Book reviews

Dunlea, Marian. BodyDreaming in the Treatment of Developmental Trauma: an Embodied Therapeutic Approach. Abingdon, UK & New York: Routledge. 2019. Pp. xxii + 289. Pbk. £29.99.

BodyDreaming in the Treatment of Developmental Trauma is a welcome and timely addition to the literature on trauma and particularly, early developmental trauma. It is a book with a difference. Dunlea invites the reader to read with the BodyDreaming approach — by tracking their responses carefully in their own bodies.

For those psychotherapists and analysts wishing to integrate the insights of neuroscience and trauma to work with the body 'hands-off', this book demonstrates in detail how it can be done successfully. The basic premise is that those who have suffered early developmental trauma (in utero and/or within the first few years of life) have that experience deeply embedded in their body and nervous system. For example, Dunlea writes that one client's experience of the womb was not safe. As a result, her nervous system was over-reactive and she felt unsafe in herself. She had grown up around this patterning in her body. She was often overwhelmed and retreated into 'her head' as her default position. Hence, what had happened to her could be understood intellectually through talking and thinking, but never fully sensed in the body. The trauma continued to cycle around as repetitive thoughts, in spite of an understanding of it. As a result of the BodyDreaming approach, which offers a different and effective way of working with this, by slowing the sessions down and focusing on the sensation in the client's body, the client could access a sense of safety and feel more secure in her own body. This was a new experience. Dunlea describes how the client may then perceive the outside world in a different way, think more clearly, have more ideas and

The foreword by Donald Kalsched beautifully summarizes the book. Part 1 then 'sets the scene'. The fundamental point is that the body is not metaphor. Dunlea guotes Jung:

900 Book reviews

The difference we make between the psyche and the body is artificial In reality there, is nothing but a living body. That is the fact: and psyche is as much a living body as body is living psyche: it is just the same.

(Jung 1935/1989, p. 396)

The basis of BodyDreaming is that body and psyche are one. Much of the discussion in psychoanalytic circles recently has been in this area, questioning the primacy of the mind over the body. Where in the past body and psyche have suffered from the Cartesian split, they can now be brought together as Dunlea describes. By establishing greater coherence and regulation in the nervous system it helps to hold the psychic process.

What led Dunlea to this mode of enquiry? She outlines all the experiences which have shaped and informed BodyDreaming. There is a moving account of her time in the L'Arche community in France, where she worked with disabled young people and learnt the importance of loving attunement in the healing process. Studying early relational trauma, which affects later relationships led Dunlea to train in a variety of psychotherapeutic therapies including as a Jungian analyst. She also trained with Canadian Jungian analyst, Marion Woodman, in her BodySoul Rhythms workshops, which provided a way of linking psyche and soma. The work of Allan Schore gave Dunlea the links she needed with the growing insights of neuroscience and its links to psychotherapy and the new PET scans and fMRI gave credence to a more integrated world view of mind and body as one. Schore also describes how important the primary relationships are for relatedness. Dunlea incorporates the work of many clinicians and academics such as the Somatic Experiencing trauma work of Peter Levine, Steven Hoskins and Organic Intelligence, Gendlin's work on Focusing and importantly, Porges discoveries regarding the vagal nerve and its response to trauma. Dunlea's BodyDreaming approach weaves together many strands of different modalities into a holistic whole.

Part 2 describes the neuroscience which gives a background for the trauma work in the body. It draws together a huge amount of information. For anyone not yet familiar with this material this is an informative introduction. Dunlea gives the salient points of how parts of the brain function so the reader has a rudimentary map of the brain. Particularly relevant here is Porges's groundbreaking work on the vagus nerve (Polyvagal Theory). For this, readers are well advised to consider his original work, it is basic to BodyDreaming and social engagement theory. At the end of each chapter Dunlea provides extensive notes and references. Dunlea makes repeated references to this section in the clinical chapters.

So how may the body be down-regulated? There are detailed descriptions of how Dunlea works in the next chapter. She explains how she

has to be fully embodied herself in order to work with clients who are activated – that is starting to dissociate, getting hot and agitated or cold and frozen. Dunlea

Book reviews 901

asks the client to take their attention out into the room and focus on something which they are attracted to, rather than focusing on the client's problem or fear. Hence, she slows the session down. By taking the client's attention out into the room it allows the body to relax and the nervous system to settle. In this more relaxed state, it is suggested, new neural pathways may form. The client can return to the dream or problem with a wider perceptual field and less fear or upset. This enables the person to think more clearly and aids imagination. Through the descriptions of the way Dunlea works, we are able to share in the way the client comes to feel profoundly seen, in a safe way. Hence, she gets under the trauma so new neural connections may be made. A third place is created – similar to Jung's description of the transcendent function.

