

Session 1

Introduction to
Embodied Inquiry

EMBODIED INQUIRY FOR PAT

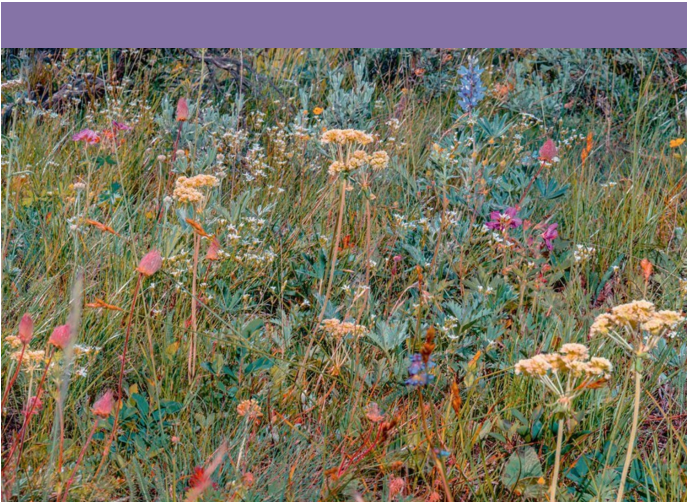


AGENDA

Welcome, agreements, L.A.	01
Arrival practice	02
Introductions	03
Context, Objectives & Overview	04
Approaches & Intentions, Psychological Flexibility	05
Therapy intentions, assumptions, models	06
Inquiry method & practice	07
Balancing acceptance & change	08
Closing	09

