FREEING THE FEELINGS: Basic Radix Concepts and the Functional Approach[•]

by Charles R. Kelley

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FREEING THE FEELINGS

Reich approached the loosening of the muscular armor structurally. He observed the armor to be arranged in seven somewhat discrete body segments: 1) ocular, 2) oral, 3) cervical, 4) thoracic, 5) diaphragmatic, abdominal, and 7) pelvic. The armor forms lateral patterns of tension in each segment which interfere with the normal longitudinal flow of the life force. A specific longitudinal flow underlies each of the deeper feelings. Reich found that the armor should be loosened systematically from the top down. Problems arose when the armor segments closest to the body core were worked on before the upper segments had been freed (Reich, 1949).

We have found Reich's segmental concept of the armor an invaluable tool. In Radix body work we, like Reich, work "top-down" or, more accurately, "outside in," beginning our work not only at the eyes, but at hands and feet as well. Eyes, hands, and feet are the three most important areas of contact with external reality. We want students doing feeling work to have their "eyes open," have their "feet on the ground," and have a "firm grip on reality." These are not mere metaphors, but refer to the radix flow in the body that moves from the body core toward the world around. The structural approach to us means freeing patterns of armor starting with eyes, hands, and feet, and working toward the core. This involves freeing the head and neck, feet and legs, hands, arms and shoulders before the trunk, in general but not strict accord with Reich's top down concept.

A second approach to opening the feelings deals not with structures but with ongoing processes, their expression and their blocking. The primary focus shifts from the organization of patterns of armor by body segment to the organization by patterns which block a particular radix process, often a feeling process. This armoring extends across the body segments with a pattern of blocking that is characteristic for each major feeling. The Radix teacher must become skilled at identifying the particular patterns of tensions associated with the blocking of a given feeling. Subtle muscular cues tell us when the student is blocking pain, fear or anger. And the way to work with process is across segments striving for an integrated expression of feeling, most significantly when discharge comes.

This second approach to understanding and opening the feelings typifies Radix work. It is rooted in radix processes, including pulsation, charge, discharge, counterpulsation and blocking and the processes which underlie the major feeling pairs: pain/pleasure, fear /trust, and anger /love. Blocks to these processes and the characterology of those blocking them are major topics of Radix work, and will be discussed later in this article.

Basic Radix Processes

Pulsation, Charge, Discharge

Radix pulsation exists in living and non-living radix systems. In Radix Education, our primary concern is, of course, the radix pulsation of the human body. Pulsation can be observed directly in the rhythmic expansion and contraction of the blood vessels and of the respiratory system. Everyone alive is pulsing continually whether moving or still, but what differs in each is the amount and type of pulsation. As a radix system pulsates, it develops a radix charge, which increases tension and the capacity for discharge. The process of charge is shown in non-living

radix systems, for example, in the growth of a thunderstorm. (The electrical charges of the thunderstorm are, I believe, secondary to a radix charge which precedes them.) In the human body, the radix charge develops the capacity for action and for feeling, while discharge is the process by means of which the capacity is utilized. The discharge is the conversion of the radix into some form of energy. In the case of the human being, the basic short-term conversion is into feeling and movement. (A long term conversion is into growth, a particular form of long-term "movement.") With the conversion, the radix charge is lost.

The most powerful radix discharges are convulsive. Two things are necessary for such discharges: 1) there must be a radix charge, a concentration within the body; and, 2) the pulsation must intensify to the point of convulsion. The clearest illustration of this process is human sexuality. The radix charge develops relatively slowly at first, with only vague subjective sensations of restlessness and tension. The charge increases as one becomes increasingly "horny." There is a pleasurable tension and swelling in the genitals and a heightened interest in sexual experience. During foreplay the pulsation deepens, the charge increases and focuses at the genitals. In the sexual act the charge is increased rapidly as the respiratory pulsation deepens further, finally synchronizing with voluntary movements, pressing toward convulsion. Then the movements become involuntary, the will is suspended and the whole body surrenders to the convulsive pleasure of the orgasm.

The basic sequence of this process was described by Reich as "tension-charge-dischargerelaxation." I have previously expressed the view that the process of radix charge precedes the development of mechanical tension (Kelley, 1974, p. 25). The formulation then becomes "charge-tension-discharge-relaxation." The same sequence occurs in other deep emotions. The deepest expressions of grief, of rage, of terror involve a similar surrender to an overpowering and involuntary convulsion of the whole body. The discharge of grief, for example, may start with crying that involves only the eyes and mouth and upper chest. As the discharge is allowed to develop, the respiration becomes fuller and more convulsive, and deep tragic sobs may well up from the abdomen.

Few adults have retained the capacity for full surrender to the involuntary movements of total discharge. Some carry a chronic level of excess charge and tension. Some block the process of pulsation and charge itself, become chronically undercharged, and suffer a great reduction in vitality.

Discharge is more likely to happen when the charge is high, and in Radix work we employ a variety of techniques for increasing the charge based on this principle: *The radix system charges on the inward stroke of the radix pulsation*. Charge is increased by deepening the instroke. In breathing, for example, charge increases with inhalation. Exhalation is more important in encouraging discharge, but the increase in potential for action, reflecting the acquisition of radix charge, occurs with the intake of breath. With inhalation the direction of radix flow is inward towards the center of the system. Two of the general techniques we use frequently for charging are "belly breathing" and high chest breathing, both emphasizing inhalation.

In "belly breathing" the emphasis is on breathing with the diaphragm. The diaphragm is an umbrella-shaped muscle separating the thoracic from the abdominal cavity. During the inhalation the diaphragm contracts downward in its central area, compressing the abdominal organs from the top and moving the belly forward. The abdominal wall must release and expand to allow this to happen. During exhalation the diaphragm relaxes and is pushed upward as the abdominal wall comes in and the belly moves back. When the belly is soft and the diaphragm swings freely, the wave of excitation produced by each breath moves downward through the body, giving the subjective impression that the breath itself is moving down. The effect of belly breathing is to soften and charge the lower part of the body, which is so frequently undercharged.

In high chest inhalation breathing, eyes and mouth open and air is inhaled with a gasp as in surprise or fear. The diaphragm contracts but the abdomen tenses, limiting the downward stroke of the diaphragm. The ribs lift, the chest expands, and air is gulped in quickly. The pulsation occurs primarily above the abdomen, and this is an effective and rapid method of charging the upper part of the body. However, this technique can produce the signs of hyperventilation to anyone who has a tendency in this direction.

The effect of these exercises varies quite widely from one individual to another. This is not surprising since some individuals typically function at a low level of charge, while others are usually over-charged. The undercharged person gives the general impression of low vitality and a lack of energy. Respiration is shallow and the chest is depressed in an attitude of prolonged exhalation. The skin is usually soft, pale and rather lifeless in appearance. (The skin of a healthy young person by comparison is soft, glowing and firm.) Muscles tend to be flaccid. Movement and speech are slow and unassertive. The undercharged person has a soft structure. The back is flexible, the muscles relaxed. There is not much vitality. This person functions habitually at a low level of energy with a limited capacity for work.

The overcharged person, in contrast, gives the impression of considerable vitality and energy. His speech tends to be forceful and his movements quick, though he may be blocked and awkward, or uncentered and jumpy. The chest is usually held high in chronic inhalation, for it is exhalation that is blocked. The muscles tend to be tight and the body tense. The skin is taught, alive and ruddy. The body continues to charge without adequate capacity for discharge. In some cases the entire body may be tense and overcharged, but usually the tension is centered in the upper chest and includes the shoulders and face.

Quite frequently the overcharge is above the waist, and the lower half of the body, below the diaphragm, may show none of these characteristics and may even be pallid, undercharged and underdeveloped, despite the overcharged upper half. To generalize, many persons have blocks that cause overcharge in some parts of the body and undercharge in others. When pulsation deepens, the person who is undercharged and has a soft structure charges readily, while the tense muscular person charges more slowly. Areas of undercharge are charged by extending the body's respiratory pulsation to that area. Overcharge should be handled, not by blocking or reducing pulsation, but by facilitating discharge.

The purpose of the charging techniques used in Radix sessions is usually not to increase charge for its own sake, (though this is important for undercharged structures) but to increase the likelihood of an emotional discharge. Discharge has to be approached indirectly because it is an involuntary and spontaneous process. In an exercise we can imitate the process of discharge, but it remains an imitation because it is under voluntary control. While exercises can be valuable in revealing the pattern of muscular tension or respiratory block that prevent discharge, and sometimes in initiating a radix flow leading toward discharge, no exercise can be *expected* to result in discharge. It sometimes happens, of course, but true discharge is involuntary, mediated by the autonomic nervous system. It has to be allowed to develop in its own way and at its own rhythm. Like the orgasm, it just "comes."

The most powerful discharges are convulsive. This is not to say that all discharges are convulsive. Any emotional experience (in fact, any conscious experience) means some radix discharge. Emotion, like other forms of conscious experience, is the subjective experience of the radix process. The stronger the radix discharge, the stronger the feeling, and strongest of all are the convulsive discharges of sex, pain, terror and rage.

Convulsion in this context does not mean hardness. Orgasm and grief (sobbing) are soft convulsions. In convulsion, pulsation deepens and becomes involuntary and ego control is given up as pulsation becomes convulsion. In pulsation radix charge slowly builds, and in convulsion it is quickly discharged. It should be said that significant emotional releases are not always convulsive, but include new soft quiet feelings that the student becomes able to allow as a radix block releases. These, too, have their source in the radix process.

The techniques for facilitating spontaneous discharge are more accurately described as techniques for removing the blocks to discharge. Discharge, or emotional release, is essentially a simple process. A three-year-old child can do it. Reaching this simple process through an adult's labyrinthic defenses can be difficult and complicated. Often the adult will allow a feeling to develop to a certain point but block it short of full involuntary discharge. The problem becomes one of how to get the student's will out of the way so that the spontaneous process of discharge can take place.

An interesting type of discharge often seen in Radix work is what I call a "direct motor discharge," in which convulsive discharge is present but the feeling that should go with it is absent. In a typical case a man may begin kicking angrily, lose volitional control and explode into what appears to be a spontaneous discharge of rage. When finished he has a healthy relaxed glow, yet when asked how the experience felt he replies, "I don't know, I didn't feel much." Similarly someone may manifest absolute terror. He is screaming, his head turned back, eyes wide open, contracting and convulsing as if he is about to be killed. Afterwards he says, "I didn't feel much, but it felt good. I feel better now."

Somehow the emotion being expressed in the direct motor discharge is short-circuited. The person allows the involuntary radix discharge that underlies the feeling, but blocks the feeling from awareness. If the person was unable to allow discharge previously this motor discharge represents progress, but a vital next step is to become able to feel the emotion. Sometimes it helps to have the person identify and verbalize the emotion by having him say, e.g., "I'm scared" or "I'm angry" before the discharge is complete. Yet premature verbalization will impede spontaneous release.

A related but different point is that a deep, satisfying discharge can take place without being remembered later. This seems to occur when the discharge is complete and unblocked. The person goes through the experience totally and emerges without a recollection of it. I believe that this is different from the direct motor discharge in that the person does experience the feeling at the time of discharge but fails to register what he feels in memory. Obviously, it could be hard to prove he had ever felt the emotion, and had not had a direct motor discharge instead.

Whether or not one should consider a student to be in a true convulsive radix discharge has to do, not with the person's subjective experience, but with the extent to which there is an involuntary element in the movement and the sound the person is making. When everything is entirely voluntary it is an exercise and not a discharge. I carefully distinguish between Radix exercises and the vegetative experiences that they sometimes bring about. Emotional discharge is a vegetative function, and only to the extent that there is a vegetative component, an autonomic component, is there "real" -- meaning spontaneous convulsive -- radix discharge.

Before going into the ways that feeling discharge is blocked, something should be said about a confusion in the use of the word "feeling." It is important to distinguish between emotions and body sensations, since both are referred to as "feelings." Certain methods of sensory relaxation, meditation, introspection and drugs are designed to help a person experience his internal and external environment with renewed vividness. One can become a true connoisseur of body feelings, alert to every subtle somatic change and still be incapable of feeling love or anger or trust. The two feeling experiences are quite different. One is sensation and the other is emotion. Sensations refer to the body periphery, usually to energy impinging from the environment. The special sense organs and the skin are the primary sources of sensation. Emotions, on the other hand, are core rather than peripheral experiences, which express a non-intellectual evaluation and often carry a tendency toward action. Emotions are the experience of the flow of the radix through the plasma, the liquid contents of the body, including the viscera. In Radix work, we deal with both sensation and emotion, but our emphasis is on emotion.

Armor, Blocks, Counterpulsation

The methods that are used to block discharge are numerous and varied. The simplest involve directly resisting the process by tightening up muscles. Other methods are more subtle. The anxious person may attempt to anticipate the emotion and start expressing it before he feels it -- an effective block to the spontaneous experience. Another person will flee from a frightening feeling to one that is more familiar and comfortable. Pushing into the familiar feeling helps keep the frightening deeper feeling repressed. Men frequently prefer to express "manly" anger rather than "womanly" tears. Women, in turn, may prefer tears to anger. Another person, in a manner analogous to premature ejaculation, tightens against the discharge process by isolating the convulsion in a small part of the body, e.g., the upper chest, and might erupt prematurely and partially into screaming or yelling. Even if the discharge is involuntary, it is superficial under these conditions, because it is not allowed to deepen into a complete integrated convulsion. Others may employ fantasies or memories or a mixture in their efforts to force discharge. Most of these strategies to produce or simulate discharge are in reality methods of evasion. One does not, after all, need a strategy to surrender. Frightening, anger-producing, or painful fantasies usually serve to tighten the body against the deeper involuntary fear, rage, or pain that might otherwise emerge.

