to sense when we are heard, relationship happens, rapport is established.' Inherent in this is the aspect of learning a new way of being.

Juhan (1987a) emphasises that learning within Trager sessions happens as a result of being given certain feeling experiences, such as gentleness, gracefulness and pleasurable movement. These feelings then become part of our own personal repertoire. Trager often said:

You are the sum total of everything you have ever experienced-- the negative and the positive, and the negative will always be there, you can't get rid of that.... But you can bring in new positive experiences. My work is about bringing new feeling experiences to the unconscious mind (Trager 1986).

It may be that by moving our clients in new ways, we are providing a model of a more harmonious and pleasurable way to be. In recall, we provide tools for clients to practise this and empower themselves.

This study develops some of the points raised here.

## **3. METHODOLOGY**

### **3.1. Introduction**

The aim of this research project was to carry out an exploratory study, with a phenomenological perspective, focusing on Trager practitioners' subjective experiences of Tragerwork, uncovering their understanding of hookup, working with the mind, and what they consider to be mechanisms of effectiveness.

The specific steps were to:

- Explore the available literature on Trager to deepen understanding of assumptions and conceptual framework.
- Investigate practitioners' experiences through semi-structured interviews, both face to face and telephone.
- Keep a reflective diary of personal responses throughout the process.
- Consider other sources of information, handbook, newsletters, articles etc. if certain categories need 'thickening' (Denzin 1989)
- Analyse the data using a system of coding and categorising based on the principles of grounded theory (Strauss and Corbin 1998).

### **3.2. Conceptual framework**

Interviewing Trager colleagues meant that research was carried out from an 'emic' or insider's perspective (Kane 2004), which was advantageous in the sense of encouraging a more open sharing of experiences (Chew-Graham et al 2002) leading to more rich data and personal accounts. However, it also

involved certain challenges in that I needed to retain sufficient objectivity in questioning practitioners' use of language and intended meaning, in order to avoid the pitfalls of collusion and assumptions, especially with non-English language speakers. A policy of using interviewee's vocabulary to frame supplementary questions (Britten 1995) was employed to minimise this.

A phenomenological approach to interviewing (Appendix 3) was chosen based on the assumption that narrative provides meaningful data on the organisation of human experience (Seidman 1991), and our deepening awareness of what constitutes healing.

One of the major assumptions within Tragerwork is that everyone and everything is intrinsically connected, hence the concept of 'hook-up', which could also be understood as 'a coming to presence of the whole' (Bortoft 1996). Such a belief presupposes a transpersonal awareness as a basis for effectiveness in the work and lends itself to phenomenological inquiry (Braud and Anderson 1998), which seeks to draw out 'pre-languaged, bodily knowing' (Valle and Mohs 1998) and have it emerge in the reflective awareness as meaning. Phenomenological studies produce complex data. However, Plsek and Greenhalgh (2001) suggest that the science of complex adaptive systems may provide new metaphors to help us respond to the challenges of 21st century medicine. It is hoped that this research has contributed to that.

### **3.3. Sampling strategy**

A purposive sampling of 15 practitioners each with more than 7 years' practice experience was enlisted for the study. Four were initially contacted through an email invitation. Included in this email was an invitation to submit questions or

topics for inquiry within the framework of Tragerwork that were of particular interest to the interviewee (Appendix 1).

There was 'snowball sampling' (Kane 2004) from the preliminary invitation resulting in a sample of 11 interviewed face-to-face at an annual International meeting of Trager Tutors in September 2004, plus two in England, and another two interviewees who were interviewed by telephone.

### **3.4. Informed consent**

Potential interviewees were given an introductory letter informing them about the purpose of the research, and guaranteeing confidentiality and anonymity (Appendix 1). They were given the opportunity to ask questions about the research, and told that they would be able to read and correct the transcript afterwards in order to clarify meaning and avoid misrepresentation by the researcher. They were also informed that they could leave the study at any time if they chose to do so and their data would be wiped clean. Interviewees were then asked to read through a consent form (Appendix 2), circling answers to questions, which checked their understanding about the research, then sign at the bottom if they were in agreement.

### **3.5. Semi-structured interviews**

A qualitative approach in the form of semi-structured interviews was chosen in order to allow for emerging themes and divergence into interviewees' areas of interest. Guidelines for a phenomenological approach to interviewing (Appendix 3) were useful in that they encouraged receptivity on my part to incorporating silence and pauses in the flow of information.

I found the phenomenological perspective appropriate as an interviewing strategy as it parallels the practitioner's attitude within a Trager session: the establishment of rapport between interviewer and interviewee, asking questions and allowing answers to emerge, taking time to notice responses, not pushing or expecting a particular outcome, encouraging interviewee involvement in sharing what comes to mind.

The challenge in this research project was to balance the rapport or 'hook-up' necessary for phenomenological inquiry with objectivity, staying aware of the pitfalls of what Mishler (1996) would refer to as 'the joint construction of meaning'. Objectivity as part of the research strategy involved continuous questioning of my assumptions and practitioner explanations (Braud 1998), with the intention of drawing out and illuminating the four forms of knowing (Heron 2001), so that both interviewer and interviewee could explore bringing forth tacit knowledge, magnifying its expression through empathic resonance, and grounding it through clarifying language and meaning to illustrate practice.

### **3.5.1. Recording**

Fifteen interviews of 40 minutes to one hour's duration were recorded on a mini-disc player with a freestanding microphone. Time markers were used throughout the recording to enable the interviewer to find relevant pieces of data. Several interviews were recorded outdoors with occasional interference from gusts of wind and barking dogs. The most difficult interviews were by telephone, as I was unable to avoid whistling interference from an earpiece. This disturbed my sense of rapport, however, this was not reflected in the interviewees' transcriptions. Nevertheless, I decided not to do further telephone interviews, which I had

previously intended to carry out. I also had the impression from the richness of the data already collected that 15 interviews would be sufficient for the purposes of this study.

### **3.5.2. Transcription**

The interviews were listened to through an earpiece and re-spoken into the computer for transcription, using Dragon Naturally Speaking 7.3 voice recognition software. Such a process gave an opportunity for analysis of tone, and emphasis, which could be noted in the codification process, and checked later by cross-referencing in 'triangulation' (Mays and Pope 1995). Interviews were then re-read for meaning and to correct any misinterpretation by the software.

A researcher diary was also kept with notes made by the interviewer, recording context, surroundings, body language, and other items of interest that gave meaning to the words of the interviewees, as several of them used gesture and sounds as an international language. Several of these comments were included in parentheses in the text.

Transcriptions sent to interviewees revealed occasional language misunderstandings and allowed clarification of meaning and context, which fed into the analytic process. In this way, it was ascertained that the interpretations and perceptions of the interviewer, while a necessary part of the 'artistry' (Wolcott 1995) of the research, did not mask the intended meaning of the participants.

### **3.6. Data analysis**

Themes and concepts presented themselves during the research for ongoing analysis and the generation of hypotheses (Robson 1993). All data were analysed using the constant comparative method in grounded theory (Strauss and Corbin 1998), with the recognition that large quantities of data require a systematic and rigorous coding of categories and themes in order to provide a clear trail of evidence for interpretations and allow readers to evaluate the appropriateness of findings (Pope et al 2002).

Reliability and rigour within the research analysis were supported by interviewee transcription checks and member checks (Byrne 2001) to ensure the validity of findings, and interpretation of the data.

There were several steps within the analysis procedure:

- Read the approved transcriptions to become familiar with the text
- Give each transcription a colour and number e.g. (P1) is practitioner 1
- Re-read and code text -- notes written in margin
- Establish preliminary list of categories
- Go back and forth between the original interviews, transcription logs and researcher diary to validate categorisation of data
- Using a split screen, sort excerpts from transcriptions into categories
- Revise early coding and categorisation as more data was analysed
- Develop new categories during this process
- Create mind-maps to plot relationships of categories
- Develop themes from categories
- Use quotes to illustrate themes

- Have analysis checked by Trager member

### **3.6.1. Triangulation**

Triangulation through transcription checks, examining for tone and consistency was carried out, as well as referral to documentary sources such as articles, Trager handbook, and newsletters when further background information was required. This was based on Denzin's (1989) proposition that 'thick rich description' reflects the heart of all social relationships, and involves background detail, and context as well as personal feeling and emotionality.

### **3.7. Ethical approval**

Ethical approval was given by the University of Westminster School of Integrated Health Research Ethics committee. In consenting to the study participants agreed to be interviewed, have the interview transcribed and the data analysed. They also agreed to use of quotations in written form in any subsequent publications of research data. Potential discomfort to the participants was avoided by the following assurances:

- 1) Participants were assured of anonymity. All interviewees were given a number, which was used in reporting and cross-referencing, so that personal details were not available in the data transcriptions or report.
- 2) Interviewees were assured of confidentiality. Recordings were only listened to by the researcher, and wiped clean at the end of the research.
- 3) Participants were given a chance to look over transcripts, checking for accuracy and meaning, to avoid the discomfort of being misunderstood.

- 4) All interviewees were informed of their right to withdraw from the study at any time, with the understanding that all their data would be wiped clean.

Participants were given the interviewer's contact details, if further questions arose. Transcripts were stored in the researcher's private residence. The researcher was the only person to have access to the computerised data. Face-to-face interviews were held at an International conference, and did not necessitate any extra expenditure for the interviewees.

### **3.8. Personal process**

The term 'phenomenological approach' impacted me fully as I carried out the interviews. I often found myself emotionally affected by what participants were sharing, and not sharing. My researcher diary records one particular instance where I was aware of tightness across my chest as I listened to the interviewee. As the interview evolved, and I began to fully understand the impact of Tragerwork in this person's life, I felt myself moved to tears and the tightness disappeared as they found expression for their deeper feelings. An interesting explanation for this is presented in the following chapters, with regard to the work of the HeartMath Institute. Many of the interviews were characterised by laughter and joy, familiar in Tragerwork.

I recognised the value of having a shared context with interviewees through Trager principles: the sense of 'being in hookup', allowing insights to emerge, being comfortable with not-knowing. I observed interviewees go through their own process of self-acceptance e.g. 'I don't have anything eloquent to say', to recognising the impact of simple words and heartfelt expression. I also observed that I was not always in a state of receptivity. I had ideas about what I wanted to

hear, and often it was only later, on reading through the transcript that I recognised the importance of what was being shared, and how that contrasted with my lack of appreciation at the time. There were also instances, though very few, of not being entirely in agreement with what I was hearing, (e.g. the state of hookup and emotional catharsis -- see later chapters) but being able to stay open to inquiring further prompted some rich findings and uncovered a key issue which I hope stimulates discussion with Trager colleagues.

Also, the depth of my 'hookup' occasionally surprised me. I awoke one morning with a feeling lightness and freedom in my body and the words 'I could have walked to Paris' in my head. I knew the feeling so completely in my body, and I was unsure whether one of the interviewees had said that or had it been my own experience? On looking through the data, I found that, yes, someone had said that, with such exuberance that it I had instantly responded by merging with that feeling state. Is this perhaps the reason why positive emotions spread? I later recognised this as entering a positive trance (see discussion chapter).

The challenges of the phenomenological perspective did involve an attachment to the data. Therefore, my first attempt at analysis included mostly quotes from interviewees with minimum backup from me. I felt so impressed by individuals' eloquence that I was loath to leave their words and use my own.

In letting go of attachment to interviewees' words, I recognised the power of the phenomenological approach that enabled me to draw from them their heartfelt expression and enabled them to trust me with their understanding. The downside, of course, is being so emotionally immersed in the data that it interferes with analysis. I found support for the resolution of this in the first

instance from my supervisor, and then in retrospect from an interviewee, a doctor, who said, 'The deeper I go into my feeling, (...) I need to go the other way, to the other side, to increase my knowledge, to stay scientific (P2).'

This statement and Wolinsky's (1991) work on everyday trance states (see discussion chapter) has prompted insights, which have fed back into the study. I recognise how my writing is swayed by emotional states, and how this is also a part of the artistry of conveying the essence of what I have received from interviewees. However, I have attempted to maintain focus and balance emotion with objectivity. To do this I have adhered to the process set out in the study aims, based on Heron's (2001) paradigm that calls for congruence in four forms of knowing to demonstrate soundness in research. I believe I have achieved this through empathic resonance with interviewees, through expression of understanding of the data, understanding of theories and concepts, and practical knowledge demonstrated, hopefully, in competence. In this way, I lay claim to validity in this project.

## **4. RESULTS AND ANALYSIS**

This chapter explores the main themes arising from the practitioner interviews, covering interviewees' personal experiences of Tragerwork, and what they consider mechanisms of effectiveness within Tragerwork:

- Personal/professional development
- Meaningful touch
- The effects of well being
- Therapeutic alliance
- Trager and cognitive behavioural therapy
- Significance of hookup
- Experiencing peace.

