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Bioenergetic Analysis

26. Volume, No. 1, 2016, Page 41–73

Psychozoal-Verlag

DOI: [10.30820/0743-4804-2016-26-41](https://doi.org/10.30820/0743-4804-2016-26-41)



Submissions for consideration for the next volume of *Bioenergetic Analysis* must be sent to the editor (vincentiaschroeter@gmail.com) between June 1st and September 1st, 2016.

Bibliographic information of Die Deutsche Nationalbibliothek (The German Library)
The Deutsche Nationalbibliothek lists this publication in the Deutsche Nationalbibliografie;
detailed bibliographic data are available at <http://dnb.d-nb.de>.

2016 Psychosozial-Verlag, Gießen, Germany
info@psychosozial-verlag.de
www.psychosozial-verlag.de



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Cover image: Sabine Strenger-Rehberger, *o.T.*, 1997
Cover design & layout based on drafts by Hanspeter Ludwig, Wetzlar
Typesetting: metiTec-Software, me-ti GmbH, Berlin, www.me-ti.de

<https://doi.org/10.30820/0743-4804-2016-26>
ISBN (Print) 978-3-8379-2504-3
ISSN (Online) 2747-8882 · ISSN (Print) 0743-4804

On Falling, Holding, and Grounding

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“Grasping is the source of all our problems. Since impermanence to us spells anguish, we grasp on to things desperately, even though all things change. We are terrified of letting go; terrified, in fact, of living at all, since learning to live is learning to let go. And this is the tragedy and the irony of our struggle to hold on: Not only is it impossible, but it brings us the very pain we are seeking to avoid.”

Sogyal Rinpoche, Feb. 2, 2014

Abstracts

English

Building on the theoretical and developmental history of the *fear of falling*, *holding* and *grounding* in bioenergetic analysis and other psychodynamic theories, this paper presents some of the expressions, experiences and anxieties of falling and the defensive/adaptive, characterological, intra-psychic and interpersonal correlates of holding. In addition the importance of grounding is discussed for setting a foundation and a space/relationship in which it feels safe enough to surrender to the fear of falling. This yields to one's understanding of the need to *hold*, in whatever adaptive form it takes, in order to maintain attachments and protect the life force within.

Key words: bioenergetic analysis, early trauma, fear of falling, grounding, hang-ups, holding.

German

Aufbauend auf der theoretischen und entwicklungsbezogenen Geschichte der Fallangst, des Haltens und des Erdens in der Bioenergetischen Analyse und anderen psychodynamischen Theorien, zeigt dieser Beitrag einige Ausdrucksweisen, Erfahrungen und Ängste vor dem Fallen auf sowie die defensiv-adaptiven, cha-

rakterologischen, intra-psychischen und interpersonellen Korrelate des Haltens. Zusätzlich wird die Bedeutung des Erdens für die Etablierung eines Fundaments, einer Beziehung zum Raum diskutiert, wo es sich sicher genug anfühlt, sich auf die Angst vor dem Fallen einzulassen. Das führt zu einem Verständnis der Notwendigkeit zu halten, welche Form auch immer dieses Bedürfnis annimmt, um Bindungen aufrechtzuerhalten und die innere Lebenskraft zu schützen.

French

Cet article est élaboré à partir des concepts historiques issus de l'analyse bioénergétique et d'autres théories psychodynamiques, concernant la *peur de tomber*, le fait de *se retenir* ("holding"), et l'*enracinement* ("grounding"). Il présente quelques unes des expressions, des expériences et des angoisses relatives au fait de tomber, mais également les manifestations défensives/adaptatives, caractérogiques, intrapsychiques et interpersonnelles relatives au fait de se retenir. L'importance de l'enracinement est également discutée afin de poser les bases, dans ses aspects également spatiaux et relationnels, à partir desquelles il est possible de s'abandonner à la peur de tomber tout en éprouvant une sécurité suffisante. Cela conduit au fait de mieux comprendre la nécessité que chacun éprouve dans le fait de se retenir, de quelque manière adaptative que ce soit, afin de préserver ses attachements et les forces de vie qu'ils recèlent.

Spanish

Partiendo de la historia teórica y de desarrollo del *miedo de caer*, *sostenimiento* y *arraigamiento* en el análisis bioenergético y otras teorías psicodinámicas, este documento presenta algunas de las expresiones, experiencias y ansiedades de caer y la correlación defensivo/adaptativo, caracterológica, intrapsíquica e interpersonal del sostenimiento. Además se trata la importancia del arraigamiento para establecer una fundación y un espacio/relación en la que uno se sienta lo suficientemente seguro como para rendirse ante el temor de caer. Esto cede paso al entendimiento de la necesidad de personal de *sostener*, en cualquier forma de adaptación, con el fin de preservar los apegos y proteger la fuerza vital interior.

Portuguese

Com base na história teórica e de desenvolvimento do *medo de cair*, *da contenção* e *do grounding*, na Análise Bioenergética e outras teorias psicodinâmicas, este

artigo apresenta algumas expressões, experiências e ansiedades de cair e os correlatos defensivos/adaptativos, caracterológicos, intrapsíquicos e interpessoais da contenção. Além da importância do *grounding*, discute-se o estabelecimento de uma base e um espaço/relação que forneça segurança suficiente para permitir a entrega ao medo de cair. Isto leva à compreensão da necessidade da *contenção*, qualquer que seja sua forma adaptativa, no sentido de manter apegos e proteger a força de vida interior.

1. Introduction

Several years ago, before I was exposed to bioenergetic analysis, a perfect storm of events occurred in my life. My adult daughter fell into a clinical depression, which worried, scared and shamed me. I felt overwhelmed by a couple I was treating in therapy that I feared might wind up on the front page of the New York Post, ending with one of them going to jail, and my having to bear witness to their rage and disintegration in a court of law, as their two-year old child was used as a pawn between them. I was also struggling with whether or not to retire and my computer had crashed sending me into a state of panic. In addition, I had developed a profoundly painful sinus infection, which rendered me dizzy. One evening, around the time all this was bombarding my psyche, I woke up in the middle of the night to urinate. I felt disoriented and experienced a profound loss of balance and struggled to hold onto the walls, lest I fall. I felt terrified. Even as I was struggling to “hold on, hold tight and hold together,” to gather my wits about me, (the default adaptive mode I use to negotiate life) I began to descend into a vortex of an agitated depression, which lasted several months.

In this state of what felt like total collapse, I sought out Scott Baum for a consultation. One of the first things he said to me was that he was a bioenergetic analyst and he noticed that my body looked like it was in a collapsed state, and that my stomach felt rigidly held in. As he inquired about this, I revealed that I always held in my stomach. This was a typical holding pattern for me. It indicated that I could take it. No matter what came my way I could stomach it. But at that moment I felt that I couldn't take it anymore and that I shouldn't have to. Because Scott was seeing my partner in therapy at the time, he suggested I see Bob Lewis whose love, humor, presence and compassion have filled me and held me more than I can say in words.

I spent months screaming in anguish, crying, raging and grieving for, among other things, the child within that had to “hold back” his own life force because

of the threat that energy and soul presented to my depressed, bitter, controlling and sadistic mother and my equally sadistic, detached and narcissistic father.

Because of his work on “cephalic shock” (Lewis, 1984), Bob was particularly attuned to how my wits, at the expense of my impoverished soul and body, had helped me survive a very damaging upbringing. One day, as I was lying on the couch in his office, Bob held my head, as he had done many times before. He began gently rocking my head from left to right and asking me to let out whatever sounds I could. The rocking increased as did the pitch and intensity of the sounds I was making. These sounds resonated through my body. He accelerated the rocking motion and suddenly I felt totally disorganized, shock waves were coursing through my body and I was screaming from the depth of my soul: “I’m falling, I’m falling. Help me.” I was screaming in terror as I experienced myself falling through space with no end in sight. Bob, who had been seated next to me, immediately stood up, grabbed my arm, told me to hold his arm, put his hand on my chest and said: “I am here. I have you. I’m holding you. You’re safe.”