The most basic of Reich's concepts is that of the life force, which he called orgone energy and I call the radix. Of almost equal importance is his concept of muscular armor, the means by which the flow of the radix is habitually diminished, distorted or blocked. By blocking the flow, the movement of the radix within the body plasma toward discharge, the corresponding feelings are inhibited. Muscular armoring, referring, as it does, to chronically tense muscles often visible as hard and unyielding structures and ridges, is an easily understood descriptive term suggesting a suit of armor used to protect the wearer against unacceptable feelings. Unfortunately, implicit in this term is the idea of a static objective external barrier. In some literature there is a discussion of how to "break through the armor." In actuality the body armor is not an objective barrier but the continuing purposive activity of living organism to block feelings. I teach my trainees to remember always that armor is an activity, something that is being done by the individual, a process. It is most easily understood when expressed as *counterpulsation*. I like to think about radix counterpulsation and armor together. Counterpulsation is armor in action. As the name implies, counterpulsation is a contraction against the normal radix pulsation of the body. On the expansive phase of pulsation from the body core, the counterpulsing part of the body tightens. Whether a rhythmic tightening and loosening anywhere in the body is a pulsation or a counterpulsation depends on whether it goes with the pulsation of the body core or whether it is fighting it. When pulsation of the body builds, it threatens to lead into convulsive discharge, and counterpulsation is the way of blocking off, of preventing discharge. It opposes the direction of the pulsation and prevents it from extending into and mobilizing part of the body for discharge.

Counterpulsation is the activity that is the basis of and that leads to armor. What appears at first are large counterpulsing movements, but later what emerges are isolated chronically tense areas of the body that subtly block the radix flow, and seldom have to involve large groups of muscles. Think of the child first holding anger: he makes big contractions with his fists and shoulders, neck and jaw and chest to hold back his temper. In time, all of these large contractions fall away, for the child gets so that he can control the feeling perhaps with just a little residual counterpulsing tension. In some cases, pulsations and counterpulsations are not detectable, as chronic muscular tension may not reveal movement at all.

A radix block, whether thought of as counterpulsation or armor, always involves a dual impulse. The radix flow in the body has split into two opposed branches. One branch carries the impulse that is trying to be expressed, the second carries the impulse that is working against that expression: It is too easy in emotional release work to think of the feeling trying to emerge as alive and the block holding it back as dead, like a piece of wood. That is confusing and wrong, for the block is alive, the living expression of an opposed impulse. While the blocking impulse is in contracted opposition to the feeling trying to emerge, it itself expresses a true and alive feeling, a part of the person to be respected and understood. It is rooted in conceptual evaluation and the channeling process which forms the mechanism of volition. (See Kelley 1980 and 1983)

Generally, only one of the two branches of the radix involved in a radix block is acknowledged consciously, while the other is disowned. This may first happen when we are young and come to feel guilty, ashamed, frightened, or otherwise wrong about a feeling. The core feeling is opposed by certain developing values, according to which the feelings may be experienced as inappropriate, undesirable, a disvalue. The disvalue may be correct or incorrect from the adult standpoint, but the ability to block undesired feelings is a significant survival function, the foundation of volition. The disvalue is associated with the new second branch of the radix, opposing the first. Consider the child who has sexual feelings and is made to feel bad about having those feelings. Often the child will reject them as part of the "real" self and, as a consequence, end up accepting the block that is holding the feelings in check. – And often when the adult gets in to Radix work the reverse thing happens. The adult has become dissatisfied with his ability to feel, and wants to accept the blocked sexual feelings, or pain or anger that he once rejected. The tendency then becomes to disown the feeling supporting the block, and no longer experience responsibility for it. The block was put there by parents or school or others in the environment. "They did it -- it's not something I do." And with the disowning of the feeling behind the block, the positive value of emotional control, self-discipline, and other reflections of volition in our lives is often denied.

One of the hardest things to do is to make people aware of the blocks that they have shoved out of consciousness. Yet the block is there and functioning in the here and now. A good part of our work revolves around intensifying the counterpulsations and blocks so that the person can discover what he is doing in blocking and experience that doing. Reich spoke of it as intensifying the resistance: One of the things that frequently happens just before blocks resolve is that the person becomes aware of and conscious that he is "doing" the block as well as the feeling, and that the block is something he put there and keeps there, whatever the original role of his parents or other environmental influence when he first learned to do it. In Radix work we do not consider it to be our function to remove blocks to feeling, but rather to refine the process of control so that the student can either block or surrender the block as and when he so chooses. It is often a significant and poignant turning point in this learning process when the student realizes that blocks to feeling, like the feelings blocked, have been a genuine value, had an important survival function in childhood, and are to be respected, even if they are relinquished because they are no longer useful.

The first step in gaining this new level of control, then, where blocks can be retained, modified, or relinquished as appropriate is to become aware of blocks and counterpulsations, which are unconscious habit patterns in most people. The unconsciousness of the patterns is supported by the disowning, denial, or rejection of the value of either the blocking impulse or the feeling it is aimed at blocking.

The process of counterpulsation and armoring becomes very evident in certain bodily positions. The position most used by Reich has the subject lying on his back with his knees bent and apart. It is a position of openness and surrender. If the person is not blocking, his feelings accepted and integrated, he simply surrenders and his whole body pulsates as a unit. Watching the breathing, we note that each time he exhales there is an outward impulse from the core to the extremities of his body. It is not dramatic but it is noticeable. As he breathes out the bodily attitude is that of relaxed extension. In the thoracic segment, the chest "gives," the shoulders drop and the fingers uncurl a little. The expiratory pulsation tends to extend the neck and throat, and there is a slight backward rotation of the head, the chin moving upward and forward. This is the same movement that occurs in marked form during sexual intercourse. (This head movement has a different emotional expression from the rotation produced by contracting the muscles of the back of the neck, a common counterpulsation.) Observing the expiratory pulsation in the lower half of the body, we note that the belly falls, the pelvis curls gently upward and forward, and the legs separate further as the pelvis tilts upward. Often a soft flow of pleasurable sensations to the genitals arises. The expiratory impulse flows into the legs and feet. The toes tend to extend on exhalation, flex on inhalation.

When a person is unable to surrender to the ebb and flow of the radix, instead of this unified pulsation we may observe pulsating movements in the extremities that oppose pulsatory movements arising from the core of the body. These are counterpulsations. During exhalation the shoulders pull in, or the fingers curl, sometimes into fists, showing opposition to the expansive impulse. The chin is commonly held in, the jaw tight. The diaphragm contracts, preventing full expiration. The lower back arches on exhalation, retracting the pelvis. Counterpulsation may tighten the muscles on the inside of the thigh. Often the knees move closer with each exhalation, and may clamp together to look like the gesture of a nice young lady protecting her virginity.

The counterpulsations described so far are those in rhythm with the basic pulsation of the body. Counterpulsations can also take a form that is completely unrelated to the basic pulsation. Perhaps I should coin a name other than counterpulsation for these; as yet I haven't. This second type of counterpulsation is usually much faster than the basic rhythm of pulsation. A good example occurs in sexual intercourse or masturbation. When pleasurable excitement increases, some individuals break into extremely rapid pelvic movements that appear unrelated to the

respiratory rhythm. The effect of these rapid movements is to block the slower movements and deeper feelings of surrender in favor a faster, more limited localized feeling. This type of counterpulsation allows a partial discharge – one involving only one or a few body segments -- and prevents a complete one. Sometimes, however, it can intensify and slow down, extending to more and more of the body until it becomes a true pulsation. Another example of the second type of counterpulsation is the "consolation movements" typical of frustrated and unhappy children. In Radix work consolation movements often appear as side to side movements of the legs, out of rhythm with the breathing. Nervous twiddling and strumming is the same kind of counterpulsation.

There is often a symmetrical pattern to feeling blocks. When an individual has a throat block, almost invariably he has a diaphragmatic block. The two blocks form a functional pair, which means that they cooperate to block the same impulse. Until both blocks of a functional pair remain loose simultaneously, the blocking impulse has not been relinquished. Moving further from the center, the jaw and pelvis form another functional pair, similarly the mouth and genital, and the eyes and feet. There are some complications to this symmetry, and much that is not yet understood. Usually a shoulder block occurs with the jaw block, for example, and extends into arms and hands. Almost every "head type," who defends against feeling by intellectualizing, has a throat and diaphragm block, and I have only a theory as to why. (I associate it with inner speech and sound production.) It is one of the most common and yet most difficult blocks, which indicates that an important element is missing from our understanding of it.

In day to day functioning we seldom encounter the limitations imposed by our radix blocks. Our habitual movements are adjusted to compensate for our limited mobility. It is only when we attempt some unfamiliar activity that we encounter and become aware of these limitations. Two of Reich's most original students, Alexander Lowen and John Pierrakos, have developed bodily positions purposely designed to place certain muscles in stress (Lowen, 1975). In these bioenergetic stress positions the subject quickly experiences how rigid or flaccid his spine is or that he cannot release his diaphragm and allow abdominal breathing. His experience is immediate and direct rather than an intellectual insight. These bioenergetic positions are used in the beginning of most Radix sessions, both to deepen the respiration and to put the student in touch with muscular tensions.

It is important to emphasize that not all muscular tension is related to emotional blocking. Normal movements and postural alignment require a constant interplay of muscular tensions. As a result of his occupation or athletic pursuits or habits of life, each person develops certain individual patterns of contraction and relaxation which do not have blocked impulses behind them. There is no clear borderline between these two types of muscular tension. The way to discover whether the tension is blocking emotion is to surrender the tension in a Radix session. In one person the muscle will simply lengthen and become comfortable, in another, the same relaxation will release a flood of tears.

In working with a new student I first let his body give me an indication of how he handles his feelings. His body expresses his emotional history. Usually I'm impressed by two things. The first is the posture, which to me includes both form and movement of the body. The second is the radix system and how it functions. With experience one learns to see the difference between well-developed muscles and tight muscles and between relaxed muscles and flaccid muscles. I note where the person is overcharged, where undercharged, and whether he seems to have a charge appropriate to his structure. Of course, radix charge is not observed per se but inferred. What is observed is tone, tension, vigor, vitality, color, pulsation. Most people perceive these things unconsciously in daily life. When doing this type of work this perception becomes conscious. We learn to "see" the movement of the radix and its blocks. By paying careful attention to the body pulsation we can tell where the flow is impeded.

Once I have some idea of how the student functions and where and how he or she blocks, I try to help the experience of the blocks, beginning with the ocular segment and working down. There is no way to force anyone to relax; that is a contradiction in terms. The student has to learn gradually to experience the body and to trust it. If the breathing will deepen, the radix charge will grow and the characteristic feelings and their blocks will then be accentuated. As the charge develops, the skin color changes, and it is much easier to distinguish areas of overcharge and undercharge. Always the teacher must be aware of the students' anxieties about their body. Some are certain that if they surrender to feelings they'll have a heart attack or pass out or go crazy. It is important then to keep the eyes open and feet grounded in reality in a literal sense. If the radix pulsation deepens and charge increases, small vibrations, color changes, I attend to these vegetative expressions and encourage them to allow impulses into consciousness and to surrender to vegetative processes.

In working with a new student, successive impulses often counteract each other. As soon as anger is felt a student may get frightened and cut it off. The mouth may want to suck, and rather than give in to this the student becomes angry and starts kicking. One has to expect this and allow the confusion to be expressed physically. I first tune into what appears closest to the surface – the first layer of the onion. Over a period of time, by working with the counterpulsation and their physical and characterological expressions, intensifying them when needed, the first blocks work their way through. If I help the student to follow through correctly, counterpulsation will in time give way to pulsation, which will deepen and integrate across segments, and the student will feel it as unconfused pure emotion.

Then the next layer of the onion is ready to be worked on. The general direction of Radix work is, as I have stated, outside-in and top down. Historically this corresponds to more recent blocks back to earlier ones. In particular, eyes, jaw and throat are loosened and kept free as blocks further down the body are dealt with. Yet we are not rigid or programmatic about the sequence of what we do next. The body and feelings are our guide, and not the head. The errors in sequence usually come from the head -- the student's or the teacher's. Someone has read a book, and decided they want to work on their "incest wishes", or tries to force a "rebirthing" or their "primal feelings," or even their "anger." We tell them to let go of thoughts and expectations, release fantasies, get in touch with their body, and breathe. The body will show what feelings are really ready to emerge if they will get their heads out of the way.

The good Radix teacher works with the radix process in the student's body. The teacher is able to tune in to what is going on in the student at the vegetative level, to guide the process of charge, to develop it into readiness for discharge, to provide the right voluntary expressions to focus the charge and to start the transition into discharge. The teacher senses when the process is going well and when intervention is called for to unblock or help the flow. This is the "art" of the intensive. It can be done well or badly. Consider an example:

A student has been charged well by breathing techniques, and begins to transition towards emotional discharge. The teacher observes the expression of the student's face and body, and correctly discerns anger is rising and blocked. "Hit and kick, roll your head and say, 'No, I won't,'' instructs the teacher. The student complies with loud and

vigorous expression, which continues until the student is spent and the student lies quietly.