Group Agreements

CENTRE



CONFIDENTIALITY



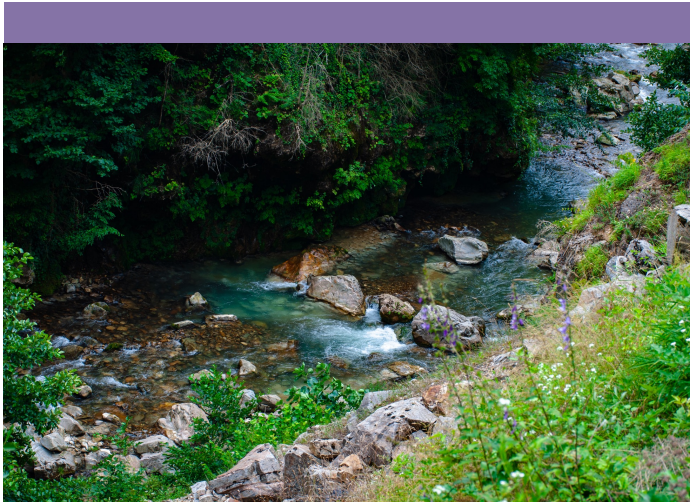
ENGAGEMENT



NON-JUDGMENTAL
LISTENING

Group Agreements

CENTRE



TIMELINESS



RIGHT TO PASS

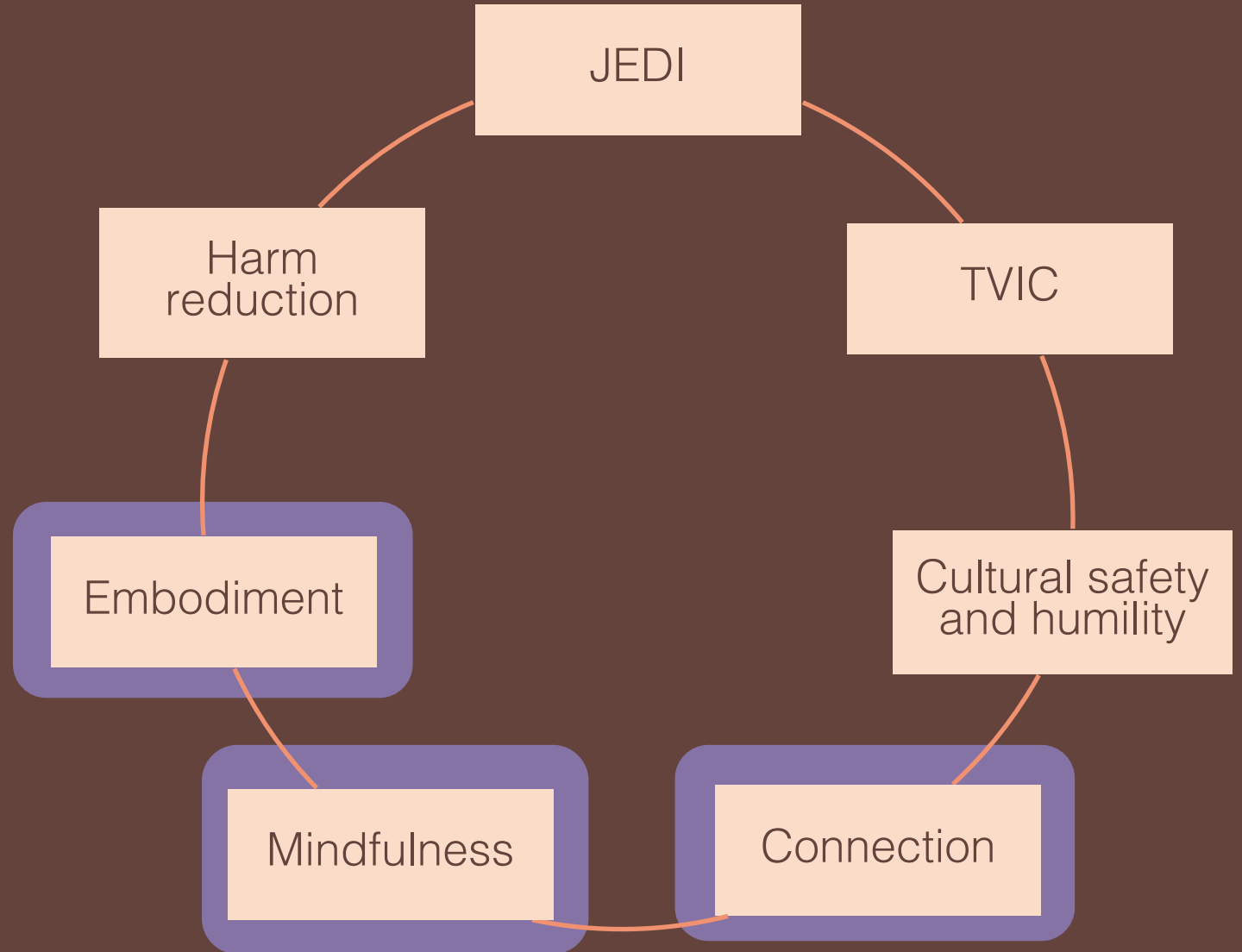


EQUITY

INTRODUCTIONS



SEVEN GUIDING PRINCIPLES



EMBODIED INQUIRY: TRAINING OVERVIEW

- Session 1 – Embodied Inquiry as a method and practice – Psychological Flexibility and Mindfulness as foundations
- Session 2 – Considering the nervous system - working with NS states, trauma, attachment using Embodied Inquiry
- Session 3 – Inquiry through the arc of PAT – preparation, dosing sessions & integration; using parts language with EI



EMBODIED INQUIRY: SESSION 1

LEARNING OUTCOMES

Upon successful completion of the module, learners will be able to:

- Describe the underlying assumptions and process of Embodied Inquiry
- Utilize layers of Embodied Inquiry across dimensions of experience at an introductory level
- Understand how to apply Embodied Inquiry to increase psychological flexibility, distress tolerance, and acceptance.



POLL

Inquiry

A process of investigation whereby content of present moment experience is brought to conscious awareness, and integrated

- Can be guided by another, or self-directed
- Content: body sensations, thoughts, images, impulses, emotions, sound

Attitudes: curiosity, patience, non-judgment, kind observation

Skills: cultivating awareness, training attention (mindfulness)



Embodiment

Being aware of our internal felt sense experience as we navigate life; "lived experience"

Interoception – sensing bodily signals: thirst, hunger, heart rate, tensions

- Essential for:
 - Emotions and their regulation
 - Empathy, socio-emotional competence, connection
 - Gut feelings, intuition
 - Influences cognition (bottom-up process)

Trauma, rumination, consumerism, distraction, entertainment, hyperrationality:

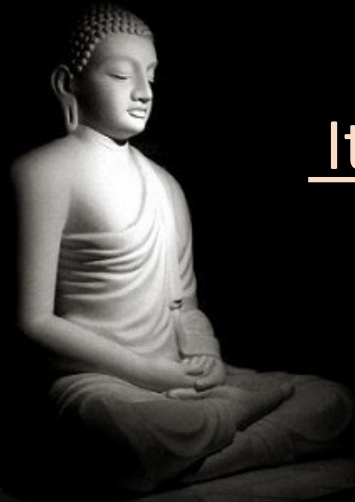
--> disconnect us from our bodies

--> disconnect linked with psychopathology and loneliness



“There is **one** thing that, when cultivated and regularly practiced, leads to deep spiritual intention, to peace, to mindfulness and clear comprehension, to vision and knowledge, to a happy life here and now, and to the culmination of wisdom and awakening.

And what is that one thing?



It is mindfulness centered on **the body.**”

- Gotama the Buddha, *Satipatthana Sutta*

Experiential Avoidance

THE PROBLEM OF EXPERIENTIAL AVOIDANCE

Difficulty remaining in contact with distressing internal experiences such as thoughts, memories, emotions, and body sensations and the attempts to control or avoid these experiences.