I did feel truly held and safe. I understood on the deepest level, the terror of my childhood and why I had to dissociate that experience. My breathing eventually returned to a regulated state and Bob said: “Now you know what Winnicott meant about a holding environment. You didn’t have one.” I laughed and cried. I was exhausted but relieved and felt a little more whole and connected to my body than I had ever known before. What I had known intellectually from years of analysis was now known in a way I had never experienced before. It was no longer a cerebral understanding, it was in my body. My body tingled with that profound knowledge. It was clearer to me than ever; time does not heal those wounds that occur early in life, nor does an intellectual understanding of those early experiences devoid of affective-bodily integration. Time may conceal them, but those traumas and the bodily adaptation to them are buried within the muscles, bones, organs and every cell of our bodies. Some of us armor and hold our bodies in such a way for fear of falling, which may translate into the fear of experiencing severe anxiety, terror, depression, disorganization or rage often associated with a profound absence of a holding environment. This then tells a fuller story of our adaptations to what the Greek word *trauma* signifies: the wounds, damages and defeats we experienced at a time when we were not at all prepared to protect ourselves.

I have been using the words hold, holding and held to describe the physical act of tightening my stomach muscles to hold in that region in order to maintain my characterological pattern that, however ultimately limiting, protected my sense of self from being overwhelmed. I have also used the terms to denote the

experience of being held by and/or holding on to another, exemplified by Bob Lewis's holding me and my holding his arm as I experienced the terror of falling forever. In the latter experience, touch became a means of feeling safely attached rather than abused. All of these holding experiences involve somato-psychic relational connections. Throughout the remainder of the paper the reader will note these various uses and meanings of the terms hold, holding, and/or held as they refer to being cared for by another or by self, or armoring and positioning oneself in relation to a real or perceived environmental invasion, neglect and/or abuse. Clearly some forms of holding are loving, encouraging, and supportive; and when they are, we feel safe enough to allow ourselves the right to reach out to or fall into the arms of another. Other forms of holding can be used to constrain, to control, to abuse, to invade, etc. We also construct our own holding patterns in order to resist falling in on ourselves, thus avoiding experiencing the realities of our embodied being, including disappointing, humiliating, terrorizing, neglectful, oppressive and/or disorganizing experiences.

As a result of Scott's observation of my holding pattern and Bob's facilitating my body awareness of and his compassionately bearing witness to my lack of a "holding environment" and my terror of "falling forever," I became fascinated with issues and experiences surrounding the "holding/falling" dialectic. As I begin to be more comfortable linking my newly formed bioenergetic awareness with my more familiar interpersonal/psychodynamic understanding, I have been asking my patients to participate in grounding exercises. I am learning that a good number of them, when I have asked them to stand on their feet, soften their knees and keep their feet parallel to each other at about shoulder width and imagine roots growing from the soles of their feet and burrowing through the ground until the roots reach the earth below, spontaneously announce that they are afraid of falling. As they leave their adaptive, protective stance, they report feeling unbalanced and in danger of falling.

2. Bioenergetic Views on Holding and Falling

Lowen (1976) has written about "hang-ups" which represent conscious or unconscious emotional conflicts that become structured in the body in the form of chronic muscular tensions, and which are the antitheses of being grounded. The further the person is from feeling grounded the greater is his hang up and fear of falling. Lowen states that the major thrust of bioenergetic work is to get a person into his legs and feet; to be truly rooted in reality means to be embodied, to be

aware of one's body in space, externally and internally and in relation to others. But coming downward into one's legs/feet and thus into reality may bring with it a variety of anxieties that had been held out of awareness. Lowen talks about the fear of collapsing into a depression as one's illusions give way to the real self. The letting go of illusions, masks, and/or armor often creates a sense of loss. In his discussion of the narcissistic style, Johnson (1987) points out that as the false self of the narcissist yields to the symptomatic self, depression often follows. Lowen (1983), a self-proclaimed phallic narcissist, may have been referring to his own experience of depression as he tried to become more grounded. I recall during a first year class in bioenergetics, Jodi Schneider guiding me through the Bend-over exercise. As I rushed to return to an upright position, she cautioned me to come up slowly. As I did, a surprising wave of sadness swept through my body. No wonder I wanted to come up quickly. I had let go of the muscles in my abdomen, upper body, neck, jaw and head. When I let go of my holding pattern, the reality of a deeper grief became apparent. This is not to say that all character types/styles will experience depression or sadness as they move toward greater grounding; it may be more related to those with predominantly narcissistic styles. Others may feel anxiety, panic, rage, terror, or even joy.

Lowen (1976) posits that the fear of getting into one's real self is associated with the dread of falling. He states that "in the interval between letting go and feeling one's feet solid on the ground, one experiences the sensation of falling and the anxiety it evokes" (p. 198). In his autobiography (2003), he reiterates "all neurotic individuals have a fear of falling, because this is experienced as a defeat by the ego" (p. 180). Lowen notes that the fear of falling is also a transitional stage between being hung up and having one's feet firmly planted on the ground. In *Fear of Life* (1980) he writes that "when a patient gives up his defensive position, he will experience some sense of being mad or crazy" (p. 145).

This is not unlike the Rogerian therapist, Sidney Jourard's (1968) discussion of change in the course of psychotherapy. He posits that if one insists on holding onto the illusion one has about herself, she will clearly not grow. In letting go of the false self, there is a fear of going out of one's mind. Because indeed, for change to occur one must go out of one's illusory mind and into one more deeply grounded in reality. It resonates with Fritz Perls's famous statement challenging one to go out of her mind and into her senses. This may be terrifying. For those suffering from very early chronic trauma, letting go can signify annihilation.

Extending both Lowen's and Jourard's contention that the fear of falling is a transitional period between holding onto a familiar adaptive pattern and a letting go toward a more grounded position in reality, I am positing that each character

structure, as suggested below by Hilton (2007) and Johnson (1994), has a specific holding pattern protecting one from a specific fear of falling; and that for each character structure the fear of falling may equate to the fear of re-living the dreadful dissociated embodied experiences resulting from the negative environmental forces that presented obstacles to the developmental task at hand. The fear of falling has a particular significance at each developmental level. A few examples from my practice may be useful to illustrate the point.

Case Example 1

Maggie is a very talented teacher and writer who exemplifies the schizoid structure. She came to see me when she was 67 years old, shortly after her husband of many years had died following a long illness. She appeared frightened, mousy and hid herself on the sofa in my office as far from where I sat as possible. She would often hide her face behind her hand when speaking of something uncomfortable. She told me it was her way of thinking. When she left the room at the end of a session, it seemed as if she were trying to leave without being seen. Initially, I felt weighed down by her lack of energy. But I noticed that she wore an ankle bracelet, and she had a sense of style. And when she took her hand away from her face, her eyes would connect with mine for just a second. I could feel an energy that wanted to be freed.

Grounding exercises, writing short stories about her early life experiences and connecting with a fitness trainer who comes to her apartment, all help to bring her more in touch with her body and allow more energy to be taken in, acknowledged and expressed.

During the course of our work together, she would from time to time say that she felt as if she were *falling off a cliff*, particularly when she was alone. This was a very frightening experience for her. She talked about spending more time alone and going into places that she called “unreality, aloneness, and disembodiment.” It mirrored experiences from her childhood. We talked about her experiences of being the good girl, the obedient child, and the non-expressive and non-demanding child who sort of floated around the house in which she lived with her mother, grandparents and uncle.

