

Community and Global Health

The 2nd IAPOP International Conference February 24-27, 2010

PL1: PUBLIC LECTURE: Rainbow Medicine, Dreambody & Nonlocality Arny Mindell Ph.D., Amy Mindell, Ph.D.

Day1: Rainbow Medicine: Symptom Work, Movement Work, Pain, and Chronic Illness

PS1: Plenary Session

From the Subtle to the Sublime: Using Process Work in Performance and Performance in Process Work Kate Jobe, MA, Dipl. PW, Certified Laban Movement Analyst

Body symptoms and addictions offer some of the strongest and most important personal and collective non-verbal messages. While body language expresses meaning that we read more or less automatically and unconsciously, symptoms have the capacity to "stop the world", and transport us to less known or parallel world of experience. In this presentation, we will look at how Process Work contributes to art as a way to delve into the parallel world of the symptom experience and to find the transformative power of public performance. In addition we will look at art's contribution to Process Work as a way to work with an individual who, through a series of brain surgeries, is permanently in a parallel world.

1.1: Feynman, Feigenbaum and N-Process: A Chaos Theoretical View on Self-Healing Power Achim Goeres, Dr. rer. nat.

In Process Work, we symbolize the transformation at an edge by the Feynman graph of electron scattering from Quantum Physics. In the same way, the Feigenbaum-diagram from chaos theory shows a very general behavior of complex systems in identity changes. Applying this to healing processes, we get a theoretical pattern, called "N-Process," that helps us, to better understand the self-healing power and the role of the different phases of every healing transformation. With this background, we can be more aware of the processes contributing to the self-healing transformation. Furthermore, as experience shows, referring to chaos theory helps representatives of the scientific main stream to be more receptive to the ideas of Process Work. Additionally, the N-Process concept from the perspective of theoretical physics also gives one possible answer to the question, why Dreambody Work does not end in chaos, but in order and peace.

1.2: Moving Your Dreaming - Dialogue with the Sentient Body Lucia McKelvey BA, LMT, & Lisa Marks MA, LMHC

According to Árnold Mindell, psychologist and author of Quantum Mind and Healing, "In Rainbow Medicine you are neither ill nor well, young or old, but simply on a path whose intent you are not yet conscious." A symptom is a "challenge to contact your deepest nature." He adds, "our sense of well-being depends on unfolding subtle body sensations that reflect the underlying dreaming or essence level of reality... I have found that all body movements and symptoms can be traced back to these tiniest, most subtle, 'imaginary' experiences that precede their 'real' everyday appearances." Tuning into this level is Sentient Awareness - our experience of sensation/proprioception in the body which allows us to access these "tiniest, most subtle" experiences and which can lead to deep and transforming moments. Tuning into the feeling of "being moved" by these small flirts can put us in touch with the creative source of life. We hope to learn together how to open up to, and dialogue with these feelings, sensing the flow and connection between them and other levels of reality, and trusting these irrational, subtle sentient signals - the body's dreaming.

1.3: The Dreaming Path of Conception, Pregnancy, and Childbirth Dawn Menken. Ph.D., Dipl.PW

This workshop will introduce a process-oriented approach to conception, pregnancy, and childbirth. Bringing in the dreaming dimensions of these profound life experiences enriches parents and can be useful for practitioners. We will touch on the following themes:

- Fertility challenges and the dreaming process of conception
- Exploring pregnancy and the growing fetus through dreams and body experiences
- Fears of childbirth and parenting
- · The altered states and fatigue that emerge in childbirth and beyond
- Influence of community and relationship

International Association of Process Oriented Psychology

1.4: The Heyoka's Face in the Body: Finding the Meaning of Body Symptoms from the Viewpoint of the Sacred Clown of the Lakota

Ellen Schupbach, Ph.D., Dipl.PW

For many of us, staying close to the energies that come through us means going against societal, family, or community rules (spoken or unspoken) – and for some of us, this process is fraught with difficulties. At times, these unlived energies can appear in body symptoms, lack of energy, anxiety, or other disturbing physical experiences. Our inner and outer critics often create a psychological environment that makes it difficult to find the mood to work on these issues. Here is where we find help from the Heyoka tradition, with a Lakota shamanic approach to access these unlived energies. Wild, fun, raunchy, and lacking any respect, the heyoka brings enlightenment to the role of culture and family in our lives, and helps to find our true natures.

2.1: Art and Co-Creating Community as Medicine Kara Wilde, MA, Dipl.PW & Susette Payne, MA, Dipl.PW

This is a workshop for individuals suffering from chronic pain, their family members, and those with a professional interest in working with chronic pain. Using the methods of Process Work and community art-making, the powers of chronic pain to victimize, isolate, create hopelessness and other negative moods are diminished. These tools can positively change our relationship to chronic pain: not only for the individual but also for the healing of the participant community, and perhaps, our world community. We have worked with two groups of chronic pain clients for eight weeks. Our exciting research shows how a healing field, (which Arny Mindell names Process Mind) emerges and can move a co-creating community toward awareness, meaning, and less suffering around multiple issues of chronic pain. The workshop includes a skill building exercise for interested individuals to integrate and experience these methods to use with clients or themselves, developing comfort with art materials in a subjective and non-intimidating way.

