The Discovery and Use of Shape Therapy Sol Mogerman M.Sc.

Presented at

Counseling in the 21st Century

Fourth International Conference

Vancouver, B.C., Canada, 1994

Before I embark on any discussion of therapeutic intervention, I want to "give credit where credit is due". I would therefore like to give this credit to the "inner healer" which is built into our physical, emotional, and spiritual self.

One important mechanism of emotional/spiritual healing is known as the grieving process. This process works through random cycling of the six emotions of shock, anger, sadness, fear, guilt, and denial. The "inner healer" can be so insistent in its working through of this mechanism that it can compel us, at times against our will, to experience the feelings generated by these emotions. Many of my clients find themselves in a futile battle against their "inner healer" with the hope that they can avoid the discomfort of healing through grief. This battle creates situations where clients are engaged anti-therapeutic activity which has the power to create disease.

Keenly aware of the therapeutic nature of the grieving process, I committed myself to a search for something that could infuse the "inner healer" with additional strength to do its difficult and distasteful work. My search, as you shall see, resulted in a highly personalized counseling tool which I call "Shape Therapy". This paper describes the discovery, formulation, and practical application of Shape Therapy which I use in conjunction with the acknowledgement and honoring of the emotions connected to the grieving process as well as other traditional therapies.

My first discovery of "Shape Therapy" was not in the field of counseling but rather in the form of a rationale for a series of drawings which I produced 26 years ago while living on the Greek island of Sifnos. Even as a trained artist I was somewhat aware of the personal transformation with which the creative process is inextricably involved.

I would like, at this time, to quote from my journal entry of August 14, 1968: "There is also the intuitive recognition of the shapes and volumes which make up the more important part of one's knowledge and being. The intuition that these shapes were present in the Sifnos

island churches was foremost in my decision to pursue work on the island."

I was not until my artistic spirit was re-kindled by conversations with the great Canadian artist Sveva Caetani, that I felt the need to re-read my old journal. I found my earlier sentiments in harmony with Sveva's insistence that we are all in a constant process of creating ourselves with the "aim towards wholeness". This conversation set me to thinking about the bountiful opportunity to realize our wholeness (through healing) which exists if we are somehow able to become participants in this process of selfcreation. It was from this train of thought that the two part metaphysical framework for "Shape Therapy" took form in my mind:

- a) We are in a constant process of creating ourselves through resonance with the shapes, sounds and feelings of our environment.
- b) Consciousness of this phenomenon (a) through therapy can give us the ability to encourage our innate healing processes.

The metaphysical framework for "Shape Therapy" did not solely emerge from the world of my own artistic and spiritual development, but also grew in the context of a

busy and demanding counseling practice. It was within this latter context that the pressures of my clients to heal and, at the same time, avoid their healing melded with my own personal development and revelations. This leads me to present relevant material from the case study of client "T".

T came to me ostensibly for help with anger management as he was afraid his uncontrollable outbursts of anger might result in violence that would greatly affect the well-being of his young children. He was afraid that his potential for violence that he was considering moving out of his family home. His attempts to manage his own feelings were so fraught with anxiety that he was experiencing bouts of severe depression and his relationship with his family was becoming increasingly problematic. Further inquiry into T's past revealed a hypercritical and emotionally abusive father coupled with a physically disfiguring childhood illness.

As a youth, T discovered two strategies to deal with his grief. The first was to acquire and restore an old car. T attributed the success of this strategy to his ability to set a goal and achieve it. The second strategy was to "tranquilize himself with alcohol which proved to

further complicate his feelings of loss and aggravate his self-hatred.

T managed to extricate himself from the grips of his alcoholism with help from Alcoholics Anonymous and came to me with remnants of his more positive car restoration strategy in place. He nonetheless maintained a deep self-hatred which refused to budge in the face of his notable life achievements as a successful professional and provider for his family.

It was during a conversation with T about his sexual relationship with his wife that he admitted to surrounding himself with objects that he found pleasurable and pleasing to look at. This admission was disclosed with a deep sense of shame that he admitted that he was providing this pleasure solely for himself and not for his family. T's shame was compounded by his extremely logical mindset and brilliant defense of his negative self image. Without realizing the impact of the following observation, I offered T the "logical" possibility that he might not be able to surround himself with an environment that made him feel good if he didn't somehow love himself. This innocent remark was met by T with an overwhelming sense of relief, self-acceptance, and recognition of his positive aspects.

My next move with in T's therapy was to encourage him to

consciously explore, in detail, the aspects of his environment that infused him with good feelings.

With the logical defenses of his self-hatred down, T was able and eager to accompany me on a figurative exploration of his environment. I was during this exploration that he was able to distinguish that certain shape and special relationships WERE MORE EVOCATIVE OF HIS POSITIVE FEELINGS THAN OTHERS. The more T was able to become conscious of the healing nature of these shapes, the more comfortable he was to surround himself with them. The more time he spent with them, the less overwhelmed he was by anger, sadness and guilt. It was interesting for me to note that T's preferred shapes were identical to those found in the bodywork of the old car he chose to restore as a wounded youth.

On the suggestion of a colleague, I offered T the opportunity to work with the material of his choice to manifest the shapes which brought him such emotional equanimity. T resisted my offer and expressed a general lack of trust in his creativity and ability to manage the media I offered. He was so adamant in his resistance to my suggestion that I was forced to reevaluate the course of therapy with him.