I noticed her feet and ankles as she spoke about these experiences. They would shake and then curl and contract. She recalled how her uncle had a foot tic, as the family called it, and about which her grandfather was furious. I suggested it might have been one of the only means of expressing the life within, (and perhaps

the inhibited rage) that he had available, but his foot shaking was disdained and disallowed. No wonder she felt disembodied, she had to empty herself out and get into her head to survive. We did ankle exercises recommended by Conger (1994), which allowed a gentle layering of tolerable amounts of energy and a growing sense of groundedness as her ankles opened to her feet and calves.

Maggie talked about feeling insubstantial and of little value. We explored a childhood where she was the little adult who had to stay under the radar. Energy had to be suppressed as she tried to survive in a life-deadening environment. She never knew quite where she belonged. Her estranged father, whom her mother divorced when Maggie was 4 years old, had much energy but was seen as “being the limit,” meaning “too much” in her mother’s lexicon. He was a dreamer, a gambler and a risk taker.

She told a story of two college professors who wanted to work with her on an honors paper in an area of great interest to her. She chose neither of them and went to another professor for mentorship. One she didn’t particularly like, nor was he particularly interested in the subject matter most dear to her. When I asked about that, she told me that she was afraid that if she got too close to either of the first two they would see right through her and notice that there was nothing there. Or perhaps they would not like what they did see. She grieved missed opportunities. She spoke of how she would, until recently, hide out in groups, avoid asking for what she wanted, and make herself disappear. She referred to her childhood home as one of “stoic disappointment.” She felt her family was seemingly benign to her, but devoid of energy, connection or hope. Of course we could see in the incident with her uncle’s so-called foot tic, her grandfather was hardly benign. As she spoke of these experiences, I felt a heaviness across my chest and an accompanying deep sadness. When I told her of this, she excitedly said, “Me too.” I then asked her to breathe into her chest. I did likewise and had an immediate reaction. As my chest filled with energy, I felt: “Oh, I exist! I am real!” I shared that experience with her. A smile came across her face, there was no hand hiding it, and she said she could feel her realness too. She laughed.

As I inquired more about her experience of falling off a cliff, she would get teary and let me know that there would be nobody to even notice that she was falling. It was frightening and terrifying and profoundly sad. She would shudder. This experience is captured in Michael Eigen’s concept of an “electrified tightrope” on which the person walks with no net beneath them (Scott Baum, personal communication).

There was no one to bounce off, no borders, no boundaries; “I had no direction,” she decried. The only imperative she could recall was that she and her

family were not to think that “they were somebody,” meaning too big for their britches; the caveat however, speaks volumes.

Maggie has come to appreciate and to know her own power and capacity for tapping into the energy available. She can hide out if she needs to, but she doesn’t feel she absolutely has to anymore. She recently told me that she feels more real. It is not necessarily good or bad, just real and that is satisfying to her, she says.

Case Example 2

A 53 year old man named Dan, who fits the description of the narcissistic character structure, informed me that he had *fallen* on hard times and was depressed, his reason for seeking therapy. Hard times meant that he went from having 15 million dollars in the bank to having less than 7 million and wasn’t sure how he was going to return to his former state of glory, as he put it. Nor was he anymore the “wunder kind” he had always seen himself as. He had been in a powerful executive position in a business that folded and he was consumed with getting back on top. He would often use the term: “*How the mighty have fallen!*” in reference to himself. This is a man whose mother, now deceased, told him that he was better than his sister, that she could rely on him and that she had great expectations for him. Indeed, he was a gifted, ambitious and a hard working entrepreneur, more gifted than his father. He had little respect for his wife or kids and valued himself as an honest businessman. “If only I had been more ruthless,” he would lament, meaning he then wouldn’t be in the circumstances in which he now found himself. He had no sense of how ruthless and disdainful he was to his family members and those who challenged his authority.

In the course of exploring his phrase, “How the mighty have fallen,” I asked him to imagine himself falling from a great height. After several attempts, he was able to picture himself falling from a high place and his breathing seemed to stop for a moment. For a very brief second, I could see a rise and a tightening in his torso. He quickly stopped the exercise. Nevertheless, the following statement and recollection came to him: “They betrayed me. They used me. When I was 18 or 20, I went to work for my father, who had always encouraged my competitiveness. It was my first real big money earning job. I was selling real estate. My father and my uncle ran the business and they promised me a lot of money and a bonus if I sold over a certain amount. I surpassed everyone’s expectations. But when it came time to get the bonus, they said I wouldn’t get it. But you promised,” he said.

Their reply was something like: “Well, that will teach you not to trust everything people tell you.”

Dan was devastated; he was in touch with his shock, his sense of betrayal and his anger. I suspect that were he able to really allow himself to fall, he might have experienced the many betrayals he had known prior to that particular incident: the realization of being used by both parents and the rage and grief underlying those experiences. But more poignantly, he might have been able to access his deep sense of emptiness and powerlessness and how manipulating others to maintain his own sense of power would be the core around which he would organize his identity.

Case Example 3

For the rigid character, falling, letting go, can mean betrayal yet again. Babette, who is a very pretty, ambitious, petite young woman of 33, has had many romantic relationships, which typically end amicably but leave her feeling once again unfulfilled and frightened that she will never find love and have a family. Recently, she has been dating a travelling musician who appears to be quite talented, handsome, cerebral and distant. She says, “He is cool.” She uses the term in the current slang to mean “very good.” But it is clear that she experiences him in the more common use of the word suggesting a lack of warmth, etc. Babette feels she does most of the work to keep the relationship going; she is continuously disappointed by his lack of responsiveness and emotional distance. She will write lengthy emails to which he will respond with a word or a line. She has typically avoided men whom she says are probably good for her, thoughtful, considerate, and caring.

There are two vignettes that we often refer to regarding interactions with her father who is a very self-absorbed, wealthy businessman. The first story is about his coming to New York on business and arranging to meet her for dinner. He tells her how eager he is to see her and what a great opportunity for just the two of them to get together. She is very excited to see him and is anticipating a lovely evening with her father. The day of the proposed dinner, he calls and tells her that coincidentally his good friend just notified him that he too is in the city and would love to have dinner with him. He invites his daughter to join them, which she refuses. Her father is annoyed and frustrated by her response. The call over, she hung up the phone and cried. “He invites me and pushes me away. He always does shit like this.”

The second story is of her visiting her parents on the west coast where this

time, she has come for business. Having spent a fairly pleasant day with them and her sister, she is getting ready to go to a business event that evening. She tells the family that she will take a cab. Her father insists that it is waste of money and that he will drive her. She accepts his offer. As the time draws near to leave, Babette becomes anxious, because she is ready and her father hasn't even begun to dress. She reminds him of the time of the event and how it is getting close. He becomes agitated that she is pushing him. It ends badly, with his accusing her of being difficult. Her father is busy looking for his cuff links while the clock is ticking. Babette takes a cab to her event.

These two anecdotes speak to the experience of feeling chronically disappointed by her father and of her choosing men who fit into her characterological choreography. Her holding back is for fear of falling as she anticipates the rug being pulled out from under her yet again. "Is it any wonder," she said recently, "that I won't let myself *fall in love* with someone who will be there for me; that I don't believe it when men are kind and thoughtful; that I have to close my heart and keep testing and testing until they fail as I know they will."

3. Hang-ups and Holding Patterns

In his discussion of the chest segment, Reich (1949) originally stated that chest armor, when in an attitude of being pulled back suggests a stance of being "self-contained" or "self-controlled," of "sticking to oneself," or "being reserved." In all, these adaptations represent forms of "holding back."