Transdiagnostic marker of psychopathology, associated with:

- Anxiety, GAD, Panic
- Depression
- Bipolar disorder
- Self-harm & suicide
- Obsessive-compulsive disorder
- Substance abuse
- Post-traumatic stress
- Trichotillomania

Experiential Avoidance

- EA in ACT
 - Not moving toward what is uncomfortable
 - Strategies for fixing discomfort
 - Gets us stuck
- EA in development
 - Attachment and authenticity
 - Splitting of what isn't supported/attuned with
 - Adaptations that no longer serve
- EA in therapy
 - Psychodynamic approaches
 - CBT
 - Mindfulness-based approaches
 - Somatic therapy



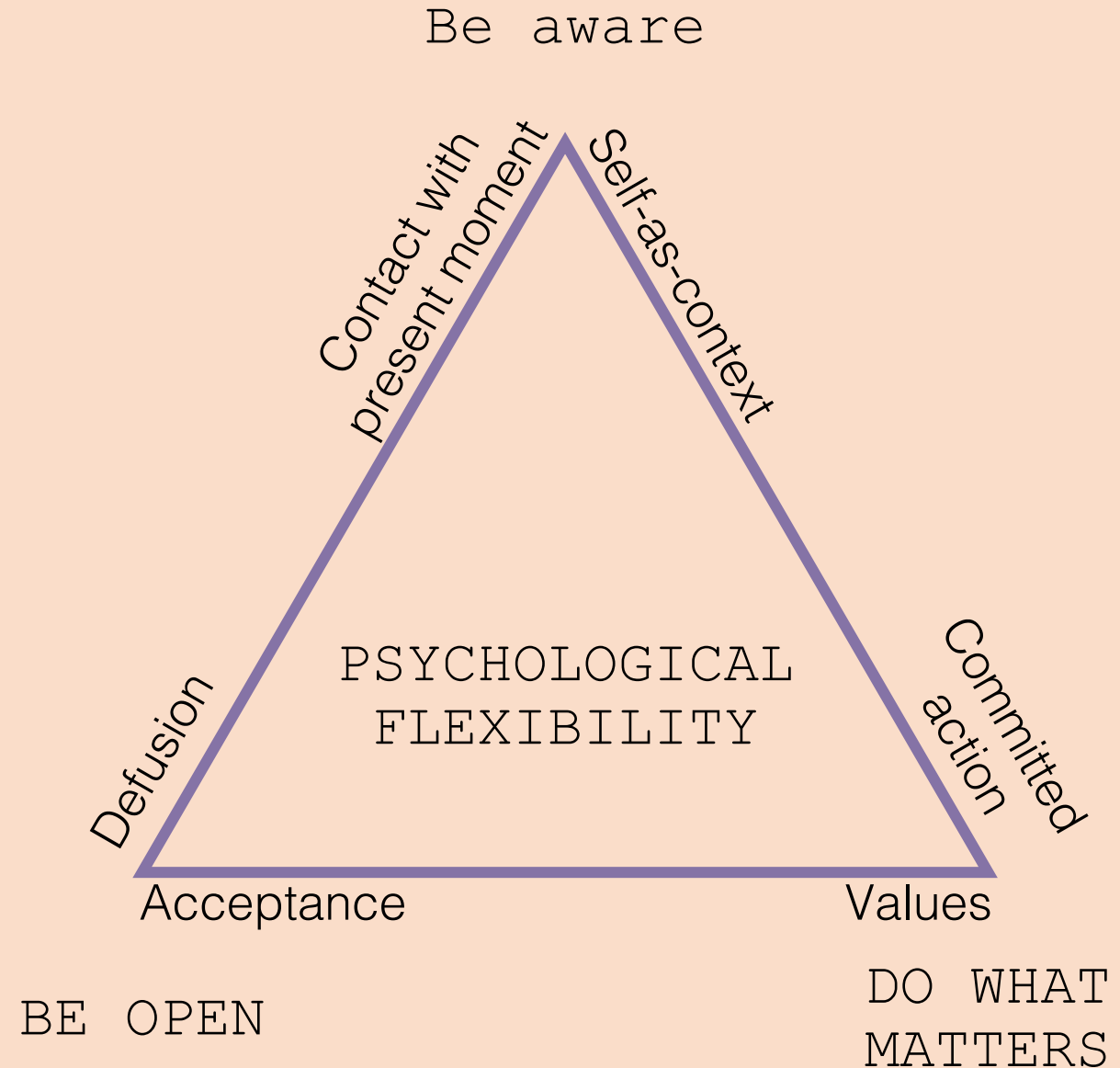
Psychological Flexibility

A person's capacity to meet all aspects of experience arising in present moment awareness **with openness and acceptance** that allows access to choice to respond with words/actions that aligns with one's values

Accounts for 45% of change in therapy (Hayes et al., 2022)

3 SKILLS (PF)

- Awareness (includes interoceptive awareness)
- Openness
- Values engagement



THREE MARKS OF EXISTENCE – BUDDHIST PSYCHOLOGY

1. *Dukkha* (dissatisfaction
– everything
is *imperfect*)