If this is an accurate description, it is an example of a poorly taught ineffective emotional release experience. Consider a better taught (and better described) case:

A student has been charged well by Radix breathing techniques, and begins to transition towards emotional discharge. The teacher observes the expression of the student's face and body, and correctly discerns that anger is rising and blocked. The teacher notes that the eyes are mobile and expressive but there is blocking evident in mouth, neck, and high chest. The lower jaw pulls in, the tongue back, and the mouth closes slightly on each exhalation. This pattern is registered by the Radix teacher as a lower jaw counterpulsation. The growing tensions in the side of the neck show, with prominence of the sterno-cleido-mastoids. This is registered by the teacher as the student holding back the rising anger and "holding onto his head." The shoulders are stiff, the chest does not empty, and the teacher has a feeling that the lower half of the body is cut off due to a deadness and lack of participation of the legs in the respiratory pulsation.

The teacher begins at the jaw with direct manipulation that signals the student to open the mouth, release the jaw, and let it go forward a little with each exhalation. The teacher's fingers then work into the tense sides of the neck and begin moving the head a little from side to side to help break the neck tensions. The teacher's forearm rests on the student's chest, and applies pressure that tells the student to deepen his exhalation. Then the teacher grasps and shakes the student's shoulders....

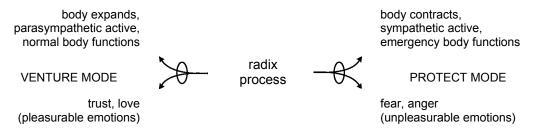
No word has been spoken here, but what has happened if the work has been done correctly is a significant facilitation of the radix flow underlying anger by correct segmental work on the anger block. The eyes were observed to be free, so the counterpulsation in the mouth became the first focus of work. As that work succeeded the teacher progressed to the neck, and while still doing that moved to the chest and then the stiff shoulders. All the while the student's progress towards a spontaneous discharge of anger is noted. Color changes in the skin, breathing sounds, a change in the size of the pupils in the eyes are a few of the signals monitored. If the flow into discharge developed, the teacher might start the student into pounding, kicking, and head rolling movements, but alternatively might allow the student to flow into his own form of expression. The teacher would not hurry the student into words, however. What the teacher is after is a release of the contraction by means of which the student blocks the radix flow, and hence prevents the spontaneous vegetative expression of the feeling that the contraction has held in check -- in this case anger. This kind, of work (as compared to the first) will lead to deeper more spontaneous discharge, and to authentic change which the superficial work cited in the first example may forever short-circuit. Not only simulated discharge, but even real discharge without a release of contraction does not result in freeing the capacity for feeling. Such release does not occur when discharge is forced from the head by words or fantasy.

This is not to say that words should not be used, of course. As long as words are secondary to the radix process which is the focus of the intensive, and they are not used prematurely to produce or force feelings, as long as they do not replace but supplement non-verbal body work, words are a valuable adjunct to the non-verbal technical work of the Radix intensive.

Venture and Protect Modes

As living things evolve, two modes of experiencing the environment come into play. The mode which is active when the environment is favorable I call the *venture* mode. This is the prolife mode. What happens physically is growth, expansion, development, and what is experienced subjectively is positive feeling, pleasure, trust or love. The *protect* mode is the "danger" mode, active when the environment appears unfavorable. The protect mode is associated objectively with injury, contraction, obstruction, or their threat. What is experienced subjectively is pain, fear, or anger -- negative feelings.

The primary feelings of the venture mode each have their antithesis in feelings in the protect mode. What each pair of antithetical feelings has in common is the direction of the radix flow through the body. It can be seen most clearly in the following diagram. I developed the formal language of "Radix Algebra" to represent the radix discharge process with its dual aspects, subjective and objective, and their common root, the radix process.¹



In anger and love the direction is outward, expansive; while in fear and trust, the direction is inward and contractive. In the first case, the emphasis is on the outward stroke of the pulsation, while in the second case, it is on the inward stroke. With the same direction of flow but the different mode, the subjective experience is opposite; that is, the feeling quality is antithetical with the venture versus the protect mode. When the flow is outward and the venture mode is active, the subjective experience is one of love or joy. But if the protect mode is in play, the experience will be of anger. On the other hand, if the flow is inward, towards the center, the experience will be that of trust or receptivity when the venture mode is active, but of fear when in the protect mode.

Earlier than any of these are the feelings of pain (protect mode) and pleasure (venture mode).

Pain and Pleasure

Pain and pleasure are not emotions in the sense that anger and fear are. They are tied to the very existence of the venture versus the protect mode. If the venture mode is operative, the experience will be, broadly speaking, that of pleasure, including trust and love. If the protect mode is active, the experience will be of pain, fear, or rage, or associated unpleasurable emotions. Pain and pleasure lack a cognitive element which is present in emotions which emerged later in the process of evolution. Pain and pleasure are the result of what is going on "in the now," an evaluation of what is being experienced, and the motivation for much of behavior.

¹ Kelley, C.R., 1992, "Radix Algebra," in THE RADIX compilation Vol. 2, pp. 57-82. And 2004, Chapter 8: "The Algebra of Radix Discharge" in *LIFE FORCE:The Creative Process in Man and in Nature*.

Very simple kinds of organisms seem to be capable of pain and pleasure while mirth, grief, happiness, sadness, are more highly developed emotions, forms of pain and pleasure unique to organisms high on the evolutionary scale. However, even "simple" pain and pleasure are feelings and, like other feelings, can be blocked in man.

Pleasure is the perception of the process of growth, of creation, of life. It is the experience of the normal life process in its best sense. Living things enjoy their bodies, enjoy feeling and doing and being alive.

Pain is the experience of damage to the self. This concept allows one to speak of physical pain and psychological pain simultaneously. It is more than an analogy to use "pain" to describe psychological experiences that are damaging to the self, as well as for physical pain damaging to body. It is just a different aspect of the self that is being damaged.

Pain has a survival function, whether it be psychological pain or physical pain. This function is the awareness that one is being damaged. Those who are born with poor or inadequate pain receptors are severely handicapped. Suppose someone put his hand on a hot stove and didn't feel pain, what would happen to the hand? Suppose he is in a relationship or life situation that is psychologically damaging and does not permit himself to be aware of the pain, what happens? – And, unlike the case with physical pain, this frequently does occur. In both cases, the results are the same. Without the experience of pain, the individual stays in the situation that is damaging, and the destruction continues. While psychological pain usually takes place over much longer periods of time than does physical, the principle is the same.

Pain and pleasure can be contrasted in the following ways:

Pain	Pleasure
particular, part	general, whole
contractive	expansive
held (immobilized)	pulsating (moving)

Pleasure is general, it involves all of a person. Pleasure expresses the feeling that all parts are right. Pain is particular and expresses the feeling that some part is wrong. Yet the contraction that goes with pain is general, however localized the damaged area. As pleasure involves a total expansion of the life apparatus, pain involves its contraction. A radix contraction is expressed as tightening physically and psychologically, a tightening that involves all the body but most intensely near the injury. The function of the contraction is to halt the pulsation, isolate the injured area and permit one to do something about the damaging situation.

A radix principle states that, with paired antithetical emotions, the same block that blocks the positive also blocks the negative emotion, such as release of blocked anger opening the capacity for love, and release of blocked fear opening the capacity for trust. Even though pain and pleasure are not, strictly speaking, emotions, but an earlier form of feeling, it is still true that the release of blocked pain opens the capacity for pleasure. It is useful to consider how this is true.

The expression of pleasure in terms of terms of the radix involves an expansive and rhythmic movement of the body. The prerequisite for pleasure is the capacity for pulsation of the life apparatus. This pulsation will only occur when there is freedom from chronic contraction. Contraction holds in not only pain but other feelings, especially fear and anger. Any contraction, regardless of what it is blocking, will diminish the experience of pleasure. All blocks are experienced as unpleasurable, in that they interfere with the total radix pulsation of the body.

They block radix expansion, which means psychologically that they obstruct the total commitment that one can make to something that could be pleasurable.

In man the most important single source of radix contraction is not pain per se, neither physical nor psychological, but the anticipation or expectation of pain. It was a great evolutionary step when man could respond to the threat of damage and pain, but it brought a cost. The highly contracted individual expresses with his whole being the threat of pain, not the experience of pain. This threat is based on a psychological reality that is interesting and significant. The contracted individual is blocking feelings; that is what the contraction is about. The contraction keeps the painful feelings out of awareness. It is not the experience of damage but *the experience of his own blocked pain that forms the threat the contracted individual feels so acutely*. Release of the contraction means flooding his consciousness with pain that had been held in by that contraction.

Good psychologists are aware of the tremendous fear of pleasure in every chronically contracted person. Reich wrote perceptively of the problem of "pleasure-anxiety" in this context. "Pleasure-anxiety" is a difficult paradox. Why should the prospect of pleasure regularly provoke so much anxiety? Every professional who works deeply and sensitively with feelings can testify that it does. Why?

The paradox becomes understood when the identity between radix expansion and pleasure is grasped. To experience pleasure means allowing the life apparatus to expand. But to allow this vegetative expansion means releasing contraction, freeing the blocks to pain, which means bringing on the experience of the pain the blocks have held. Deep pleasure is anxiety provoking to the contracted person because the only route to deep pleasure for such a person is pain. This is not an intellectual point, but an ever-present dilemma to the contracted individual. Every time he begins to open up, to release his contraction, to expand and experience pleasure, his blocked pain and anxiety about pain begins to flood his consciousness. Only when the pain is accepted and experience does the deep pleasure he longs for become available. Until then, the pain forms an insurmountable barrier to such pleasure.

Radix education is very successful in dealing with students blocking pain, but perhaps a failure will be a more instructive example. A psychologist in his thirties came to see me because of a lack of pleasure and of sexual fulfillment in his life. I was perhaps the seventh or eighth professional he had consulted seriously over a period of years. These included counselors, a Rolfer, a bioenergetic therapist and others. He was nearsighted, his chest compressed, underdeveloped and boyish looking, his attitude fearful. Most striking was the expression of pain around his mouth and eyes. Much of the time his lips pulled back from his teeth as if he were about to utter a cry. His back was stiff, his entire body contracted, with special rigidities in his throat, upper chest, diaphragm, lower back and buttocks. I experienced him as a bundle of frozen pain.

He seemed powerfully motivated to change, and we worked hard for more than a year to soften his blocks systematically, starting at the top. There were many local successes. The eyes became freer, the throat began opening, and his high chest gained mobility. He then gained much greater contact with the lower half of his body and sexual sensations increased in intensity. There was a marked growth in pubic hair at this time, showing that deep-seated changes were indeed occurring.

However, every expansive change was quickly followed by contraction. He complained about the painful feelings that seemed to him to be the focus of our work together. He wanted

"good feelings," he'd known enough pain, he said. When I kept insisting he must accept and work into and through his pain before truly good feelings could be reached, he became increasingly resistant. Finally he left to try another, hopefully less painful way out of his dilemma.

I believe there was no other way out. When one's whole body is in contraction against agonizing repressed pain, the only route to genuine pleasure is through agony. Genuine pleasure can only occur with expansion, and expansion must open the very pain the contraction is there to hold against.

Interestingly, although this student was in more or less constant dread of pain, he did not seem to suffer deeply in his actual sessions. His crying seldom broke through his diaphragm to come from his belly. If he could ever have allowed his repeated fearful, frustrated high chest crying to develop into deep tragic racking sobs from his belly, if he could have moved from the *anticipation* of his pain to the full *experience* of it, his contraction would have broken, and he would have found the route to the pleasure he so desperately wanted but made unavailable to himself.

The Expression of Pain and Pleasure

What happens when a person is hurt, regardless of where the hurt is? The body contracts, slowing the natural radix pulsation that underlies life. The body itself shrinks longitudinally, the spine bends over. The eyes squint down, the mouth opens, the head moves forward, the back of the neck tightens. The sympathetic division of the autonomic nervous system is activated. When the mouth opens, it appears to contradict the general shrinking of the rest of the face and body, but I believe that this evolved because we need oxygen in an emergency, and that sound has survival value when pain is experienced. Most lower animals cry in pain.

The function of the radix pain contraction is twofold. It limits the damage at the time of injury and it limits awareness of damage while the emergency is going on. The damage is likely to be too much to be experienced deeply while we are dealing with the damaging situation itself.

Be aware that the experience of pain often *follows* the trauma, it isn't necessarily experienced simultaneously with the trauma. The sequence is frequently injury, a quick surge of pain bringing awareness of injury in progress, a contraction limiting radix pulsation and hence the experience of pain, an action to get out of the situation, then release of contraction, the restoration of the pulsatory activity and, with it, the pain that was held back. This is true of psychological as well as physical pain. When somebody says something that hurts a great deal, at the time the individual may contract and only vaguely or partially become aware of being hurt. It is after the initial shock of injury and contraction, when he starts to restore normal expansive life activity, that he becomes aware of how much he has been hurt. An important principle to note here is that expansion restores the awareness that was made unavailable by the contraction.