Lowen saw emotional "hang-ups" as manifested in the body in such postures that he labeled the "coat-hanger type" with its raised shoulders and expression of fear; or the "meat-hook hang-up" represented by the so-called dowager's hump containing blocked anger; or the "noose" which is characteristic of the schizoid structure, among others. It seems that Lowen uses hanger types and holding patterns somewhat interchangeably, with the former being somewhat more metaphoric. Lowen (1976), Hilton (2007), and Johnson (1985; 1994) have all written about character structure, holding patterns, and accompanying falling fears. Modern bioenergetic analysts fundamentally agree that the impact of environmental forces upon the emerging human being's basic developmental needs shape the relational, psychic and somatic structures of the individual in the form of defensive body armor. In his attempt to attach to and survive in a particular familial or caretaking environment, the individual reflexively, through his involuntary muscles, inhibits/contracts his natural strivings thereby identifying with

the caretakers' frustrations, inhibitions and/or aspirations. These chronic defensive postures form the basis of one's habitual ways of relating to himself and others, as well as one's affective attitudes and cognitive styles. Some classic examples of these holding postures with their accompanying falling fears are as follows:

The schizoid character is depicted as desperately trying to "hold together" against the fear of annihilation or "falling apart."

The oral character is trying to "hold-on" in the face of collapse, or the fear of "falling behind" or "falling back."

The psychopathic/narcissistic/character tries to "hold himself up" to ward off the fear of failing, or "falling down."

The masochistic character "holds-in" as a way of avoiding the bottom from "falling-out" or making a mess.

"Holding-back" is the stance taken by the rigid character for fear of "falling on his face" or "falling forward" toward a broken-heart, thus the fear of "falling in love."

Perhaps, presaging the work of Winnicott, Reich (1949) describes an acute falling anxiety that occurred in a child of three weeks. He writes:

"It occurred when he was taken out of his bath and put on his back on the table. It was not immediately clear whether the cooling of the skin had precipitated the falling anxiety ... the child began to cry violently, pulled back his arms as if to gain support, tired to bring his head forward, showed intense anxiety in his eyes and could not be calmed down ... There was a definite contraction in the musculature of the right shoulder ... the child had pulled back both shoulders as if to gain a hold" (p. 329).

Similarly, Feldenkrais (1949) writes about the newborn's violent reaction to being "suddenly lowered, or if support is sharply withdrawn." He notes that one can observe a

"contraction in the all the flexors and a halt of breath ... followed by crying, accelerated pulse, and general vasomotor disturbance. The similarity of reaction of a newborn infant to withdrawal of support, and that of fright or fear in the adult is remarkable. This reaction to falling is present at birth" (p. 115).

He goes on to say "And sudden, sharp lowering of a newborn infant elicits the series of reflexes which are the reaction of the body to falling," which is the basis of all anxieties in whatever form they may eventually take (p. 117-118).

Hilton (2007) added the borderline holding pattern, which he characterized as “holding-apart,” splitting as a means of warding off “falling into an abyss,” or “holding-still” in Johnson’s words (1991). It is not clear that the borderline represents a fixed structure in the way Lowen describes such. It seems rather to be an absence of structure, a loosely held frame. Baum (1997) likens it to a vase that is made of many broken pieces without sufficient glue to bind it. Thus it is easily fragmented and takes an enormous effort to reassemble it each time it collapses. It is like humpty-dumpty trying to put himself back together again and again. Unlike the disciplined free-fall of a trapeze-artist or a trained sky diver, Baum posits that the fear is of falling in a disorganized way, without a solid sense of being able to re-organize oneself from this position. Similarly, a supervisor of mine noted: “If one is going to ‘regress in the service of the ego,’ it’s comforting to know that you have a return ticket on the train ride back.”

In his presentation of “cephalic shock,” his bioenergetic translation of Winnicott’s “view of the dissociated mind and body,” Lewis (1980) describes aspects of the false self as embodying the following:

“cephalic bracing, a holding, holding together and holding against the shock to its ongoing being ... This often takes the form of a premature and unnatural fight against gravity (mother) which is structured into the head, neck and shoulder girdle ... as soon as it becomes capable of thinking, this ego ability becomes part of the child’s automatic cephalic process for holding on for dear life” (p. III)

“There is no piece of the head and mind within that is ever free of the burden of holding its world together ... The infant first holds onto itself for dear life, then tries to pull up and away from the parent”(p. IV).

Dan Siegel’s (1999) discussion of the disorganized attachment style points out the split between trying to get away from the terrifying parent, a natural flight response from noxious stimuli, while simultaneously seeking comfort from the caretaker (another natural biological directive) who is creating the stress. This leaves the child’s sense of self and attachments quite confused and split in the way Lewis describes it.

In another context, Lewis (1974) states that it is “unrealistic to expect some patients to relate to and integrate the feeling of standing on their feet for they lost too much ground in the process of growing up.” Scott Baum (2007) in his treatise on the borderline structure, reiterates this view when he writes: “It is appalling,

and terrifying to become aware of the irreparability of that damage.” Its implication is clear: grounding can provide the basis for one’s being able to hold one’s self in good stead. But when there has been too much “ground” lost, it becomes very difficult, if not impossible to make up for this lost ground and thus the individual may be stuck “holding on for dear life.” It is similar to a person who had been blind or deaf from birth and then sometime in adulthood gains these senses. He or she will never be able to see or hear like the person who was born hearing or sighted. It raises the question as to whether there is a critical period before the brain closes to new learning not only in seeing, hearing and language development but to intrapsychic and interpersonal development as well. To wit are stories of feral children or those who came from abusive/neglectful backgrounds and then are adopted by good enough parents. With so much ground having been lost, the transition to a place where one feels solidity connected to reality, if possible, can take a lifetime.

Although Keleman’s book, *Emotional Anatomy* (1985) is sparse in its use of the words holding and/or falling, his work concerning our adaptive reactions to insult via the startle response reflect somato-psychic positions of holding. Keleman posits that the “startle reflex is the fundamental response to any stimuli that are unknown ...” The initial response is in the upper body which, in order to focus on the novel stimulus, “must grab, hold, brace. So the beginning of the startle reaction can be characterized as a state of *hold it!*” Thus the spine stiffens and the diaphragm descends opening the airways. He goes on to say that the startle response is on a continuum from assertion to defeat, from rigidity to shock. The body reacts to environmental forces by halting pulsation, creating segmentation, and/or using more layers of its self to respond to the insult. Keleman gives us what he sees as the various somatic reactions to the startle response, depending on the event, its severity and temporality. The normal response of readying the individual to investigate, challenge and straighten-up may yield to: an upright readiness to action; a rigid pulling-up and back; a closing-up and pulling in; a protruding outward; or a collapsing and falling inward. All these positions can easily be translated into postures of “holding” oneself in the presence of powerful environmental restrictions, invasions and prohibitions as is being discussed here.

In his discussion of grounding, Keleman (1994) states that

“If we do not have plenty of touching and holding we may never be sure of ourselves emotionally, of the ground we stand on, since we cannot trust others to hold us ... People who are not held enough have a fear of falling and hold themselves stiffly away from the earth ... [nor can they] really hold their ground with others.”

Similarly, John Conger (1995) writes that, “What the mother does not touch remains undeveloped and unconceptualized, so that we grow up with impoverished images of our embodied selves.” He also states that we tend to compensate for the lack of grounding “by ‘holding on’ with watchful eyes and the musculature of our arms and shoulders, as if we were grasping the outer world for safety.”

Kindlon and Thompson (2000) note that,

“the opiate system partially governs emotional attachment by its connection to the sense of touch. In a very real way, this tactile sense not only protects from pain ... it allows us to be comforted ... All kinds of touch result in the release of these natural painkilling opiates.”

Thus, when a hurt child runs to his mother, “her touch not only brings psychological reassurance and the promise of safety, but it also literally helps relieve the pain” (p. 185). In his discussion of the usefulness of touching in psychotherapy, Jourard (1968) writes “I believe the time to dispense with the touch-taboo in psychotherapy is now” (p. 65). He goes on to say “Mothering is mediated, among other ways, by cuddling and holding. I suspect the need for such mothering is never completely lost.”

