

Hypothesis and Theory

A conversation about *Leibgedächtnis* (body memory)

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Introduction

Two years ago I suggested to the IFF *Feldenkrais Research Journal* editor Cliff Smyth that Dr. Thomas Fuchs' ideas about subjective body memory, which he calls *Leibgedächtnis* in German, would offer a valuable perspective for understanding the Feldenkrais Method. In November 2014 I began a series of conversations with Professor Fuchs with my partner Ulla Schläfke, and at times with Sabina Graf-Pointner joining us.

Dr. Fuchs, or more correctly, Dr. Dr. Fuchs since he has doctorates in psychiatry and philosophy and is professor in the medical and philosophy faculties at the University of Heidelberg, has a wide knowledge and a gentle manner. He knows the Feldenkrais Method through Barbara Pieper and Daniel Clenin, who have worked with him for many years and held leadership positions in the IFF. Our talks with Professor Fuchs have ranged over many topics, including this one about *Leibgedächtnis*. In the future, the other transcripts concerning themes of embodiment, philosophy, and emergent learning processes will be published.

A note on pronunciation

The German word *Leibgedächtnis* would be pronounced "Lie-b-ge-dackt-nis" approximately in English. Ä in German is pronounced like the English "a" in gate.

Attendees

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Roger Russell, June 2016

A conversation about *Leibgedächtnis* (body memory)

Roger – Thomas, your idea of *Leibgedächtnis* is a word that doesn't have a good English translation.

Thomas – You could call it body memory, why not?

Roger – We could, but that doesn't capture what it means in German. In German the word for body, *Koerper*, is the objective, third-person perspective; looking at the body as an object from outside. However, the word *Leib* is the subjective, first-person perspective; experiencing one's own body from the inside.

Thomas – Yes, of course. There is, however, a German notion of body memory (*Körpergedächtnis*), which is described by Joachim Bauer for example. (Bauer 2004) His concept of body memory in this book is much different from what I mean. He writes about mirror neurons, the immune system, about hormonal changes and all kinds of reactions of the anatomical, physiological body, including pain memory and so on.

You couldn't describe the whole phenomena which I have in mind when I talk about subjective body memory in that way. You can describe them from an objective, anatomical or physiological point of view, or you can describe subjective correlates of that objective point of view.

The concept, or better yet, the experience of *Leibgedächtnis*, signifies the essentially subjective component of our memories of our *Leib* experience, even if it's mostly something that is implicit or even unconscious. It's still subjectivity; it's not objective, and in that sense you are right, there's no really good English word for that. "Lived body memory" perhaps?

Roger – Alan Berthoz and Jean-Luc Petit (Berthoz and Petit 2008) call it '*own body*', which is translated from the French *corps propre*. The French expression seems much closer to *Leib* in German as opposed to body. *Own body*, something like that, but that doesn't seem to work so well either. In English it seems a bit awkward. So if the English-speaking world learned to live with the German word *Gestalt*, then maybe we can train them to live with *Leibgedächtnis*.

Thomas – It's up to you. If you translate it as body memory or *Leibgedächtnis*. When we published the volume with Sabina Koch, with something then we used the term "body memory" as well in the anthology edited by Koch, Fuchs, Summa and Müller (2012).

Roger – What was your line of thinking that brought you to differentiate these two concepts, and what are the consequences?

Thomas – The concept emerged from my interest in the lived, subjective body as such. When I wrote about "Body, Space and Person" (*Leib, Raum, Person. Entwurfeiner phänomenologischen anthropologie*) fifteen years ago (Fuchs 2000a), I looked into the different experiences of space: starting from the *Leib* or immediate and already extended spatial bodily self-awareness; then moving to the *Richtungsraum*, that means the directional space of your body in relationship to your surroundings, the space of action and perception; then going on to what I call *Stimmungsraum* which translates to mood-space or affective space, basically this is the space of attraction, repulsion, all kinds of affective evaluative relationships to your environment; and then finally you arrive at the *Lebensraum* or lived space. This is the space, which includes the whole of your social relationships, which are always inter-corporal relationships with others and which are embedded in a shared, lived world.