This brings us to the question of why, when one is in pain, the natural tendency is to cry. The way I understand it is this. When one experiences a loss, an injury, when something happens in life which is experienced as hurtful, the body's radix shrinks inward. The result of going into this contraction is the activation of the protect mode of functioning, the marshaling of forces for danger, including an increase in the radix charge within the body. This increased charge needs to be discharged once an emergency is past. Yet when in contraction one is not feeling happy, not feeling like any pleasurable discharge, and it isn't the time for sex or mirth. The discharge that nature has developed for this situation is sobbing. After crying one feels much better because of having discharged the excess radix charge that was accumulated. It is analogous to orgasm, and

to the other forms of discharge, such as anger. It "turns around" the inward direction of sadness, or hurt, and can become an outpouring of grief. The function of sobbing then is to discharge the excess charge and restore the radix pulsation so that the normal venture mode of functioning can be resumed. Discharge through crying not only gets rid of the excess charge, it "mends" the contraction. We feel better after crying because the contraction is broken, the radix accumulation discharged, and radix pulsation restored.

What about the expression of pleasure, then? In pleasure the body expands, and it tends to lengthen. The radix, the life force, flows out of the person and towards the world. When pleasure is strong, there is an experience of pulsation and often of body streamings, which I believe may be the direct experience of the radix flow through the plasma. When one gives himself over to the pleasure of these streamings, one is experiencing: the life force directly.

The Blocking of Pain

The person who can't get out of a painful situation needs to do something with the pain. The need is to block it out of awareness, because to keep aware of it and yet be unable to do anything about it results in paralysis. One can't function effectively in constant awareness of pain: Radix contraction cuts down the awareness of pain and tends to prevent crying, which points to the major way pain is blocked. Pain is blocked by not pulsating, not convulsing, not crying. If this continues over a period of time, the contractions involved will become a permanent feature of life and the pain will be more or less permanently repressed. The contraction is most severe in the parts of the body most active in the expression of pain. Thus the main areas involved are those involved in the expression of crying. It is the convulsive discharge of sobbing that is blocked to keep the pain from awareness. The upper part of the body, the eyes, nose, throat, upper chest, are always involved in sobbing. Only sometimes, with deeper levels of pain, does sobbing extend strongly into the belly. The expression of the mouth in crying is wide and gets rectangular. This squareness is not just the lips but extends backwards into the mouth, the nasal pharynx, the throat. The eyes are doing the same thing, they are crinkling and pulling wide. There is a powerful radix flow into and through the eyes with crying, and people tend to close their eyes tight as if they must clinch them to hold them in their sockets. This outpouring of the radix through the eyes brings about the discharge of the tear glands. Crying sounds are produced by the larynx in combination with the breathing apparatus, Sound comes up and goes through both the mouth and the nose. The nasal path of the sound is important, and often blocked.

When people are blocking crying, frequently their lips pull in to hold against the mouth widening. The lower lips may come up and forward, as in a pout, or pull up and back in over the lower teeth in more repressed crying. The floor of the mouth shows a prominence under the chin that is connected with "swallowing" sobs. The chin may quiver. The platysma and other muscles connecting into tendons and cartilage down the neck and into the "V" atop the sternum frequently contract. The holding deep inside the throat and up into the back of the nose is central whenever people block tears. The voice is often somewhat nasal. Hay fever and sinus problems often occur. In my experience, the high chest is always immobilized in blocking pain.

People blocking crying do all kinds of funny things with their breathing. The diaphragm and high chest are involved. When a person is relatively free in his breathing apparatus and in contact with a hurt, the crying is deep, it comes from the abdomen, which means the diaphragm swings. These deep sobs are also soft. Blocked crying is hard and comes from the chest. If it becomes intense without softening it becomes harsh and racking. The natural thing for crying that does not soften and extend into the belly is to change into angry crying.

The quality of the crying sounds gives the clue as to whether it is pure pain, or a mixture of pain and fear, or a mixture of pain and anger that is being expressed. The mixture is much more common than the pure thing. It isn't at all uncommon to have all three feelings mixed in and to go from one to another. Just as the Radix teacher thinks he has helped to get a student into infantile rage, the student backs off into fearful crying, for example. This will block the completeness of the discharge. The radix contraction underlying fear chokes off the outward flow. The crying expresses the pain from the frustrated angry impulse -- and from a lifetime of such frustration.

The speaking voice in blocked pain is something to listen for carefully. In blocking pulsation, one blocks the modulation, the variation in pitch and intensity, the animation of the voice. The voice becomes a monotone and slows down. It may or may not quaver. The slow monotone voice signals blocked pain. A certain nasal resonance is often present.

Secondary hurts play an important role in the blocking of pain. Remember, sobbing is blocked because it is expansive and will bring the organism into pulsation, breaking the contraction. Full sobbing brings on the deep experience of the repressed pain underlying the contraction. In order to hold onto this contraction, which frequently holds back so much agony, it is necessary to maintain some awareness of danger or of hurt, even as (or especially as) the original pain situation is repressed. Other less threatening sources of pain are then needed to sustain the contraction. The person blocking pain therefore develops an investment in finding secondary sources of pain, ways of being hurt or threatened with hurt. Thus pain blockers are forever finding ways to get their feelings hurt. They become over-sensitive and thin-skinned. One might think these would be the people who would be hardest to hurt because they are so defended against it. They have so much holding, so much contraction, so much armor to protect them, it seems as if they should be as thick-skinned as a rhinoceros, yet they are exactly the reverse; they often are so over-sensitive they seem to have no skin at all.

Those blocking deep pain need small incidents of hurt or rejection, secondary sources of pain. These they hold onto and cultivate and may remember for years. In this way they reinforce unconsciously the primary pain contraction, and rationalize the conviction expressed by the contraction that it is unsafe to open, to expand, i.e., to release the contraction. The secondary pain they unconsciously search for and cultivate serves to justify their basic way of reacting. Hurt is often held onto, nurtured, saved, dwelled on by the pain blocker, and sometimes sought after, created, or invented.

In this is imbedded a general principle of extraordinary significance. The person blocking *any* basic feeling unconsciously searches for secondary sources of reinforcement for the particular feeling block. A serious mistake in helping them work free of such blocks is to hook into the secondary fantasy trips, treating a defensive activity as if it were the problem, and thus keeping the real problem inaccessible. It is not always easy to distinguish what is the primary blocked feeling. I know of no safe guide but knowledge of the body and a carefully developed sense of vegetative processes, the involuntary, natural ways of expressing feelings.

Remember, too, that the source of anxiety with respect to pleasure is not pleasure itself, but the pain that threatens before the pleasure can be reached. Expansion means the pain contained in the contraction releases. Every big expansion threatens the person holding pain. Every time someone loves him and he is drawn outward by reciprocating that love, his contraction softens and threatens to give. He has to prevent that if he is trying to block the pain that his contraction holds. To surrender to love requires him first to surrender to pain.

Radix contraction means simultaneous contraction of the body and of awareness. Awareness is contracted selectively, just as the body is contracted selectively to isolate that part of the self that is in pain. Psychologically this means we become unaware of certain feelings, needs or behaviors. We make ourselves unaware of anything that reminds us of an area of blocked pain or that leads our awareness into that area. It is just like a contraction around our arm when our arm has been injured. It keeps the blood from flowing out of the injury and keeps the life from oozing through this damaged area. With a contraction of awareness we take the injured part of the self and, in Branden's terms, disown it and the needs and feelings associated with it. This is part of the process of blocking pain.

The chronic radix contraction in blocked pain is closely related to a self-concept problem. Pain is the experience of damage to the self, and self-concept problems commonly express the view that the self is damaged or otherwise inadequate, which may be expressed in such feelings as "I am unattractive," "I am unworthy," "I am vulnerable," or "I cannot get my needs satisfied." When the pain block is loosened significantly in Radix bodywork, usually by opening up and deepening blocked crying, there is first a vegetative expansion as the pain contraction is relinquished. Awareness, including self awareness, grows with this expansion. If the increased self-awareness involves an intensified experience of the self as damaged, contraction will set in quickly. The strong vegetative expansion resulting from a deep and powerful Radix Intensive with blocked pain can revert to contraction in a few hours from this cause. This quick reversal of the expansive effect of the Radix Intensive is often found with blocked pain, but only rarely with blocked anger or fear. It signals that the problem is not only of blocked pain but also of blocked painful self-awareness. The negative self-feeling as well as the blocked pain per se must be opened, experienced, and dealt with for Radix education to proceed.

Techniques for Releasing Blocked Pain

Freeing blocks to pain and grief is primarily a process of freeing blocking to crying. Many people come to us and say that they don't have any trouble crying, they cry all the time in fact. What they want to learn is how to stop crying. Blocked crying can go on for hours. However, if a person really cries, it is never going to go on for more than twenty minutes, usually much less, because the radix charge is spent. You can't sustain real crying any more than you can sustain a real orgasm.

Eyes. Looking down with the eyes on the exhalation can help get the flow into the eyes and nose, once the feeling starts happening; then have them close the eyes on the exhalation, but with the mouth open. Sometimes it will help to do something with the nose, e.g., wrinkle each breath. There is often a nasal deadness that comes from holding back tears. This deadness comes from immobility.

<u>Nasal sound work.</u> Those blocking pain frequently hold in the nasal passages, soft palate, sinuses and below and behind the eyes. We have students make squeaking sounds on the inhalation, and strongly vibrating nasal sounds on exhalation to charge and "work" this area. Properly used, this can evoke blocked crying and the repressed pain associated with it. Respiration must develop cyclically, and the balance between exercise and vegetative surrender watched. Nasal sound work can be very powerful. It must not be done mechanically if it is to be effective.

Other sound production. Sound is very important in working with people with blocks to crying. People cry silently so many times, and the sounds get swallowed, put away, held down. Sometimes pressures in the mouth have the function of keeping the sounds down. Many men who have very deeply suppressed crying will offer pathetic convulsive little grunts that don't seem related to sobbing. Even when you have worked with them effectively, their high chest is mobilized and their breathing moving well, they will be on the verge of crying but, rather than sobbing sounds, strange grunts seem to come from the middle of the chest. Whenever this happens suspect blocked sobs and give them a lot of time. Work them softly and ask them to allow those feelings. I've seen these grunts in about ten minutes develop into deep sobs.

We've tried different kinds of sounds to encourage crying with varying success. Sometimes it has been successful to have little high sounds, up in the nose, like a puppy crying. It doesn't always work, primarily because people recognize that it is associated with crying, and they try to cry. If they try, the pushing gets in the way of letting natural crying occur. "Trying" to produce a spontaneous discharge is worse than useless; it gets in the way. What they must do is allow, experiment with sound or movement but without "trying." Sometimes just having people make a nasal sound and wiggling their nose with your fingers will be effective. You need to get a radix flow up the throat, into the back of the nose and to the eyes.

<u>Floor of the mouth.</u> The direction of work in crying is always from the heart out the mouth, nose and eyes. The block is holding the radix back from flowing in that direction, since it is the natural direction in tearing. So you work with this natural direction on the exhalation. With some people you will want to work from behind their jaw because the holding in the jaw can be important in holding their crying back. With those who aren't holding in the jaw, work with the floor of the mouth. People swallow their sobs.

<u>Throat.</u> The inside of the throat has a variety of activities in the blocking of pain. You can hear the constrictions by listening to the qualities of the sound. Have them open and mobilize throat passages and pharynx. Work externally with the platysma and the tendons that go down into the V atop the sternum, especially at the base of this V.

<u>High chest.</u> The sequence I use on someone blocking pain is to work on the chest mobility first because that is necessary to get the breathing going. Sometimes I use a long period on the Lowen stool. The high chest will also tell you whether the person is blocking mainly fear or anger with their pain. In fear the block will take place when the chest is down while in anger it will take place when the chest is up. In either case, the chest will be immobile if pain is an important factor. The chest must lift and drop with each breath, especially when the vegetative process is under way.

<u>Breathing.</u> In people who are blocking crying, there can be the most extraordinary efforts to block breathing, almost always completely unconsciously. Students may close their mouth on the exhalation so the air can barely get out. You persuade the mouth to finally open, and then they push the tongue up and against the back of the mouth and stop their exhalation that way. Then you get them to stick out their tongue or let it drop to the bottom of their mouth, and the chest stops moving. Whatever you do they are going to fight the exhalation until they are able to decide on an emotional level to allow that feeling to emerge.

<u>Diaphragm.</u> The diaphragm, like the throat, is important in sobbing. Chest crying, in my experience, carries an admixture of anger or fear. You need to soften into the abdomen to reach the deep pure expression of pain. To encourage crying from the belly it is important to get the person to loosen the diaphragm, soften the abdominal muscles, and allow the feeling to go "all

the way down" and convulse the whole body. Belly breathing, and pressing up under the ribs with the exhalation can help loosen the diaphragm to allow sobs to develop.

Simple words. In dealing with blocked pain, I have found the most effective method to be a combination of direct mobilization and word techniques. The well-chosen word or phrase is often the key to opening pain. Begin with just the feeling, saying, "I hurt," or "it hurts." People deny their pain. "Please" is often effective while they look at you or someone else in the group, as it is related to "I have a need that is not fulfilled," which can be a major source of pain. "Please" is the hardest word in the world for some people to say. These people are often blocking pain.

"I want" can go in many directions, one of which is to stimulate tears. Longing will frequently go into pain because there is the longing and then there is the pain connected with the longing not being fulfilled.