If the environment cannot facilitate a good enough holding environment, then the infant/child must learn to hold herself. This is done with the few internal and external resources available at the time(s) of trauma. It is in Johnson’s words (2012), “An elegant solution, based on the resources possessed at the time of their creation.” Depending on when the insults to the life force of the developing human being occur, we can see the beginning development of a character structure that includes a holding pattern as an adaptation to the dread of falling within a psycho-biological-relational matrix. It must also be added that the trauma is not a once-in-awhile event, but is a fairly constant experience in the development of the individual. In fact, as Tuccillo and Baum (2012) maintain, it is the relationship between the caretaker(s) and the infant/child that is the trauma. They call it “chronic relational trauma” which is the result of chronic relational abuse. The latter abuse comes from “being dominated, or defined, or manipulated or demeaned, or seduced ... by another, in an ongoing relationship so that these destructive dynamics-power dynamics-happen regularly, chronically.” Masud Kahn (1995) uses a similar term, “cumulative trauma” to describe such phenomena as daily demeaning of a child or ongoing parent conflicts to which the child

consistently bears witness. From a Relational Analytic perspective, Bromberg (2011) uses the term “developmental trauma” which results from “consistent nonrecognition and disconfirmation” of the infant/child as he is. Parents, he states, relating to a child as though he were “such and such and ignoring other aspects of him as if they don’t exist disconfirm the existence of those aspects of the child’s relational self.” He is in agreement with Tuccillo and Baum, stating that the relationship between caregiver(s) and the developing child is not the *source* of trauma, but *is* the trauma (italics added). This is poignantly depicted by a fifty-year-old male patient of mine who is struggling to feel humanly connected to others. As he was describing his early childhood experience of being the totally “good and obedient child,” I noticed his hand was holding on to the strap of his backpack. I pointed that out to him. He then told me of a crustacean that lived in the Mediterranean, near where he was raised, that clung to a rock during storms. And when the storm was over it would release its holding pattern and breathe a little until the next storm came. “For me,” he said, “it wasn’t waiting for a storm to blow over; I was living the storm on a daily basis. My family was the storm.”

4. Other Psychodynamic Views on Holding and Falling

The concept and importance of a “holding environment” is by now part of every psychodynamic therapist’s understanding of early attachment and its relevance to the maturational process. Winnicott (1965, 1975) writes that without the environment the infant would fall infinitely. The infant who is held is not aware of being preserved from the infinite falling. A slight failure of holding, however, brings to the infant a sensation of infinite falling. Although the concepts of a “holding environment” and “falling forever” were not to come for another thirty years, the seeds of them are noticeable in a brief article by Ferenczi (1969) concerning “Sensations of giddiness at the end of the psycho-analytic session,” originally published in 1926. He writes about the patient giving himself up wholly to free association, transference and a feeling of being in a good environment. “Suddenly this illusion is destroyed by the doctor’s warning that the session is ended; he suddenly becomes conscious of the actual facts; he is not ‘at home’ here, but a patient like any other ... this is not the helpful father that stands before him. This sudden alteration of the psychic setting, the disillusionment (when one feels as ‘though fallen from the clouds’) may call up ... a feeling as is experienced in sudden and unexpected change of posture when one is unable to adapt oneself ...

to preserve one's 'equilibrium.'" This is a clear description of the need to hold as a reaction to the fear of falling. Today we might also understand that the disillusion and concomitant body reactions are not only toward the transference figure, the analyst, who is not the idealized father, but more importantly, to the original caretaker who did not provide the necessary holding for that person's secure development. But Ferenczi did not process this for himself or with the patient, even though he was one of the early analysts who was not afraid to hold or touch a patient.

In a small book of his unpublished papers, Winnicott (1987) uses the words hold, holding, held, handle, or handling, more than forty times. He states that

"Infant care can be described in terms of holding. He notes that holding becomes more than physical as the infant develops. But that in the beginning, actual good holding and handling facilitates the maturational process, while the opposite is equally true and development is likely to be held up. The latter is reminiscent of Lowen's concept of 'hang-ups.'"

Winnicott proceeds to say that "every distortion of the infantile developmental process is accompanied by unthinkable anxiety: disintegration, falling forever, total failure of relating to objects, etc."

Falling forever is an experience of terror without end. I have borne witness to a patient who has been in touch with this fear in dreams, reveries, or expressed as fear of heights. This experience is like a game adults often play with children at the beach where four adults, each holding a corner of a beach-blanket bounces a child, who is lying on the blanket, up and down. Everyone is having a grand old time. Now imagine that you are this child being bounced up and down on that blanket, and now having been bounced up, they all take the blanket and walk away. There is no one to catch you. The image usually produces a sense of horror, dread, and fear of annihilation.

Winnicott states that when the mothering-person is unable to provide a good enough environment for her child, to provide an auxiliary ego, there is no ground upon which to build his identity; so the infant must resort to self-holding. That is, where environmental holding, which should have provided the ground upon which a solid sense of self can develop, is absent or deeply flawed, the infant/child must learn to hold himself; and must do so with the very rudimentary capacities available to an undeveloped being.

Although he does not credit Winnicott, clearly Lowen (2003) seems to be echoing his views when he writes,

“Babies and children are not grounded in terms of the contact between their feet and the earth. They are of course, grounded in their relationship to their real mother. When that relationship is broken, the child withdraws its energy and becomes autistic; in a very young child, this is anaclitic depression.”

In his autobiography (*ibid.*) he writes, “When a baby is born, its ground is the warm and loving body of its mother.”

Winnicott’s work on “unthinkable anxiety” is very much related to Sullivan’s (1953) concept of “uncanny emotions.” The latter derives from what Sullivan calls the personification of “not-me” which is an unconscious

“organization of experiences with significant people that has been subjected to such intense anxiety ... that it was impossible for the then “relatively rudimentary person to make any sense of. This very intense anxiety precipitated by a sudden, intense, negative emotional reaction on the part of the significant environment has more than a little in common with a blow to the head. And this is experienced as an *uncanny* emotion: awe, dread, loathing, horror.”

Although he doesn’t write much about bodily sensations other than those affecting the digestive system, like diarrhea, vomiting, revulsion, etc., Sullivan does talk about “convulsions of some muscle groups” that hold the dissociated experiences and may be manifested as tics, and/or gross motor acts that are unconscious or meaningless to the person.

To summarize, Reich (1972) suggested that allowing the life force, the energy within us, to flow freely was the hallmark of physical and mental health. The cultural and familial patterns of responding to these forces create blocks to the natural flow and it is the therapist’s job to help the patient open up the resistances that present in the form of body armor; the work is about freeing the flow of energy so that it can pulsate, vibrate, contract, expand, and regulate as needed. While this is a useful foundation, Lowen allowed that this was not sufficient to permit a person to feel fully embodied, empowered and loving. Modern bioenergetic analysts, (Baum et al, 2011; Hilton, 2007; Lewis, 2007; Tonella, 2008) have taken the work of these two giants and expanded it using our current knowledge of parent-child relations, attachment styles, neuro-bio-chemical brain events as well as the importance of the energy flow within and between the patient and therapist. Still, at its foundation, it is the deep conviction of the centrality of the flow of energy, and the contractions, expansions, restrictions, blockages and resistances to that flow and the interventions that challenge these blocking patterns

that engage bioenergetic analysts. One such pattern is holding in the face of the dread of falling in its various manifestations. These may be seen as self-organizing responses to chronic relational trauma, which become habitual ways of relating to the world and oneself way beyond their usefulness in present time. Yet the fear of letting go of these positions means facing the terror that set them in place to begin with.