### **4.1. Interviewees' Background**

This study involved 15 practitioners: 10 instructors and 5 tutors. The interviewees had a total of 245 years' of experience in exploring the Trager principles; eight of them trained with Milton Trager. Length of practice varied from eight years to 30 years, with a mean of 16.3 years.

Practitioners came from varied backgrounds: two professional ballet dancers, one massage student/classical violinist, a doctor of paediatrics and gerontology, two directors of massage schools, three massage students, two Postural Integration practitioners, two psychotherapy students, two teachers, one school teacher, the other teaching/practising Aikido.

The interviewees came from seven different countries: Italy, Germany, Austria, France, United States of America, Canada, and United Kingdom. All spoke English.

Selected practitioner quotations, condensed from 173 pages of original transcript, may be seen in Appendix 5.

## **4.2. Personal/professional development**

Woven throughout the interviews is the idea that effectiveness within Tragerwork is dependent on the personal development of the practitioner, which is intimately related to their ability to be in hookup, as well as their skill in using the Trager principles. Practitioners see themselves not so much as practising a technique but using their present-moment awareness through touch and a peaceful attitude to affect the body/mind of their clients.

### **4.2.1. Being comfortable with not-knowing**

All practitioners mentioned how much they had changed physically, mentally and emotionally – some also mentioned spiritually – since beginning the work. Some felt that this was due to the Trager principle of 'putting oneself in question' (P11), being willing to be in a state of 'not-knowing' what is best for the client and encouraging clients to become curious about their inner impulse for movement or responses to movement.

Within psychotherapy there is more familiarity with the state of not-knowing. Casement (1991) emphasises that an experienced therapist needs to 'preserve an adequate state of not-knowing if he is to remain open to fresh understanding.' Some interviewees mentioned that their personal development involved learning

how to ask inner-directed questions and trust the answer would emerge through tissue response both within themselves and the client (P1, P6, P2).

### **4.3. Meaningful touch**

Practitioners report using touch as a way to 'dialogue' with clients, both imparting sensations such as softness, support and ease of movement, as well as 'listening' for unconscious tension and resistance using the sense of weight release of the client's body as a way of attuning to clients' level of relaxation (P4, P8, P3). Much more emphasis was placed on the meaning of touch and the importance of pausing within the session than physical manipulation of tissue or structure.

Dr. Manfred Clynes' research into what he calls 'Sentic', a visual recording of emotional messages communicated through touch has implications for the health profession generally (website accessed 5/7/05). He suggests that emotions can be transmitted through touch and are instantly recognised by every human being. Clynes, a distinguished scientist and pianist, noted that all humanity, in widely dispersed and racially distinct communities, showed the exact same 'Sentic' forms for emotions like anger and love. Assuming the validity of this research would entail an increased awareness on the part of health practitioners as to their emotional/mental state in relationship to patients/clients.

Some interviewees mentioned the difference between touching as part of a medical procedure and touching as a form of communication (P3, P2). One interviewee, a medical doctor, expresses it thus:

This is coming from my first years of practising medicine.... I discovered that I had never learned how to touch my clients. (...) I knew the anatomy but I didn't know the body. (...) I had the perception that I was missing a very big thing. (P2)

Nathan (1999) says that because touch is so emotionally charged, often at an unconscious level, the impersonal touching of medical procedures that treats the body as a machine protects both patients' and physicians' sensibilities by enabling them to distance themselves from the emotional impact of what is taking place. However, Nathan emphasises that asking permission to touch, and acknowledging emotional responses to touch are important in the context of healing, where patients often feel vulnerable. Interviewees reported being made to feel safe within Trager sessions, knowing that the practitioner was open to feedback, attuned to their comfort level and would not push through resistance (P1, P5).

#### **4.3.1. The use of touch**

Touch was reported to have several different functions:

- Transmitting a feeling of support through full hand contact with the body
- Experiencing and encouraging a sense of acceptance of the body
- Both giving and receiving information and new feeling experiences

One practitioner describes it thus:

It's like I felt her talking (with her hands) to the holding in me...(...) she was just listening, and I was almost having an inner dialogue with myself.

And I came out of that session saying, 'Well, I can feel the war going on inside me, I can feel the letting go and the holding back.' (P3)

Although Trager students are taught to negotiate feedback contracts with their clients with regard to comfort, appropriate touch, need to pause etc. I feel that the issue of the emotional impact of touch could be emphasised more in trainings, to support practitioner verbal communication skill in dealing with a challenging subject.

#### **4.4. The effects of well-being**

The results of this Trager study paint a picture of the type of experiences that attracted practitioners to Tragerwork: playfulness, lightness, spontaneity, safety, self-acceptance, respect, open communication, being listened to, not-trying, pleasure, sensuality of the organism, joy. These are all experiences that would be considered beneficial within healthy human functioning. Even within situations where there is pain, disability, or dementia, or in the dying process, practitioners gave examples of how self-questioning, soft-handed touch and practitioner presence could be used to invite feelings of well-being into conscious awareness, enabling clients to change their relationship with their bodies or their experience of pain (P2, P9, P, P13).

Juhan (1992) proposed that by using easy-flowing movements with supportive touch within a comfortable range for the client, Tragerwork introduces 'the chemistry of pleasure', a flood of neuropeptides throughout the organism. Recent developments in psychoneuroimmunology (PNI) indicate how intimately we are affected by thought and feeling. New brain scanning techniques enable scientists to map the experience of emotions showing that 'feelings come first'

and that our highly-prized rationality is actually fuelled by the motion of emotion (Gerhardt 2004). This is supported by Interviewees' early responses to Tragerwork.

#### **4.4.1. Unconscious benefits**

Practitioners described their attraction to Tragerwork in terms of 'falling in love (P1, P6)', 'coming home (P4)', 'it was touching me (P15)'. If one looks at this from the perspective of Trager's statement that he was 'working with the unconscious mind' (Trager 1982), it then becomes easy to suppose that even from their early introduction to Tragerwork, interviewees were responding from a feeling perspective, rather than logic. Some interviewees remarked on the fact that their early experiences of Tragerwork were so uplifting and enjoyable that they remained unaware of any physical changes until much later (P8, P14) when they discovered pains had gone.

This emotional sphere of unconscious processes is relatively unexplored in terms of its healing potential, and often relegated to the ranks of 'placebo effect'. However, recent research into the power of laughter and humour to positively affect the immune system and ease discomfort in cancer patients indicates its importance within healthcare (Berk et al 2001; Bennet et al 2003; Christie and Moore 2005).

#### **4.5. Therapeutic alliance**

In talking about early experiences of Trager, interviewees mentioned a sense of safety, trust in the practitioner and feeling 'listened to', and how this enabled them to relax, trust the process and make positive changes (P1, P2, P3). Most

had had a positive experience in their early contact with Tragerwork. However, two interviewees (P6, P11) mentioned how their understanding had developed more quickly in working with an experienced practitioner who communicated clearly, and encouraged self-questioning.

One interviewee (P3) emphasised the need to give greater acknowledgement to the importance of the establishment of a collaborative relationship in Trager training. This is supported by interviewees' responses to questions about which clients/conditions they felt did not respond to Tragerwork: they invariably spoke about not being able to 'reach' the client. Most suggested that this might be because of some inability on their part to make satisfactory contact with the client, and encourage open communication (P8, P7, P9, P13). They also felt that erroneous client expectations could interfere with the outcome of the session. Research into movement education emphasizes the importance of the therapeutic alliance to outcomes (Gyllensten et al 2003). This understanding has prompted me to be much more specific with regard to describing what is involved in a session and clarifying client expectations.

#### **4.6. Discovering options**

Although several interviewees reported that Tragerwork had helped them with their chronic complaints, they indicated nothing changed in their conditions until they began to self-question, for example: 'What could be easier in this moment? (P6)' and observing a response in the body. Through questioning, and inviting a different physical experience to manifest, practitioners felt that they were developing communication between conscious and unconscious processes and thereby changing patterns through heightened awareness (P4, P6, P10).

I was experiencing what is considered chronic fatigue syndrome. It (questioning) really started me in a process of recognising the patterns that I was employing, that were hardwired or dark grooved into me, that were permeating or promoting or supporting this syndrome. And I started to notice more; I started to notice what I was saying to myself, and how that was contributing to what I was actually experiencing. (P6)

Practitioners mentioned also how their thinking was changing, their 'way of being in the world (P5)' through both receiving new feeling experiences and practising recalling these experiences in daily life.

Liskin (1996), Blackburn (2003) and Foster et al (2004) have previously indicated that Tragerwork might be understood as a form of cognitive behavioural therapy (CBT). The results of this study would tend to support that hypothesis. This is discussed in the following chapter.

#### **4.7. Hookup**

Most of the interviewees felt that hookup was a necessary and integral aspect of everything they did, although they recognised that the actual physical 'technique' of Trager was probably, in itself, effective in producing states of integration and relaxation in the body, even without hookup (P7, P12).

Although some Trager interviewees were not entirely sure that they were always in hookup throughout sessions (P12, P7), they acknowledged that there were levels of this experience and the effectiveness of sessions was linked to the amount of hookup they were experiencing within themselves and clients.

Interviewees generally agreed that hookup was characterised by a sense of peaceful connection to themselves and the environment, and that they moved into hookup through becoming more aware of relaxing tension in the body. In contrast, one practitioner mentioned that he felt some clients were also in hookup even when they were re-experiencing some traumatic event. This raised an interesting avenue of exploration that is pursued in the next chapter.

#### **4.7.1. Getting into hookup**

Interviewees' emphasis on calm, focussed attention as an absolute requirement for the state of hookup indicates that hookup could be equated with mindfulness practice (P4, P8). Much research has been carried out into the effects of mindfulness practice on health and well-being (Davidson et al 2003; Kreitzer et al 2005, Shapiro et al 2003). One study into mindfulness of movement as a coping strategy with multiple sclerosis (Mills and Allen 2000) parallels the movement awareness work mentioned by some Trager interviewees (P4, P11, P9) with clients suffering from spinal injury or neuromuscular complaints. It is likely that benefits here arise from focused attention to optional ways of moving, lessening of fear of loss of control, and introducing an aspect of fun and discovery.

And we're exploring all those things for a long enough time so that her body/mind begins to learn that she can, in fact, support herself on her left leg in very specific ways...and that we can begin to build on those ways that are still available to her (...) And playing with it as a dance, so taking it out of the context of functional movement and into the context of pleasurable movement. (P4)

Interviewees also mention that being present with body sensation has the effect of quietening the mind, as they were not able to be with feelings/sensations and thoughts together (P7, P8, P15). This might be understood in terms of, what Oschman would call, 'the narrow window on the world we call conscious experience' (2003), a state he considers is limited by neurological consciousness. Oschman suggests, however, that within the living matrix we have an enormous, elaborate microcircuitry that has virtually unlimited capacity to store and process information. I have much appreciation for this explanation of the vast storehouse of what we would normally call the unconscious mind, with its instinctive intelligence and untapped knowledge.

#### **4.7.2. Hookup and the Heart**

Interviewees' descriptions of hookup included several references to feelings of peacefulness and putting aside emotional disturbances and distracting thoughts. Research conducted by the HeartMath Institute may have some bearing on this state.

HeartMath's (McCraty et al 1998a, 1998b) research team have discovered that feelings of compassion, love, care and appreciation produce a smoothly rolling or 'coherent' heart rhythm, which leads to certain chemical, electrical and neurological reactions in the body, resulting in the production of more DHEA and a reduction in cortisol levels. In essence, when people experience 'love', it is not just an emotional state but also a physical state. Although Trager interviewees did not use the word 'love' in terms of a working approach, they emphasised acceptance of self and others, gentle inquiry and a non-judgemental attitude. Only one practitioner mentioned actively 'putting her heart in her hands' (P7).

### **4.7.3. Hookup and the Mind**

Within practice, most interviewees recognised that they were working with the unconscious mind of their clients. One felt that it was the practitioner's unconscious mind that was working with the unconscious mind of the client, with permission of the client's conscious mind (P4). Some were unsure of how they were working with the mind other than quietening the mind through repetitive movement. One was very clear that he was helping athletes release memory, expectation, and the unconscious tension of trying to repeat success by 'coming back to zero' (P15), a quiet mind.

#### **4.7.3.1. Using the voice**

Interviewees mentioned using the voice in a state of hookup, i.e. with a relaxing tone, to check in with clients' experience, gently encouraging them to find words to describe what they are feeling and suggesting that they would be able to recall that feeling at other times of the day. This is very much akin to the hypnotherapeutic technique of future pacing. Some also emphasised the importance of noticing clients' self-talk, encouraging them to listen and correct any self-talk that conflicts with present-moment experience (P9, P7, P6). This could also be understood in terms of CBT.