2.2: The Health Effects of a Deep Democracy Approach to Trauma Work Emetchi, MA, Dipl.PW

Deep Democracy is a concept, a principle and a metaskill, which invites and facilitates active inclusion of, and relationship between, all the component parts of an issue. Deep Democracy includes not only the everyday consensus reality level of our lives but also the less known, non-consensus reality Dreamland and Essence levels of reality. This presentation will highlight both the beneficial effects of a Deep Democracy approach to working with trauma and examine the challenges inherent, for both patient and practitioner, in applying Deep Democracy in a field that is often radically polarized.

2.3: You Don't Say: Process Work with People Who Stutter Lane Arye, Ph.D., Dipl.PW & Clare Hill, Dipl.PW

Lane and Clare will present how they worked over a number of years with adults who stutter. They will discuss the complexities of working/living with any chronic symptom, and how these apply to this particular tenacious problem. Stuttering manifests in practically every channel, so our toolkit must be large and flexible. One fascinating part of unfolding stuttering is that many signals related to the stutter (like facial ticks and movements) are often actually strategies for getting through the block. Clare and Lane will talk about teasing out and focusing on the original (or root of the) stuttering, as well as unfolding the strategies as an important part of long-term work. Also important are working with the social marginalization and internalized oppression faced by people who stutter, and exploring nonlocal phenomena like holding a role in society that is possibly less in control or more in touch with vulnerability.

2.4: Cross-Pollinations in the Sentient: Combining Process Work and System Constellation Ivan Verny, MD, Dipl.PW

The Process Work offers great tools to be aware of and to unfold signals. The System Constellation Work offers good tools to check out and work with the space- and body – awareness as well as with the sentient. The combination of both approaches can enable participants to tackle aspects of symptoms and their contexts in time continuums and in family- and other systems. This introductory workshop offers an opportunity to set up symptom-based system constellations using group members to represent a symptom, body part, or an aspect of the context and then following or amplifying movement tendencies or picking up & unfolding other signals in different channels. Is the process facilitated with a proper respect for the participants' perceptions it will usually help to create new pictures and new perceptions, feelings and believes about the quested issues?

I believe that this technique is using and training the sentient skills of each participants and is a marvelous tool to get in touch with the wisdom of the field / Earth Wisdom. It can be used in single setting or in groups.

3.1: Dreambody/Energybody: Applied Kinesiology and Energy Psychology Interventions in Process Work Steven Fenwick, Ph.D., Dipl.PW

The field of Energy Psychology is a growing area of psychotherapy that is pioneering the use of energetic methods of diagnosis and treatment. Drawing on the use of meridian points from Chinese medicine as well as Applied Kinesiology (muscle testing) as developed originally within chiropractic medicine. Energy Psychology methods have shown themselves to be powerful tools for rapidly treating trauma and other psychological and physical problems. These methods can be some of the more useful tools to have in your

"Rainbow Medicine toolkit."

In this workshop:

- you will learn the basics of muscle testing as a way of getting binary feedback (yes/no responses) from the dreaming body.
- We will explore possible ways that this tool can be used as another way to get feedback in work with body symptoms, dreams and psychological problems from a process-oriented perspective.
- We will also look at its use as a way to get feedback about various possible mainstream and complementary treatment methods that may be useful for each client. In addition, you will learn some basic acupressure point interventions that can be useful when confronted with overwhelming emotional states, traumatic flooding and difficult edges in clients.
- We will discuss the use of Energy Psychology interventions as powerful "magic wands" in psychotherapy and how they can be useful techniques within a Process Work framework when used with awareness.

In this workshop I will be presenting some of the theory behind Energy Psychology and we will explore some of the differences, similarities and areas of complementarity between Energy Psychology and Process Work. The workshop will include some theoretical material along with a brief demonstration and practice in dyads.

3.2: Improvising with your Chronic Symptoms

Rhea, MA, Dipl.PW & Doug Kagel and Kate Jobe, MA, Dipl. PW, CLMA

Using physical theater and embodied language, we create a spontaneous dreaming relationship with the body and its symptoms that reflects in form and content our moment-to-moment experience. This heightened realism provides an alternative perceptual experience to the everyday definitions of sickness and health as we reorient ourselves to the mythic process to which our chronic symptoms point us.

3.3: Nourishing the Spirit: Clearing Emotional and Spiritual Blocks to Healing in Chronic Conditions Yvonne Lazette

In the modern world most chronic health conditions including cancer, affect us at the level of the spirit (yuan level in Chinese Medicine), and many have their source in an undernourished spirit. By acknowledging and treating at this level of spirit; the body, mind, and emotions can also heal. Obstructions and stagnations that occur over time in the body or in the emotions then affect the spirit and are a block to healing and our process of becoming who we are. Any loss of control over our lives due to trauma, abuse or chronic stress leaves us in a state of extended shock, our spirit is unable to be nourished and progress in our life journey is frustrated. This source of symptoms and dis-ease affects the body at all levels of the body, mind, emotions, and spirit. Shamans have traditionally treated at the level of the spirit and Chinese Medicine texts from 2,500 BCE refer to acupuncture points and herbal formulas that move spiritual and emotional blocks and obsessions to allow life to progress and healing to occur.

