

## **The Body Keeps the Score: Dance, Creative Arts and Somatic Therapies in the Healing of Trauma**

*The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*

By Bessel Van der Kolk

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I have long awaited the coming of this book to help address the global looming human disaster of trauma and PTSD. As a psychologist and dance movement therapist, I have witnessed the dramatic healing of somatic and creative arts therapies and appreciate the support that Bessel van der Kolk's work provides for a creative, whole person approach to working with trauma.

Despite apprehensions about reviewing *The Body Keeps the Score*, I found a new approach as I started reading it. I saw Bessel van der Kolk as a prophet with a mission, restlessly and sometimes impatiently questing for ways to help people who have been traumatized. I was moved by his passionate desire to help and his connection to his patients, by his poetry and political activism.

From that appreciative stance, I will try to convey some of what I learned from this book, what stood out to me as foundational, and to my own work as a psychologist and dance movement therapist.

### **Bessel van der Kolk as Prophet**

Here are some of the prophetic statements he makes:

- He is outraged by the need to devote resources to the study and help for trauma: "...trauma remains a much larger public health issue, arguably the greatest threat to our national well-being" (348).
- He is outraged that schools are cutting activities that teach self-regulation and leadership like chorus, gym, arts, and theatre.
- He is outraged that more than ½ million children in the United States are taking antipsychotic drugs that are prescribed four times more for children from low-income families.

- He is outraged that over the past 10 years, the Department of Defense and Veterans Affairs spent over \$4.5 billion on antidepressants, antipsychotics, and anti-anxiety medications.
- He laments: “I find myself close to despair...I wish I could separate trauma from politics, but as long as we continue to live in denial and treat only trauma while ignoring its origins, we are bound to fail” (p. 348). He knows that drugs don’t change anything; they don’t “teach the lasting lessons of self-regulation” (p. 225).

### **Critique of existing treatments**

Here Bessel van der Kolk frames his work in the context of the history and the changes in the field of psychiatry. In 1968, psychiatry was moving away from understanding problems of feeling and relationships to a brain-disease model of discrete ‘disorders’ (p. 27).

He critiques the main assessment tool of this pathology model called the DSM. “The manual has become a virtual industry that has earned the American Psychiatric Association well over \$100 million. The trend, embodied in the latest version of the manual, is getting worse: “ His pointed question is: “Has it provided comparable benefits for the patients it is meant to serve?” (137).

He laments the overuse of psychotropic medications, and reports that Prozac had no effect on the PTSD symptoms of combat vets at the VA (p. 35).

He is concerned that the pathology model makes patients passive: “The brain-disease model takes control over people’s fate out of their own hands and puts doctors and insurance companies in charge of fixing their problems” (p. 37).

The brain-disease model, for van der Kolk, impoverishes our humanity and potential for healing by omitting four “fundamental truths”; the capacity to destroy is matched by the capacity to heal; relationships and community are central to healing; we can regulate important aspects of our own physiology; and we can change social conditions (p. 38).

Nor are symptom reduction therapies adequate: “...the method of management du jour: medications, behavioral modification, or exposure therapy. These rarely work and often cause more damage” (p. 157).

### **Healing**

Healing is not the same as symptom reduction. Van der Kolk describes one of his patients who, as he recovered, taught yoga to vets returning from Iraq and Afghanistan. His “successful outcome” might not have been solely through the reduction of symptoms but through finding the hope in the tragedy, by not succumbing to despair, and by helping others.

Van der Kolk's approach is actually humanistic, client-centered, and existential, emphasizing the importance of *meaning* (Serlin, & Cannon, 2004; Paulson & Krippner, 2007), posttraumatic growth and growth through adversity (Calhoun & Tedeschi, R, 1999; Joseph & Linley, 2006; Stolorow, 2007).

He understands the importance of *resilience*: "Trauma constantly confronts us with our fragility and with man's inhumanity to man but also with our extraordinary resilience" (p. 356).

He supports the role of the *imagination*, key to the creative arts therapies and restoring coherence: "Imagination gives us the opportunity to envision new possibilities" (p. 17). In trauma, fragments of original memory need to be re-integrated through narrative, either verbal or nonverbal (Krippner, Bova, Gray, & Kay, 2007; Serlin, 2007a).

*Play* and the *capacity to symbolize*, for both Van der Berg and dance movement therapists, indicate healing: "Recovery from trauma involves the restoration of executive functioning and, with it, self-confidence and the capacity for playfulness and creativity" (p. 205).

*Self-Efficacy* is restored as movement addresses the traumatized feeling of being trapped and immobilized. Van der Kolk wonders: "Did my patients also need to have *physical* experiences to restore a visceral sense of control" (p. 31)? Self-efficacy, a feeling of *agency*, starts with interoception, the awareness of subtle sensory, body-based feelings, and helps us develop trust and satisfying attachment. The *mute body* (Serlin, 2014) has difficulty integrating sensory information into a coherent picture or communication. This results in a loss of inner reality, self-awareness, and sense of self (depersonalization). Van der Kolk states: "This visceral and kinesthetic sensation of how our bodies are met lays the foundation for what we experience as 'real' (p. 113).

*Somatic therapies* have begun to address these mind/body issues. Pat Ogden, Somatic Experiencing, Al Pesso and Dance/Movement Therapy all agree that "focused attunement with another person can shift us out of disorganized and fearful states" and are among the "new approaches to healing that focus on strengthening the body's system for regulating arousal" (p. 78).