Furthermore, you can also talk about the *personal space* which is, in my understanding, a space that means a *suspension* of the primary bodily space. For being a person you start to take the perspective of others at a certain point and thus your primary, egocentric bodily space becomes decentered so to speak. You learn to look at yourself from the outside, from the point of view of other persons, and this inverts the whole primary centrifugal bodily space and creates an interpersonal space of different agents; for example, I can take your point of view and imagine how things look from your vantage point. So primarily I'm in an ego-centered space, but I'm able to take a bird's eye view which gives a completely different space. You could call it personal space or interpersonal space – the space created by being a person.

So, that was a short summary of my book 'Body Space and the Person' (*Leib, Raum, Person. Entwurfeiner phänomenologischen anthropologie*) published in 2000. At the end of that book I wrote about body and temporality. It occurred to me that all of these kinds of spaces have their own history because they are all formed by experience, by inter-bodily, interpersonal experience, by learning skills, by learning habits. And so all these spaces which I looked at from a spatial point of view, could have been looked at from a temporal point of view as well.

I thought that I could write another book starting from a temporal perspective, but I never arrived at that because of lack of time. But I wrote some papers (Fuchs 2000, 2003, 2008, 2011, 2012) increasingly focusing on this concept of the history or memory of the body, taking into account some ideas from Merleau-Ponty's concept of the habitual body (Merleau-Ponty 1966). Edward Casey's (2000) idea of memory is also related to the body. He writes about skilled memory and erotic memory, for example. There are already some scattered ideas around on this, but in philosophy or in the special field of phenomenology there's no comprehensive book on the

history of the lived, subjective body. Merleau-Ponty never elaborated on this; it's just mentioned here and there as the habitual body. It is a project waiting to be done.

Roger – So that idea of temporality brought you to the question of memory?

Thomas – Yes, exactly. It was my acquaintance with developmental psychology and mother-child interactions. In our research project at the clinical unit of post-partum depressed mothers we observed and counseled them about their relationships with their babies, which brought me to the fundamental importance of the history of their interactions which is somehow sedimented into the infant's body memory. You can observe these pairs of infant and mother, and it's quite striking. Babies who interact with their depressed mothers get accustomed to the reduced expressiveness and the withdrawnness of their mothers; to the slow and rather dull expression that they show. The baby itself becomes withdrawn as well; a bit reserved, less expressive, waiting. The child self-regulates in a specific way. When these babies interact with other mothers who are not depressed, then interestingly these mothers start behaving a bit more like depressed mothers. Tiffany Field's (1984) study also found similar results.

Of course, the mothers are not aware of their responses. However, it is very interesting that the child learns a way of behaving, an expressiveness or lack of expressiveness, an inter-bodily scheme of behaviour, of being with others that is transferred to other partners and is enacted in a way that influences the third partner. So to speak, in a way that is similar to what they have learned before. So we had a front row seat to watch how these inter-bodily relationships developed.

Watching these children and women, I realized that body memory is at the same time interpersonal; it is inter-body memory. These observations made me aware of the decisive importance of these bodily experiences; experiences that become anchored in our embodied way of being with others and dealing with the world, part of our embodied personality structure.

Roger – So the baby can get the mother to adapt more than the baby adapts to the mother. This would make biological sense; without the adults responding to the baby's needs, the child will not survive.

Thomas – Certainly, and what's more, the mother has to adapt to the individual baby because it brings its temperament; its different ways of reaction, which are partially innate. The mother responds to what the individual child brings into the relationship.

Roger – Thomas, you brought up that there doesn't seem to be a clear concept in the phenomenology field of philosophy for what Sabina and I were talking about, which I'll just call body image at this point.