Branden sentences. Branden sentences allow you quickly and effectively to explore if there is hurt, its origins, what it is that hurts now, and what the hurt means to the person. You would start with an introductory sentence such as "I'm a person who….," "Something you don't know about me is….," "Right now I feel…." The Branden sentences I like once a flow is established are: "If my pain could speak it might say…." or "If my unshed tears could speak, they might say…." "The thing I feel in my heart right now might say…." Always use "might say" or "if," as this allows the person the freedom to explore. If they say that the don't have any pain you can have them say, "If I had pain, my pain might say…." Frequently people will come in with every symptom of blocked pain but without any conscious acknowledgement of it.

<u>Gestalt.</u> Speaking to a person who hurt them in the present tense, as if he or she were beside them, is frequently of value in getting pain to release. This is used when you have discovered they are feeling hurt about a particular situation or person. Have them talk, saying their feeling, to that person. Then have them switch roles, become the other person, and reply. Sometimes in working with pain, having them talk to themselves or an aspect of themselves helps them to become aware of an injury, while speaking for a body part that is tied to the pain or to the pain block can work effectively. "Speak for your hurt," or your tears, or your quivering chin, etc.

Empathy. With crying, the empathy that you show is important. Any kind of fabricated feeling or sugar-coated words will turn most people off. You must allow yourself to experience what they are feeling empathically and show it by your contact, your awareness, your attention. Avoid the tendency to console them. At the same time, you want them to know that you're listening. Often a touch with your hand at the right moment will show them that you are there. Whatever you do must be natural to you. There is no substitute for authenticity.

If you have much pain of your own, it is both an advantage and a handicap. It is an advantage in that they can tell you have "been there," and will feel a kinship of pain with you. But if their pain hooks in too much to yours, you will lose your objectivity and overreact to their hurting. The ideal response to the person in pain is sympathetic but strong and objective, not highly distressed.

Fear and Trust

The radix pulses inward and outward between the periphery and the core of the body. Receptivity and fear arise with the inward movement of the radix. Which one occurs depends upon the primitive evaluation of the situation at a given time. Is it experienced as benevolent and life enhancing or as threatening? The former triggers the venture mode of functioning, the latter the protect. This evaluation is made continuously, *vegetatively*, on the basis of both instinct (biological experience) and individual past experience. This level of evaluation is not a conscious cognitive process then, but an unconscious autonomic one. Sometimes the evaluation is quite inappropriate because the experience upon which it is based is not relevant to the present situation, or this situation is not correctly perceived. An incorrect evaluation can be overridden but not abolished by the intellect.

Receptivity involves an openness to experience. When this openness is toward another person we speak of trust. Both feelings express an inward direction, letting someone or some stimulation into ourselves, receiving. Receptivity and trust are underestimated in importance. They are really the inward stroke of love. Love is not just the going out to the beloved; it is also, and just as much, allowing the beloved into us.

Fear is an inward radix movement in a threatening situation. It can readily be visualized if we think of a nation under peaceful circumstances. The borders are open. Commerce flows back and forth between the heart of the country and the bordering nations. A more powerful neighboring state then becomes warlike and moves tanks to the borders. The population must fight or flee inward, abandoning the borderlands. If the threat is experienced as overwhelming the tendency is to pull in, abandoning the periphery in favor of a defense of the vital center.

In fear the process is analogous. The organism contracts its life force inward to ready itself for an effort that will bring an end to the emergency. Fear is a particular response to external stress. Fear itself imposes considerable stress on the body. Ordinarily this stress is not important because in the natural world fear does not last long. But when the threat is chronic and inescapable then the stress caused by fear becomes significant. The stress itself becomes a threat to life and the body moves to block the fear experience to reduce the stress. By contracting tissues and muscles the inward movement of the radix is reduced or halted. This response is far from ideal, but without it the individual could not survive. For the child in a hostile or irrational environment, blocking fear makes it possible for him to get through his days and nights.

The Expression of Fear

The physiology of immediate fear involves a general movement of the radix from the periphery to the visceral core. Heart and respiration rate increase. Usually one is conscious of the heart pounding. The scalp tends to pull back. The eyebrows raise and the eyes are opened wide. The pupils are dilated in the bulging eyeballs. The skin becomes pale and cold. Beads of cold perspiration form, especially on the forehead, hands and feet. In extreme fear, the nostrils are widely dilated and the mouth and throat open wide. The platysma, the muscle and tendons which spread over the sides of the neck extending downwards to below the collar bone and upwards to the lower part of the cheeks, contract, producing longitudinal ridges on the sides of the neck as well as depressing the jaw and lower lip. The back of the neck and upper trapezius contract, lifting the shoulders up and forward, rotating the head back as the back part of the neck is pulled down: toward the trunk.

The upper chest rises and there is a gasping in of air with a convulsive motion of the lips and a gulping and catching of the throat. All the muscles of the body may become rigid or go into convulsive movements. The shoulders are pulled up and back. The arms may be pressed close to the body, thrown wildly about or held out stiffly as if to avert some dreadful danger. The voice becomes breathy and indistinct and often there is trembling of all the superficial muscles of the body, usually starting with the lips. The radix charge is pulled in from the feet, which become cold. The back arches, the abdomen hardens, the buttocks and anal region tighten. In extreme fear the inward contraction into the viscera may be so pronounced that the sphincters are forced open to void the contents of the bladder and colon. In both sexes the genitals contract; in a man the testicles are pulled up, and in a woman the vagina contracts.

Fear is discharged in screaming, flight, or with desperate struggle (the cornered animal). In screaming the prolonged inhalation changes to extended expiration with short, rapid, almost spasmodic inspirations. After the discharge of fear the body relaxes, often in soft crying. Failing to reduce the experience of threat, however, may lead the victim to become paralyzed or even die of fright.

The extremes of fear are unusual. The usual course is that an animal recognizes a danger -- for example, a predator -- feels fearful and discharges the fear in flight. The evolutionary advantage of fear is in this ability to act in anticipation of danger and pain. The rabbit who is not afraid of foxes and dogs has a seriously reduced chance of survival.

The Blocking of Fear

The necessity of blocking fear occurs rarely among wild animals. With humans the necessity arises mostly in childhood. There is probably no other animal that so terrifies its young. The infant or child who lives with chronic fear is unable to escape and unable to change the external environment. His fear only adds to his stress, to the point where he cannot endure it. Since he cannot alter the external environment he must block the effect by altering the internal environment. The direction of the radix flow is inwards, and he learns to stop the in-rush before it can pool in his viscera. He reduces his inward pulsation and with it the in-stroke of his respiration, so that less charge is acquired. He has not discharged the fear, but merely arrested it in mid-course. And as a result of this blocking he lives less fully, feels less deeply.

In any blocked emotion there are two opposing impulses. In blocked fear the first impulse is the original fear itself caused, let's say, by the father's angry face and irrational behavior towards him. To a helpless child this feeling is overwhelming, and he is likely to block it; thus the fear block is born. He needs the block to survive, to get through the days of his young life. He needs to shut out the terrifying environment which he is powerless to change. But then his blocked feeling, the fear experience itself, becomes a separate threat. What if the block relaxes and the fear breaks loose? The fear block, like all blocked feelings, involves that which is blocked and that which is doing the blocking. Call these impulses 1) the original fear, and 2) the fear of experiencing the original fear.

The original fear is seldom experienced except during emotional release. What is experienced, instead, is the fear of releasing the block. The original fear is disowned, but the block requires daily maintenance. People who are blocking fear develop ways of frightening themselves to sustain the block. Frightening fantasies and nightmares serve the useful but regressive purpose of strengthening the block and keeping the deep fear impulse immobilized. The function is exactly that of the secondary pain block discussed earlier, and the rejection fantasies of the person blocking rage, which we'll get to in the next section. The feeling block is reinforced by these means.

For this reason, I do not try and only rarely encourage fear blockers to produce scary memories or fantasies. Such methods may result in a form of discharge, but their long-term effect will be to intensify the block. This is, I believe, exactly what is done by the wrong use of fantasy in certain feeling work. The person who is blocking fear does not need more frightening stimuli. He does need to soften his fear contraction to allow the full radix flow to develop. We show him how to surrender to it, experience it and discharge it, without head trips or fantasy.

The body of someone blocking fear shows many of the signs of fear for blocked fear is held in the body and never dissipates. The body tends to be soft, with little radix charge at the periphery, so the skin is undercharged and pale. The muscles may be weak and underdeveloped. The major blocks are in the eyes and scalp, the back of the neck including the shoulders, the throat where the scream is locked, the high chest, diaphragm, abdomen, and genitals. The stomach is also involved in that it is in the viscera that energy pools and in the pit of the stomach where the fear may be experienced.

More than with any other emotion, the eyes are central in the blocking of fear. They are generally wide open and large-looking, often with chronically expanded pupils. They are relatively free of local armoring, but lack sparkle and brightness, often expressing a deadness. There is a pulling back in the eyes of both energy and awareness, the simultaneous result of the radix contraction. The forehead is smooth and the eyebrows raised, pulled back by a tense scalp, which gives the impression of immobilization, as if the eyes are frozen open. The jaw is tightly clenched to keep the throat from opening, and the tensions go from the lower jaw to the back of the neck, surrounding the base of the skull. There are deep throat tensions starting in the jaw and going down into the voice box and often up into the nasal passages. Sound is inhibited to hold back the scream, the result being that the voice quality tends to be breathy, lacking in deep resonance and often "swallowed." The voice is pitched higher than its natural register, and may vary in pitch, "wobbling" or "squeaking."

In fear, the contraction in the head is longitudinal, the tension running from the back of the neck up over the scalp along the central meridian, resulting in the tight scalp and tension at the crown of the head. The tension at the base of the skull and the back of the neck correlates with the deadening of the eyes, cutting off the visual experience that is associated with fear. When you mobilize the eyes and upper segment of the body you revive that experience and, at that point, the fearful person, needing some other way to cut off the experience, will often tightly close the eyes and find it impossible to open them when so requested.

In the fear contraction, it is chronic tension in the back of the neck and shoulders that is most readily detected. The shortening of the flexors at the back of the neck results in the head being pulled backwards and the jaw rotated forward and up. The shoulders are held up and forward by tense upper trapezius muscles as well. The high chest is depressed and doesn't want to rise. The fear type is blocking against the in-stroke of the pulsation, and the rising of the chest would permit a movement into the center which would result in the experience of the fear. There is also tension in the diaphragm and, as was noted, the back contracts and arches, the abdomen hardens, the genitals and buttocks tense. Knees are often locked with feet pointing outward, showing the weakness of legs and feet, and lack of a feeling of support, a lack of "grounding," in Alexander Lowen's terms.

The person blocking fear is usually low in vitality. He tends to be "hypo," in contrast to the anger type who is "hyper." The metabolism and blood pressure tend to be low, the level of activity less than normal. There is a tendency toward immobility and passivity, and a sedentary life style.

Not all these signs and symptoms are clearly evident in all persons blocking fear, as compensation is common. Some may, for example, have developed a muscular body by a

dedicated program of weight lifting or karate. And some, instead of retreating into passivity, push themselves into frenetic and sometimes even dangerous activities.

Character Structures

Fearful adults are not in constant conflict with a world that insists they disguise their fear. In childhood a parent might insist that the fearful child "get a hold of himself" and force him into aggressive activities, but as an adult he threatens no one. His direction is inward, toward withdrawal. Other people will seldom confront him. If they do, he retreats further. For these reasons the blocked fear character structure is generally easier to recognize than blocked anger. There is less social pressure to adopt compensations and masks.

There are at least five character structures or characterological tendencies rooted in blocked fear. They include:

- myope (blocking fear in the eyes)
- oral character
- schizoid
- schizophrenic
- mystic

We are learning to understand the differences among these types and how their fear blocks develop. For now, I will elaborate on two of these five manifestations of blocked fear.

Myope. In my vision work I differentiate between the myopic (near-sighted) and hyperopic (farsighted) character structures, these differences reflecting blocked fear and blocked anger, respectively. (I'll describe the hyperope under <u>Anger Character Structures.)</u> Unlike the hyperope, who is outward and directed towards other people, the myope is introverted and self-oriented. He is usually shy, withdrawn and "good" in school. However, the myope tends to be stubborn and obstinate. He tends to be less comfortable with other people than a hyperope, and often relaxes into daydreams and sub-vocal thought. The myope is comfortable with his eyes closed, and enjoys sitting still with his eyes closed, since for him the significant environment is "in here." The eye block in the myope blocks his distance perception, but he often retains a healthy self-perception.²

Oral. I find Lowen's description of the "oral character" very useful,³ but in using this term I do not accept psychoanalytic characterology. I do not believe that the "oral" suffers a "fixation at the oral stage of his psycho-sexual development." Instead I think the dynamic is blocked fear.

² Kelley, Charles R. New Techniques of Vision Improvement. In *Energy and Character*, September 1971 and January 1972, and in IN THE WAKE OF REICH, David Boadella (Ed.) London, England: Coventure Ltd., 1976.

³ Lowen, Alexander. 1958. THE PHYSICAL DYNAMICS OF CHARACTER STRUCTURE. New York: Grune and Stratton. Reissued as THE LANGUAGE OF THE BODY.