Dance therapy, with its roots in tribal healing rituals, has powerful tools to address the trauma of being cut off from community. A dance movement therapist named David Harris, for example, did extraordinary work with traumatized child soldiers and the village elders from Sierra Leone (Harris, 2007).

Dance movement therapy also adds the element of *rhythm*, which can help people attune either to their own heartbeat and bodily rhythms, and then to others. Van der Kolk quotes Mickey Hart: “Life is about rhythm. We vibrate, our hearts are pumping blood. We are a rhythm machine, that’s what we are” (p. 74). Empathy and intuition, supported by mirror neurons, bring “rhythmic interactions with other people” so that “...What begins as the attuned play of mother and child continues with the rhythmicity of a good basketball game, the synchrony of tango dancing, and the harmony of choral singing or playing a piece of jazz or chamber music—all of which foster a deep sense of pleasure and connection” (p. 84). He makes a beautiful case for dance movement therapy: “Then one of the women started to hum, while gently swaying back and forth. Slowly a rhythm emerged; bit-by-bit other women joined in. Soon the whole group was singing, moving, and getting up to dance. It was an astounding transformation: people coming back to life, faces becoming attuned, vitality returning to bodies. I made a vow to apply what I was seeing there and to study how rhythm, chanting, and movement can help to heal trauma” (p. 214).

### **Art, Music, and Dance**

Van der Kolk notes that: “There are thousands of art, music and dance therapists who do beautiful work with abused children, soldiers suffering from PTSD, ....and numerous accounts attest to the effectiveness of expressive therapies. However, at this point we know very little about how they work or about the specific aspects of traumatic stress they address...” (p. 242).

Actually, there actually are a growing number of studies reporting some dramatic changes; however, these are often either in specialization journals that are not read by psychologists, or they are single-case or anecdotal accounts (Carey, 2006; Serlin, 2012; Serlin. & Speiser, 2007). There is not enough funding for the creative arts therapies to establish them as evidence-based therapies. The problem is political.

About music and the importance of shared rhythmic connection, Van der Kolk writes: “Collective movement and music create a larger context for our lives, a meaning beyond our individual fate” (p. 333). This was certainly true in Israel, where in 1948 Israeli music and dance were created out of ancient steps in order to create a coherent culture and sense of mission. I experienced this cohesiveness in 1962, and wonder if much of our young people’s flash mobs or raves today is an effort to recapture group spirit and meaning.

Theatre can facilitate “confrontation of the painful realities of life and symbolic transformation through communal action” (p. 335). Some of the most impressive drama therapists and psychodrama therapists with whom I’ve worked in New York, San Francisco and Israel include Robert Landy (2007) and Armand Volkas (Intergenerational Trauma); their work should be included here as well.

The arts and somatic therapies also help deal with *dissociation*, which Van der Kolk calls the “essence of trauma” (p. 66). One of the first steps to recovery, therefore, is to restore the ability to sense, name and identify what is happening internally. We can train our arousal system by the way we breathe, chant, and move: “In contrast to the western reliance on drugs and verbal therapies, other traditions from around the world rely on mindfulness, movement, rhythms, and action” (p. 207).

Although Van der Kolk covers previously neglected new areas of trauma like somatics, he needs to include more examples of how incoherent fragments of experience can be woven together through the use of *symbol*. Traumatized individuals with experience stuck in the body feel and think concretely. The capacity to symbolize, and consequently reintegrate a number of levels of meaning, is cultivated in the arts therapies. The capacity to symbolize allows a traumatized person to think beyond his or her immediate situation to symbols of hope or change.

Mindfulness is a key component of sitting, breathing, moving and acting; the foundation to hold all the emotions is self-awareness. Bessel van der Kolk often asks patients:

Notice that  
What happens next?

He asks people to label emotions:

Learn to observe  
Learn to observe relationship thoughts and physical sensations

His work is influenced by the Mindfulness-Based Stress Reduction (MBSR) program established by Jon Kabat-Zinn at the U Mass Medical Center in 1979. Using this approach, Van der Kolk starts by establishing “islands of safety” within the body (p. 245) that anchor the self, pendulates communication between verbal language and the body, and knows that by “connecting viscerally” with oneself, one knows who one is and what one values. The ability to tolerate sensations and trust oneself leads to trust in others and finally intimate relationships.

### **Summary and Conclusion**

*The Body Keeps the Score* is a landmark textbook that should be required reading for all professionals who work with trauma, and for all people and/or their families who have want to learn more about trauma and possible paths to ease their suffering. In this book, Bessel van der Kolk explains the nature and origin of trauma, reviews some of the body and brain physiology as a basis for a revised approach to working with trauma. In *The Body Keeps the Score*, Bessel van der Kolk critiques medical model and reductionistic approaches to trauma, and reviews newer mind/body approaches. To this end, he provides an invaluable roadmap for other trauma researchers and clinicians to practice, refine and build.

My wish, would I refine and build, would be to add research and training in the creative arts therapies. This field exemplifies so much of Van der Kolk's principles, yet builds on dimensions of mindfulness into dancing through life; that is, bringing awareness, grounded action, capacity to symbolize and play, clear and coherent verbal and nonverbal communication, and rhythmic attunement to others into re-entry into life.

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