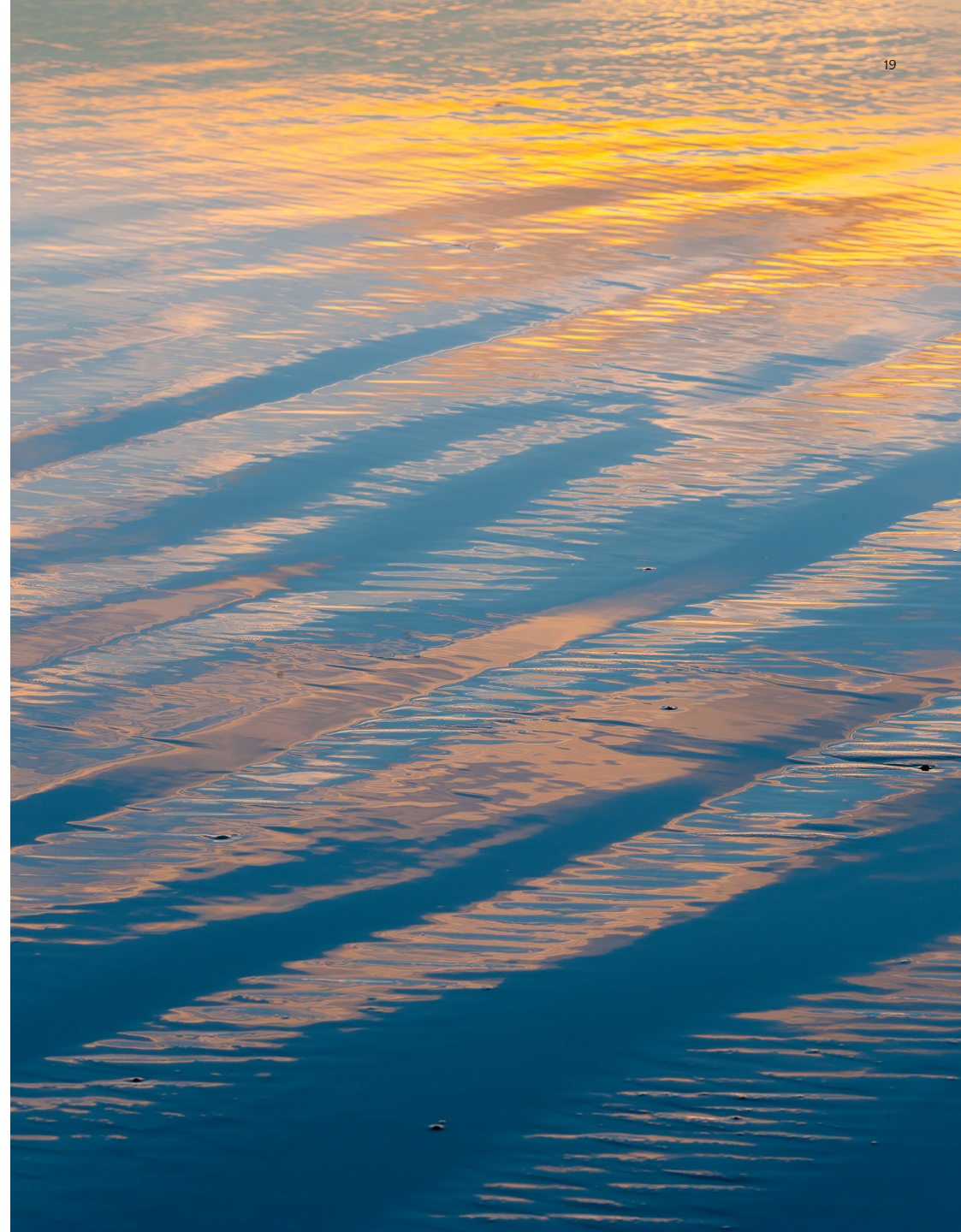
2. *Anicca* –
everything is *im-
permanent*)

3. *Anatta* (non-
self –
everything is *im-
personal*)

Psychological Flexibility and Psychedelics

Psychedelics can catalyze PF:

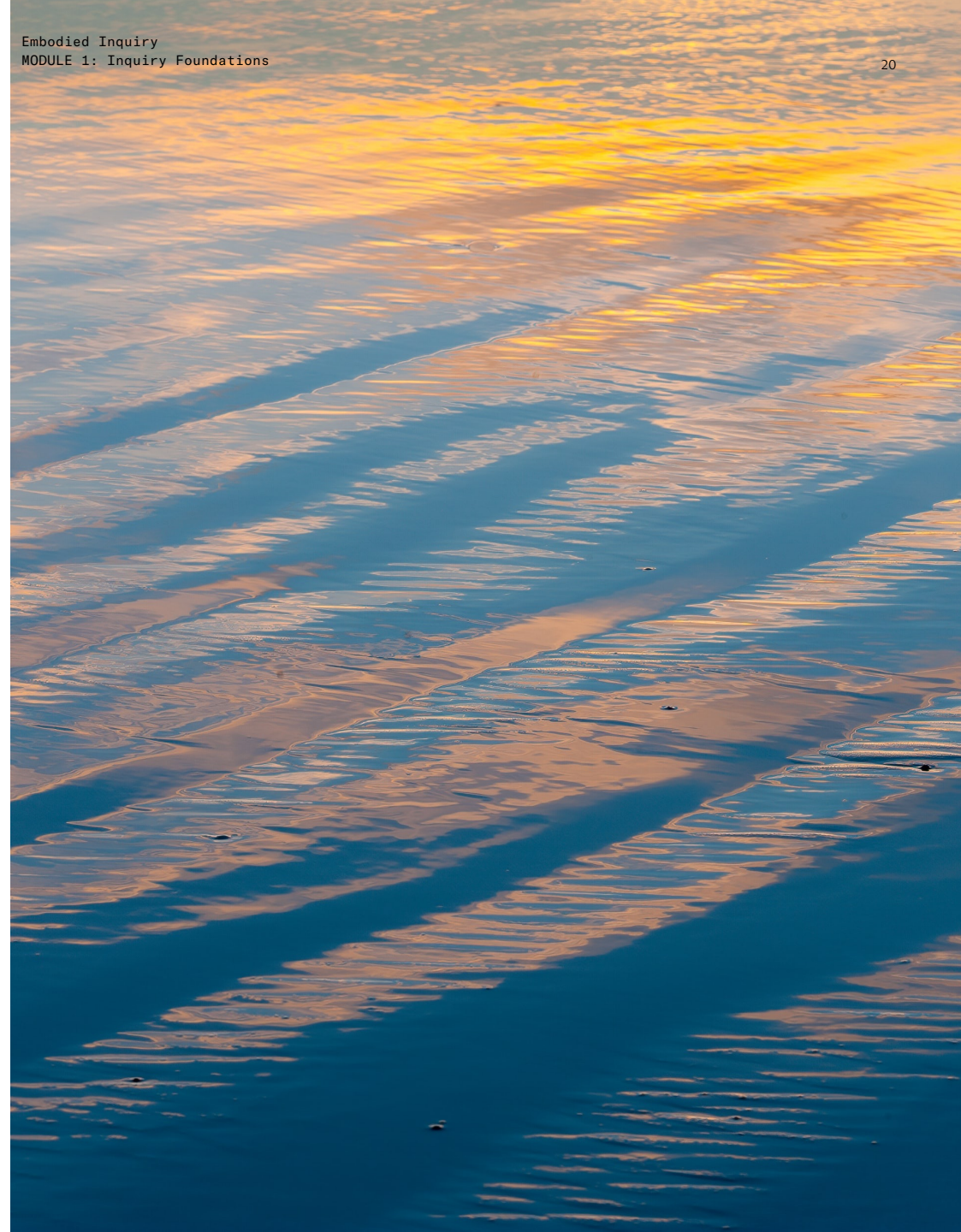
- Disrupts established patterns of brain activity
 - DMN & sense of self
 - REBUS model
 - Neuroplasticity
 - Can promote access to embodiment
- Can transform coping strategies through integration therapy