The "oral" character tends to be open, soft, receptive and vulnerable. Usually he is intelligent and verbal and, as Lowen points out, often capable of the open, simple perceptiveness of a child. There is a lack of energy, a lack of capability for sustained aggression or work. He tends to be passive and sedentary, though there may be overcompensation. He has a capacity for suffering and emotional pain, which he needs because he lacks the aggression to protect himself. His anger takes the form of resentment, stubborn hostility, resistance in the absence of aggression. Frequently he feels abused by the world. He is un-giving since he lacks development of an outward, aggressive direction, but can be very receptive.

In an emotional relationship the oral character has much need to receive emotionally, but a limited capacity to go out. He needs far more than he can give, and consequently is always "in debt" to his environment. He thus needs to rationalize away the unpleasant perception that he needs to take more than he can give and keeps books on his transactions with others. In Transactional Analysis it is called "saving stamps." Old injuries, slights, disappointments and resentments are accumulated and filed. Now the world is in his debt and owes him compensation for his suffering. Each time that someone gives to him it is not a gift, but merely partial payment of what is owed. Since these "books" go un-audited, the bookkeeping is as crooked as it needs to be to keep the world in his debt. In my experience this rather odd and elaborate defense is quite usual to the "oral" character. I term it "oral bookkeeping."

Principles and Techniques for Releasing Blocked Fear

The primary objective in dealing with blocked fear is to release the fear. Sometimes the path is circuitous, but that does not change the goal. I do not believe in trying to force the student to experience fear before he is ready. He was frightened as a child and he is frightened still, but he has resources now that he did not have as a child. He has to freely arrive at the decision that he is willing to face his own terror. This decision has to come from him, not you, and from his body, not just his head. When he has reached this point he has gained something that no one can give him – courage. True courage is, after all, the willingness to face fear.

One trap that must be avoided to work effectively with people blocking fear is their needfulness. Their eyes are usually wide open, soft, and appeal to the teacher "please help me." The teacher may feel parental and supportive. When students act like fearful children, the worst thing you can do is reinforce them in that role by becoming parental. A matter-of-fact attitude, one adult to another, is essential. You should not accept their fearful role, not accept their "child" ego state, and not become parental with them. The fearful child role serves two purposes. It elicits help from adults without asking for it in a direct, adult manner, and it maintains the fear block. Children are much more easily frightened than adults. They have far less understanding and control over their environment. Nightmares, threats, angry faces can terrify a child to a degree that is almost incomprehensible to an adult. When the student adopts the role of a helpless child he feels himself overwhelmed by the environment. There is then unlimited opportunity in the scary adult world to intensify his fear block. He needs to develop an adult ego state (in Eric Berne's terms) to confront his genuine fears.

The teacher works carefully to increase the student's pulsation, gradually emphasizing the inhalation as he builds his breathing. As he inhales, he opens his eyes, mouth and throat, and lifts his chest. He will develop a charge quickly. Watch the breathing because the charge will make him anxious and he will tend to depress the breathing. He will probably want to close his eyes as he inhales. You have him open his eyes and raise his eyebrows until the process is further along. At a certain point when he begins to mobilize the fear you may say, "All right, do that

with your eyes, give in to the feeling that you are expressing in your eyes." When the eye pulsation is satisfactory, loosen the jaw. Usually it is held tight to close the throat. In fear the jaw clenches more tightly than with any other feeling, though tense jaws occur with blocked angerpain also. Ease the jaw down gently so that he becomes aware he is holding it. Have him open his throat as he breathes in.

To help free the scalp, pull the hair on top of the head gently on inhalation, release on exhalation. Place your hand on the back of the neck and work to release that contraction when fear arises. It is the most typical and powerful part of the fear block. With some people you may need to keep your hand there throughout, fighting the neck contraction continuously. They must soften that contraction to experience the fear fully. Encourage the sound of "oh" which helps to unblock deep in the throat. You want the student to maintain the same throat position on both inhalation and exhalation. As the fear deepens he will scream. The sound will rise up from the belly into the chest and throat up into the nasal cavities, and will be experienced to the top of the head and in the eyes. The fear should be expressed through the eyes. Have him look directly at you and encourage the scream. If the fear is real, the pupils will enlarge. Sustain the breathing pulsation. Don't let them freeze or lock.

Looking at you will often bring up the memory of a parent's angry face. (Don't push fantasy here though.) Sometimes pressing along the sides of the nose where there is a hollow in the cheekbone is helpful. As the screams come up, the throat widens laterally and the sound changes from "Oh" to "E-e-e-e." Hand passes on throat and eyes may help move the radix up, or direct work on the chin or back of the neck may keep these important blocks from choking off the discharge.

Sometimes the pulsation is well established and moving freely and the student is on the verge of discharging, but he is not able to because he is blocking in the scalp. If you grab the hair on the top of his head and shake vigorously, he may be propelled into terror and convulsive discharge. This hair pull is done quickly and vigorously. It is only useful if all the other elements are together. The fear released should far outweigh the pain caused.

When the upper part of the body is freed of terror, you can begin to mobilize fear blocks in the lower part. Watch for contractions and counterpulsations. Does the upper chest lift fully on inhalation? Does the diaphragm swing? Is the stomach hard? Is the pelvis retracted? Are the buttocks contracted? Do the legs pull together on exhalation? These are dealt with in turn, making sure the upper segments, especially eyes and throat, stay free.

During the expression of fear watch the pupils of the eyes. They will dilate as the student gives in to fear. This autonomic process is a sign that the student is moving toward the vegetative involuntary phase of the discharge. Some students have chronically dilated pupils expressing blocked fear. After freeing a fear block it is gratifying to see the pupils become normal in size and I have seen this again and again.

Some students will allow the fear to develop and discharge it without experiencing it. The entire discharge process occurs, including screams and vegetative convulsion, but the student has blocked it out of his awareness. I call this a "direct motor discharge" (discussed earlier under <u>Pulsation, Charge, Discharge</u>). In itself, it usually represents progress when such a discharge occurs, but contact with the feeling experienced must be developed. The mental block that prevents him from experiencing the discharge will release as he develops more confidence in the process and in himself, and allows himself to open up to what his body is expressing. Identifying

the feeling at the right point can bring the connection home dramatically. Say "I'm scared," the student is told, and the discharge intensifies with the words.

Ordinarily the person blocking fear is quite comfortable with himself and has an adult perception of his own strengths and weaknesses, but when his fear rises it is as if he has fled from the world to hide inside himself; leaving his body in between as an inert buffer -- a no man's land. His impulse to move back into the world, to inhabit his body, is weak. Strengthening this outward movement, developing his aggressiveness, is often an important secondary goal in unblocking fear. The student needs to establish a greater capacity for outward movement, aggression. These exercises can be helpful in bringing this about:

PHYSICAL ACTIVITY	Any activity that involves moving the body. Gym Programs. Dance. Swimming. Running. Competitive sport if they can handle it.
ANGER DRILLS	The most effective is towel pounding because it produces a flow of energy through the eyes. "Tantrum" is less effective with the eyes, but is a useful drill to get the body moving.
BUILDING UP CHARGE	Learning to tolerate more charge through breathing exercises.
EYE CONTACT DRILLS	Emphasize looking outward at other people and keeping aware of what he sees.
OPPOSITIONS	Used in groups – the group forms pairs. One says "Yes," the other, "No," or "You will," "I won't," etc. These drills are light, not too threatening and establish an outward movement of energy.

Many of these drills the fearful person will perform without much conviction. He may feel as if he is faking the aggression. Encourage him to perform it regardless, "Do it as an exercise; don't fake feelings, but let them happen if they will." He will become more comfortable with it as time goes on and, more important, he is developing the strength to address himself to the primary task. When the student is functioning better in an outward direction, he will feel safer, stronger and more capable of opening and releasing the blocked fear, which remains the primary goal as long as there is a significant fear block in the body.

When the primary fear is finally released the student feels a new confidence in himself and his relations with the world. An apprehensiveness he has carried since childhood is gone. It is as if an incredible burden is lifted from the shoulders. He becomes able to trust.

The capacity for aggression can now develop naturally, without faking or forcing. This is a process that takes time and experience, for we learn how to aggress appropriately over years of our lives, and fearful people have seldom learned. But once the blocked fear is out of the way, the outward direction of the character is freed for its normal development. This brings with it not only the capacity for healthy aggression, but also the capacity for work, for joy, and for love.

Comparison of Fear vs. Anger Structures

The "need" diagram below contrasts receptive (inward arrow) and projective (outward arrow) tendencies for the normal, fear-blocking and for the opposite, anger-blocking character. The upper arrow in each case represents projective, the lower receptive tendencies.



On the left is the normal character. The incoming and outgoing tendencies are approximately equal; the arrows of equal length show this. The center is the soft character structure (blocked fear). He is deficient in his capacity for radix pulsation, blocking on the instroke and stuck on the inward direction. He needs the environment to support and stimulate him to charge. He acquires radix charge with difficulty and expends it easily. His radix charge is withdrawn from the periphery and concentrated at the center. His relation to the environment is characterized by his need to receive attention, caring, support, to relax his apprehension and to stimulate his pulsation. He has little to pour out to others, and his need is great.

On the right is the diagram representing the rigid character structure (blocked anger). This individual charges easily, but has difficulty expending the charge, blocking on the outstroke of the radix pulsation -- stuck on the outward direction. His relation to the environment is characterized by his need to discharge. His structure is tense, surrender difficult, and the need for help from the environment to discharge is often present. The need for others to trigger discharge is dynamically different than the need for others to help one charge, however. The basic direction of this character structure is outward, from the center to the environment. The need is not for support but for someone to "bounce off," to interact with. The radix charge is pushed outward from the center to the periphery. There is a problem in taking in, in receiving, for the tendency is to project, to push outward, and to exclude the environment from coming in; thus the shortened incoming arrow.

Characteristic tendencies of the undercharged versus overcharged structure can be compared thus:

Radix Undercharge (blocked fear)	Radix Overcharge (blocked anger)
Blocks inward stroke of pulsation; inhalation inhibited. Chest depressed.	Blocks outward stroke of pulsation; exhalation inhibited. Chest high
Hypo (passive, low metabolism hypotension).	Hyper (active, high metabolism, hypertension)
Muscles over-soft.	Muscles over-tense
Муоріа.	Hyperopia.
Poorly grounded; weak in eyes.	Poorly centered.
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Inner oriented, self-directed	Outward oriented, other-directed.
Feels powerless, weak, helpless.	Feels powerful but paralyzed in power.
Fantasy: I will find my true giving lover, who will satisfy my need.	Fantasy: I will overwhelm you; I am too much.
Deep wanting to receive; needful, longing quality.	Deep wanting to discharge, together with fear of discharge.
"Need to be loved."	"Need to love you, but I'm afraid to."
Need is for charge, freeing of charge process, capacity to sustain tension.	Need is for discharge, freeing of discharge mechanisms.
Needs to develop strength.	Needs to allow vulnerability

Anger and Love

Both anger and love are feelings that occur naturally from infancy in appropriate circumstances. Unfortunately our culture judges anger an unacceptable emotion. Fear, though often blocked, is much more acceptable. Fear does not threaten people; anger does. The result is that honest direct anger is rarely expressed. Anger, like love, should need no justification; it is its own excuse for being. Because anger is so often vilified, because many students totally reject the idea of releasing anger (they wish to concentrate on "positive" emotions), because anger is "unchristian ", "unladylike ", "immature ", and "uncool", it needs more than simple acceptance. The anger structure needs to learn to own, affirm, and value their anger.

We can be quite certain that all the deep simple feelings have great biological value. They must have a survival function or they would not have evolved. The biological advantages of anger are several. There are a few times when an individual needs to fight for his rights but many times when he needs to move aggressively in the world. The capacity for anger is the platform on which healthy aggression and assertion rest. The signs of anger are an unmistakable warning of position. In most cases the warning is sufficient to deter a casual aggressor and protect one's position. When a fight is unavoidable anger provides a surge of energy to overcome a stronger opponent or to mount a vigorous attack against a threat one needs to destroy.

The person who cannot become angry, whose anger is deeply repressed, is seriously handicapped. His aggression lacks conviction; even his conviction lacks conviction. He is at the mercy of those who are capable of anger. Frequently a person who cannot become angry becomes emotionally dependent on someone who can. Failing this he has to defend his rights with subterfuge and manipulation or have others ride over him.

The person whose anger is partially blocked is also at a disadvantage. There is no easy continuity of response to threats of different magnitudes. Anger in an unblocked individual is self-regulating and appropriate to the situation. A partially blocked individual, however, tends to react inappropriately. He may ignore a significant threat and yet respond with thermonuclear intensity to a minor irritation. This unpredictability is disadvantageous. No one knows where he stands.

Women in our culture are often incapable of anger. Many cannot even think they have a right to be angry. Girls, far more than boys, are taught to disown their anger: "It isn't feminine;" and "Nice little girls don't get angry." They are taught to be helpless or manipulate in other ways

instead. This sort of emotional castration is widely practiced upon girls and reinforced as they grow up. In order for anger to take its proper place in their structure they have to accept and affirm it as a legitimate and vital part of them as they learn to unblock it. Owning their anger can give them strength and independence. It is the blocked and distorted forms of anger that are ugly. Over-adaptive "niceness" and rebellious "nastiness" are but the two sides of the coin of blocked anger.