Thomas – Which is a problematic term for the way you sense yourself. The problem is that it is about how our life experience has formed our sense of ourselves. So the problem with body image is that the word 'image' automatically evokes the idea that we are discussing a visual

thing. Of course, in a multimodal sensory experience of ourselves, our visual experience makes a contribution. However, that shouldn't be in the centre of the process. This is one of the reasons I have developed the concept of *Leibgedächtnis*; it is much more comprehensive than a visual metaphor.

Roger – It being so that this term is inadequate for the experience, there is still the question how that changes over a lifetime and how it changes through different experiences. In our Feldenkrais field we work with the experience of the subjective, lived body. We know that it can change very quickly; within a 60-minute group lesson. We have also found, in talking to people in the fields of psychology or psychotherapy, and in people thinking about embodied philosophy, that the ideas of body image and body scheme are there but the people talking about these concepts do not have the personal experience of how their own subjective experience of their body can change quickly and significantly. Therefore it seems that they cannot imagine how flexible this experience can be. So the plasticity and flexibility of the *Leibgedächtnis* has not become part of the conversation. This is a particularly interesting theme for us because we believe that the phenomena which Feldenkrais lessons bring to light belong in the center of the conversations in psychology and philosophy. Finally, is your article about *Leibgedächtnis* in English or only in German?

Thomas – It's in English in the book in which Sabina Koch and I edited entitled *Body memory, metaphor and movement* (Koch *et al* 2012). This is a conference report, but there is a translation of my original paper into English. The article is about the phenomenology of body memory. It gives a short overview on the types of subjective body memory, or *Leibgedächtnis*, which I distinguish. These are: procedural memory, then spatial or situational memory, intercorporeal memory, pain and traumatic memory, and what I call incorporative memory, which is the kind of memory that plays a particular role in enculturation.

Roger – Thomas, would you please give us a short summary of each of these?

Thomas – Yes, of course. Some of them are not intuitively obvious, at least not without giving all of this special attention.

Let's start with procedural memories. These are the sensorimotor and kinesthetic patterned sequences of movement, well-practiced habits, skillful handling of tools and other instruments of our cultural world. But it also includes familiarity with patterns of perception. Generally, procedural memory releases our attention from having to monitor many details of our everyday performances. Working in the background, this dimension of memory operates without us remembering how we learned these skills, as a know-how without the need of knowing-that. This is what psychologists usually describe as implicit memory. When I looked beyond this description I have found that there were a host of other skills we all learn, which are often not seen in that sense. However, they are learned ways of living our individual lives within our life space over our lifetime, so one could say that they are living skills or know-how in life.

Next, situational memory includes our familiarity with the spaces and situations of our lives. Therefore, it is a spatial memory. It helps us find our way in the space of our neighborhood and homes, for example, and one special situation: our hometown. These situations also have expressive qualities that contribute to their peculiar atmospheric impression that is stored as a whole in the intermodal memory of the body and which might not be completely expressed in words. Just think of the atmosphere of your place here that you are acquainted with.

Intercorporeal memory reverberates from our encounters with important others. When encountering another person, our bodies interact without our being able to say how, or without even consciously noticing this kind of intersubjective resonance. Merleau-Ponty (1960) called this pre-reflective bodily understanding, “intercorporeality”.

Developmental research has shown that motor, emotional, and social development in early childhood does not proceed on separate tracks, but is integrated through the formation of sensory-motor and affective patterns of interaction. These “intercorporeal” memories are potent carriers of our past. Not remembered in the explicit sense, they are unconsciously effective in every encounter. Just stand across from someone, maintaining eye contact for more than a few seconds; you will sense a strong, affective response which you cannot inhibit with intentional will.

Stern has called this implicit relational knowing. It is memory for the dynamics and undertones present in interactions, which also forms the implicit relational style of one’s personality. Comparable to the acquisition of motor skills, these intercorporeal memories shape relationships and are also expressed in the habitual postures of the body. As a result, the embodied structure of one’s personality is most accessible in the actual intercorporeal encounter, and can be attended to with proper training.

