

**Body-Rhythms and the Movement of Sound: Integrating Somatic  
Approaches to Healing**

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From an external point of view my behavior as a Focusing guide has little to do with the practice of West African dance, or Contact Improvisation and Motivity (low flying trapezes and bangies) to which I dedicated so many years of my life. Yet from an internal point of view my interaction with clients unfolds as a dance. The sensibilities I have developed as a dancer function implicitly while I actively call on them in the Focusing interaction. This implicit functioning does not interrupt the flow of a typical Focusing session and therefore does not involve a re-negotiation of the Focusing contract with clients, yet it supports deep levels of somatic integration.

As a dancer, I approach each Focusing session as a choreography in which I attune to the rhythms, impulses and stirring of another while following their flights of spirit and memory, or the wondrous imaginings of dreamtime coming alive even in awakened states. This intimate attunement coordinates improvisations at several levels : within the Focuser, in our interacting, and in our attuning to the larger dance of life. We dance to a polyrhythmic ensemble of time-lines, from the most immediate (i.e. the blinking of the eyes, the gurgling of the stomach, a sudden gasp of fear, the upset at the neighbor today), to the most ancient (i.e. the intergenerational fallout of migration or gendered wars, or the million years old history of the human spine). My own presencing to these multiple rhythms and levels of experiencing engages me in an informed resonating with the somatic states of the client (which I call “somatic resonance”) while inquiring into

their affective and symbolic dimensions, and at the same time offering my own body-field as a stabilizer and a modeling of peaceful containment.

Within this way of working, I also look for a more explicit engagement of somatic movement that can be useful to the client and that arise directly from our interaction in Focusing process. For this purpose I have chosen the practice of *Continuum*--developed by Emily Conrad and in which I have trained intensively since 2008--for the way it integrates with the Focusing approach to complex trauma developed by Shirley Turcotte and also with *Somatic Experiencing* by Peter Levine.

I will briefly say that *Continuum* is a practice that explores the continuity between sound and motion, engaging the dance of breath and tissue to awaken the fluid nature of our being. As we are composed of 75% to 60% of water (shifting from infancy to old age), how do we interact with this mysterious quality of our being? If we do not reduce ourselves to chemistry, we can be free to wonder: how is our fluid nature inherent in our being human, and a healthy human at that? *Continuum* asks these questions engaging each practitioner in a “moving research” as both a personal and collective exploration.

Following is an example of a session in which I engage *Continuum* within the context of Focusing.

### **The Dance of Fluids:**

Hillary is a woman in her 50's who approached me in the context of her diagnosis of breast cancer, which came as a surprise and required quick surgery. My intervention was intended as a time limited one, essentially for pre-surgery preparation and immediate post-surgery support.

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During the pre-surgery time, my dance approach to the sessions with Hillary functioned at the implicit level along the lines outlined above and mostly engaging the field of somatic resonance: I used my own corporeal field to both sample and track her somatic states and as a stabilizing resource (i.e. modeling a calm breath, a relaxed muscle tone and voice, and a kind connection with our surroundings etc).

Hillary was mostly concerned about not wanting chemotherapy and being afraid to find out that the cancer had spread to the lymphatic system. In my own being I could sense how facing the possible news of such a spread activated in her a strong shock-response that could inhibit if not harm her recovery from surgery. We then worked on preparing for the worst without going into physiological shock. This involved a great deal of sacred work in which I integrated the principles of Somatic Experiencing and Focusing to support a client-centered and body-centered spirituality that helped Hilary connect positively with her feeling of mortality and enter the surgery (and the state of anesthesia) without fear.

Fortunately the surgeon found that the cancer had not spread to the lymph nodules and no chemotherapy was prescribed. Yet Hillary had received a breast implant and adjusting to it was difficult. Hillary found that the implant at times felt like it “turned to stone”-- something that happened quite often, and particularly when she was tired. The tissue around the implant would constrict and cause a kind of cramping in the whole area of the chest, immobilizing the fluids and making the silicon of the breast feel “hard like stone” and painful.

I drew on the principles of *Continuum* for a direct intervention. In *Continuum* we use sound to activate the fluids in our tissue and thus open up and soften different parts of the body as well as the body as a whole. Particular sounds are

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made on the exhale without forcing the diaphragm and while maintaining a low pitch that has calming qualities.

I experimented with Hillary which of two sounds was easier and most comfortable to her, testing between an E and a “puffed O” sound (made by puffing the cheeks). I felt it was more important to find something easy and acceptable to her than to apply the perfect sound to her condition.

Before making the sound I invited Hillary to scan her body in relation to her breathing: could she feel the movement of her breathing reaching her back? Could she feel it in the pelvis? Did she sense any tension in the back of her neck? In her jaw? How was her belly? Once we had this base-line (a term of *Continuum*) I did the sounds with her, in a seated position, in a cycle of 4 or 5 breaths.

Hillary chose the O sound to work with. I then invited her to self-touch around the breast (away from the scarred tissue and just at the edge of it), holding the hand in one spot while sounding on the exhale. I joined her by doing the same on my body. Every so often I invited her to enter into “open attention” (again a specific term in *Continuum*): in “open attention” the person listens to their whole body, to receive the effect of the sounding and to notice if an impulse for any subtle moving has been stirred, following it with an open attitude. Each little impulse is received, supported, and “bathed” in a kind of moving stillness. We shifted several times between sounding and open attention, for about 20 minutes.

I then invited her to check back with her base-line and describe verbally what she was sensing and if she could notice any difference from when we started. Among other subtle body changes she reported a sense of softening and

opening in the breast area and a definitive lessening of the pain. She also expressed a sense of calm wonderment that something so simple and gentle could have such an immediate effect. This was our last in-person session. I continued to check-in with her via phone over the course of two weeks.

Hillary reported that she would apply the sound often, as needed—that is when she felt the silicon breast becoming hard--and also before going to sleep. This brought her immediate relief and thus motivated her to continue. The simplicity of the process and its self-directed nature also fostered a sense of agency and empowerment especially welcomed at this time: she could feel that she was not at the mercy of her own body nor of medical doctors.

Emily Conrad who created *Continuum* writes:

*“Breath will start to activate our fluid systems and bring about novel intrinsic interactions where the throb of life becomes apparent. ... movement stimulated by using breath ... brings warmth and flow to what once appeared to be frozen and unresponsive.”* (for full article see

<http://www.continuummovement.com/article3-textonly.html>)

Hillary could feel this herself, her body giving her unmistakable bio-feedback. In *Continuum* we “feed” our body with self-made sounds, thus potentiating the breath and its motion, and fueling our bio-system with its most essential nutrient:

*“All breath is movement. ... All movement originates with inhaling and exhaling. All movement becomes elaborated by the breadth of breath.”* (Conrad, 2007:143)

*Continuum* is to me like Focusing in that it has broad applications, it is both simple and intricate, reaching into deeper and deeper layers of our organic

wisdom; it fosters self-referencing and direct experiencing; it slows us down and helps us relinquish our cultural conditioning; it connects us to greater and greater wholes, and it cannot be easily understood without experiencing it. At the same time *Continuum* and Focusing differ in significant ways and thus amplify each other.

Focusing opens people to trust their embodied nature in a culture that is deeply distrustful of our organismic wisdom and agency. In doing so people also open up to practices that, albeit deeply healing, often sound too alien or foreign and strange if presented by themselves. In this sense I find Focusing a great connector and bridge to the world of somatic/dance/body-work practices. For this (and more) I am thankful.

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