Anger is indispensable not only in threatening situations but in close relationships. When a relationship gets overcast with gray clouds of boredom, resentment and misunderstandings, it is often anger that is being held back, and only a discharge of anger will "clear the air." Some couples who feel "stuck" need to fight before sex is really enjoyable. The expansion of anger frees their radix flow, and with this freeing they are able to expand softly and pleasurably in sex.

This last is one of the most pleasurable benefits of releasing anger. The body that is blocking anger is tense. The muscles and skin are tight. Positive thinking and good intentions notwithstanding, it is not a body that can love. The same blocks which dam anger dam love. When the anger is released the body softens, and the sweet streamings of love become possible.

We are concerned here with the feelings that accompany the outward movement of the radix through the body plasma. In the venture mode of feeling the radix flows freely outward, the body is open and relaxed, and the subjective feeling is joy or, if focused upon a person, love. Love, in the romantic sense, means more than this, however. It means both the feeling of giving and its complement -- being open to receive from another person, for which I use the word "trust." In the protect mode of feeling when the direction of radix flow is outward from the center but the body is tense with an experience of threat, the subjective feeling is of anger.

Again think of the body as a nation. Under peaceful conditions (venture mode) the nation's borders are defined but permeable. There is free movement across the boundary in both directions. When the nation is threatened (protect mode) it responds by closing and strengthening the borders. Troops are mobilized and dispatched to the threatened area. They attack and destroy the threat. In this analogy, anger is discharged. After the threat is removed the venture mode is reestablished. The border is reopened and free movement returns.

In blocked anger the threat is not attacked and not destroyed. The protect mode then becomes chronic. Free movement is not restored, and the army is stationed permanently on the border. The center is weakened and drained, a large part of the army supporting the fortified border. In the body, the radix charge remains in the periphery. (As we have seen, in fear, the threat appears overwhelming; the nation abandons its borders and the troops retreat inward to protect the center, i.e., the radix charge contracts back inward.)

The Expression of Anger

In anger, the radix no longer streams freely but is bound in the skin and skeletal muscles. At the same time heart and respiration rates increase, accelerating the metabolism and the flow of fuel from the core to the periphery. The organism begins to expand, literally. The chest inflates, muscles tense and swell with blood. In some animals hair is erected. The body is now tense, like a drawn bow. It is ready for movement, exertion, attack.

Anger activates the sympathetic nervous system, and the stress-reacting endocrine glands, especially the adrenals, secrete. It can involve all of the muscles used in fighting (including biting, hitting, kicking) and pursuit. The general direction of the radix flow is from the core to the periphery. It flows from the body core up and down the back and out through the eyes, jaws,

arms and legs. The brows come down and in, lids tense, and the orbital tissue is pressed in on the eyeball. The eyes are hard and bright, locked on the target. The sides of the neck tighten to immobilize the head. The lips may pull back and lower jaw come forward as if preparing to bite. The chest is held high and the shoulders and arms may lift. The abdomen is hardened, protecting the viscera, and blocking the downward swing of the diaphragm on inhalation; the chest instead expands outward. The arms come up and the hands are held in readiness to strike or grasp. The leg muscles tense, ready for attack or pursuit.

The Blocking of Anger -- Physical Description

The two impulses involved in blocking anger must be sorted out carefully. Anger is by definition the impulse being blocked, and the impulse behind the block is usually fear of the anger, but may be more complex "heady" feelings, especially shame or guilt. Consider the muscles used in the expression of anger; when the expression is blocked, some or all of these muscles remain in a state of tense readiness. Although body types vary, and individuals feel and express anger differently, these are common signs: the chest is full and high and resists deflation. The long muscles paralleling the spine are tight. The lower back is stiff and sometimes arched (in the hysterical character, in which both anger and fear are blocked, the arch is often pronounced). The body is tense and will usually be rigid rather than flexible. The skin, especially of the chest and face, is ruddy. The head is slightly rotated with the back of the head up, top forward. The muscles at the sides of the neck and head are tight. The eyes are bright, staring and sometimes glassy. The jaw is tight, as in other blocked emotions.

Sometimes the chest is held high by an individual who is primarily blocking grief or pain. There is then a certain outward direction to the grief, which is not the usual case in blocked pain. When this happens the chest is easily mobilized. In a "straight" anger block the chest will not go down easily, even though there is some element of anger and pain present at the same time.

People blocking anger tend to be "hyped up." High metabolic rate, hypertension, and hyperactivity are often present. Paradoxically this "hyped up" state sometimes results in immobility. There is so much radix charge straining for release that the block intensifies, the muscles clamp down, even to the point of paralysis. This paralysis is different from the immobility of blocked fear in which there is little charge reaching the muscles. With blocked anger the muscles are charged and often overcharged. The accelerator is floored and the brakes are locked.

There is an outward direction in this character structure, with heightened projectiveness and lessened receptiveness. This may be a tendency, or an overriding and imbalanced orientation. The anger-blocking individual charges readily but has difficulty discharging, the flow sticking in the periphery, in the muscular sheath. He is stuck on the outward stroke of his pulsation, his awareness fixed in the outward direction. His need is for discharge. His relation to the environment is characterized by projection, pushing out toward -- or against -- the environment. His is often poorly centered with a weak radix charge in the viscera. In this case, self-awareness is poorly developed; the focus is too much outward.

The Blocking of Anger -- Indirect Expression

People who cannot express anger directly express it in a hundred guises, many of them so subtle as to be hardly recognizable. The easiest to recognize and handle is simple displacement. A man who blocks his anger at his boss releases it against his children. The anger is expressed as anger but not against the real target. A safer target is chosen.

In a more elaborate displacement an individual chooses a target so remote that his anger can never reach it. This also satisfies his need for secondary sources of anger to reinforce his primary anger block – just as pain and fear blockers unconsciously seek fuel for their primary pain and fear. Our anger blocker speaks his fury toward the Government of Rhodesia or the International Jewish Bankers. This is safe enough for a resident of Los Angeles. In Salisbury or Tel-Aviv he might need to find other objects for his anger. Some individuals cannot express anger about their own mistreatment but can express it on behalf of others -- sometimes quite directly. Such people may sometimes be found fighting courageously and openly for the rights of others. A short displacement and an element of reaction formation from here leads to the individual who is very nice, fair-minded and devotes his energies to relieving injustice. There is little evidence of anger in this individual's behavior, and while that itself is a clue it takes a considerable amount of work before he can recognize the underlying anger block.

The most difficult blocked anger to deal with is that which is most intellectualized. I am far from a complete understanding of how anger is intellectualized. In some way the anger is blocked from direct expression and the radix charge moves from muscles to head. Intellectualized anger is very common among university professors, where it establishes a destructive pattern on campuses that is quite different from the more open aggression commonly seen in the business world. I have been employed professionally in private business and in academia. My experience is that, in general, businessmen are competitive, and their aggression and anger are overt. They compete for survival and the competition is sometimes tough and ruthless. University professors are seldom as openly competitive. In committee meetings they are polite, not angry. But covert anger, dirty politics, maneuvering, manipulations, vicious gossip and backstabbing are endemic, incomparably worse than in most businesses

Intellectualized anger is hidden inside the head, rationalized, and has no direct outlet. It expresses a direction of the radix stuck on the outward direction from the core, and is thus lacking core contact. The simple, integrative, intuitive functions arising from the inward direction of the radix are poorly developed. Intellectualized anger tends thus to be overcomplicated and mechanistic. As blocked fear underlies mysticism, blocked anger underlies mechanism. Intellectualized anger is often not expressed angrily, and can be hard to confront. It may instead appear as a scholarly work advocating the violent overthrow of capitalism, or objective research on weapons of mass destruction. An intellectual individual may confine his anger to angry fantasies. Often these fantasies are concerned with very large issues -- there is some "wrong" in the world, e.g. pollution or socialism. The "wrongfulness" of the perpetrators makes his anger justifiable and the size of the issue excuses him from confronting it directly.

These are but a few of the more common faces of disguised anger; a more complete catalog is beyond our purpose here.

Character Structures

There are very different types of character structures rooted in blocked anger, depending on where the blocks are in the body and how deeply the anger is repressed. We need to develop more fully the characterology of anger, fear, and pain blockers, but for now I would include as anger blocking characters the following:

- hyperope
- hysteric
- paranoid
- phallic and other rigid character structures

mechanist

Let me elaborate on the first two.

Hyperope. (I have described the opposite structure, the near-sighted myope, under <u>Fear --</u> <u>Character Structures</u>). When the eye block freezes the outward direction of radix pulsation, the tendency is toward hyperopia (far-sightedness). The outward orientation sticks and does not release. The hyperope is outward and directed towards other people, contrary to the myope who is introverted and self-oriented. The hyperope may be aggressive as a child, often a behavior problem in school, often subject to temper tantrums. With the eyes the hyperope wishes to control, to guard, to interact at a distance. He does want to interact, but without opening or becoming vulnerable. The hyperope is more able than the myope to yield to external pressure -- this again evidences his outward orientation. He is likely to be more comfortable with other people and less comfortable alone than is a myope. The significant environment for the hyperope is "out there." It is hyperopes who often develop presbyopia ("old age sight") and need reading glasses in their later years.

Hysteric. I see the hysteric as blocking anger in the trunk with pain and fear held in the head and neck. Since the "core" structure involves anger, it is an "anger" character type. The pelvis is often relatively soft and lively, the chest high and blocked against expiration, but with puffy high chest breathing, producing a radix charge the head and throat cannot cope with. The eyes are guarding, the back of the neck holds tight with fear, the throat often thrusts forward in a "martyred" expression. The eyes may tend either to hyperopia or myopia, depending on how much fear is held in them. The hysteric uses fear and pain to defend against anger. The rage under hysterical crying is often obvious. Attention is jumpy and peripheral, behavior often mannered, e.g., flirtatious, cute, dramatic, coy, self-conscious. The charge is pushed toward the environment, projected, and the felt need is for someone or something to trigger discharge. There is likely to be over-wrought emotional behavior, recurring emotional crises, dramatization of problems, histrionics, seductiveness and flight, using up friends emotionally, blaming them, and desperately grasping for others. The radix charge is weak at the center and the self-concept poorly developed. Sometimes the hysteric "shuts down" emotionally, and in Radix work the typical character then only starts unfolding after the structure starts loosening. The hysteric's problems are projected onto the environment, and grandiose or persecutory paranoid fantasies are common. I think of paranoia as an exaggerated form of the hysterical problem.

Hysterics are difficult to work with because of their recurrent crises and poor insight, but respond well to this work if they stay with it. Centering techniques are crucial to them, and superficial discharge is to be discouraged. As the upper segments are freed, powerful rage emerges, and with their poorly developed self-concept they have great problems accepting and integrating this rage. Hysterics reject and often repress the great amounts of rage their structures produce. It is likely to be projected onto the teacher and his work. Good centering work facilitates integration and results in better insight. Dramatic changes occur quickly early in their work, including remission of long standing physical symptoms, but this means little unless the radix center and consequently the self-concept are developed and the blocks in the upper segment are freed. A good sexual relation speeds their progress but its loss can precipitate a crisis in their work. Successful work with an hysteric can be very gratifying, for they are often energetic, creative, alive people. They are also about the most demanding and exasperating type of student one can work with.

Principles and Techniques for Releasing Anger

General Principles. The muscular sheath and skin are overcharged, the visceral core undercharged. Usually the chest, shoulders, neck and head are overcharged, the rest of the body undercharged. The belly and diaphragm are tight and, since the diaphragm does not release down on inhalation, the chest then takes over the function of breathing. This produces a swollen chest, with the accent on inhalation.

Principle I: Center the student. Build up a charge in the core without intensifying the charge in the upper body. Emphasize exhalation, diaphragmatic breathing, softening and receiving.

In blocked anger the radix charge is usually projected out to the periphery. There is little contact with the core. Discharging the muscular tension without the core contact is superficial and relatively meaningless.

Principle 2: After centering, work slowly, and concentrate on reaching deeper focused levels of discharge.

Blocked anger is an inhibition of the motor act and the simultaneous blocking of the feeling that accompanies the motor act. The deeper the block, the less the awareness of the feeling. Since the anger (really, the radix process producing anger) is held in the muscles, direct mobilization is much easier than in fear. The expression of anger is an active process like sex. In both, voluntary movement is used to lead to involuntary movement and discharge. It is very rare in anger or sex for the involuntary phase to occur without voluntary movement. The transition from voluntary to involuntary must be handled with great skill, however; the emphasis must be on surrender, not on "trying."

Principle 3: Initiate appropriate voluntary movement, (e.g., kicking, pounding, biting, etc.) and help the student transition it to spontaneous discharge.

Blocking of anger is in itself a problem, a problem of chronic tension. Releasing this tension provides a profound relief. However, for anger to be functional in a person's life it must be focused and used. The first step in focusing anger is to get it expressed through the eyes.

Principle 4: Work consistently with the eyes. Have the student look directly into your eyes during and after expressing anger, *working off you and not off fantasies or images*.

These are basic principles of working with blocked anger. The teacher who understands these principles can develop good original techniques, in addition to the ones to be described. Consider yourself now in the role of Radix Teacher.