#### **4.7.3.2. Remembering in the body**

Recall of positive feeling experiences was an important aspect of Tragerwork that practitioners used for themselves and with clients. McCraty, senior researcher at HeartMath Institute, says that by shifting attention to a positive emotion, like appreciation or care, or allowing thoughts to return to the feeling of a cherished memory, the heart rhythm changes instantly (McCraty et al 2004b).

It is possible that this is happening within Tragerwork practice. Research indicating the possibility of managing pain through what is considered to be the placebo effect of imagery and recall (Staats et al 2004) supports this idea.

Recent technological developments have increased scientists' capacity to measure the relationship between states of consciousness and physiological processes, using functional magnetic resonance imaging (fMRI). This may provide evidence in the future of how the state of hookup, or heart rhythm coherence actually triggers health-promoting mechanisms in the brain (Richards et al 2002).

#### **4.7.3.3. Mentastics movements**

Some interviewees mentioned how they used mentally-directed movements, resulting from self-questioning, to enhance the state of hookup (P10, P4). Inherent in the movements is the idea of pleasure and cultivation of well-being.

When I reach for a cup... walk down the stairs... climb up the hill... pick up a load, what I learnt in the session, in the Mentastics, is applied there, and sometimes the things I pick up teach me how to move. I am feeling their weight and connecting with my body. So what this means is, I can be in hookup when I'm doing fast, complicated activities, if I am aware and playing with the weight of my body (...) So it's a game, it's a constant game in my life. (P8)

Practitioners saw Mentastics movements in various ways: releasing tension from the unconscious mind (P9, P5), re-discovering spontaneity (P10), finding pleasure even in limited movement (P4, P11), discovering fluidity and effortlessness (P14, P2).

#### **4.7.4. Hookup in relationships**

Trager interviewees acknowledge the importance of their state of hookup on clients. HeartMath's research also indicates that the electromagnetic field of the heart will entrain with that of another (McCraty 2004a) and the transfer of the signal was particularly evident when people were touching or close by. Milton Trager's assertion that, 'Hookup is like measles. You catch it from someone who's got it' makes sense within this context.

If one views this phenomenon from the perspective of participatory thought, this 'entrained' state could be understood as a return to an inherent and basic mode of communication, the 'animistic conversation' that Abram (1997) says has pervaded 98% of our evolutionary history as hunter-gatherers. Oschman (2003) cites Condon's work on the 'dance of conversation', where he discovered that, 'the listener moves in precise shared synchrony with the speaker's speech'. If this is the case, acknowledging 'hookup' or connection between self and others, and taking steps to bring oneself into a state of harmony seems a logical step to take within therapeutic relationships, as HeartMath's research also indicates that people are affected by others' discordant heart rhythms (McCraty 2004a).

HeartMath's research offers ways of explaining hookup that might be helpful within Tragerwork and could also possibly provide tools to measure hook-up in practice. This, I feel, would be an interesting adjunct to measuring physical effects in RCTs, and could provide the basis for a fascinating research project.

#### **4.7.5. Surprise and new learning**

Some interviewees emphasised that a deep state of hookup enabled intuitive connections with others characterised by 'a sense of good timing', and trust in

the effortless development of the session towards a beneficial outcome (P2, P11, P14). They also linked this with an element of getting a 'surprise' either through words or action that was appropriate in the moment. Practitioners recognised that Milton Trager used his heightened sensitivity to student/client's shifts in conscious awareness to know exactly the right time to give a significant, emotionally impactful message e.g. 'This is for the rest of your life' (P9).

Rossi (1986) mentions how Milton Erickson also used surprise to provoke heightened states of autonomic system arousal that would assist clients to break through patterns of state-bound information in their mind/body system. In this way, says Rossi, clients are stimulated to engage their natural creative genius that helps them heal (2002a). Both Erickson and Trager seem to use awareness of what Rossi calls 'recognition of the patient's readiness for new learning' that Rossi states can turn on gene expression and neurogenesis to update the brain and body in ways that modulate consciousness, memory, learning and behaviour (2002b). Interviewees indicated that the power of these moments of surprise were instrumental in their own development. I believe that Trager's 'koans' served the same purpose. Certainly, for me, they grabbed my attention, facilitating a shift in habitual perceptions.

#### **4.7.6. Creating a bridge**

Some interviewees referred to hookup as a way of connecting to universal consciousness (P2, P14, P6). I resonate with Heron's (1998) ideas: our personal expression of consciousness exists simultaneously within a backdrop of cosmic consciousness, which includes all experience, both physical and subtle. Heron suggests that when people remember to notice their 'coming to being' in

present-moment awareness, the primary distress of 'cosmic amnesia' or self-forgetting is dissipated, with the resultant dissolving of body/mind tension. I find it interesting that several interviewees mentioned the importance of hookup in Tragerwork as a way of being 'connected' (P7), 'knowing that you are not alone' (P1), and 'being connected to people all over the world' (P14).

Several interviewees also mentioned that Trager had given them a 'taste of what it would be like to be enlightened' (P6, P13, P14, P11), emphasising also that it was a 'normal state', something to be integrated into everyday life, 'not mystical or special' (P7, P9).

#### **4.8. Practising peace**

Interviewees recognised that Tragerwork affected all aspects of their lives: they felt themselves to be living more harmoniously, with more self-acceptance.

Several interviewees commented on Trager's statement 'My work is about world peace' (P1, P9, P7). One interviewee mentioned using present-moment attention to body responses to illustrate to students in Israel how they had just moved out of the state of laughter, playfulness and peace to a state of shock, rigidity and anxiety, when asked to do an exercise of talking to someone about Tragerwork – maybe a Palestinian, someone they would never normally speak to. She mentioned how bringing them back to focusing on changing the state of anxiety in their bodies, using recall and self-questioning, opened up a new possibility within their minds to have a conversation from the place of 'hookup'.

The aspect of resolving conflict was also a theme that emerged from the interviews. Using the tools and attitudes which are very much a part of the Trager approach--listening skills, acceptance, patience, respect, staying with

inquiry rather than pushing for answers, pausing to notice and coming back to a harmonious state – practitioners mentioned how much they were in awe of the process of conflict resolution in international Trager meetings and within their own lives (P3, P14, P10).

## **5. DISCUSSION**

This chapter discusses implications of the results and analysis of the Trager study, and covers the following topics:

- How Tragerwork may be understood in terms of mindfulness and cognitive behavioural therapy
- How does hookup relate to trance states?
- Considering the role of Tragerwork within integrated healthcare and Tragerwork's biopsychosocial significance

### **5.1. Trager and mindfulness**

The practice of mindfulness can be used to understand the Trager approach.

Common elements are:

- Focus on present-moment experience
- Use of non-judgemental awareness (Kabat-Zinn 2003)
- An attitude of 'beginners mind' (Dimidjian and Linehan 2003)
- Belief that changes occur through non-striving or not fixing
- Both emphasise alertness
- Quietening the mind
- Focusing attention in the body
- Neither approach gets involved in emotional distractions

- Respect for innate wisdom of client/student
- Acceptance of past history (Baer 2003)
- Importance of practitioner/teacher practice
- Acknowledging importance of practice community
- Both have a 'spiritual' element (Dimidjian and Linehan 2003)

Studies indicate that health improvement through meditation is often linked to understanding physical complaints and greater sense of control over symptoms (Tacon et al 2004; Steinsbekk and Launso 1999; Schneider et al 2005). Kabat-Zinn (2003) suggests that non-judgemental observation of current conditions results in a lessening of emotional reactivity and de-sensitisation of conditioned responses to pain, uncomfortable emotions or thoughts thereby increasing the patient's sense of control (Baer 2003).

Trager interviewees' experiences would tend to support that belief. Blackburn (2004a) says that many times a pain-free state is induced during a Trager session as a direct result of taking the client out of the experience of fear, rather than out of pain. Research carried out into fear-associated responses to back pain indicated a reduction in fear of movement through an educational programme based on CBT, which also has links with mindfulness (Dehghani et al 2004).

Data in this Trager study indicates that practitioners received insights about the body/mind relationship, which empowered them and changed all aspects of their lives. Dimidjian and Linehan (2003) emphasise that the essential nature of mindfulness is the cultivation of insight, wisdom and compassion, witnessing the

ever-changing display of thoughts, emotions and body sensations. Dmidjian and Linehan also affirm that the practitioner's personal development in mindfulness practice enables him/her to be with, but not do anything with, whatever issues emerge for the client.

This is where mindfulness practice differs from Tragerwork. Whilst mindfulness merely observes, Tragerwork notices and invites something different in the way of feeling experience to emerge. In this way, there are similarities with cognitive behavioural therapy (CBT).

## **5.2. Trager as a form of cognitive behavioural therapy**

Common elements between Tragerwork and CBT include:

- Establishing empathy and trust in therapeutic alliance
- Applying an optimistic attitude
- Identifying areas that could be changed
- Inviting optional behaviours and thoughts
- Acknowledging changes
- Empowering the client
- Reducing reliance on practitioner
- Doing 'homework' (Bush accessed 12/7/05)

Hobbis and Sutton (2005) suggest that CBT can be used to support health behaviour change, by educating patients into recognising the link between thoughts, feelings and behaviour, focusing especially on questioning automatic, reactive thoughts. Using CBT, patients are encouraged to test out and

experience new ways of thinking and behaving in everyday life, just as Trager clients do.

CBT is also similar to Tragerwork in that it focuses on engaging clients' imagination in finding their own solutions with anticipation of positive gain. Reframing is not something that is necessarily taught in Tragerwork. However, practitioner reports of using questioning with clients suffering from severe neuromuscular complaints to enable them to find new ways of moving and adapting to their limited mobility, included descriptions that sounded like reframing: 'finding pleasure in the dance (P4)', or 'enjoying the slowness (P11)' that was part of their new movement experience. Others mentioned listening carefully and questioning limiting beliefs, drawing attention, always, to options available in ways of moving/being/speaking.

Hobbis and Sutton (2005) state that the presentation of persuasive information to the cognitive function is not considered sufficient to produce change. People need to experience something different. In Tragerwork, this might be a sense of freedom, lightness, resilience, gentleness, support and respect communicated through touch and attitude.

Juhan (1987b) eloquently describes what could be called CBT in action within a session:

If I can succeed in surrendering to the movements that another person imposes on my body (...) it is possible to treat my mind to a flood of sensations that are novel in important ways, sensations that may well be able to indicate what I have been doing that produced my aches and pains at the same time as they have reinforced my normal sense of self. And

even more important, this moment of surrender and new sensation can demonstrate to me that I am not permanently obliged to continue acting out a habitual compulsion. I can see a habit is a habit, I am something else, and for the moment at any rate, I can choose to repeat it or not. And if I can drop a compulsive behaviour or attitude for a moment without causing a crisis, then perhaps I can dispense with it altogether.

As this study produces data that points to parallels between CBT and Tragerwork, it could be beneficial for both students and practitioners to recognise CBT as a model of why Tragerwork might be effective. This could result in increased focus on the process of self-questioning and the importance of teaching this to clients.

### **5.3. Understanding hookup**

#### **5.3.1. Present moment versus recalling past experience**

Practitioner presence in hookup is a theme throughout all aspects of the session, from the initial interview to closure with suggestions for future-pacing and recall. However, study data indicated some varying aspects of hookup, which challenged my previously unquestioned assumptions of hookup as mindfulness.

Most practitioners refer to hookup as a state of heightened body awareness and quiet mind. However, hookup is also used to anchor positive feeling experiences and recall pleasurable feelings as in CBT. How can the state of presence, as in mindfulness, and the action of recall both be referred to as hookup? They are in opposition to each other: presence requiring acceptance of present-moment

experience and recall necessitating the process of imagining the past and recreating that feeling in the present. Similarly, projecting the use of recall in the future is movement away from now.

### **5.3.2. Alertness or trance state?**

Blackburn (2004b) also mentions different understandings about hookup with regard to client presence throughout the session. He emphasised that Milton Trager wanted clients to remain alert and believes that both Juhan (1993) and Liskin (1996) are ignoring the vitally important aspect of client 'presence' when they talk about a trance state induced in the client through rhythmic movement. Milton Trager certainly emphasised 'lulling' the client, soothing the nervous system through rocking, but he stressed that it was 'not a go-to-sleep thing (P8)' that was happening in sessions. He wanted clients to learn a lesson within the session (1986).

### **5.3.3. Re-experiencing trauma in hookup**

In addition, one interviewee stated that clients sometimes relived traumatic experience during the session but they were still in hookup, therefore hookup must be a state of being present to whatever one was feeling, which may not necessarily be harmonious. This is certainly very different from the state of peace that most practitioners described. However, if one understands this in terms of mindfulness, emotions and thoughts flow constantly through conscious awareness and are not pursued by further attention (Dimidjian and Linehan 2003)-- a policy encouraged by Dr. Trager. Trager students are taught to pause when clients begin to express emotion, not get involved in discussion, allow time for the client to experience what they are feeling, negotiate either the

continuation or the stopping of the session, and refer to a psychotherapist or counsellor if clients need verbal processing.