BodyDreaming really has to be experienced to know how significant its effects are; it is hard to convey in words. So, in Part 3 Dunlea gives many detailed clinical examples. She asks her readers to approach the material in an embodied way, to track their own sensations as she demonstrates and describes her interactions with her clients. She delineates a process which finely tracks what is happening in her client and in her own body, explaining why she says what she says. She admits she makes mistakes sometimes and she shows how it is possible to recover from them and re-establish attunement with her clients. Describing how she works with dreams, she describes how to hold the threshold – that is the tension of the opposites, as Jung describes – in order for another position to emerge. She is constantly bringing together the body and psyche, by gaining some safety in the body so that it is not overwhelmed by the psyche.

Dunlea considers the work of John Bowlby and the different attachment patterns which he identified. Through BodyDreaming the client may 'learn' secure attachment in their body, often for the first time. She also describes working with dissociative and disorientated attachment patterns. As she writes about some long term cases we see how the introduction of the new work she is learning, relating to trauma in the body, changes the work with the client and secure attachment is created. The BodyDreaming approach may help therapists who feel 'stuck' in their work with clients.

One chapter on working with numbness and freeze was particularly memorable. Dunlea was working with someone in her BodySoul workshop in a group context and describes, in detail, how the person would close her eyes and retreat into herself. She was easily overwhelmed and her nervous system activated. As the client tells her dream she shuts down in this way and Dunlea movingly demonstrates how she works with her. She slows down the session, encouraging the client to orientate out to the room to see

what her eye is drawn to. Later Dunlea encourages the client to orientate out of the room to find a resource which calms her – in this case some bushes moving in the breeze. These become the bushes which 'do not 902 Book reviews

panic' and this helps the client to feel safer in herself and less fearful. Dunlea encourages the group to engage with the process as each person tracks their response. When the client is feeling calmer and less fearful she returns to the dream, all the while stopping and reorienting when the client again is on the edge of entering the freeze or shutting down. Slowly the client is able to relate to the dream image in a calmer way and, as she does so, she discovers humour and a more playful side of herself. However, we see that as soon as there is a change, the old patterning tries to come in and shut her down again. This is carefully managed so that there is time to settle her system each time she is activated before returning to the dream. We see how the client can begin to keep a sense of herself internally while now also being able to relate outside herself to the group. This she does with a new strength and humour, involving the whole group. Thus, Dunlea describes how the psychological process can be seen to have a counterpart in the bodily neurophysiological processes such as the dorsal freeze of the vagus nerve and how both psyche and soma work together.

Dunlea considers self-regulation and, finally, she gives the clinical example of a numinous experience a client had. By numinous Dunlea is talking of the connection with the unknown which is beyond the present reach of the ego, i.e. a 'sense' of something which is over and beyond normal experience. Dunlea shows how the opposites are always constellated in the work e.g. holding awe and fear, attraction and repulsion. The edge between them has to be finely balanced. When a new impulse comes in, the nervous system may shut down in the old way, but by slowing down, re-orientating and settling the body, a new experience can be had and the associated emotion can be safely felt. Then the mind can think more clearly.

In interpreting dreams the therapist often goes to the image as symbol. What happens if instead we start by bringing the body to it? As has been shown, it can open up a whole different perspective/image in relation to the dream which links to the authentic, true or core self. Done in a safe, embodied way through BodyDreaming it can lead to profound and lasting change.

BodyDreaming is published at a time when there is an appetite for a book which offers a new way of working. Highly recommended, it gives the reader the experience of integrating the recent insights of neuroscience into psychotherapeutic practice. This book is particularly recommended for a study group – so that participants may read, learn and practice together and it will be useful for therapists in training. Readers will be rewarded by insights which may readily feed back into their practice. Anyone who has

attended Dunlea's BodySoul workshops will find it provides the theory behind the work and explains the profound processes they have witnessed unfolding in the members of the group.

Book reviews 903

Reference

Jung, C.G. (1935/1989). Nietzsche's Zarathustra. Notes of The Seminar Given in 1934- 1939. Vol. 2, Part 1, ed. James L. Jarrett. London: Routledge & Princeton University Press.

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