Breathing. The student starts by closing his eyes and concentrates on breathing with his belly. If the eyes are open, awareness will be directed toward the outside environment, towards you and beyond. You want his awareness directed down into his own body. If the belly is immobile, place your hand on it and encourage him to bring it in as he breathes out. Emphasize the exhalation, the outward stroke of the pulsation, because that is where he is blocking. Reich would press in the chest as he had his "patient" shout. When downward pressure is exerted on the chest, care must be taken that the student helps rather than fights against the chest collapsing. You want to see the chest deflate and the exhalation pulse move down it, so keep the emphasis on easy exhalation. It seems simple enough, and it is if the student could follow your instructions. Instead he may try a dozen other things; sustaining the exhalation, a long pause after exhalation, slowing the exhalation or a big forced slow inhalation. The mouth will close on

exhalation or the tongue block the passage to the throat, or sound will be used for the same end, to block the natural exhalation. There are sounds that naturally accompany an anger discharge, but these should not be confused with sounds that block the progression toward discharge. Instead of allowing this progression many students would prefer to make loud angry noises. Emphasize that you only want him to breathe the air out of his lungs, and to surrender to any feelings that spontaneously arise. You want the throat and larynx to open and the chest to go down. You're not looking for a discharge of rage or anything spectacular; if it comes, fine, but the simulation of anger gets in the way.

Superficial discharge. There is one type of blocked anger that exemplifies the problem of superficial discharge. This individual, far from being bland and mild-mannered, has a "short fuse", is irrascible, and explodes angrily with minimal provocation. Why do we say he is blocking anger when he appears to be angry all the time? Because there is little connection between his peripheral "touchiness" and the deep feelings of anger. His discharge is not centered, and never completed. His problem is that the peripheral anger gives temporary release of local tension but does not really open the blocks to his anger. His superficial outbursts keep the deeper feeling from being mobilized.

Many people who block anger have this problem in some form. In some it is further complicated by their need to relate to the outside environment, to you. If they think you want to see an angry discharge they will try to provide one. They feel more comfortable trying to contact you rather than their own core; they are more concerned with what you feel about them than what they feel. They tend to dramatize, to display emotions rather than feel them. As soon as they begin to feel from the core they are apt to become fearful. They may anticipate the emotion, and then force or fake the discharge. They want to control the impulse and then force something to happen. They may "cooperate," "try hard," and so on.

The hysteric is particularly likely to rush into a dramatic discharge. Within a few minutes and long before he has built up any charge in the core he is emoting very strongly. At first the discharge may seem impressive but after a while you will recognize that something is lacking. He is not necessarily faking it, but the discharge is not supported by radix charge flowing from the core. He can repeat it over and over without touching the basic problem, the blocked anger.

You have to teach the student who is blocking anger to take his time. His impatience and excess cooperation are both resistances. If he has been blocking anger for twenty years he can tolerate another twenty minutes. You work slowly to reestablish connection between the core and the periphery. Ask him not to "help," as it only interferes. Discourage him from starting into any discharge while the chest is still inflated. The discharge will be superficial. Ask him to stay with the breathing, stay with the pulsation, and let the feelings develop. When the chest exhales fully and a charge develops in the viscera he will be ready for the next phase.

Voluntary movement. Appropriate voluntary movement is almost always necessary to initiate the involuntary discharge of anger. The voluntary movement will depend upon the student's particular block and the given situation. When you reach this stage and ask the student to make a sound or movement you will often notice a curious phenomenon. He will not want to do it and will give you a lot of reasons why. Or he will not be able to do it. Coordinating the movements of some rather simple drill is beyond him. In the early phase he was impatiently eager to "cooperate," move, make sounds; now he isn't. Both are resistances, and may hide his developing anger towards you. Since you have already stressed that you don't want him to fake anger he will argue that "I don't feel angry so I don't feel like hitting." Explain that the voluntary

movement is just that, voluntary movement; it is an exercise. If anger comes up, fine, and if it doesn't, that's fine too. If he has difficulty in doing the movement ask him to do it as well as he can, but not to invent a different movement of his own. You want him to do the exercise without any expectations and give in to any feelings that may come up without faking or forcing.

One voluntary drill that we use frequently is the "temper tantrum." A tantrum is a child's almost global discharge of frustration. Have the student start on his back, and work slowly, kicking, pounding, moving his head and making sounds. We are particular in teaching how movements are made. The head rolls in a large arc, breathing in on one side, out on the other. The legs kick in unison with the head movement. The eyes see. The arms pound alternately in opposition to the movement of the head and legs, i.e., the left arm hits as the right leg kicks and the head rolls to the right. In this way the long back muscles and neck muscles are flexed and extended. It is these powerful muscles that hold back deep rage. As the coordination is attained the pace is gradually stepped up. Pulling the hair on the sides of the head will facilitate "losing the head," which occurs when the discharge becomes spontaneous. If the discharge goes into a spontaneous phase, the coordination is no longer insisted on. Large cushions are kept handy and used to protect people from kicking or hitting the floor, as students getting into "tantrums" often kick and pound their way off the mattresses we work them on.

People vary greatly in how long they can sustain a tantrum exercise, and it has little to do with how athletic or muscular they are; I have seen a ninety pound woman sustain a powerful tantrum for ten or fifteen minutes, and a big athletic man exhaust himself in two or three minutes. When a student runs out of steam very quickly he usually has blocked his inhalation. In a tantrum there is so much to attend to that breathing is easily overlooked. Each element of the tantrum, hitting, kicking, seeing with the head turning, and the sounds, may be used separately as a voluntary drill.

A tantrum mobilizes the whole body. It is effective in reaching the internal stress of undischarged anger. It has no effect on the external stress. Once the student has lost some of his fear of his anger and learned to release it in a tantrum he is ready to focus the freed aggression in the service of his own life. We are not satisfied to stop with teaching a student to discharge his rage and tension in private tantrums or other "anger" exercises. If he does, he is dissipating the very energy he needs to alter the conditions of his life. Instead of increasing the scope of his life he is practicing a novel form of masturbation. As with masturbation he would miss the deepest satisfactions.

Focusing Anger. Focusing anger involves letting anger out through the eyes. The exercises we use involve having the student direct his anger at you or a partner. Pounding on the floor or a chair with a rolled-up towel is effective. The student can be kneeling or standing, facing a partner. The standing position can be particularly helpful for maintaining "grounding" during the exercise. He takes a series of deep breaths, systematically built to a climax, then opens his eyes wide, makes clear loud sounds and *sees* as he hits. The systematic build-up of the breathing at the outset builds a charge to work with. After pounding to exhaustion the student keeps looking at the partner. Done correctly, the exercise will usually bring a good flow of radix out of the face. At the end the student may want to retreat from his anger. Have him stay with his partner in the eyes.

In all these techniques it is important that you, the teacher, be able to accept your own anger and face that of others. Otherwise you will convey to the student some degree of disapproval, falseness or fear. When you have accepted your own anger you feel genuine

pleasure when someone becomes able to express anger for the first time. You will appreciate the real progress that has been made.

The sequence given is the sequence used in the hypothetical case of an individual who is blocking only anger. In reality the anger block is usually mixed with pain and fear. Each individual is different and you have to help work through the defenses, layer by layer.

Some individuals work in the direction of a discharge of anger. You help them, encourage then. They build up a head of steam and just when you think they'll explode in rage they collapse into helplessness and crying. They are afraid of their anger. They have retreated into a familiar feeling pattern rather than go into their anger. Some people will cry helplessly whenever they are close to an angry discharge. Helplessness is usually if not always a defense against underlying anger, and often a "racket" to evoke protection or sympathy. If the student has reached a certain point in his work and you have good rapport you can say, "Here comes your helplessness bit." That may get them furious at you and help them through the block.

Verbal provocation like this can be effective and it can be destructive. The student must always know that you are really on his side. Often it is a good idea to state beforehand that you are playing a role. You can say that you are going to oppose him and needle him. Comments like: "Be a *nice* girl," or "Do what you're told," or "You can't really get angry, " will really infuriate some students. But the student who is not sure of your deeper support may feel betrayed and have their trust in you undermined.

You have to emphasize that the student give himself permission to get angry with you for "no reason." He should be able to say, "Damn you," or "Fuck you" with conviction while looking you in the eye. Verbal provocation is a technique to be used with great sensitivity. And I seldom use physical provocation at all, other than loosening a tight scalp, moving a blocked neck, or holding someone's arm to their side for a moment. Physical provocation is likely to be too threatening, and may result in anger that is forced or faked, not with the authentic feeling we are seeking.

Branden Sentences. Nathaniel Branden has developed the use of sentence completions into a fine art. These can be used effectively for exploring or eliciting a wide range of feelings, including blocked anger. The student usually chooses a partner to work with, and after some work to free the breathing and establish a flow with the partner, the leader feeds the desired sentences. The student repeats the incomplete sentence and adds the first grammatical completion that comes to mind, continuing to say the root of the sentence with new completions until the leader stops him or changes the sentence. Some "anger" sentences I have used are:

For expressing and exploring anger:

I resent... I get angry when... One thing that makes me angry/mad/ frustrated is... If I blow my stack... If I get angry at you... If I get angry at you... If I got angry at him/her... If I let my anger pour out my eyes... When I get angry... When I get angry... When I got angry at my mother/father... (At a shout) I FELT LIKE YELLING AT HIM/HER... (At a shout) IF I WERE ANGRY AT YOU I MIGHT YELL... *37 of 40* Facing, Standing Up to Anger:

When he/she/mother/father/ was angry at me...

When I looked into my mother's/father's angry face...

If you are angry at me...

When I see annoyance/irritation/disapproval in your eyes...

When I let his/her/your anger in...

There are obviously many others, and one must learn how to choose and use the sentences that further one's objective in a particular session. I focus heavily on visual attention, breathing, and body expression as well as on the selection of sentences. After eliciting and permitting an angry discharge, I usually follow up with an ambiguous sentence emotionally, to let the student flow into whatever the anger expression has brought up, e.g.:

Something else I want to tell you... Now I'd like to say... I'd like to tell him/her now...

This opens the road for the student to go in one of several ways, e.g., more anger, pain or hurt, open or loving feelings. Ambiguous sentences may be called for whenever the teacher is unsure where the student is or is headed.

I also employ Branden sentences in paired encounter, working in groups, along with "oppositions" and "permissions."

Oppositions. The group forms pairs, and does breathing exercises to develop a charge. Then one says, "Yes," the other, "No," or:

"You will;" "1 won't. "Do what you're told;" "Get off my back." Etc.

I use this usually as a light technique that is good for starting group interaction. It can also be done more seriously when a group is ready.

Out of My Way is a heavier technique for most people. Each group member must face each of the others in turn and order them to "get out of my way," with good eye contact, and without smiling.

Permissions. Permission phrases dealing with anger might include:

"I can get angry with you."

"I can show you my anger."

"I accept my anger."

"I can face your anger."

"I accept your anger."

Each statement is made without assertion or dramatization but in a simple expository way to find out if it is true, or can become true. The assertion can develop later if it is true.

Physical Interaction. We use all of these at times:

Bataca fights Wrestling Pushing (e.g. seated on the floor, back to your opponent) Tug of war (2 or more) Holding someone down Other contests Pillow fights

All of these are valuable if they are not overdone. Some students, however, will find them very frightening and will withdraw rather than interact. These students need them most, and contests they can enter wholeheartedly can be excellent for them.

Fantasy and Regression. These are usually done in pairs in Radix, working on a mat. The student has first gone through a tantrum to mobilize energy. Then we attempt to go further by regressing him to adolescence or using a fantasy of adaptiveness and/or rebellion, such as:

"Let yourself into your adolescence, remember the feelings you had as an adolescent. Were you nice? Were you good? Were you sweet? Did you conform? Did you twist yourself out of shape to please your parents? Did you do things you didn't want to do to please, or out of fear?"

At some point when they have gone through the regression you tell them to say, "NO," meaning "no more of that shit." The "No" is emphasized by turning the head from side to side. The partner says: "Do what you're told." "Be a *nice* girl," or "a *good* boy."

All of these techniques are most effective if done all-out, without any reservations. The breathing, eye contact, sound and movement are essential. The reservation, no matter what form it takes, is a resistance that needs to be worked on. When the student lets all his feeling out without reserving any, without holding anything back, and without forcing he feels free, free of the net of tense muscles in which he has been held, and free of the necessity of maintaining all that tension.

Fantasy must always be used with caution in emotional release work or it will increase rather than decrease the chronic contraction that is the repository of blocked feeling. Inducing anger or any other feeling by fantasy is of no value to a student in itself. Only if it is used in conjunction with freeing the body from contractions which block anger can it help open the feelings and free the capacity for feeling. Ultimately the student must become able to express anger to real people in real situations, "in the now," or the work has not been effective.

Love and Joy

The outward branch of love is blocked by the same tensions that block anger. There is thus no way that deep loving feelings can be opened when anger is being blocked. Just as the chronic tensions that reduce pain reduce the capacity for pleasure, the tensions that block anger block love and joy, and those that block fear block the capacity to trust and receive. The negative feelings are the "other side of the coin" of the positive, which are freed at the same time, by the same work.

Groups that aim at happiness and joy, trying to bypass negative feelings, are of necessity superficial. Many people want to stay at a superficial level of feeling, and that is their option, of course, but such people have no business being in Radix emotional release work. The proper "contract" and attitude for doing this work is to do the exercises and feel whatever is there. Over enough time those who work seriously and effectively under this contract reach the point that "what is there" comes to be a full share of pleasure, love and joy.

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