The same interviewee felt there was an element of control that he perceived in the use of hookup in trainings. The invitation, 'Let's go into hookup' seemed to carry with it the understanding that this would be a peaceful and pleasurable experience. He believed that it was not always so. In considering this, I remembered a situation where Milton Trager approached someone who was practising Mentastics in hookup with her eyes closed and beaming beatifically: 'Be more neutral,' he said, 'you are too positive.' The state of being neutral also points to mindfulness practice. Interviewees indicated that there was no emotional state associated with their experience of hookup, although pleasure seemed to be an important way of sensing hookup's effects.

Another interviewee, who had previously worked with Postural Integration, which focuses on cathartic release, stated that emotional release in Trager clients had diminished as his expectation of its necessity changed. He observes it rarely now. This raises the point of practitioner expectation, and interestingly highlights the issue that the interviewee who raised the question of emotional catharsis has the least experience of the group. Could this be just a question of expectation and practitioner development? Or might it be thought of as insight springing from 'beginner's mind' that has not been indoctrinated by years of unquestioning practice? It certainly highlights the confusion, which surrounds hookup and indicates an important area for further discussion.

#### **5.3.4. Communicating and teaching hookup**

Consideration of this topic led me into a fruitful and I think, enlightening, inquiry and raised some interesting questions with regard to how hookup is communicated and taught within trainings.

It is possible that those who were first drawn to the work at Esalen Institute had a shared contextual background and understanding of Eastern philosophies, which enabled them to easily assimilate the idea of hookup as 'nothingness'. However, if Tragerwork is to be more easily communicated and understood by the general public, then there needs to be more clarity with regard to what it is, whether it can be taught and its value in sessions.

Many practitioners mentioned that they never used the word hookup with their clients; they were just 'in it' and transmitted the benefits of the feeling state in that way. This may be due to the difficulty of explaining hookup, a wariness, perhaps, in creating spiritual associations with Tragerwork that would be off-putting for clients. Consequently, I think that hookup remains something of a mystery to many students, practitioners, and even tutors, and this is supported by the study data.

I have always experienced hookup as a deep sense of relaxed connectedness within myself and others that is characterised by feelings of well-being. And yet, from my own experience of hypnotherapy training, I am aware that altered states can uncover unprocessed trauma that would be expressed in some form of catharsis. So, how does hookup as an altered state differ from the state in which emotional catharsis would occur?

#### **5.3.4.1. Everyday trance versus no-trance**

Consideration of this topic led me to gain insight from the work of Wolinsky (1991) and Rossi (1986). Wolinsky suggests that we are continuously moving in and out of trance states throughout the day, which are triggered by emotions, both pleasant and unpleasant. In trance states, we identify with thoughts, emotions and feelings and are generally so overwhelmed by their effect that we fail to recognise that we are, in fact, the creator of the trance.

The difference between self-induced trance, such as that experienced in meditation (or hookup), and reactive trance is merely a question of awareness of the creation process at hand. Seeing oneself as the creator of everyday trance states can be cultivated in practices such as mindfulness meditation, where the changing flow of thoughts and emotions are merely observed without attachment or need to investigate further.

Wolinsky (1991) says that both the self-induced trance of meditation and the emotionally reactive trance result from a narrowing of focused attention i.e. in reactivity, clients' focus on trauma prevents them from seeing the bigger picture; in meditation, practitioners deliberately focus on the breath, the body, or chanting. Wolinsky suggests that this narrowed focus is the doorway to expanded states of awareness of self and can be used by anyone who wants to move out of the reactive trance of trauma into what might be called 'clear seeing'. Erickson referred to this state as 'therapeutic trance', Wolinsky calls it no-trance, where all thoughts, feelings and emotions are witnessed by the observing Self. In this way, the focus is shifted to awareness of being the context in which thoughts, feelings and emotions arise rather than their content.

Teasdale (2000) has made a subtle distinction between what he calls 'metacognitive knowledge', taught in mindfulness-based cognitive therapy (MBCT), knowing that 'I am not my thoughts -- thoughts and feelings come and go', with 'metacognitive insight' -- experiencing thoughts and emotions as events in the field of conscious awareness, as in mindfulness. I believe it is this witness state that observes changes in the flow of consciousness that Milton Trager referred to as hookup or 'nothingness.' Consideration of Wolinsky's ideas leads me to believe that the difference between lulling the client and expecting the client to be present is no difference at all. The repetitive, rocking movements induce a narrowed focus of attention, and an opportunity to witness the changing landscape of the body/mind, anchored securely in present-moment comfort, established through therapeutic alliance.

It is interesting to note that Dr. Trager had a two-year internship in psychiatry in Hawaii, before setting up his own practice as a GP (Liskin 1996). This leads me to believe that his 'tacit knowledge' was far greater than that communicated through touch and presence. It also suggests that he considered working with the unconscious mind through the body and inducing clients into a peaceful state of being through touch was more effective than 'talk therapy'.

I am grateful for Wolinsky's insight into trance phenomena, as I feel it helps to cast light on interviewees' differing descriptions of hookup. With its emphasis on present-moment awareness in the body, Tragerwork creates a bridge between the trance of re-experiencing trauma and the no-trance of NOW, and develops familiarity with actively choosing to use trance states to re-create physical manifestations of positive trance experiences. Hookup, then, can be understood as the perceptual shift to recognising ourselves as creative 'nothingness' from

which emerges all unfolding experience; within this we have the power to recall, and reframe experience— perhaps even ‘build a better brain’ (Rossi 2003b).

#### **5.4. Personal implications of the study**

Overall, I have much greater awareness of the need for communication with clients as to their expectations and focus, and what Tragerwork might be able to offer. I am also using the principles of questioning more, conveying to clients the value of observing their unconscious inner landscape, and encouraging them to explore. My understanding of the value of staying with resistance in client’s muscle tissue has deepened, along with recognising the unconscious dialogue and the importance of resting in myself as I work.

Practicing the Trager principles during the writing of this dissertation has resulted in several changes: sugar addictions have disappeared, I no longer drink tea and coffee, since recognising that they bring on symptoms of hyperventilation. I have also started moving my body more regularly in order to prevent tension. In fact, I am now practicing what I preach, and finding it works!

#### **5.5. Tragerwork in Integrated Healthcare**

As medicine becomes more aware of how mind states affect our physiology (Evans et al 2000) it becomes increasingly evident that relationships between health practitioner and client are instrumental to healing. In a report that examined what doctors found meaningful in their work, physicians all spoke of moving out of the world of biomedicine into the patients’ world, with the recognition of the healing capacity of simply being present (Horowitz et al 2003).

Perhaps a deeper recognition of this will enable doctors to off-shoulder some of the burdens they carry in a profession that is over-stressed and over-worked.

Peters (1997) suggests that integrated practice, where complementary therapists work alongside doctors in patient-centred healthcare, may represent a practical way forward for a stressed profession and an increasingly strained biomedical model.

One of this study's interviewees, a medical doctor, credits hookup as the key to what is needed in medicine in establishing positive outcomes with clients. He teaches members of his medical team that, 'In hookup, you don't need time, even one-minute is enough...' (P2). He compares this to the inefficiency of working against a 'resistant' patient. Establishing a therapeutic alliance facilitates ease in procedures based on trust and optimism.

Adams (1996), a doctor who establishes relationships with his patients by dressing as a clown, states 'a good bedside manner' is not a matter of expertise but of interaction, humour and love. Positivity and laughter produce a better healing environment, he says. Adams also emphasizes the need for playfulness in hospitals for medical staff, as well as patients, stating that he is a 'stranger to burnout', which is endemic in modern hospitals (Adams 2002). Recent studies indicate the immune strengthening response of optimism (Gerend et al 2004; Levy et al 2002). Chesney et al (2005) argue that more research is needed into the effects of positive emotional states on health enhancement and disease prevention. They suggest that interventions using cognitive behavioral strategies or meditation can increase positive emotional states that are maintained over time.

Tragerwork has much to offer an integrated practice. Practitioners could be expected to work in the following way:

- Focus on establishing a therapeutic alliance
- Use the principles of their work for their own growth
- Be involved in self-questioning and reflective practice
- Engage in a gentle, respectful way with resistance
- Focus on empowering clients to help themselves
- Work as co-operative members of a team
- Be working with the unconscious mind through the body
- Teach clients how to self-question
- Focus clients' attention on positive changes
- Be part of a bona fide organisation that is also a supportive community

#### **5.5.1. Biopsychosocial significance**

Tragerwork's role within integrated healthcare would involve a wider vision than individual healing: it recognises that healing begins on a personal level, but one by one, person by person, it results in a wider experience of health. One of the most striking aspects of this study for me were stories shared by interviewees about practising Trager principles in all aspects of their lives. In this way, interviewees have discovered meaning in Milton Trager's words, 'My work is about world peace.'

Patch Adams also says, 'We cannot separate the health of the individual from the health of the family, the community, and the world' (Adams, accessed 27/6/05) He believes that 'good health is much more deeply related to close friendships, meaningful work, a lived spirituality of any kind, an opportunity for loving service and an engaging relationship to nature, the arts, wonder, curiosity, passion and hope.' This is echoed within this study by the number of interviewees who mentioned the importance of belonging to a community, which holds to the principles of respecting and acceptance differences, and offers tools for conflict resolution.

When we recognise that mind exists not only in the body but in the pathways and messages outside the body, as an organising activity within a living system (Capra citing Bateson 1989), we begin to recognise our personal responsibility to find harmony within ourselves. Juhan (2002) echoes this idea when he says 'How can an industrialist understand what his factory is doing to the Mississippi River if he can't even perceive what he is doing to his own bloodstream?' The multidimensional nature of healing is present in every Trager practitioner's moment-to-moment contact with clients, because of Milton Trager's vision and this is reflected in interviewees' words in this study.

## **6. CONCLUSION**

The aim of this research was to conduct an exploratory study into practitioners' subjective experiences of Tragerwork using semi-structured interviews, to uncover practitioners' understandings of hookup, working with the mind and what they consider to be the mechanisms of effectiveness within Tragerwork.

The study fulfilled its aims. Results are condensed in the following sections.

### **6.1. Hookup**

Practitioners indicated that hookup could be experienced on various levels and was an integral part of everything that happened within Tragerwork. Although some practitioners were not sure if they were always in hookup, they understood their work to be more effective when they were in some level of hookup. Some practitioners had very significant and memorable experiences of hookup, which they felt had changed their lives. Some described these moments as enlightenment experiences.

Although hookup is generally described as a relaxed, harmonious bodily presence, the induction of an altered state through gentle rocking and narrowed focus of attention may result in clients re-experiencing unprocessed emotional trauma. This may also be dependent on practitioner expectations and focus, and level of safety established in the session.

This study has highlighted the need for further discussion into ways of recognising, experiencing, inducing and describing hookup, which might be usefully implemented within the training programme. Wolinsky's work (1991) may be helpful in this regard. The work of the HeartMath Institute also provides

a useful model for understanding the importance of practitioner development in hookup and its potential effects on clients.

## **6.2. Working with the mind**

I deduce that Milton Trager's tacit knowledge in psychiatry, as well as his aptitude as a physical therapy practitioner, informed the development of Trager Psychophysical Integration.

Practitioners all agreed that they were working with the unconscious mind, using touch, movement and voice. Self-questioning was emphasised as a way of creating a bridge between unconscious and conscious processes, empowering clients to recognise their ability to find optional ways of moving/being. Trager practitioners emphasised that this permeated all aspects of their lives.

Recall of touch, voice and movement has been instrumental in practitioners' self-development. Those who trained with Milton Trager recognised his heightened perception of their positive experiences, which he anchored through movement or touch and an element of surprise that left an indelible impression. Rossi (2002) offers explanations of this that may be useful in helping practitioners recognise the importance of well-chosen words and good timing in delivery.

As a consequence of this research project I now give more focus to teaching clients how to self-question and observe responses. Both CBT and mindfulness practice provide models that can be used to illustrate some of the mechanisms of effectiveness in Tragerwork.

### **6.3. Therapeutic alliance**

The impact of practitioner presence was highlighted in the study, with practitioners emphasising the need to practice the Trager principles on a daily basis to develop skill in noticing unconscious messages in their own bodies and that of clients. Practitioners recognised that successful outcomes with clients were bound up with the establishment of the therapeutic alliance. Any interruption in this interfered with positive results.

It might be useful to the Trager community to give more emphasis to therapeutic alliance and entrainment between people as illustrated by HeartMath's research. In my own practice, I now create more time to prepare myself with Mentastics movement before a session to promote peaceful, friendly, open-hearted receptivity to whatever the client brings.

### **6.4. Biopsychosocial application of Tragerwork**

Tragerwork is seen not just as a tool for dealing with physical/mental problems, but as a way of living more harmoniously every day. Practitioners observe Trager principles at work in conflict resolution within their families, organisations and in teaching situations in war-torn areas.