PS2: Plenary Session

Unfolding the Meaning and Mythic Patterns Behind Chronic Body Symptoms

Salome Schwarz, Ph.D., Dipl.PW & Anusuya StarBear, MA, Dipl.PW

Salome and Anusuya will talk about how body symptoms are not only a disturbance but also a powerful way to discover our wholeness and multifaceted selves. The key to life lies in discovering the unique powers and hidden gifts that are encoded in our body symptoms, dreams, and the world around us. Anusuya and Salome will demonstrate Process Work methods that allow us to explore potential meanings behind chronic body symptoms and the ensuing emotional and psychic pain. A slide show of Anusuya's artwork will serve as an example of how creatively working with body experiences can relate to a mythic pattern or organizing principle behind one's life.

PP2: PUBLIC PANEL:

Deep Inner States Awareness & Palliative Care

Gary Reiss, Ph.D. & Pierre Morin, MD, Ph.D., Dr. Richard Maunder, MD, Dean Yamamoto, M.Div., BCC, Deborah Strohecker, RN

At the heart of a process-oriented approach to coma and remote states of consciousness is a shift of mind set or paradigm. Coma Work requires us to reevaluate our understanding of health, healing, and process. Gary Reiss and Pierre Morin will introduce the theory and practical steps of a process-oriented approach to working with people in coma and then facilitate a panel discussion about the opportunities and challenges of its clinical application.

Day 2: Palliative Care: Coma Work, Aging, Death and Dying, Alzheimer and Dementia, Ethics of End of Life

PS3: Plenary Session

Addressing Pain and Agitation from a Multidisciplinary Perspective

Richard Maunder, MD, Thomas Kammerer, Theologian, Stan Tomandl, Dipl.PW, Ingrid Rose, Ph.D., Dipl.PW

4.1: Process-Oriented Coma and Palliative Care in Diverse Environments Ingrid Rose, Ph.D., Dipl.PW

- Things to watch out for and to appreciate in applying Process Work methods in varying situations and environments Attention to the specific environment in which the patient is being cared for, it's model and belief system, gaining permission to work with the patient, obtaining releases, etc. Questions to reflect on for yourself such as, who calls you in to work with the patient, what is their relationship to the patient and to the family, family dynamics, counter transference issues.
- Building a process-oriented certificate program in Palliative Care A report on the development of the Palliative Care 2 year certificate program of Process Work Aotearoa. How this course has been developed, course content and structure, outreach, approval by national bodies, ongoing support for students.

4.2: Death, the Later Years and Beyond...

Herb Long, ThD, Dipl.PW

This workshop will provide an opportunity to address our fears, hopes, imaginings and dreaming around death – our own and others and the process leading up to it. The focus will be on our stories, fantasies, an exploration of the ways death is already present in our aging bodies together with our intimations of death as the gateway to the fullness of our being. We'll practice accessing our Process Mind as we explore aging and death together with sharing our individual stories and experiences. The facilitator will bring the perspective of one now in his 80's.

4.3: Using Personal Reactions in Service of Clients and Loved Ones in Palliative Care Stan Tomandl, MPW, Dipl.PW & Ann Jacob, B Ed

Over time, caregivers can begin to feel uneasy if they leave too much of themselves out of their work. Burnout and compassion fatigue can happen when personal thoughts, feelings, intuition, and spiritual presence do not contribute fully, in service to clients and loved ones. Most of us usually interact with clients in caregiver roles: professional; volunteer; friend; family member. Our roles enhance comfort and competency. When I began as a hospice volunteer my heart often broke from sadness, or froze from fear as I entered a dying person's room, but I had responsibilities and tasks and too often ignored my reactions. But Ann and I believe that our inner personal experiences form part of the field of care. Trusting our reactions and 'cooking' them by doing inner work, until they are useful for clients, will deepen levels of care, connection, communication, and relationship. We want to add a new role to palliative care: your personal awareness role. We will:

- Teach inner work to help 'cook' raw reactions into helpful palliative interactions
- · Share how to help patients express themselves in states of altered consciousness
- Teach ways to reduce patient and caregiver hopelessness and burnout

4.4: Suicide Wisdom

Kerri Cripps, EBE & Helen Wells, Dipl.PW

This creative action research project explores the dreaming process of suicide to find the wisdom behind it. Working collaboratively, using image making, movement and shape shifting enabled us to engage with a difficult subject in a way that was surprisingly enjoyable and deeply satisfying. We invite you to watch a 15 minute video poem which is the result of our creative collaboration and arose out of and contributed to the research. It expresses both the essence of Simon's personal story and the essential themes of the research. The video introduces the themes of the research so far: the roles of the killer and the killed, what needs to die and what is trying to live. It will be followed by some experiential work and time for discussion and feedback

5.1: Journeys and Encounters in the "Unknown Lands"

Sebastian Elsaesser, Dipl.PW

Phenomena, challenges, attitudes, and training for the work in coma and other extreme states in intense care units and end of life care. Parallel to the high-tech modern medicine we are confronted with dramatic archaic worlds of disintegration, emptiness, and bliss. Therefore, it seems to be helpful to include shamanism and other extreme states in contexts of other cultures for a broader understanding of the overall situation. At the heart of the work we develop besides skills and meta-skills a practice of contemplation to comply with the consciousness of the people we work with.