The question is often asked, “Why do we hold onto non-productive, sometimes self-destructive patterns?” Two fundamental human needs, perhaps ones that are built into our DNA, are the need for self-cohesiveness and the “need to be our parents’ child,” in the words of Philip Bromberg (2011). The somato-psychic, relational patterns, the holding patterns, derived in part as an attempt to stay attached and be known in the world in which we develop, become wired into our bodies and psyches. They become a known, habitual way of thinking, behaving and feeling that are deeply engraved in our neurons and in our musculature. We don’t have to rediscover ourselves in relation to ourselves and the world each time we wake up in the morning. Nor do we have to endure the powerful, and potentially destabilizing, emotions that we have tucked away in our bodies. We hold on to familiar old patterns because we are afraid to fall.

Neuro-biological Interpersonal theory offers us another view of why we repeat old patterns. Siegel (1999) writes that traumatic events that occur to an infant/child before 18–24 months of age, before the hippocampus is fully developed, may get stuck in the implicit memory system. This system is comprised of bodily sensations, motoric impulses, perceptions, emotions, schemas and a priming of the system to be vigilant. If the hippocampus is not available to give the person perspective on what is now and what was then, certain triggers in the present can set off the implicit memory system, and all that implies, leaving one to experience a current event as if it were the same as happened in the past. Without hippocampus engagement there is no perspective. He adds that the hippocampus can be turned off by among others things, excessive drinking, rage, massive release of stress hormones, and traumas.

In a discussion of the oral character, Lowen (1980) writes

“All tensions serve the function of blocking the expression of that which is too painful. It is painful to want to suck a breast when none is available, to reach out when no one is there ... By compressing their lips, setting their jaws, and constricting their throats, children can block the desire and deaden the pain of a need that will not be fulfilled. But then, [and this is the point] as adults they are similarly blocked in their ability to reach out to another person with feeling” (p. 168)

and get what they need to work through the early traumas. “The inner emptiness remains, and the person is forced to repeat the [compensatory] experience again and again” (p. 166) until such time as she is able to re-experience and express the pain and accompanying experiences of the original traumas that are now held in the body. He likens this to Freud’s repetition compulsion.

Lowen (1976) posited,

“Whatever its origins, every holding pattern represents in the present the unconscious use of the will against the natural forces of life. For every patient, falling represents surrender or giving up of his holding pattern. Anxiety associated with the fear of falling is one of the deepest in human personality.”

Discussing his own insecurity, based on his own lack of grounding, Lowen (2003) notes that he always felt nervous when he stood close to the edge of a precipice.

“Even though I tried to keep myself straight, I could never find the position of my feet that would give me the good sense of security that many other people have. The idea that I was unconsciously leaning forward did not occur to me until I worked with a patient who sat far forward in his chair when we were discussing his problem.”

Lowen realized that the patient was “ahead” of himself. And he realized that he had been doing the same thing, i. e., “scanning the foreground to pick up any evidence of danger.” Lowen notes that “My body was forcing me to come to terms with my willfulness and head control.” Bob Lewis might say that he was too much in his head; that he was suffering from “cephalic shock,” which kept him in his head and away from his body and solid grounding – leading to a chronic sense of insecurity that he was trying to compensate for by being even more in his head. Lewis (2007) writes “Lowen’s odyssey is about never having come to terms sufficiently with the shock in head (cephalic shock) to find the peace of mind that eluded him.” In *Fear of Life* (1980), Lowen writes about a patient who says, “If I let go of my head, bend down, I feel weak, helpless, and frightened. I have to hold myself up.” Lowen goes on to say that the back of the neck is an important “holding” area in the body, and most of us have strong tensions there because we are afraid of losing control by letting go of the head. Finally, he writes, “We hold against our anger, our sadness, and our fear. We hold in our crying and our screaming. We hold back our love. We do this because we are afraid to let go, afraid to be, afraid to live.”

5. Grounding, Holding, and Falling

In writing about grounding, which is a basic tenet of his work, Lowen (2003) states that the difficulty in getting grounded lies in the fact that it is more frightening to move downward than up – the former being associated with the idea of falling. To the extent that the contact between the supporting structure of the body (the legs and feet) and the ground is compromised, there is disturbance in one's relationship to self, others and reality. Again he relates this to the "falling anxiety" which he notes is manifested in dreams of falling, fear of heights, and fear of "falling in love." He goes on to say that in a safe environment, as one lets down, the first feeling is that of sadness, a "breakdown" into tears, a surrender to the affect held in the belly, a letting go of the holding pattern. The second experience that derives from first learning to be grounded, standing on one's feet, is the feeling of standing alone. And in the interval between letting go and feeling one's feet solid on the ground, one feels a sensation of falling and profound anxiety.

In this interval lies the unexpected shock that comes from experiencing a dissociated aspect of the self. When the person doesn't feel safe enough to risk getting into his feet, the holding pattern rigidifies and/or chaos ensues. The paradox being that as one feels more grounded (held), the fear of falling lessens and thus the need to rigidify the holding pattern, or falling into chaos, is reduced. Mayer (1996) writes

"We have to give up one thing in order to see the other. We have to lose what's familiar in order to see what's new ... Giving up our habitual grounding in rational thought to see something else, even just for a moment-that's anything but easy for most of us" (p. 138).

Providing a safe and grounded environment comes in many varieties. One may hold with one's eyes, one's voice, one's words, one's physical being, attitude, and so forth. Anita Madden (2005) writes that "holding and support of the head creates a form of grounding. Such as is supplied by a 'good enough' mother." In a discussion of her own experience as she was detoxifying her body, Madden describes the shock her body was in and how she clenched to avoid the cold/shivering she felt; she was afraid that if she "let go" to the shivering, she might die. "I wanted to hold on. I wanted to let go." Note the paradox again.

At another time in her life, after having lived for over a year with great stress, she describes a workshop- experience with Peter Fernald, who having created a safe enough environment encouraged her to stand in a grounding position. She states that, "As vibrations increased throughout my body, I felt I could no longer

stand up. I could no longer 'hold up, or 'hold on' ... I lay down on a mattress ... I felt relaxed, open and re-energized. I had let go." Anita is describing an experience in which she risked falling, and having falling safely she was able to let go of the defensive vigilance that had gripped her the past year. She was for that moment grounded in reality.

Danita Hall's (2013) presentation on grounding speaks to the importance of grounding in bioenergetic work, its origins, manifestations, and connections to developmental and relational processes. Using the Bow Position as a basic grounding exercise, she points to the limits of the various characterological structures to experiencing a full body experience. In this context, she reiterates Lewis's (1974) caveat that it is ..." unrealistic to expect some patients to relate to and integrate the feeling of standing on their feet for they have lost too much ground in the process of growing up."

Describing various examples, using different grounding techniques, Hall points out that attention must be paid by the therapist to the developmental and characterological structure of the patient. Again underscoring the importance of relationship in grounding, she states, "Not only does grounding come from being held and supported by the ground, the therapist's touch and holding and focusing words act as a ground ..."

A patient of mine, who had recently been diagnosed with a chronic illness, was experiencing the world as though the ground had fallen out beneath him. As I was compassionately bearing witness to his terror, despair and confusion, I asked him if he wanted me to hold him. "It wasn't necessary," he replied. "I feel you holding me with your voice."

It is clear that the concept of grounding has evolved, as has the practice of bioenergetic therapy which more and more is taking into account the importance of the therapeutic relationship and the space within which that evolves; but also the concepts of attachment, holding and falling which are part of that matrix have evolved as central issues in the relational and characterological development of the individual. As Scott Baum (2007) has written, "The therapeutic relationship acts as a holding environment for the truth to emerge."