Interviewees mentioned the importance of belonging to a supportive international community interested in personal/professional development, based on the principles of acceptance, non-judgement, and respect with recognition of 'hookup' as a unifying state of connectedness.

This study has provided much rich data and food for thought. It is anticipated that it will stimulate discussion within Trager organisations with regard to the

points raised. It has also created the groundwork for a subsequent inquiry into client experiences.

For myself, the privilege of interviewing experienced practitioners has prompted a profound experience of reflection and learning, which has influenced my work in ways mentioned in the study, and probably unconsciously in ways that have yet to be revealed. The process of putting myself into question continues to deepen my experience. One interviewee quoted Milton Trager's words, 'It's a never-ending thing'.

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## 1. Appendix 1 --Information letter



*Layo M. Nathan*

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7<sup>th</sup> June 2004

**Re: The experience and effects of Trager Psychophysical Integration: an exploratory study into practitioner understanding.**

Dear Trager colleagues,

Thank you for your interest in taking part in the study. This is the first part of a two-part study into Practitioner and client experiences of Tragerwork, carried out under the auspices of the University of Westminster, London.

As I mentioned in the email, this inquiry is geared towards uncovering individual practitioner's personal experiences of what is happening in Trager sessions. How important is 'hook-up' in effectiveness? What is your experience of working with the 'mind'? What makes for a successful outcome for your clients? What interferes with that?

The interviews will be free-flowing, focussing on what is important for you in your understanding of Trager. Sharing stories, realisations, memorable moments within your learning or your practice will be most welcome. Feel free to bring your own questions if there is something you want to focus on within the experience of Trager, as well as accounts of cases that informed you in some way.

Such anecdotal material, previously disregarded as non-scientific, is now being recognised as a valuable contribution to understanding the wider context of healing.

The interviews will be recorded and transcribed, if we are meeting face to face. They will only be heard by the interviewer, and you will be given an opportunity to read through the transcript and make any changes if you feel that some thing needs to be clarified.

If we communicate by email, we will agree on a time frame for the completion of the interview. Your correspondence will be given a number for referencing and anonymity.

Everything that you say, or write, will remain confidential. The recordings and files will be wiped clean at the end of the study.

If you decide you no longer want to take part you may leave the study at any time and the recordings and all transcriptions will be deleted.

The data gathered will be coded, categorised and systematised using the principles of 'grounded theory' (Strauss, Corbin 1998) in order to produce a study that demonstrates rigour. You may, if you are interested, participate in 'member checks', which will involve reviewing the analysis of the data, and discussing interpretations.

Please fill in the consent form if you would like to participate in the study.

Thank you again for your willingness to participate.

Sincerely,

Layo M. Nathan

## 2. Appendix 2--Consent Form

### Participant No:

Please read the statements circling the options as appropriate and sign at the end of the form.

### **The experience and effects of Trager Psychophysical Integration: an exploratory study into practitioner understanding.**

I confirm that I have read the letter providing information on the above study, and agree to take part.

Yes/No

My signature on the bottom of this form indicates that:

I have had the opportunity to ask questions about the research

Yes/No

### **It has been explained to me that:**

- I will be interviewed and this will be recorded. Yes/No
- Only the researcher will listen to and transcribe the recordings Yes/No
- My involvement will be confidential, and my name will not be used in any part of the report. Yes/No
- The information collected will be used to contribute towards the analysis of the study and that direct quotations might be used which will be made anonymous. Yes/No
- I will have the opportunity to check the transcript and clarify anything I have said that may be misunderstood or taken out of context. Yes/No
- At a later date the work may be published in a professional journal and made available to a wider audience. Yes/No
- My participation is voluntary and I may withdraw from the study at any stage. Yes/No
- That if I withdraw from the study any information already collected will be destroyed. Yes/No
- That on completion of the study the recordings used will be wiped clean. Yes/No
- That I will receive a summary of the completed study and will be able to access the final report. Yes/No

Sign below if you are willing to be involved.

Signature.....

Name.....

Date.....

Copies, 1 for researcher, Layo M. Nathan, and 1 for participant

### **3. APPENDIX 3 - A Phenomenological Approach to In-Depth Interviewing**

(developed by David Schuman)

Some Guidelines and Suggestions for Interviewing

- listen more, talk less
- follow up on what the participant says
- ask questions when you don't understand
- ask to hear more about a subject
- explore rather than probe
- listen more, talk less, and ask real questions
- avoid leading questions
- ask open-ended questions
- follow up, don't interrupt
- ask participants to talk to you as if you were someone else
- ask participants to tell a story
- keep participants focused, and ask for details
- do not take the ebbs and flows of interviewing too personally
- share experiences on occasion
- ask participants to reconstruct, not to remember
- avoid reinforcing your participants' responses
- explore laughter
- follow your hunches
- use an interview guide carefully
- tolerate silence

excerpted from:

Seidman, I. E. (1991). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. New York: Teachers College Press.

## **4. APPENDIX 4 - INTERVIEW PROMPTS FOR PRACTITIONERS**

### **Background**

How long have you been practising Tragerwork?

Have you trained in any other modality?

What made you decide to learn Trager?

### **Experience of Receiving Trager**

What was your experience of receiving the work? Before you trained?

During the training?

Was there some particular moment that was memorable for you in the training?

### **Present day work**

How has your work changed since your training?

What kind of conditions do you work with mostly?

Are there certain conditions that respond more easily?

What effects do you think clients receive from Trager sessions? What kind of outcomes are you hoping to see?

Can you give an example of a successful outcome with a client?

Are the effects short-term or long term?

### **What factors inhibit effectiveness in sessions?**

Any situations, other than contraindications, where Trager work does not seem to work?

### **Hook-up**

How do you understand/use hook-up in your sessions?

Can you give me an example that stands out in your memory of hook-up in a session?

What were you doing, feeling, noticing? In yourself? your client?

### **Mind**

What's your understanding of working with the mind? Can you describe how that happens?

### **Relationship with Trager**

Is there anything else that is important for you to say about Trager?

Was there any particular thing Milton Trager said, or did that has been meaningful for you?

## **5. APPENDIX 5 -- THE EXPERIENCE AND EFFECTS OF TRAGERWORK: PRACTITIONERS' PERSPECTIVE**

This section gives a selection of quotes documenting practitioners' experiences of Tragerwork. It is divided into seven parts.

1. Interviewees' early experiences of Tragerwork and what meaning they gave to it.
2. Practitioner experience of hookup and how they are using it
3. How practitioners are working with the mind
4. Working with the body
5. What practitioners' consider to be mechanisms of effectiveness
6. Practitioner perceptions of client experience
7. Personal and professional development

### **5.1. Early Experiences of Tragerwork**

Interviewees came to Tragerwork for a variety of reasons. Some were suffering from various physical ailments: chronic back pain, chronic neck pain, exhaustion and chronic fatigue syndrome. Healthcare practitioners recognised that Trager work offered a way of working with clients that filled a gap in their own practice and seemed easy, fun and beneficial for both practitioner and client. Others felt that the arrival of Trager work in their lives was serendipitous. Practitioner benefit was a major theme throughout the interviews, with the recognition that through practising Tragerwork they could find something for themselves.

### **5.2. Discovery**

Practitioners speak about the sense of discovering something important within the Trager Approach that they felt they could use for themselves, as well as with

clients. They mentioned the realisation that they needed to change some aspect of their lives.

This is coming from my first years of practising medicine.... I discovered that I had never learned how to touch my clients. (...) I had the perception that I was missing a very big thing.

Before I began the process of learning, I received 40 sessions with two different practitioners.... And each time I was discovering a part of my body with new feeling, new sensation, new perceptions, in my knee, in my feet. (P2)

With my background as a classical violinist and the Alexander technique, I quickly realised that this was very sensitive, deep work, which was invaluable to musicians. And I also felt that there was a lot to be discovered here. (P10)

And I walked, floated off the table, and it was as if I were recreating, reinventing, rediscovering what it was like to be alive, what it was like to move, what the possibilities were. I broke the framework of the way it is. And became, 'Mmm, how could it be?' And I was as high as a kite. It felt like colour was introduced in my life.(P6)

### **5.3. Instant attraction**

Some Practitioners described an instant attraction to the work that could not easily be explained. They describe it in terms of 'falling in love', 'coming home', and 'being touched' by what they felt and saw in the practice of Trager.

The first contact of the hands, and the work he did on my neck at the beginning of a session.... It felt like I had arrived home in that physical sense of form, back in my body, and in a professional sense as, 'This is what I really want to do! ' (P4)

I fell in love with Trager. And I recognised that it was extremely relevant to me. Not just intellectually. (P6)

All of a sudden, there was really something in the massage she was giving that really caught my attention. She was taking my arm, weighing my arm and moving my limbs. And I asked her, 'What is this? Because I like it.' (P14)

I saw my friend practising (...) For me, it was something to see how he was moving, even though I didn't receive. I was just seeing, the first time. But that was touching me. (P15)

#### **5.4. Joy and playfulness**

Several practitioners mentioned the feeling of lightness in mind and body in response to both seeing and doing the work. They found it easier, not only because of the way of working, but because there was an aspect of fun and playfulness in Tragerwork.

I noticed that the people who were practising Trager seemed to be having a really good time! (P5)

I remember doing Mentastics with Milton and really feeling a lot of joy and pleasure and exuberance. ( P9)

I think what I got from the very first intro. (workshop)... was just that feeling of freedom and joy and love. You just feel so good afterwards, and this is what people go on vacations for. (P11)

Well, the comparison I came home with was a religious one. I had been doing Esalen massage and it was a bit like the Catholic Church, and this (Trager) was a bit like going to synagogue.... seeing people talk to each other in the pews and have a little interaction.... the joy, the casualness of spirit in their work. (P8)

#### **5.5. Sensory experiences in the body**

Practitioners spoke about bodily sensations during a session that impressed them: fluidity, freedom, sensuality, integration, aliveness, peacefulness, spaciousness, balance and sense of weight. They also indicated that these feeling experiences had effects in everyday life.

I couldn't dance classical ballet anymore, but it (Trager) gave me a way of moving and being still in a relationship with fluidity and also created that in connection with other people. (P1)

It was very different from the Esalen massage she was doing before, which I also liked. It felt much more me; not her treating me, but I could feel much more my own stuff, my own tissue, and moving the deep muscles. ... When I had the first session, I was really astonished about the millions of ways my body can move. It was like a fireworks of impressions. (P14)

### **5.6. Listening Touch**

Some interviewees spoke about the sense of 'being listened to' by the practitioners' hands. Others mentioned how they are conveying new information to the clients through their hands.

It's like I felt her talking to the holding in me. I mean, that holding comes from early childhood, the kind of family I grew up in, but it was like she was just listening (with her hands), and I was almost having an inner dialogue with myself. And I came out of that session saying, 'Well, I can feel the war going on inside me, I can feel the letting go and the holding back.'

Trager has given me another conversation – instead of just pushing until I burn out, and collapsing and starting again, it becomes a dialogue in everyday with the part of me that gets anxious and the part of me that wants to do too much. (P3)

In my mind I was (thinking), 'Now I would like to feel ...)' something like length, or more pressure, very specific things and without telling (him) anything, the practitioner gave me the response, gave me what I needed. It was incredible how he was connected...(P2)

### **5.7. Contact with Others**

Practitioners mentioned their appreciation for the type of contact they had with others through Trager work.

I felt like I could leave any other bodywork or psychotherapy... because the quality of being in contact through hookup or/and touch was something that touched me so that I felt this is where I want to continue. And everything is in there that I'd ever learned or could ever learn. This maybe sounds overwhelming, but it was very clear. (P7)

You can really feel in a good connection to your own stuff (sighs deeply) yeah (laughs) that's on the physical level. And on the emotional level, I was finding a lot of very good relationships in the Trager world.... And today I feel connected to a lot of people who live all over the place. I know I can go there, and I know the quality of connection we can establish very quickly through our work. It's just what my heart really strives for. (P 14)

### **5.8. Pain-free relief**

Some interviewees remarked on how surprised they were that changes could take place without pain. Some mentioned using the principles of questioning, others recognise that the pain had disappeared, without them having noticed.

With the postural integration, you are really pushing the consciousness in the tissue so that the body/mind of the client is at the limit, and there at the limit is the border of even pain.... But what I discovered with Trager was much more respect, nobody was pushing or trying to go against resistance. (P15)

I came to the work in an enormous amount of pain and limited mobility. And as a dancer that was a tragedy. ...The pain itself didn't really begin to change until I began to actually practice the principles that I was being given: of recall and doing Mentastics, moving on my own in certain ways, changing.... (P1)

I had a very bad neck problem.... I was told the only thing I could do was take painkillers, and it was only going to get worse, and I was given no self help in any shape or form, either from the medical profession, or from the osteopath.... And from the first training, it just came home to me, that I could really work with my own neck in such a way that was gentle and non-invasive, delightful, and actually brought feelings of bliss. So I didn't have to rely on anybody else. So I developed a way, by mimicking what I had been taught on the training, of questioning, 'So what can I do for myself?'