5.2: Working with Patients in Coma and their Families: The Healing Role of Contact and Communication in Different States of Consciousness

Bogna Szymkiewicz, Ph.D., Dipl.PW

The aim of this presentation is to (1) present the development of process oriented coma work done by Polish Process Work Association; (2) discuss the role of 'contact' and 'communication' in supporting health and well being in different settings and states of consciousness. The presentation will be based on our experience from working with patients in coma and their families in two settings: rehabilitation ward in a hospital for children (project realized by Polish Process Work Association and a Foundation "Akogo") and coma section in the long-term care facility for adults run by organization "Caritas" (internship for advanced Process Work students). I will talk about our practical experience and about some theoretical aspects of consciousness,

contact, and communication. I will refer to three basic states of consciousness (Consensus Reality, Dreamland and Essence) to present our practical ideas and difficulties that arise in communication not only with people in comas, but also their families, professionals and caregivers.

5.3: Process Work Mindfulness: Evoking the Shaman in the Clinician Emetchi, Dipl.PW & Dean Yamamoto, M.Div., BCC

This workshop will introduce the participant to an extraordinarily innovative approach to healthcare. Building on Dr. Arnold Mindell's work in Jungian psychology & physics, and Dr. Amy Mindell's writing in "Metaskills," we will develop awareness and skills to support patients as they experience a variety of body symptoms at the end of life. Theory, inner work, and case review will all be utilized as we cultivate a new approach together.

5.4: Bringing Home the Ghosts: Addictions as Generational Processes of Altered States/Dreaming Awareness

Waynelle M. Wilder, MA, Dipl.PW & Melvin Young, NCACI, CADC III

Over half the population of the U.S. knows someone who suffers from substance abuse or chemical dependency. Some persons with addictions come from families in which 3rd, 4th or 5th-generation substance abuse is commonplace. A major chronic health issue, it remains a horrendous burden for the person with addiction, for families, communities, countries and the world at large. This presentation blends Process Work with more mainstream theoretical models to explore addiction as both a genetically inherited tendency and as a process of altered-state awareness repeating over generations. Our research posits that a missing piece for most addiction models is long-term dreaming in the background. This study began in 2003 after a Process Workshop about ancestry: My great-grandmother, who died in 1944, Johanna O'Brian, became an active dream figure. Her son, my grandfather, Charles McFarland, died of alcoholism at an early age...my family is riddled with addiction and has been over many generations. Johanna O'Brian has been the initial and on-going impetus for unraveling the ghost of addiction in my family. This presentation is an homage to her and to all who suffer with the ramifications of addiction.

6.1: Dreamland ICU: Training Program for Hospital Chaplains in Germany: Joint Venture of Clinical Pastoral Care and Process Work

Peter Ammann, Thomas Kammerer

Patients treated in intensive care units (ICU) are in an artificially extended living space, which is characterized by a huge polarization between a predominant world of stressful control, feasibility, physicalness and high-tech medicine, and a marginalized world of inner experiences in extremely deep altered states of consciousness. Supported by a short documentary film this session introduces into the situation and dynamics of the ICU.

- It demonstrates how Clinical Pastoral Care has transcended the focus on verbal communication and the support of families of dying patients into working with non-verbal processes and altered states of consciousness in patients themselves by using Process Work coma work methods.
- It explores personal and cultural challenges of applying coma work in these circumstances;
- Demonstrates the change from focusing on the patient into including the whole field of the ICU;
- Gives insights into the training program for chaplains and its development in Germany and presents the fruitful joint venture of Clinical Pastoral Care and Process Work in approaching patients in the whole gamut of consciousness from ordinary to extremely deep altered states.

6.2: New Developments in Coma Work

Gary Reiss, Ph.D., Dipl.PW

In this workshop we will learn the basic hands on techniques of Process oriented coma work as well as learn new applications coming to this work from more sentient and Earth based developments in Process oriented Psychology. This workshop is for Process Workers and Process Work students, caregivers, and interested others. We will touch on how coma work techniques can help all of us not only in working with people in coma, but with our own inner work and our awareness around relationship, intimacy, and touch.