Psychedelic-Assisted Therapy

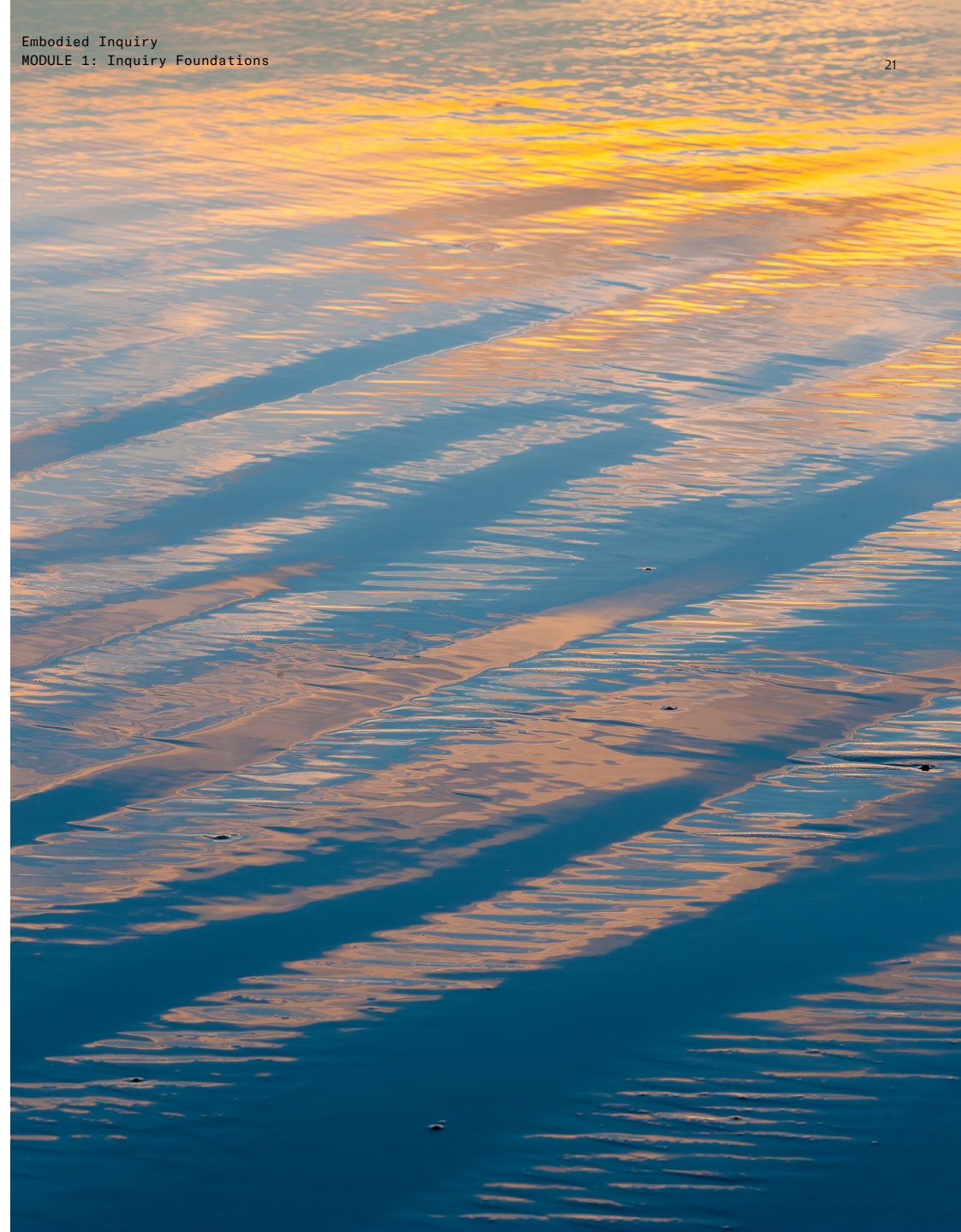
An optimal approach to PAT is:

- Bottom up
- Present moment experience
- Learning and integration
- Curiosity and kindness
- In safe and supportive connection



PAT PSYCHOTHERAPY PRINCIPLES

- Attitudes – Curiosity, Non-judgment, Kindness
- Cognitive De-fusion/De-centering & Re-Appraisal
- Present Moment Orientation – Immediacy
- Developmental as required
- Acceptance & Psychological flexibility (opening up)
- Non-Directive
- Experiential/Process Based
- Reflection & Meaning-Making
- Change Strategies (Applied Learning and Values)
- Process based therapy is individualized, focused on problem solving
- Self-Determination (autonomy, relatedness, competence)



EMBODIED INQUIRY:

- Overall goal/intention is moving from rigidity to flexibility, psychology & physiology
- Experiential avoidance keeps us stuck. E.A can be a helpful and necessary survival strategy.
- Embodied Inquiry is a relational method that facilitates opening to the fullness of experience, including what has been avoided, to support awareness, learning, and connection
- The somatic lens intends to create the conditions to keep the client safe and anchored in the body, enabling them to move towards activation, difficulty, and the client's gifts.



EMBODIED INQUIRY:

A therapeutic method of investigating direct experience (reflective or present) and cultivating the ability to recognize, describe, track, and integrate what is learned in the service of psychological flexibility.

ASSUMPTIONS OF EMBODIED INQUIRY

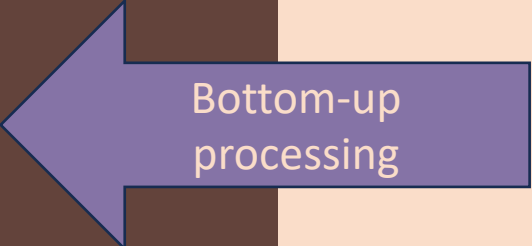
- Psychological flexibility is necessary for mental health
- Experiential avoidance can be limiting
- Reduced experiential avoidance increases self-determination
- Turning with kind attention to challenging experiences assists in moving through them
- Resourcing is an essential support
- Experiential/somatic ways of processing difficult/traumatic experiences are necessary
- Identification/fusion with thoughts and emotions increases reactivity and rigidity.
- Perspective taking enhances regulation, flexibility of responding, reducing fusion
- Self-compassion enhances psychological flexibility and reduces poor outcomes
- We inquire in response to the client's experience ("leading by following") by staying anchored in the present moment with them
- The therapist's embodied attitudes facilitate client processing
- Client's capacity to witness their own experience is supported through the relational field

NARRATIVE SELF-REFERENCING

- Enduring meaning
- Judgments
- Interpretations
- Reasons
- Memories
- Goals
- Self across time
- Conceptual Evaluation
- "Self" in relation to the content of "Secondary consciousness"