### **5.9. Self-Acceptance**

Self-acceptance on the body level was always a big problem. And whenever I was touched in a Trager session, I could very often connect to the feeling of, 'I am completely okay the way I am. This is wonderful flesh'. (P14)

There's something about maybe being given permission by the practitioner to just simply be however I am, and no pressure, no need to change anything. So, there's the feeling that for me took a while to realise -- that I'm okay just the way I am. (P5)

What has changed? Being more myself, and being myself in front of others. Yes... and not so impatient with the children (in class). (P12)

### **5.10. Understanding changes**

This section draws together practitioners' perceptions of what changes resulted from their early experiences of Trager work, covering also significant experiences they had with Dr Trager or Betty Fuller, the first instructor he trained.

#### **5.10.1. Perceptual Shifts**

I had a motorcycle accident once.... And he (Trager) started working my chest in this nice gentle way, nice big, very soft rocking movements, and suddenly I saw myself hitting the pavement, again and again and again except this time it was soft. I actually had a flash of myself hitting the pavement, and I'm not a visual person; I'm generally kinaesthetic. So there I was, rocking, rocking into that memory being changed into a pleasant experience. (P8)

And my back was very swayed, because of the injury. I lost control of the muscles in the pelvis I was tilted very extremely and I was thinking, 'Oh, if only someone could just unhook it, and it would just drop down and be straight again.' And Milton just played with this little tossing, hitching move, and the feeling was so huge that I thought he was really throwing me across the room. And a part of my mind thought, 'I am going to fly into the wall.' Another part thought, 'I have been waiting all my life for this. I am completely safe.' That was an amazing little moment of conversation in my mind, because that was the moment my body let go. (P1)

And as she (Betty) was talking, something happened, I just dropped right through into another place that I had never been to before.... I've always said in all my years prior to that point, that I had tangible idea of reaching out for

something that I knew was there but could never quite touch it. And what happened at that moment, was that I knew I was there, I was completely immersed in it, and that I didn't have to reach out any more... And it's created enormous joy in my life. (P9)

The second time that she (Betty) took my arm and went into hookup in a more concentrated way..... (mimics explosion) I felt like this part that she had touched became light and bigger and bigger and bigger... I felt really wonderful. (P12)

### **5.10.2. New Ways of Moving**

Practitioners mentioned learning how to move differently and how they experienced this in relationship to themselves and others.

I couldn't dance classical ballet anymore, but in order to live, I have to move, so it gave me a way of moving and being still in a relationship with fluidity and also created that in connection with other people. (P1)

The meaning of the contact, the softness of it, the flow of movement, the sense of fluidity I got that was possible in my body was something that I had been looking for in all my dancing. (P4)

Physically at 52 I have a body that is much more in proportion, and much happier than at age 15.... I haven't picked up a tennis racket since college, because for me there was a lot of competition there, but any other thing that I've gone back to doing, skating, ice skating for example, I just feel so much in harmony, I have the strength that I need, the soft strength, there is no competition, not even with myself....(P11)

It started with that very physical, mental, and emotional experience of rediscovering that I had options, simply putting one foot in front of the other. And when the practitioner suggested to me, that this... by questioning, not answering, but by questioning could be extended into my life, at first I went, 'Another bullshit intellectual construction, okay?' But the question kind of stuck in my mind. (P6)

### 5.10.3. Questioning and Answering

Using the Trager principle of questioning and allowing the body to respond had various affects in practitioners' lives as well as in sessions. They reported recognising not only that they had options in ways of moving, but their attitudes were also changing in the process. Many of them remarked on the amount of time it had taken them to learn how to listen.

One of my father's favourite expressions was, 'Well, what can you do?' (With a shrug and laughter) and for him it was an expression of hopelessness, vexation, and for me it became 'Mmm, yes, what can I do?' And it was an expression of possibility, of potential, of hope, but it wasn't what I did, it might be how I did it. (P6)

So initially I was asking questions that I thought were of my body really, and as I got deeper into it, I began to realise that I was questioning my mind and my belief system about my body, about my pain....

As time has progressed, and my own process has progressed, I began simply learning to ask the question and listen, because I have discovered that the answer is already there. If I can get quiet enough, it will simply emerge. (P1)

And my patterns have changed -- from a person who was very ambitious and very eager to have results and be successful, to a person that can be patient, can wait, can ask, can stay without an answer to a question. (P7)

I was experiencing what is considered chronic fatigue syndrome. It really started me in a process of recognising the patterns that I was employing, that were hardwired or dark grooved into me, that were permeating or promoting or supporting in some manner this syndrome. And I started to notice more; I started to notice what I was saying to myself, and how that was contributing to what I was actually experiencing. (P6)

There is the moment when I ask and then I let the question open, staying with the experience of what the questioning is provoking. In that moment, the experience of what I am feeling is happening before I transform it into words... (P15)

#### **5.10.4. A New way of Being**

Practitioners reported changes from the work that affected the way they were living their lives.

I would have the feeling of very deep relaxation and peacefulness and I would feel... I felt that it went beyond my body; it felt like it went into a place of consciousness, or into a place where my thinking began to change, my feelings began to change, my way of being in the world shifted. So it was way beyond the physical relief I got from other modalities. And it seemed to last longer. (P5)

Trager work has given me an inner appreciation and understanding of my physical self, and my psychological self and how the two interrelate. (P10)

I don't crowd my schedule as much because my body inside knows what space feels like. (P3)

#### **5.10.5. Practising Change**

Practitioners mentioned using the Trager movements, and self-questioning to facilitate changes throughout the day.

So I didn't have to set time aside, like I did in yoga ... I didn't have to find time in the day to practise Trager; I could be practising it whenever I thought about it, whenever something came up for me. (P5)

I am aware that I can change the atmosphere completely in the class, by being **in** myself. When I am going to the classroom, this walking is like Mentastics for me. And when I am entering the class, the question is in me, 'What am I going to give them?' Something of peace and confidence in themselves, because I can **be** there. And they can be confident that I am here with them, for them. It has changed, really, my way to work. (P12)

### **5.11. Practitioner Understanding of Hookup**

This section explores practitioners' descriptions of hookup, how they recognise hookup in themselves and how they are using hookup in sessions.

What is this hookup thing? A mysterious state that people get into? No, it is actually teachable, and practisable. And the more you practice it, the easier it is. And I felt that I got that from Dr Trager.... he would go into hookup, and what I could feel from him was the sense of quiet... in his presence I would also feel that settling in my body, and a calming of my mind... and just a being present without a lot of mental chatter. A calm, peaceful presence. (P9)

### **5.11.1. Recognising hookup in themselves**

Practitioner experiences mostly centre around being present, feeling in contact with themselves physically, having a quiet mind and heightened sensory awareness. Some spoke about levels of hookup, some mentioned not being sure whether they were in hookup in sessions.

I first feel connected with me, with each part of my body, in my deep feeling perceptions... and all parts of my body are connected and working together-- something delicious to feel. And this is the first understanding I can have. And then, I can open this state to around me, with the room, with nature, with the universe and of course with other people, with my clients in medicine, with my family, with everybody.... (P2)

I suspect that there are all sorts of states of hookup that can go deeper and deeper. I think the first issue is, am I in the moment here and now? Am I open to what is happening around me...? Is my body in a feeling state? (P15)

I can say that when I feel the most connected to my client, I have gotten rid of any distracting experiences in my own body/mind so I am not in pain anywhere, I am not in any exaggerated emotional state anywhere, I am not distracted by thinking about other things, I am very very present and simply experiencing.... (P4)

I know that when I really consciously go into hookup before I touch somebody, the first thing I do is I find a place in my body to connect to, mostly it is somewhere in my pelvis, and the moment I go to this place, my mind somehow gets empty. (P7)

To feel is something that can happen only **now**, you cannot feel in the past or the future, feeling is in the present. So in the moment that I feel, and connect -- I am in hookup, it is very simple. Are you feeling? Then, you are in hookup. Because you cannot feel with your thoughts; you can only feel with being there and receiving the experience. (P15)

### **5.11.2. Recognising hookup in clients**

Practitioners expressed various opinions about the use of hookup and recognition of this state in clients. Indications of hookup in clients ranged from recognising deepening levels of relaxation, increasing sense of connection with the practitioner, to expression of repressed emotion.

Well, it is progressive of course, there are degrees of it. When I'm feeling all these individual qualities at once, a letting go, a spreading out, and opening up at the same time, an enlivening...(P8)

I find that when the client can get to the point when they ask themselves, 'Well, what is it that I want right now?' When they can ask the question and get an answer, and respond, and provide whatever it is that is needed, that generally signals to me that we are in hookup. (P 5)

I have witnessed clients reliving car accidents, bouncing off the table, and they were most certainly in hookup. I have witnessed clients bursting into floods of tears because of the physical abuse they have received as children and they were in hookup. For me, hookup encompasses allowing the emotional flow through the body. It is not about an absence of emotion; it is about being present. (P10)

### **5.11.3. Using hookup in sessions**

Most practitioners spoke about the importance of hookup in sessions, some of them saying that, in their opinion, hookup was essential for effective Trager work. Various themes arose: timelessness, wordlessness, effortless, making a bridge with something that is limitless. Others expressed their doubts about whether they were actually in hookup in sessions, and wondered about the different levels of hookup.

If I meet a client in my tension, in my worries of the day, whatever... maybe I am too tired, ... that's what I'm giving them. If I can take a moment and come into a feeling of being in my centre, of being connected to my own weight, of recalling softness and recalling that interconnectedness, then I'm inviting, I'm offering that space. And I don't have to say anything; I'm just in it. I hope and intend that I can express it somehow through my being, which is the greatest joy I can experience. It's like Milton said, 'It's like the measles. You have it, and somebody else catches it. There is nothing that you have to do.' (P1)

When I reach into hookup into a place where my mind is doing what minds do best, noticing, not judging, not thinking, not speculating, not evaluating, not comparing, not anything just being there and noticing what there is, then a bigger picture comes in, more information comes in than that that is solely about me. (P6)

I think a lot of clients come up from the table feeling very well but I'm not sure I have been in hookup during the session.

...today what I would call hookup is the best short moments when I can feel something like I felt with Betty (first Trager Instructor) and my arm. It's like as if I was searching for hookup... (P12)

If I am in hookup, what will happen doesn't need time. And if I am in hookup -- I explain this to the team in medicine -- if I am in hookup, maybe one minute will be enough to give the feeling and receive a big response from the body. I remember some medical people, just three years ago when I was teaching something about that, they all told me, 'but I don't have time to be....' No, this doesn't need time. On the contrary, if I am in hookup, one minute is enough. (P2)

I'm not fixing anything, I'm being with it and at one moment feeling exactly how it is in this moment and at the same moment in my mind connecting with that place that is boundless, limitless, and completely free. So inherently, this neck, this arm, this being is completely free, and in this moment this is the range that is comfortable, safe, and possible. (P6)

I also did psychotherapy studies, and I found out that I am not a person who can help too much with words -- because I fall into the trap of wanting to find a solution for somebody. But in hookup, lots of people come with problems, emotional problems and when I go into hookup with them, or just support them with my hands or hold them, it's much more than words. And they always find their own solution.(P7)

### **5.12. Working with the Mind**

In this section, practitioners comment on how they are working with the mind, and what they understand this to be. Most of them made a distinction between the function of conscious and unconscious mind; one practitioner considered the difference to be one of focus rather than separation.