6.3: Delirium: Sacred Portal to Patients' Sentient Natures Stan Tomandl, MPW, Dipl.PW & Ann Jacob, B Ed

Thin places between the worlds including delirium, confusion, forgetfulness, preservation, stupor, depression, agitation, and "impossible" situations: provide entry points, portals, to realms of altered consciousness; opening opportunities for insight, soulful healing, spiritual connection and renewal, personal growth and relationship transformation. We will present communication and meta-communication techniques for chaplains, nurses, social workers, physicians, and other professional, family, and volunteer caregivers, that work with those in states of memory loss, dementia, traumatic brain injury, vegetative state, and coma. Goals:

- Present new perspectives on old problems of both hypo- and hyper- delirium: perseverations; hallucinations; and aggression,
- To find essential seeds of insight and creative growth buried in seemingly "impossible" situations.
- · Examine how people in delirium states are trying to heal emotional issues and soul pain, and ascertain

how they require heartfelt awareness support.

 Teach sensory-grounded techniques to facilitate people in delirium states to gather information within these states, to promote growth, relationship, and spiritual connection in their living and dying.

6.4: Eldership and Advocacy: Exploring Personal Edges to Social Action and Spiritual Healing in Palliative Care Situations Tom Richards, MBA, Cert PW

Eldership and advocacy are desperately needed in the palliative care world. This workshop is for individuals interested in growing as advocates and spiritual elders. We will explore opportunities to step into these roles that may occur when:

- working with seniors on symptoms, relationship issues, and deep inner states of consciousness;
- working in semi-public settings including; facilitating visits with loved ones in doctor's offices, emergency rooms, hospitals, nursing homes, rehabilitation centers, intensive care units, family homes, and hospice facilities:
- working with the health care system including mentoring and facilitating doctors, nurses, therapists, and caregivers along with their diagnoses, treatments, medications, care giving procedures, institutional policies, and the United States Medicare/Medicaid bureaucracy, and;
- working on the essential aspects of care when facing fear of aging and death, along with related planning; and the end-of-life processes including intimacy, grief, thankfulness, forgiveness, love, and spiritual healing.

PS4: Plenary Session

From Paradigms to Pragmatics: Collaborating Across Disciplines and Facilitating Solutions Among Diverse Models

Julie Diamond, Ph.D., Dipl.PW

The field of health care requires more active participation, advocacy, and facilitation than ever before. Whether we are trying to facilitate our own medical care, or whether we work as providers and caregivers, we are part of a complex, interdisciplinary team that may not always share a common framework, language, or paradigm of health. A new kind of collaboration is needed, one that is interdisciplinary and cross-modality. But this raises questions: Is it possible to pick and choose among Process Work interventions and methods without losing the efficacy and potency of our model? Is something lost in translation when we move from being paradigm-centric to being pragmatic? This presentation looks at the challenges and opportunities in collaborating across multiple disciplines, in particular, the facilitation and leadership skills needed for leading and participating in interdisciplinary teams.

PP1: PUBLIC PANEL: Health Leadership in a Global Health Environment Facilitated by Max Schupbach, Ph.D., Dipl.PW, CPF

This evening brings the local Portland community together in an open forum to discus issues of health leadership and diversity. Health leaders from various organizations and communities will open the evening in the first hour, outlining their perspectives on Health Leadership. In the second hour, everyone present will have a chance to discuss these points further in a large group process setting.

Day 3: New Health Leadership: Health Disparity/Equity, Care-Team and Consumer-Provider Relationships, Health Policy, Health Leadership and Partnership Systems

PS5: Plenary Session

Just What the Doctor Ordered: Global Health Through Global Healing

Max Schupbach, Ph D, Dipl.PW, CPF - USA

Global health is quickly becoming one of the key drivers to develop new models for global collaboration. Our diverse views about the questions, "What is health?" and "How can it be achieved?" force us into a dialogue about our underlying cultural values concerning the meaning of health, life and death, and how to achieve a diverse, global experience ofwell-being - a process that could be described as Global Healing. Indiscriminate pandemics have become allies in forcing us to understand that the health of one individual is the health of everyone. At first glance, one could assume that this is primarily a process of social justice: if only "the haves" would share their resources with the "have-nots," global health would progress by leaps and bounds. In this lecture and experiential event, we hope to show how this viewpoint is true, and at the same time also false. With examples from our work in Africa, the Middle East, Europe and Australia, we would like to show that global health is a learning process that seeks facilitators who are, first and foremost, students of the miracle of life on this earth, and second, open to having their own mindsets challenged and changed. We also hope to demonstrate how Worldwork methods can bring forth new models of common inspirational experiences, in which all parties involved feel that they received "just what the doctor ordered."

7.1: The Effects of Heterosexism and Homophobia on the Health, Wellness and Life Fulfillment of Gay Men - A Process Oriented Perspective

Anup Karia, Dipl.PW & Aleksandr Peikrishvili, MSW - UK and USA

The dynamics of heterosexism and homophobia operate on individual, institutional and community levels and we are all active and unconsciously complicit in maintaining these to everyone's loss. We invite you to a conversation where we will discuss research (both from our studying ourselves as we were planning this as well as external sources) that highlights the impact of this on the mental and physical health of gay men on patterns of depression, addictions, suicide and life meaning. We will demonstrate how awareness makes a profound difference to our personal and collective health and lives. We will look at how within the experiences of internalized and external oppression is also the vital information needed for transformation. How 'coming out' is both a social and dreaming experience needed by everyone.