EXPERIENTIAL SELF-REFERENCING

- Sensations
- Emotions
- Individual thoughts
- Arising and passing of experience
- Self as context/process
- Momentary experience
- "Self" in relation to "Primary consciousness"

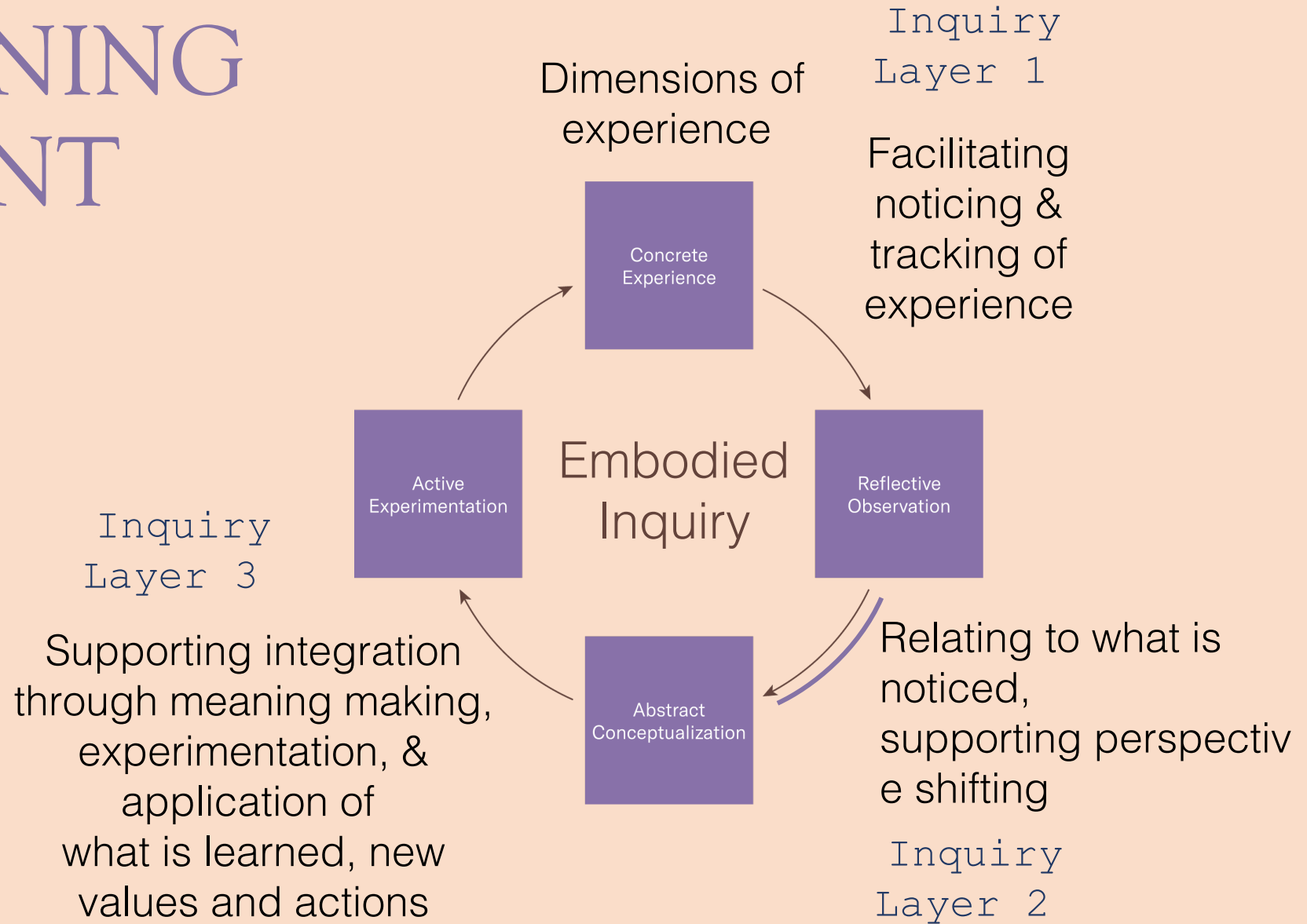


Bottom-up
processing

NUMINUS

DEMONSTRATION

PAT is a LEARNING ENVIRONMENT



Inquiry Layers

(can be non-linear)

LAYER 1: NOTICING

What are you noticing?

What did you notice?

*Naming, tracking, and describing
experience*



LAYER 2: DECENTERING

How are you relating to this
experience?

*Shifting perspective, noticing attitude(s),
what experiences inform assessments?*

LAYER 3: INTEGRATING

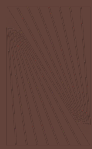
What does this mean for you and
your wellbeing?

Application of learning

Inquiry Questions: Layer 1

ORIENTING TO DIRECT EXPERIENCE

- Present: What's happening right now? What are you noticing?
- Reflective: What did you notice? What happened?
- Use the language of experience as sensations, images, behaviours (gestures, expressions), affect (emotion), and meaning (SIBAM)
- If the client is focused on narrating, consider gently inviting them to redirect their attention back to direct experience.