... In order to have a physical change, there has to be some internal change, there has to be something in the mind, some shift of thinking, and feeling. There has to be some reason to change, and I think that comes through the mind -- whether it is just a physical sensation, or an idea or a thought, or an 'aha', but I think that the body and the mind work together. (P5)

It's the mind we're after. It's all this ability to have feeling experiences, of soft, light. These are all very precise mental abilities that we all have, and in recognition I remember what it feels like. So kind of by moving or softly bouncing, or sometimes just receiving your tissue with the softness of my hands, I am receiving it mentally, I am connecting to you with my ability to feel you, which Milton might say, is with my mind.(P8)

When I'm working with my clients, a large percentage of the time, I am working with their unconscious through the permission of the conscious mind -- their conscious mind gives me permission to dialogue with their unconscious -- but the dialogue with the unconscious stays relatively unconscious except at various moments when we both go, 'Oh wow, did you feel that change? Isn't that a wonderful feeling that just started to happen in there? (P4)

I realise that with old people, of greater and greater age, I see a lot of pathology or symptomatology disappearing. At the same time, they are going into a sort of

dementia. ... We can see blocked tension is coming well and no pains. Their pains are disappearing in the body. And it's incredible. So when I see that, I say everything is coming from mind. And this is unconscious mind. (P2)

(On questioning) It's not asking the conscious mind, because it's not looking for an answer from a thinking place. It's looking for the answer through movement, and so... I think that's important, because when you let the conscious mind go, the body absolutely knows what it needs. (P5)

As I spend more and more time letting my unconscious speak to my conscience, really listening to what my body/mind has to say, I can begin to tune in to subtler and more hidden internal experiences that my body/mind is having that are also happening with my client, happening in their experience as well. (P5)

It is like the focus of consciousness... into the focus only a little part of the information is possible. But the unconscious mind... is everything that is not conscious. So all around is unconscious mind, but the focus is moving. So it becomes conscious in a way that the focus is moving. I can become conscious of my feelings, all my consciousness can go with thoughts and then I am not conscious of feelings... (P15)

#### **5.12.1. Using recall**

'Do you feel it? I am interested. I want you to feel it, then you can recall it.' (P7)

I can still feel the fingers on my neck of one of my first level one fellow students -- one of my classmates, when we apparently didn't know what we were doing. Just the gentle lift on my neck... (P11)

Everything that you have ever learnt is in your subconscious mind somewhere, and you can recall it; you have the skill to do that. ... We are really cultivating a sense of well-being. You could put it in that way ... reminding people that they have the ability to recall a pleasant experience and suggesting that they do it as an exercise again and again. What a simple thing! (P8)

And I was talking to a friend, telling him about my experience in this class I had just taken, and at the end of talking to him about this class, he looked at me, and he said 'You know, your whole face changed when you started talking about this work.' I went, 'Oh, recall. It really does work.' (P9)

## **5.13. Working with the Body**

### **5.13.1. Using Touch**

This section looks at how practitioners understand the tools they are using in working with the body.

We use our hands, but it's what is in our minds, our unconscious mind coming through our cells, through our hands into the other person. (P5)

One definition of being well hooked up in my book is that I am available to read all of these subtle shifts in gravity, in weight that is happening in my structure, so that when I am playing with the structure, the physical weight of my client's body, I am reading it in all of its subtlety, whether it's hanging, whether it's held, whether it's pouring right or left, whether it's bouncing, whether it's swinging, whether it's jiggling in any way or whether it's changing in its depth of weight -- whether more weight is being given, or more weight is being held back. My body structure is reading that in me, and when I have contact with my client, it's reading that in my client at the same time.

Through Mentastics and table work we quickly realise that every part of the body can be accessed from every other part of the body and we get these flows of energy and movement through the body. (P10)

When I give a session, and when I also receive, waves are, for me, the image of any move going from one part of the body to the mind. I imagine that waves are bringing all the feeling, all the sensation...(P2)

### **5.13.2. Using Movement**

I use Trager a lot when I hike, and it feels like it helps me go miles and miles when I am hiking, because the swinging starts a rhythm going and the effort becomes less and less, the momentum of the rhythm becomes more and more

what does the work. ... I am following my arms and legs swinging, so my mind relaxes and I am probably in what somebody would call a trance, although I'm very alert, and I feel the breezes better, I see the colours better and I'm in, what Milton would say is, hookup. (P8)

One of the principal shifts that took place in myself about Mentastics was there was a process of disinhibition, so that I became less inhibited about movement, less inhibited about being playful ...(P10)

### **5.14. Mechanisms of effectiveness**

Several themes arose here: practitioner relaxation and body awareness, creating a safe space, establishing a collaborative relationship, teaching and modelling fluid movement, witnessing uncritically, inquiring touch, using weight, presence without touch, using verbal inquiry and direction. This section will also consider interviewees ideas' on clients who they feel would not benefit from Trager work, and what they feel interferes with effective outcomes in a session.

#### **5.14.1. Creating a safe space**

My being mindful of all that is happening in me and developing this mindful presence in me is something that creates a more welcoming, relaxing, accepting space in the relationship with my clients, in the obvious ways of my not being threatening person, but also in the less obvious ways of body/mind -- feeling like a comfortable physical presence for this other person's physical body to be in contact with. (P4)

#### **5.14.2. Not-knowing, not-fixing**

Practitioner perceptions of effectiveness indicate a strong link between their own level of relaxation and that of the client.

I had started out with some definite pain in my shoulder and neck and ... it wasn't going away, so I just let it be there and while I was working on his neck and shoulders, and staying in 'not-knowing' -- he had come for a very specific problem in the shoulder and wanted it fixed, but I allowed myself not to get into fixing it -- just playing with the tissue.... And at a certain point, it felt as if I had

just received a shower of warm water and everything in my neck and shoulders disappeared, absolutely everything. (P11)

#### **5.14.3. Finding fluidity**

And the freedom is what I am interested in -- I don't care how small it is, or how big the range of movement is, it means nothing to me other than it is data, you know? And it gives me a range that I can play with the mobility in, play with the freedom. But what I am looking for is the quality and the feeling of freedom and pleasure. So that if I am working with a dancer or an athlete who has tremendous range and freedom of movement, we can play with freedom, perhaps, in a larger way. If I am working with someone who is paralysed, due to a stroke, or is affected by some kind of pathology, I am still looking for the exact same quality of freedom because I know that once they can feel their own freedom, it will expand. (P1)

#### **5.14.4. Non-judgemental attitude**

Interviewees mentioned the effects of being present and non-judgemental.

I have come to recognise that when we forget, or repress or unable to process memories, they pass from the conscious mind to the part of the mind that controls muscle tension. What was a group of memories becomes a physical attitude. By feeling these physical attitudes, witnessing them uncritically, it can create a space for the memories to resurface. ... I see my job as a Trager practitioner to create a safe environment for that to happen (P10)

#### **5.14.5. Working with resistance**

My clients come to me with their own internal resistance already there. They are resisting, in their bodies, something in their experience. It may just be something in their imagined experience, or their perceived experience.... So, they have got their own internal resistance, and if I meet that and push against it, all I am likely to do is to increase their own resistance, which is not helpful for the body. So, this whole thing of being disarmingly and simply present is a way in which their resistance can come up into more clear view and dissolve at the same time....

Whenever I meet tissue that is resisting, the direction, the impulse, the contact, if I back away from it a little but stay present with it, and listen to it, physiologically acknowledging that there is this resistance there, the body/mind of my clients can also acknowledge that it's there and they have the internal, unconscious choice to relax it, to just let it go. They discover that it's not necessary. (P4)

#### **5.14.6. Creating new feeling experiences**

Who I am at every moment is a result of all these things that have happened to me, and how do you change it? Milton says you change it by adding new information to the brain. So, Mentastics and the table work are the way that we talk to the brain.(P3)

#### **5.14.7. Pausing to notice**

At the moment when you stop, the response of the body.... you can feel the muscles melting in your hands. (P12)

Pausing to notice is, 'Where are your feet? Where is yourself?', coming into yourself and then notice what you feel with your hands... in that pause, that short-term memory gets transferred to the cortex and stored in long-term memory. (3)

It's only by pausing, stepping back, becoming a clearer and clearer witness to what my unconscious is telling me that I can begin to notice... (P4)

Throughout the session whenever I notice I am getting out of hookup -- because hookup is the state of integrity, the state of balance, where I am capable of being present in this moment which means that I am not doing all these other things that would take me out of it, such as taking on other people's feelings. I need to pause so that I can get back to simply being present. (P6)

#### **5.14.8. Teaching movement**

Some practitioners mentioned the teaching role, others felt that they were facilitating their clients' discoveries of new ways of moving.

I am basically teaching -- body awareness teaching.... And it's the same principle with somebody who has paralysis. I mean, it's teaching them to move in a way that is still possible, that makes their lives easier, and maintain the level of function that helps them.(P14)

I have also worked with people who have had serious spinal injury or been in coma and it's the same principle -- gradually inviting feeling back into body use... I am thinking of one client in particular who fell off a horse and was diagnosed as, 'Forget it. You are going to be in a wheelchair for the rest of your life.' He was about 61 at the time. He comes to my studio walking, he walks about half a kilometre and back. My work with him has also been, through Mentastics, boosting his self-esteem, accepting that he does not move as quickly as he once did, and enjoying the slowness that he has now ...(P11)

#### **5.14.9. Using verbal dialogue**

Interviewees mentioned the importance of checking in with clients in a state of hookup, using a soft, gentle voice, both to focus the client's attention on what is happening in the muscle tissue and get feedback as to what the client is noticing. One interviewee mentioned using this as a way of trying the client's conscious attention to changes.

Part of the dialogue is keeping the verbal dialogue space open. I don't use it a lot; I use it every now and then, at key moments, to check in to see whether what I have been feeling and noticing has also been felt and noticed by the client. (P4)

I think the verbal contact, if it is in hookup, if it does not bring them out of their feeling, is very valuable, because if they hear themselves talking, they often get very interesting insights for them. (P7)

I remember working on a man with back pain, who had been sent by his doctor, and he got up off the table and he said, 'I can't feel this good.' And I paused, and I had him pause, and I said, 'Do you know what you just said?' And I had him repeated it back to me. So, sometimes there is a feeling that it's not okay to

feel good, and so I do work with people in accepting that pleasure, and enjoyment of their own body. (P9)

#### **5.14.10. Trusting**

I trust the unconscious mind completely. And that's part of it I think. I really am entering into this session knowing without a doubt that all of that freedom and all of that knowledge and all of that spaciousness is there. I simply have to have a willingness to receive its presence. (P1)

I feel like I got more comfortable about not-knowing, not having the answer, but allowing something to emerge. I have more trust in the process -- that if I ask the question, or if I am there then something will emerge. (P9)

#### **5.14.11. Monitoring their own body signals**

Some interviewees mentioned the importance of feeling pleasurable sensation within their own bodies, and how they recognised this as an unconscious signal of an effective 'touch dialogue' taking place.

The unconscious mind can begin to recognise that my body and my client's body are both shifting in a way that, in a normal context, neither of us would be paying attention to. Although, both of us would be responding to,... (For example) I feel my weight relax when I am with this person, whereas, with that person I feel like I am holding my weight. I don't feel safe to really let my weight go.' Or, with this person, I can feel a kind of tingling in my belly or my hands that I have come to know as a real positive sign, a real pleasurable, healthful sign of aliveness and interest and presence. (P4)

#### **5.14.12. Using weight**

When I pick up the weight of my client's arm, I am whole-bodied and whole-mindedly present with a sense of that weight and I am allowing the sense of the weight of that arm to be the way in which my clients organism is revealing itself to my organism. It is revealing its ability to let go of its weight into gravity, and it lets go of its weight into gravity through my body structure... (P4)

#### **5.14.13. Working with pleasure**

In my 20 years of practice, the most commonly withheld emotional experience in our culture is joy.' That's what people don't allow themselves to express, most often, and what happens when people relax and let go, what bubbles up to the surface is a kind of joy, or pleasurableness, or just this soft, delighted satisfaction. And our clients don't take a lot of notice of it because it seems kind of obvious... (P4).

#### **5.14.14. Using effortless remembering**

There is a trick to remembering ... It is very simple and you don't try to remember it ... it is really just a wandering through my mind. I just started to do it, it's almost like a meandering through my mind -- what was that experience? There is no grasping in it -- it really is an opening. The process of the recall involves opening the mind, and that involves opening tissues. I can feel my head opening, and my body softening as I do the process. The very act of wondering is itself a physical and mental process. (P8)

### **5.15. Practitioner perceptions of client experience**

Interviewees described positive outcomes that their clients had described.