7.2: Healing History - Identity in Germany after the Second World War and the Holocaust. Combining Methods of Modern History with Process Work

Tanja Hetzer, Dr.Phil. - Germany

The Second World War and the Holocaust have left their marks in the societies and families of Germany and all other involved nations. Experience, memory, and history have a strong impact on the psyche and health of individuals and families. Facing such strong violation of identity, healing has to deal with the phenomenon of interference – the collective and the individual trauma goes beyond what an individual can face and the individual trauma resulting from this is often so extraordinary that it finds no correspondence in Consensus Reality. Identifying family history within the big, collective history helps to unfold the personal myth, which often is a precondition for healing. Working as a historian and Process Worker with individuals, families, and groups in Germany I would like to present and share some case studies. The presentation can also be understood as a preparation for my afternoon workshop.

7.3: Dancing Through A Field of Binging and Starving: Disruptive Eating as Sustenance Performed, written and choreographed by Annie Blair, MA, Dipl.PW & Choreographed & directed by Kate Jobe. MA. Dipl.PW - USA

This performance uses movement and spoken word to express my personal experiences with a binging-starving eating pattern. It is a collection of structured improvisations and choreographed pieces, the cumulative product of movement explorations of the eating experiences. I co-created it with Kate Jobe as my final project for the MA and Diploma in Process Work. The pieces are Belly, 9.00 PM – The Binge, Starve, The Measurer, Reclaiming 9.00 PM, Chocolate Cream Pie, and Kitchen Counter. Creating these pieces has helped me de-pathologize and celebrate disavowed parts of myself. Performing them in public, I bring the topic of disruptive eating out of isolation and into community. Please join me!

7.4a: Introducing Process Work in the Health Care Field: Utilizing the Dreamlike Direction of a Team: Team building with the staff of the Psychiatric Department of a General Hospital in Greece Lily Vassiliou, Ph.D., Dipl.PW - Athens, Greece

As associates of the Athenian Institute of Anthropos (Athens, Greece) Alexandra Vassiliou and I were part of a team that responded to the request of the head of the psychiatric department of a general hospital in Thessaloniki, Greece, for training in systemic thinking and group dynamics, and assistance in dealing with underlying tensions, which made work life difficult. In this presentation I will report on the utilization of Process Work ideas and methods on teambuilding and group work to bring to the foreground and work with the underlying tensions among the staff discussing both the challenges that we faced and the learning that we gained.

7.4b: Introducing Process Work in the Health Care Field: Conflict Resolution Training for Health Care Professionals

Alexandra Vassiliou, Ph.D., Dipl.PW, Athens, Greece

For the last three years I have been teaching conflict resolution skills to health practitioners who are part of a Graduate Program on 'Pain Management and Relief', offered by the Ioannina Medical University in Greece and co-organized with the General Department of Essential Medical Courses of the Faculty of Health and Caring Professions of the Technological Educational Institute of Athens. It has been a challenging and rewarding experience, and has contributed to my development as a conflict resolution trainer. In this roving report I will present my work in the program, the challenges and difficulties, as well as the rewards of bringing conflict resolution work to the medical profession.

7.4c: Introducing Process Work in the Health Care Field: Psychotherapeutic Research: First Results of a Swiss Long-Term Outcome-Study Involving Process Work Ruth Weyermann, Ph.D., Dipl.PW - Stallikon, Switzerland

Together with 11 other psychotherapeutic training institutes, FG POP (Research Society for Process-Oriented Psychology, Zurich) is participating in a large-scale research study of Out-patient Psychotherapeutic Practice (2006–2012). The study (PAP-S), sponsored by the Charta (Swiss association for psychotherapy accreditation and psychotherapy training institutions), associated with the medical center at the University of Cologne and the College of Further Education for Applied Psychology in Zurich, aims to scientifically record

the effectiveness and outcome of various psychotherapeutic methods, as they are actually practiced in outpatient settings. 10 Process-oriented therapists from Switzerland have registered to participate in this important long-term study. To take part in this survey is a great opportunity for the FG POP to dialogue with the various participating schools and to be part of the discourse in the larger health care field. In this report, I will present the study design as well as the first results and talk about the challenge that came with the participance.

8.1: Race and Gender Issues in Health and Healthcare/Education Leslie Gregory, MSBS, PA-C - USA, Assefash Melles, MA - Ethiopia/USA

This session will be a discussion of the disparities among vulnerable communities, - such as the non-white, nonmale, non-heterosexual, refugee, and immigrant populations, - in terms of access to health care in general and more specifically as it relates to mental health.