6. English Language Expressions of Holding and Fear of Falling

Table 2 presents a list of English language expressions having to do with the fear of falling related to character structure and holding patterns. There are other ex-

pressions in the English language that have not been included in the table below, but which may fit into the suggested paradigm presented, such as “falling off the wagon,” “falling asleep,” or “falling on hard times” for example.

One more disclaimer: I am not sure how the idiomatic expressions that follow translate into other languages. I assume there are equivalent expressions that carry similar meanings but I cannot be certain. With this caveat in mind, what follows are lists of holding patterns (somatic adaptations), corresponding expressions of fear of falling (intra-psychic) and common expressions (holding attitudes) depicting attitudes or postures toward others (interpersonal). There are many expressions that incorporate the words *holding* or *falling* that have specific meanings in the English language. Adding to the bioenergetic theorizing already cited on holding and falling, I have expanded on Hilton's (2007) interpersonal stances (holding attitudes) and clustered them under the rubric of each of the classical character structures subscribed to by most bioenergetic analysts. As no character structure presents in pure form, there is clearly overlap of postures, fears and attitudes presented. I have included the so-called borderline structure because Hilton (2007) and Johnson (1991) have written about it as a holding pattern. But, I do so hesitantly because of the controversial nature of the concept at this time; nor am I sure, as stated before, that it is a character structure, armor, in the way envisioned by Lowen. Rather as suggested earlier, it may be a different order of structure or lack thereof. It may make more sense to view it on a continuum that runs from psychotic ... borderline ... neurotic ... personality disorder ... to character style. Johnson (1994) has written on this issue, as has Schroeter (2009). She states that “I have contemplated that borderline is not even a character type ... a person may be any character type, but within that type, operate at a lower ... to middle ... to higher level of functioning.” Struggling with the concept of borderline, Rentoul (2010) states, “It is not obvious what it is the borderline of: whether of health, of sexuality, of psychosis, or, as I believe, of being able to exist at all.” He speaks of the baby's having to hang on because of being driven to the edge of endurance. Noting that these views are not dealt with well within psychoanalysis, he writes, “though fear of falling might have some relationship to it” (p. 61).

The confusion with the borderline concept may be the result of two axes emanating from different roots. Lowen's classical character structures sits on Freudian/Reichian libido theory which emphasizes pleasure-seeking as the primary motivation of human existence; whereas consideration of a continuum from psychotic through borderline through character style derives primarily from the Object Relations/Self Psychology schools of thought which posit a libido that is object-seeking. And although Lowen in his early writing occasionally

Psychological Organization	Grounding
Psychotic	No ground
Borderline	Shifting ground
Neurotic	Shaky ground
Character Disorder	Contracted ground
Character Style	More Solid ground

Table 1. *Psyche-soma matrix*

touches upon the importance of early interpersonal interaction in the formation of character, because he too is deeply influenced by the Freudian/Reichian pleasure-seeking libido, it is not until the latter schools, primarily derived from Object Relations Psychology, that we come to understand the importance of early attachment and caregiver-child interaction as formative of self-structure and relationship with others, or lack thereof. The latter perhaps relating more to the axis from psychotic to character style suggested above. It may be that character structure is essentially a means by which the individual has developed armor in order to hold onto, contain and protect whatever rudiments of an energetic vital self still exist after having been thwarted by opposing environmental forces; while Self-Psychology and Object-Relations theories may be explanatory of ways in which we see ourselves in relation to self and/or another as we seek to connect to other subjective selves. Thus one may regard the object-seeking self in a complex interaction with an energetic vitality-seeking self that is armored to protect it from future trauma. Perhaps Lowen (2003) saw this in his 90s, when as he returned to his concepts of grounding and hang-ups, reiterated that people who do not have their feet on the ground are hung-up; to which he added that “The state of being hung-up is a psychological condition, whereas not being grounded is a physical state.” These conditions complement each other, because they are really two aspects of the same state of not being fully connected to the reality of one’s being. He goes on to say that “Bioenergetics uses dual approaches – a physical approach and a psychological approach” (p. 143). He likens this to having two legs to walk on.

Another bioenergetic way of viewing the two-legged approach to our understanding of the psyche-soma matrix may be accomplished by juxtaposing the concepts of grounding and psychological organization; again emphasizing the importance of grounding and its relationship to reality as seen in table 1.

What is also being posited here, in table 2 and what follows is that the two-legged approach postulated by Lowen, can only work in a safe and holding inter-

personal set of arms. Having two legs to stand on does not mean a person is able to move about gracefully, securely and with dignity in the world. Our two legs, physically and intra-psychically operate within an interpersonal world. What is clear is that we are born into, develop and can change only in the context of an interpersonal matrix. Energy flows and can be blocked not only within the individual but also between the individual and another or many others. So to think of the body alone or the psyche alone or even as a duality is to miss the point that these are but parts of a tripartite system involving the energetic and informational flow within as well as between people. Herein we have been discussing the informational/energetic flow between the infant/child and her primary caretaker(s). This energetic/informational flow gets stored in the psyche-soma and forms the basis of whether the developing human will have a secure, insecure or disorganized attachment style which seems to be so much a part of one's character structure and transference interactions with others.

Schizoid Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Interpersonal)
Holding Together	Falling Forever	Holding Off
	Falling Off a Cliff	Holding at a Distance
	Falling Away	Holding at Bay
	Falling Through Space	
	Falling Apart	
Oral Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Interpersonal)
Holding On	Falling Into	Holding Court
	Falling Back	Holding Accountable
	Falling Behind	Holding Aside
Psychopathic/Narcissistic Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Interpersonal)
Holding Up	Falling Down	Holding Court
	Falling on his Ass/Face	Holding in Contempt
	Falling from Great Heights	Holding Forth

	Falling Short	Holding One's Head Up
	Falling from Grace	
	Falling For	
	Falling out of Favor	
Masochistic Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Inter-personal)
Holding In	Falling Out	Holding Hostage
	Falling Under	Holding Out
	Falling from Grace	Holding To
		Holding Down
Rigid Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Inter-personal)
Holding Back	Falling on his Face	Holding Against
	Falling Forward	Holding his Horses
	Falling in Love	Holding Firm
	Falling For	Holding Tight
	Falling to Earth	Holding Court
Borderline Structure		
Holding Patterns (Somatic)	Fear of (Intra-psychic)	Holding Attitudes (Inter-personal)
Holding Apart	Falling Into an Abyss	Holding Around
Holding Still	Falling Forever	Holding Aside
	Falling Through	Holding in Contempt

Table 2. Character structures, holding patterns, fears of falling and holding attitudes

7. Providing the Holding/Grounding Needed to Facilitate Falling

The best-known falling exercise in the bioenergetic quiver of techniques is Lowen's (1976). Assuring there is a soft place on which to land, he has the patient put

all her weight on one leg, bending the knee fully, the other foot being used for balance only. Now the person is directed to stand in that position until she falls. It is important that the person not let herself fall consciously; it should be involuntary. It is an anxiety-provoking situation, he says, because most people are afraid of losing control of their bodies. Lowen also suggests the person breathe easily and keep saying, "I am going to fall." The therapist, when appropriate, asks what falling means to the patient. The exercise is repeated several times. Ultimately, the person may realize that falling is not the end. The body gets up again. In fact, falling to earth may allow a renewal of energy in the awareness of being grounded. But when the ground, the caretaker, is not a source of holding/grounding, there is an understandable fear of falling to mother earth that isn't there or is there in a highly anxious and/or disorganized manner.