#### **5.15.1. Lighter and longer**

Every single client gets up and reports lighter and longer. So in terms of continuing, when clients follow up on that, that feeling perception gets stabilised and leads to other things. And that length and that lightness of course means that the whole body is starting to move in a freer away. (P8)

#### **5.15.2. More self-awareness**

It's an unavoidable side effect of receiving Trager work -- more self-awareness whether you want it or not. You come in to get your back fixed, and you get more aware of yourself. (P4)

So what we do is give people permission to move as they need to, so that they are not stuck in a pattern that is not serving them any more, that's causing injury

or pain. I think ... people can expect to develop more awareness, or have an ability to release their own tensions. (P9)

In my work I do a big emphasis on integration in everyday life, and love to teach people how to sit in front of the computer. I have my dentist who comes to me as the client. She is doing Mentastics with moves that are contrary to the moves she is doing everyday. (P7)

### **5.15.3. Quiet mind**

I have a lot of people who are very mentally focused, and they say it is a great gift just to get quiet in the mind. (P7)

### **5.15.4. Stress release**

But the dissolving of that discomfort came mostly from the dissolving of the stress in the nervous system. So, you know, tight necks and bad backs, chronic depression, misuse habits, exacerbated by stress. (P4)

### **5.15.5. Managing pain**

I have two people right now who are in a lot of pain and it doesn't... it doesn't necessarily have a curative effect, but what it does allow them to do is to regain moments, moments of not being in pain.... which gives them some sort of hope and a way of re-orienting their relationship to the pain. (P9)

I had a severe whiplashed person, and it was amazing, she went through such a deep process of pain. And it was sometimes difficult because the pain does not go away immediately, maybe something else appears. And with her I learnt to support her through this crisis of pain. (P14)

But overlaying with pleasure... if you can find pleasurable feeling somewhere in the body system, to recall that feeling, and have that as part of the whole essence. (P13)

#### **5.15.6. Developing artistry**

...working with performing artists, who are interested in developing more articulate, expressive body /minds, just expanding and enhancing their already expressive possibilities. (P4)

With singers, for instance, I encourage them to go through a process of recalling their good experiences in singing. To envisage themselves, positive, comfortable, grounded, standing on the stage of a beautiful opera house, the auditorium in front of them, hearing in their minds' ear the most beautiful, appropriate voice for the song that they are going to sing. So, they are pre-setting their bodies for the best possible performance. (P10)

#### **5.15.7. Working with neuromuscular problems**

I have had success working with Parkinson's and M.S. (and) it was certainly not due to my extensive research in those fields. It was due to my willingness to be really present with what was happening with that client in the moment... to be there with her left leg, with her right leg, with her pelvis, with her balance, with her weight, with the quality of tissue, exploring all those things for a long enough time so that her body/mind begins to learn that she can, in fact, support herself on her left leg, in very specific ways. ... And playing with it as a dance, so taking it out of context of functional movement and into the context of pleasurable movement. (P4)

He said, ' They have told me that the bone in my left arm is dying; there is no movement and they are going to want to graft bone from my hip to my arm, or something'. And I said, 'Let's take some time to really feel your arm and your hand.' And we played with this idea of recalling sensation. Instead of saying, 'Oh my arm is dead', to realise that as long as it was still hanging on his body, and there was any movement, it was quite alive, for us. (P1)

I've been working with some Parkinson's patients, and they get great benefit from the work, especially from the reflex response work and the Mentastics, done in a way that encourages them to move with grace and more trust. (P11)

I have also worked with people who have had serious spinal injury or been in coma and it's the same principle -- gradually inviting a feeling back into body use (P11)

#### **5.15.8. Changing tone**

I have people who come in because they want a better quality of life, they want to change. And they often don't even know how to articulate this -- and this is my observation -- they want to change the kind of tone they carry in the world. (P6)

#### **5.15.9. Working with the elderly**

I have discovered even for very old people, life is still inside. We have just to go deeply inside, to play with life inside the body. There is no less life in an old body than a young one. Of course, there is a lot of restriction, and tension, but with Trager I discovered that I could play with this in a very gentle manner so that old people were really confident with this work. (P2)

#### **5.15.10. Being with those who are dying**

I went to see her twice a week through that time. We became very very close and her condition was cancer and she became a living skeleton. The body was obviously in profound difficulty. I used to give her the smallest input, but all over, just on the hospital bed. And for me, the most special thing was just two days before she died -- and it was the last time I saw her -- she said to me, ' You know, that is so lovely; that feeling is just so lovely.' (P13)

She is losing more and more of her body use, (and) with what is left she is discovering more and more the power of the mind... We are working more and more with those kinds of Mentastics, really inviting the mind into softening, and warming, because as the body part is used less and less, it becomes colder also. And she is ... she is my true master at this particular moment, in how powerful the mind is and how effective. (P11)

#### **5.15.11. An approach to autism**

I have done a lot of work with autistic children, and I discovered that ... the Trager approach of non-intrusiveness, of waiting for a response rather than trying to make a response... is applicable to work with children with autism, because they have to be approached that way; you cannot push on an autistic child. (P1)

#### **5.15.12. Supporting abuse victims**

I worked with one woman for two years until she could fully accept the Trager session. I saw her weekly, and she was fully bundled up in clothes, in layers of things, and we did this whole thing about gradual touch. (P3)

#### **5.15.13. Working with athletes**

I did work with three archers, they were in the international team. ... And very often they have a problem ... because at first they are fresh, also in the mind and they are very connected. And then, in the second they want to do the same as in the first, and so a kind of tension is coming in... And so, we were working on just letting the bow go down after the first (shot), and releasing the shoulder and taking a moment of coming to zero... (P15)

#### **5.15.14. Clients who don't benefit**

Trager work is very difficult when there is any kind of 'itis' around, such as inflammation, inflammatory process, so when this is occurring, some joint is in a really bad state, some skin problem, or some severe movement problem, I usually don't move this area. And of course I am very careful with early pregnancy, and this is not because I don't want to touch this body. It's more about legal issues. (P14)

I haven't really come across any situations where it hasn't worked. I have come across, or have been in myself in places where I was impatient, was wanting a result and maybe people that are very angry or aggressive and have a lot of tension and don't want to let go of that... (P5)

People who are very very restricted in their mind, and are asking for a change done to them by the practitioner.... You know, people who are not really willing to feel. ... I am not big enough, not open enough to reach somebody sometimes. (P7)

I guess, I feel that I don't always necessarily connect with a client. And I don't make a big issue of that. They are given full permission, if they don't want to continue, to stop the session. (P13)

I truly believe that everyone can benefit from this kind of nourishment and welcoming and softening and opening. And then, there are people who are not ready for that. I find one of the more difficult situations, at least in the beginning, can be people who are used to other types of massage that has much more force in it. So it's interesting, it just depends what their expectations are. (P11)

I can count may be on one hand... the people who did not come back because they had such a powerful positive experience and they were not ready for that. And it has nothing to do with provoking, which I know well from the other disciplines that I have practised. There was just such a beautiful connection and opening that they were not ready for -- not so much with me, but with themselves. (P11)

... unless there was some bad connection that happened between us. Occasionally that might happen if I missed getting what somebody wanted, or needed -- or they were scared, or they had a pain that I wasn't aware of, or didn't treat well... (P8)

I think it depends on the practitioner, and the development of the practitioner. Sometimes I don't have the skills to help that particular person. (P9)

#### **5.15.15. Doing Trager without touch**

Sometimes... I still feel like I'm doing Trager, but I have some clients who can't be touched. For whatever reason, it could be emotional, it could be physical. But I have a couple of people who have trouble being touched. And so, the Trager piece of it, what they are really asking for, and what they are really

benefiting from, is presence and hookup, as opposed to any kind of hands-on work. (P9)

### **5.16. Personal/professional development**

That is something that I am so thankful for: that I can teach people to be less judgemental of themselves, and of course with others. This was one of my big changes that has not come to an end -- to be much more nice... not to judge myself because of a big belly or a rough chin. And that's the gift I give to myself every day. (P7)

So if I want to support someone relaxing, I have to be relaxed all the way down to the cells, the bones so that when I reach to feel their weight, and give them the feeling of their weight, if I don't have the feeling on my own, there's no way they are going to feel it. They will feel my tension. (P1)

At the same time that I am going deeper into the feeling, the sensation, and maybe emotional process, I need to go the other way, to the other side -- to increase my knowledge, to stay scientific. Next year I will do a new diploma about neurology and psychology. The more I go deeper in my feeling, the more I need to keep my balance with the medical process. That is very important for me. (P2)

I find that the teaching is the place that is taking me to a deeper level, because now I have to feel not only how I am being with the client, but how I am modelling this, how I put words to this. I like to write it and put language to it. It's not a doing, but it's a noticing and just by having those words, it shifts what I do... (P3)

It was actually not until I met and started working with a much more experienced practitioner, who did not give me little movements to practice, but rather asked me questions to explore, that I started to get it. (P6)

This is what I personally so admire in any one that embarks on the Trager path - - this willingness to put themselves in question... that for me is perhaps the most important guarantee of quality. (P11)

### 5.16.1. Trager in everyday life

So getting together on a board of directors for Tragerwork was nothing like a board of directors in any other company. So it was like getting together and connecting to touch and feeling before we started talking about problems and things we need to resolve. And whenever there was tiredness, we would take a little break. So I learnt to apply the Trager principles to a very different realm of reality. And then that was helpful, but it also made me useless for the normal world of business, because I cannot endure any kind of moment of disrespect for my body or with the other person's body. (P14)

We model the Trager principles at all levels and I think that's what we... whether it is in this kind of meeting, or with the Council of Trustees, or National Associations, there is just something about what Milton stood for that informs everything we do. I mean, in our humanity, and not getting it right! (P3)

I just see tremendous potential and possibilities in the world, needing what Trager has to teach. Our mission is to find ways of bringing it to the world in simple ways. And it's not all about teaching practitioners, it's about how we live it, and how we therefore take it to families, to children, and I guess that's part of where I would really like to help support it. (P3)

And I do see Trager as being slightly subversive in terms of the vested interests and institutions that we have in the world, because it is re-empowering people in such a way that it gives them their freedom of movement, not just on a personal level but on a social and political level as well. (P10)

...that is also very useful in many other situations when I am becoming emotional. There is another key of, okay, I can guide my attention somewhere else, changing the situation. And then, as a way of learning how to connect to another without losing the connection I have with myself... (P15)

Unlike some forms of body-meditation, what I love about this is that it's applicable to any daily movement. So when I reach for a cup, when I walk down the stairs, when I climb up the hill, when I pick up the load, what I learnt in this session, in the Mentastics, is applied there, and sometimes the things I pick up

teach me how to move. I am feeling their weight and connecting with my body. So what this means is, I can be in hookup when I'm doing fast, complicated activities, if I am aware and playing with the weight of my body, including writing bills -- the way I hold the pen. So it's a game, it's a constant game in my life.

(P8)

### **5.16.2. Tragerwork as a taste of enlightenment**

And I don't want to market it as spiritual practice, because that turns some people off. But spirituality to me is my sense of connection to the universe. (P3)

The way that we work within a place that is completely safe for someone so that they can experience more than a freedom of movement, but a peace inside themselves of mind, of emotions, it gives me when I do it or receive it, the same thing, it gives me an experience of what it would be like to be enlightened, (clears throat, and laughs shyly). So what would it be like to be enlightened? -- to be in a state of joy, ease, and pleasure in this vast ocean of pleasantness, what would it be like? A really nice session in really deep hookup gives someone that experience, gives both parties that experience. (P6)

I love to integrate into the everyday life. I think it gets less sophisticated, it gets more practical. I like the practical earthly aspect of it too. It's not so mystical... Meditation or enlightenment or whatever, it only serves people if you bring it to the earth, and into daily life. Otherwise (laughs) you don't need to live right?

(P7)

And sometimes very curious moments happen in the session. I call these moments -- it's like moments of Enlightenment, sometimes. And I really value this so much because I feel really unity and ... well, the Christians call it paradise (laughs) in the contact with my client. Some very precious moments... just being. (P14)

### **5.16.3. Promoting peace**

Belonging to the Trager community has been a tremendous asset in terms of growing into non-violent communication and recognising that we are all on a personal journey. (P10)

Being able to go with Trager all over the world, and to discover that as each person finds the quality of balance and quietness and hookup and awareness of interconnectedness, they become more peaceful. And it's true. Once they become more peaceful, they really love the feeling, they want to keep it, and they automatically want to share it. It's the nature of peace. And so, Trager is about building community, and about creating peace or supporting finding peace. (P1)

I have never experienced anything as powerful as being in Europe through this process. You get 40 people of different cultures and different languages coming together, who said yes to **one** concept that needed to be held in the world.... World peace, one person at a time. somehow they came together around 'What is it like to be? What is really important?' And we argued....

(Talking about Trager International) We took all these ideas of all the world and we created this thing. And it's sort of working, it's not perfect. But I still think of Milton: we are Tragering this thing, and you take it the way it is, you listen to it, you acknowledge it as it is, you honour it, you say, 'There' (laughter) 'There it is, look at that mess!' And the sense of honouring people and their differences -- I have never been in an organisation that does that... that honours being in that process. (P3)

Today I feel connected to a lot of people who live all over the place. I know I can go there; and I know the quality of connection we can establish very quickly through our work. It's just what my heart really strives for. (P14)

This was in Israel, so it's a country that has a lot of war and bombs...(...)... And I said, 'Okay, I'm going to give you another exercise. I want you to speak about Trager to someone you would never speak about it to... Someone that perhaps you don't like, may be a Palestinian person, or Ariel Sharon or Yasser Arafat.' The moment I said that, the entire room went stone-cold silent, and everybody literally froze. And I paused for a moment, so that we could all feel the intensity of the reaction. And I said to them, ' Please understand... I am not being political here. I want you to take a moment, and check into how you are feeling, and ask yourself, 'What closed down here? Because this is the difference

between peace and war. It's simply the thought of this separation -- that I can't speak to this person because of this culture; I can't share my humanness...(...)  
So we had an actual very strong experience in a very real place where war is happening with creating a new possibility in our minds (P1).