8.2: Healing National Identity - Under the Shadow of Genocide. A German Walkabout and Transnational Group Interaction

Tanja Tanja Hetzer, Dr Phil & Achim Goeres, Dr rer nat - Germany

The collective trauma of war and genocide accounts for all kinds of personal diseases as well as illness of national identity itself. Working with these kinds of diseases holds a special problem: The gap between perpetrators and victims is so huge and these roles are so much beyond imagination that it seems to be impossible to localize ourselves within such a field. In such a situation, achieving inner peace with one's own identity somehow is a requirement for and likewise the essence of a healing process. Among many places on earth, where collective trauma is present, Germany is one of the most challenging communities for these problems to be present. In this workshop, we invite people with German roots as well as people from other nations, to model roles from the non-local high and low dreams related to the German nation and culture. With these roles, we create a "Field of Projections." In this "German Walkabout," we are going to use a combination of sentient perception, inner work, relationship work, and collective actions to initialize a healing process of national identity.

8.3a: Women's Health and the Body: Inner Pathways Made Manifest: The Role of the Body in Women's Experiences of Fulfilling Life Paths

Katje Wagner, Ph.D.c, Dipl.PW - USA

This talk presents a work-in-progress based on my doctoral research exploring the interconnection of fulfilling life paths, women, and the body. Traditional theories link fulfillment to individual essences and psychological development. Somatic psychology expands on these theories of fulfillment by including the body as a resource for self-knowledge and decision-making, as well as a vital component of healing and personal growth. However, many conceptualizations of fulfillment tend to disregard, minimize, generalize, or categorize the socio-cultural components of this journey, resulting in shallow understandings of the complexities and diverse challenges faced by women. Given the insidious power of external oppression, as well as internalized socio-cultural norms that marginalize somatic awareness, how do women identify what in truly meaningful and manifest that in their lives? How do women experience fulfillment? And what role, if any, does the body play in helping women find and navigate fulfilling life paths?

8.3b: Women's Health and the Body: The Women's Experience in Today's World Kalpana Tanwar, MSW, Dipl.PW - USA/India

The natural, spontaneous female process of menses and menopause tends to be marginalized by society in general and women in particular, giving rise to many large social, community based issues as well as personal, psychological, feeling and image related concerns for individuals. Both menses and menopause have negative connotations. Menses is commonly seen as 'unclean', and menopause as indicative of women who are 'used-up.' This, primarily patriarchal viewpoint, supports and encourages Sexism, where women are considered inferior to men, and Ageism where in older women are seen as inferior to younger women. Traditional ethnic societies who acknowledge these processes more freely also practice sexism more openly. In westernized society were women have 'equal rights', discussions about menses and menopause are less common. This unfortunately has not done away with the discrimination rather it has gone underground. In order for women to take a more dynamic role in the larger group context and to live healthy, meaningful, empowered lives as individuals, it is important to bring menses and menopause out of the closet, and celebrate the power of menses and the wisdom of menopause.

8.4: Community - Losing and Finding the Sense of Community Joy Brown Dipl.PW, Hawaii

By age 17, my childhood rural micro-community was in last stages of disappearing, swallowed into a conformist mainstream culture. My lived experience was that of a masked stranger wandering in a strange land yet paradoxically identified as someone belonging to the stereotypical white mainstream culture. My field research for community was rooted in questioning why I felt this split and how I could feel more whole. Part of my search was to define what I had lost. The other part was to find if I could heal that loss. It became clear to me during my search that my yearning for community was not unique. Perhaps we in the west have come to the extreme pole of individualism. Along with our expectation and demand for autonomy often blows the cold

wind of loneliness and a deep longing for the felt connection of real community. I came to realize that most people I spoke with do not know what community is as they have never experienced real community. Community, what is it? How do we create community with one another that is expressive of our deeper values? I will share with you my recent fieldwork study and reflection on community, as a topic in itself.

9.1: Working with Women in Prison - An Enquiry into the Relationship Between Trauma, Dreams, and Rehabilitation

Clare Hill, Dip PW - Scotland, UK

Over 6 months, in the female section of a Central American prison, in small and large groups as well as individually, Clare repeatedly saw how reconnecting to a sense of personal path gave hope; how the patterning in crimes frequently echoed the patterns in early trauma; and how night-time dreams could guide how to unlock doors in some of the most wounded women. Furthermore, showing the women the connection between feeling bad about themselves and downing others gave many an insight into 'respek', a perceived lack of which was the issue which disturbed them the most. Might supporting and unraveling an individual's path affect their choices and inner and outer freedom in the future?

9.2: Deep Meaning and Purpose in the World: Using Process Work with People Who Have Experienced Long Term Institutionalized Care Because of a Disability Label

Pat Black, Dipl.PW - Scotland, UK

The search for meaning and purpose in our lives is important to all of us. For those people who are marginalized, have been institutionalized, or have labels of developmental disability it is no less important but the support services provided for people are rarely concerned to assist people to find their purpose in the world. We have been using Process Work tools to help some organizations find ways to engage with this search for themselves and for the people they support. This workshop will explore some of those ways to search for meaning and purpose. We will share some stories of people who have begun to find their purpose in the world with some moving results.