It seems that such an exercise derived, as most of his exercises, from Lowen's (2003) attempt to get more into his own body; a struggle he apparently worked on his whole life. The exercise described above may be more appropriate for the rigid character structure. Although, I have used it effectively with people having pre-oedipal character structures. It is also seems useful for very experienced patients, no matter the character structure, as is demonstrated by Anita Madden's description of her experience with Fernald that was mentioned earlier. But for people struggling with pre-Oedipal issues, the charge may be far more than is containable. Pat Ogden, et al (2006) point out the importance of holding safely. What does that mean to hold safely? It means, as Hall (2013) has written, to be cognizant of the developmental and characterological structure of the person with whom you are working. To be aware of the amount of charge that is manageable. To provide a holding environment that respects the individual. It means, in bioenergetic terms, to provide an atmosphere in which grounding, which may come in the forms of specific exercises, touching, the relationship between the therapist and the patient, etc., may begin to be embodied within the context of a safe environment that facilitates taking a risk of letting go and falling.

John Conger (1995) provides a seven-stage developmental schema for grounding from initially grounding on the mother's belly to standing up straight to ultimately being grounded to Nature and perhaps, as Baum (2007) put it, to being connected to the benevolence of the Universe. Adding to the concept of grounding as relational, Danita Hall (2013) states that, "Grounding is formed through contact: contact as a person-to-person connection in which the being and reality of the other is experienced and recognized." Quoting Lowen, who says that the more one feels grounded, the more charge and feeling one can handle, she goes on to note that grounding is a process that facilitates expansion. As an example of

finding a grounding exercise that fits, she describes a young man with a schizoid structure for whom standing up compelled him to “lock his knees, or stiffen his arms and shoulders, to avoid fragmentation. Having him move to a lying down position, with knees up and feet on the mat, took some of the pressure off his joints, but the regressive pull became intolerable and he stiffened up.” Finally she had him sit on a large gym ball while pressing his feet and gently moving up and down. This seemed to allow for the expression of expansion. In this way, Hall points out the relational nature of grounding. She writes that

“Not only does grounding come from being held and supported by the ground, the therapist’s touch and holding and focusing words act as a ground. It was her being attuned to him and shifting her interventions accordingly that provided grounding for a man whose family did not allow for any expression of vulnerability or emotional exploration.”

Keleman (1975) writes that containing and expressing energy allows us to be connected to the earth and expand into the social world. These are elements of grounding. We see here again that grounding has a personal and interpersonal aspect. He goes on to say that “Interference with one’s rooting and expanding is manifested in how one relates to the earth, reflected as poor bodily form, and in how one relates to one’s social surround, reflected as misshapen connections with others.” This may be seen as personal character structure and the interpersonal holding attitudes being discussed here. Keleman points out that “encouraged to develop groundedness,” depth of feeling and imagination can grow from which we can further ground our lives.

There are many well documented grounding exercises (Lowen, 1976, 1977; Conger, 1994; Hilton, 2007; Schroeter & Thomson, 2011); but not so many falling exercises. It is the contention here that a certain amount of grounding/holding is necessary for the patient to feel safe enough to let himself fall. There is the classic falling exercise by Lowen, described earlier. For many people who are too much in their heads and cannot “allow their body, including their head, to collapse under them ...” Lewis (1986) recommends

“directly involving the head by having the patient rotate his head while knees are bent, there is immediately much less cerebral control, and the stimulation to the vestibular apparatus produces sensations of loss of equilibrium and falling, which are exactly what most people who are ‘in their heads’ guard against by keeping their heads relatively immobile.”

This has certainly been my experience. It wasn't until I could "unorganizeunorganized" my head/neck/shoulder girdle control by rotating my head during the classic falling exercise that I could let myself fall. In an earlier paper, Lewis (1976) proposes that dissonance between the child and the caregiver is the basis

"of falling anxiety and premature ego development, or what we in Bioenergetics call the inability to get out of one's head – an attribute that seems to cut across all character structures. It is this dissonance, and the resultant falling anxiety and premature ego development, *structured into our bodies*, that prevent the quality of grounding we strive for in Bioenergetics" (ibid., p. VI).

For patients with pre-oedipal structures and less firm grounding, utilizing the falling fears listed in table 2., the therapist might begin by having the patient sit with his feet feeling rooted to the ground and asking him to imagine what would happen if for example he were to fall off a cliff, fall behind, or fall out of favor and so forth. What does it mean? How does it feel? Where is it felt in the body? What sensations are experienced? What does it make him feel like doing? What images or memories come to mind? How does that experience impact his relationship to self and others? What is the therapist feeling as the patient goes through these exercises?

Case Example 4

A 35 year-old male patient of mine, who was struggling with changing careers and feeling quite uncertain about his future, noted that he felt ungrounded going forward. I knew that his parents had divorced when he was three years old, and they fought over custody of their only child in a way that terrified him. He learned to keep quiet and say nothing about what he felt or wanted because he was sure that they would use whatever he told one parent as ammunition against the other in their custody battle. When he stood up to begin a grounding exercise that I thought might be a starting place for developing his ability to move forward, I noted that his feet, which were at least a size 12, befitting his well over 6 foot stature, were in a splayed position, like a ballet dancer in third position. I asked him if he could put his feet parallel to each other. As he began to do this, he stopped abruptly and said that he couldn't; he was afraid that he would fall if he took his feet out of that position and unlocked his knees. I asked him to imagine what would happen if he were to fall. "There would be nobody there to catch

me, he replied. And it would upset my sense of balance.” Locked in that position made it very difficult for him to move forward. It was as though he had one foot pointed in his father’s direction and the other toward his mother. He was keeping a delicate balance in order to maintain a connection with each parent and also, he thought, not giving them fodder for their quarrels. It rendered him unable to move forward and feel grounded in his own direction.

From an interpersonal perspective, the therapist might have the patient exaggerate his stance, (in the style of Keleman’s (1987) HOW exercises) of holding off, holding court, or holding in contempt, etc., and then inquire into those experiences as suggested above. I might have asked the same patient to exaggerate his splayed stance of holding at bay or holding apart which may have yielded other avenues of inquiry: perhaps regarding the splitting that Siegel (1999) talks about in his discussion of disorganized attachment or Johnson’s (1991) suggestion of holding still as an adaptive device to ward off falling forever. In Hilton’s (2007) discussion of character development there are a series of dyadic (mother-child) exercises that may be used to demonstrate how character-related falling fears and holding patterns are manifested interpersonally.

Although Hall (2013) doesn’t mention falling per se, she echoes the theme of many of the theorists quoted and the central point of this paper, when she writes that “A leap of faith is involved in the formation of new ground – for there is an entering into the unknown – a step into experience that is shared and contained by the therapeutic holding environment offering a new experience of the present – a new grounding.” And I would add, a setting in which it is safe to fall and explore the holding patterns that were needed to maintain attachments to significant others and to keep whatever remains of the self intact.

8. Summary

Much of the writing and theorizing in the psychodynamic literature about falling has been about very early trauma as in the fear of falling forever. And the suggestion has been offered that some may never recover the ground lost. It is this author’s contention that although all character structures may not involve a fear of falling forever per se, (nor am I sure of that) there resides in each character structure a holding pattern, a fear of letting go, that is related to a fear of falling *characteristic* of that structure which can be seen in the body and concomitantly intra-psychically and interpersonally. It is also understood that these holding patterns serve to protect whatever part of self is alive and still trying to develop.

So that even for those individuals who have been severely traumatized early and continuously in life, there is a possibility of developing some form of grounding, in a safe environment, that will allow the person to let go a little, fall a little, and develop to a place where he or she can pulsate, contract and expand as much as they are able, in order to have a life experience that is more embodied, authentic and grounded than before they embarked on the journey toward healing and authenticity.

Maybe you're going to fall.

But it is better than not starting at all.

(From *Everybody Says Don't*
Stephen Ondheim, 1964)

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Acknowledgement

This article would not be in its present version were it not for the very careful and thoughtful input from Dr. Scott Baum to whom the author is very grateful. Thanks also to Dr. Robert Lewis for his input and encouragement and for helping me see how important it is to consider the head a vital part of the body.

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