It was becoming increasingly clear to me that we were not engaged in "art therapy" which relies on a process of the client manufacturing an artifact. It therefore occurred to me that T might only be asking for the time and space to be with the shapes he loved with acknowledgement from himself that it was okay to give himself the pleasure of this very subtle and healing experience. As his therapist, I was in a unique position to help T give himself permission to become aware of how conscious communication with aspects of his chosen physical world was healing him through his senses.

Being presented with T's self-discovery and astonishing progress in therapy, I had to ask myself if there might be any universal application of the techniques that provided so much success in our work together. The problem with which I was faced was: how to formulate what I had learned through my own creative and spiritual revelations into a useful therapeutic tool that I could use with other clients? My response to the latter question required me to think in procedural terms so I could present a number of formalized steps designed to lead a client through a process of discovery, acknowledgement and generalization of his or her personal shape or form.

The first generation of this procedure came to me during lunch and was written down on a napkin. This basic form, inspirational but rather awkward, was gradually adjusted to the practical demands put on me by trying to use it with clients who were understandingly put off by a new and unexpected counseling procedure. The present form of "Shape Therapy" is constructed of a three steps and is explained below:

Step #1

In step #1 the counselor engages the client in a search for discovery of his or her personal shape. This search is adjustable to the client's degree of self-knowledge concerning a personal shape. Client responses vary from "what do you mean?" to "I love_____, so my personal shape must be ______" Clients who have difficulty finding a shape need to be helped to the awareness that they favor some shapes over others. This can be achieved through a process of questioning about the objects or natural environments they choose to have in their lives. Encouraging detail in this exploration of human-made and/or natural phenomena can reveal preferences for circles, squares, triangles, and other geometric forms and

proportions which the client can then recognize and identify, with the counselor's help, as a personal shape.

It is important to keep clear of any intellectual process or memory identification with shapes during step #1. Shape Therapy is not concerned with shapes or scenes which only evoke good memories, but rather with the identification of a certain shape which evokes an immediate and harmonious sensory or "sacred" feeling.

Step #2

Once the client has discovered a shape that he or she feels good with, he or she needs to establish an integral identification and resonance with it. It is important to consciously connect this resonance with the clients "inner core of being" to encourage and promote the process of healing.

Due to the fact that we experience our environment through our senses, it seemed most appropriate to devise a process of identification with one's internal shape that incorporates the use of the senses. For this process I settled upon a visualization utilizing a combination of visual, auditory, and/or kinetic processes with accompanying body movement to help the client make the connection of a personal shape to his or her "inner core of being".

As you can imagine step #2 seems a bit obscure to some clients and has to be included in a more subtle manner by weaving it into the unfolding of step #1. The counselor may do this by through using descriptive hand gestures during the discovery of the client's personal shape. This may inspire the client to start describing the shape by using his or her own gestures either in sympathy or in correction of the counselor's gestures.

Step #3

Step #3 is designed to propel the client into ongoing communication with the inner healing process and relies on the client's ability to take the insight gained from steps #1 and #2 into his or her perception of and communication with the environment. This propulsion partially relies upon the counselor's continual reminder that the client is surrounded by a world that is constantly resonating with the client's personal shape. Occasionally, the counselor may be obliged to accompany the client on an excursion outside the session room to help bring this phenomenon to the client's attention through actively pointing out shapes the counselor identifies as those described in step#1. Personal shapes can reside in any or all of natural and human-made creation. Another important part of step #3 is encouraging the client to report, in subsequent sessions,

successful recognition and consciousness of resonating with a personal shape. This procedure helps to insure bonding of the inner healer with the environment and encourages the process of increasing generalization of the shape identified in therapy with those found in the world. Consequently the client gains access to a broader context for self-healing.

Obviously, the application of Shape Therapy must be tailored to the needs of each individual client. As with any new therapy, it is subject to creative change as a direct result of client feedback. After successful application of Shape Therapy to help in grieving the loss of childbearing, one client came to me quite perplexed because she had identified, on her own, resonance with a shape other than the one we identified together in step #1. In working further with her I postulated that it might not be the specific shape she identified, but the proportion of the shape (also found in other related shapes and phenonena) that provided resonance with her "inner core of being". She accepted my hypothesis and was delighted with the fact that she was not limited to resonance with one shape only.

The above dialogue brought me to a broader definition of the concept of shape and has given me the opportunity to develop a more adaptable and multifaceted application of

the theory. In the same sense of discovery, I have had a number of clients who have given me feedback which has allowed me to further expand the definition of shape or form to include the quality of sound, tactile feeling, balance, and the experience of motion.

I have used Shape Therapy with approximately 70 out of 172 clients during the period of June, 1993 to April 1994. Success of the therapy at this time is purely anecdotal and cannot be scientifically measured as I have not provided any reliable instrument of measure. I will, however, attest to is therapeutic effect through my own observation of clients' improvement in my own practice.

In conclusion, I would like to emphasize that Shape
Therapy is, at this time, very young and requires many more
hours of clinical use, measurement, and exposure to other
professionals before it finds its way to broader usage. I
believe, if it is used alone or as an adjunct too other
established therapies, that it can only support and enhance
therapeutic effort.