9.3: AIDS "R" US: Inner and Outer Marginalization in HIV+ Clients Renata Ackermann, Ph.D., Dipl.PW - USA

A presentation of my therapeutic work with HIV+ clients over the past 15 years, with a special emphasis on exploring the importance of a sentient attitude of the therapist. HIV+ clients deal with a great deal of inner and outer marginalization and present with some charged moral dilemmas around life, death, the role of the killer, revenge, etc. Process Work offers an opportunity to unfold moral and unpopular issues from a dreaming perspective and to connect with the deeper needs and visions in all of us. The therapist's awareness of his or her own marginalizing attitude towards living and dying, health and illness, selfishness and altruism, revenge and his or her ability to be able to fluidly move between worlds seem crucial on this tightrope walk. Use of case examples to illustrate.

9.4: Medically Unexplained Physical Symptoms (MUPS) Among Chernobyl Liquidators Joe Goodbread, Ph.D., Dipl.PW - USA

Many of the 750,000 "liquidators" who decontaminated the reactor site after the Chernobyl disaster suffered from diverse symptoms that defy organization under any accepted radiation-related diagnoses. Lack of a diagnosis detracts from the liquidators' quality of life, by denying them access to medical and social resources, as well as marginalizing them by branding them as malingerers.

In this study we applied the methods of Process Work, – a mind-body, awareness-based therapeutic modality that focuses on the patient's subjective experience of his or her physical symptoms – to work with a group of Chernobylt liquidators. All suffered from debilitating physical and mental symptoms that rendered them incapable of either working or campaigning vigorously for promised social benefits.

We focus on the case of one liquidator – Andrei - who suffered from severe pains tentatively – and symptomatically – attributed by his doctor to pancreatitis, with no causal relationship to his exposure to intense radiation at Chernobyl. We show how, by exploring and unfolding his somatic experience through imagery, movement, and sensory-ground ed (rather than interpretive) perception of the pain, he obtained access to inner resources of strength, endurance and optimism of which he had been deprived by his illness and social marginalization. His experience helped him reach beyond the boundaries of his known identity to improve his quality of life in general, even beyond coping with his symptoms.

We show how Process Work operates on three distinct levels of such medically unexplained diseases – the individual, by improving quality of life; the social, by helping the sufferer become re-integrated into mainstream society; and the global, by helping the social system re-integrate the sufferer's otherwise marginalized firsthand experience of catastrophic social events. This holistic approach insures the method is neither socially regressive (merely healing the individual from socially-induced ills without addressing social stressors) nor, on the other hand, exploitative of the individual's pain for society's good.

Finally, we show how this method contributes to improved quality of life in situations as diverse as severe illness, comatose and near-death experience, complexes of mental-social disorders (homelessness, addiction, co-occurring disorders), and social marginalization in general.

Poster Presentations:

Physical and Mental Health as Result of Social Project for Long Term Unemployed Women of Warsaw Hanna Wieloch & Agnieszka Kramm - Poland

The aim of this poster presentation is to show the methods and results of a social project for long term unemployed women from the Włochy district of Warsaw who suffered physical and many psychological symptoms (diagnosed and undiagnosed depression). We will present a brief description of our methods of working with women on different levels of reality and the Process Work methods used in with the women - including the concept of "city shadows." The presentation will show the consequences of such a project on the general health and wellbeing of the participating women. Because of its complexity and very good results (over 80% of final beneficiaries started to work), the project was awarded the title of "Good Practice" by the Ministry of Regional Development.

Color Companion to Chronic Pain Kara Wilde, MAPW, Dipl.PW & Suzette Payne, MAPW, Dipl.PW Poster display to accompany the 1:30 presentation

Nothing Came from Walking – Surviving Encounters with the Spirit of Death Conor McKenna, Dipl.PW

Poster display describing inner work methods used to address an aggressive prostate cancer together with excerpts from the book.

CanConnect: Enhancing Communication at a Distance with Those in Special States of Consciousness Ann Jacob. B.Ed.

An enhanced touch screen Skype program for people with special needs allows me to 'be' with my 92 year old mother who has memory loss and lives in a nursing home. Providing the pleasure and comfort that we get by seeing each other's smiles and the ability to follow and encourage her minimal cues as she enters ever more remote states of consciousness. 100 years ago, 85% of North Americans died in the family home - now 85% of North Americans die in a facility. We have to find new ways of caring as well as furthering people's processes while at a distance whether one mile or 12,000 miles. This project has far reaching applications for working with people in coma and remotes states from illness, accident, memory loss, aging, or end of life anywhere in the world. It is also designed for people who are only able to move their forehead muscles or pupils voluntarily. CanConnect has been developed in collaboration with the CanAssist Engineering Department at the University of Victoria, Canada. This project has received national attention and will soon be available as a free download. http://www.CanConnect.org

PS6: Plenary Sessions
Wilma Jean Tucker Young Researcher Prize.
Candidates: - Katje Wagner, Peter Amman, Joy Brown
Celebration of Global Health - Symptoms of the Field:
Closing Ceremony
Kate Jobe, MA. Dipl.PW

By expressing the energies or our symptoms in the field we will celebrate our diversity and vitality