Inquiry Questions: Layer 2

HIGHLIGHTS THE WITNESSING AND SHIFTING OF
PERSPECTIVE

- How are you relating to the experience? What's it like to notice [an aspect of experience]?
- What might it be like to turn toward the experience? To bring kind observation to the experience?
- What might be getting in the way of accepting or being with what is happening? What supports may be needed, if any?



Inquiry Questions: Layer 3

INTEGRATION – MAKING THE LINK BETWEEN WHAT YOU NOTICE,
AND YOUR INTENTIONS & THERAPEUTIC GOALS.

- Often arises spontaneously
- What might be the relationship between this experience and your intention (staying well, values)?
- How might this be useful for dealing with...?
- How is this experience relevant to what brought you here?
- What useful new or unexpected perspectives have emerged?



EMBODIED INQUIRY PROCESS:

1. Bring attention to direct experience - inquire
2. Elaborate a resource
3. Track/describe experience (SIBAM)
4. Listen and reflect (verbal, somatic)
5. When possible, stay with, and bring kind attention to difficult states
6. Recognize when directing and resourcing (client or self) is supportive
7. Create and support more functional meaning to emerge
8. Reinforce and integrate the learning beyond the session

Embodied Inquiry: inquiring and reflecting

Enhance client's ability to describe their direct experience with both language and gesture

Provides opportunity to 'feel felt'

Simple reflections:

- Restate what was said using their words
- Mirror gestures and expressions
- Reflect gestures and expressions to bring bodily awareness when appropriate

- Assist tracking of experience
- Enhance psychological flexibility (approach, explore, express)
- Elaborate across 5 dimensions of experience (SIBAM) to expand and integrate awareness
- Amplify and reinforce experiential and embodied learning in relationship



THERAPIST STANCE & EMBODIED INQUIRY

Embodiment	Embodied self-awareness, sensitivity, self-regulation
Patience	Slowing down, deep listening, trusting inner healing
Curiosity	Genuine curiosity, suspend own interpretations
Loving kindness	Non-judgment, acceptance, compassion
Presence	Present-moment focus, relational field, non-verbal communications
Humility and Play	Client is expert, rupture/repair, exploration, lightness

INQUIRY & MEANING

- Direct Experience to Abstract Conceptualization
 - humans are meaning makers
 - meaning makes sense of experience
 - can provide alternative perspectives and interpretations
 - can disrupt fixed views and beliefs
 - processing and exploration of symbols, metaphors, and archetypes
 - may (re)define a sense of self



Open-ended Questions

Letting curiosity and openness lead

Often start with:

- how, what, where, describe, tell me about.., what do you notice, etc.

Why & what– often can be used for meaning-making, integration and/or to illicit values (layer 3):

- Why is that important to you?
- What's the most important takeaways from your experience?
- What does that say about you?

SIBAM – inquiring into the different layers of experience



SENSATIONS

- Location, qualities (soft, hard, fluid, heavy, light, etc.), temperature

"As you notice sadness, what sensations are present for you, if any?" (A-->S)
 "As you talk about that situation, I'm curious what you notice if you pause and check if there are any sensations?"(M-->S)
 - "Where do you notice it? What's it like?" (menu: is it heavy? Light? Hard? Soft?...)

IMAGES

- Spontaneous memories/scenes/imaginings
- To further describe sensations:
 Colour, texture (e.g. smooth, porous), material (e.g. metal, wood), size, shape

"Tell me more about the scene – who else was there? Can you describe the room/environment?" (I-->I)
 "That heavy tightness in your belly, does it have a shape or colour? How big is it?" (S-->I)

BEHAVIOURS

- Movements, gestures, impulses, facial expressions, sounds
- Often arise spontaneously; may gently bring attention to them and make links

"Is there a gesture that could express that joy you're feeling?" (A-->B)
 "If that black heavy anvil in the chest had a facial expression, what might it be?"(S/I-->B)
 "I noticed your shoulders tensing as you were telling me about that memory; I'm curious if you're open to exploring if there are any movements in the shoulders or arms that might feel supportive? Or, "What would it be like to exaggerate that and make it even bigger?" (B-->B)

AFFECT (emotion)

- Big 4: fear, anger, sadness, happiness
- Others: shame, repulsion, bliss, peace, tranquility, frustration, curiosity, pride, etc.

"I'm curious if there's any emotion present as you are telling me about this?" (M-->A)
 "When you see that image, what emotion is present, if any?" (I-->A)
 "I noticed your posture just changed: you sat up more (mirroring offered) - as you notice your posture now, I'm curious if there's any emotion present for you?" (B-->A)

MEANING (layer 3 inquiry)

- Cognitive interpretations, associations, narratives
- Often arise spontaneously

"As you see yourself leaning against the tree, and as you're describing the feeling of it's firm support at your back, I'm wondering if there's any meaning in this for you?"
 "If that nervous energy in your belly could speak, what might it say?"