Incorporative memory means the shaping of bodily habits by attitudes and roles taken over from others. This happens mostly by bodily imitation and identification. The body becomes a body-for-others, reflecting a set of socially learned dispositions, taste, clothing, culture- or class-specific styles of perception and action that the individuals take to be their own and which are acquired through the experiences of everyday life.

Roger – Which leads us to Bourdieu’s (1990) idea of “habitus”.

Thomas – Yes, exactly. How we get our habitus, by learning manners, acquiring certain ways of how to behave, which is very much a question of education and also of discipline. It is a second nature that we acquire in our early social interactions which is very much culture-dependent and gives shape to an otherwise spontaneous or more naturally lived body. This is an acquired memory of how you behave in a certain situation; how you sit at a table or hold your fork and knife and don’t talk so loud, and so on. Some of this can also be regarded as an adoption of roles that undermine the authenticity of one’s primary bodily self and may inhibit spontaneous impulses.

This incorporative memory is nicely illustrated by a short video, which was presented by Colwyn Trevarthen, a Scottish developmental psychologist. At one of our workshops in Heidelberg, he showed a six-month old Japanese boy interacting with his mother. You see the boy constantly making these nice bows, which the Japanese acquire obviously very early on; they just do it. It's modeled, they imitate, as a kind of incorporative memory, because they adopt certain postures, certain behaviours: by imitation, or by disciplining, or by whatever ways of acquiring or teaching a habitus, so to speak.

Now let's continue with the different types of body memory. In pain memory, there is the implicit bodily presence of former painful experiences. For example, think of walking into your dentist's room. This is part of almost every person's subjective body memory. We all have our rather harmless memories, such as the dentist's visit, but also many others which are not so easily forgiven. This can also be part of our implicit memory of abusive relationships. Thus, not only is the pain inscribed into the body, but also the situations and relationships that were associated with that pain.

Finally, one of the most indelible impressions in body memory is caused by trauma. A serious accident, rape, torture, or threat of death is an experience that is very difficult or impossible to be integrated into a meaningful narrative. The trauma is then withdrawn from conscious recall but remains all the more virulent in the memory of the lived body, as if it were a foreign object. Mechanisms of avoidance or denial help a person isolate, forget, or repress this painful memory, but it forges its way nevertheless, in flash-backs or other kinds of sudden returns of the trauma.

Now that was a short summary of my paper (Fuchs 2012), which presents these different types of body memory, which are loosely connected but can be distinguished in these several dimensions.

Roger – I understood from your German article that you place these multifaceted experiences of body memory into the framework of implicit learning and memory systems that have been clarified in relation to explicit learning and memory since the 1960s and 1970s in psychology and neuroscience (Schacter 1987, 1996).

Thomas – Yes, most cognitive psychologists might say that *Leibgedächtnis* is nothing new. They might say, "Well, what you call body memories are just procedural memory, which we know about since the cognitive turn in psychology beginning in the 1950s and 1960s." However, I think it's not the whole story, because body memory is much broader than procedural memory, which is a term in academic psychology and memory research. It does not cover the entire field of subjective body memory, because it lacks inter-corporeality for example, it lacks situational memory, it also lacks the impact of postural expressions on your mood, on your emotions and so on.

So, all kinds of interactions between body posture, body action and self-experience are not covered by this notion of procedural memory. Also, it lacks the unconscious dimension of our interrelations with others that are mediated by the body. Therefore, what I mean with implicit body memory would also mean that there are certain ways of dealing with significant others which are transferred to new persons, as I pointed out with the baby when it's transferring a certain way of interacting to other mothers; so that's what is called transference in psychoanalysis, in a way.

We can take an example: your behaviour towards your boss may imply a certain posture, gestures and behaviour that conveys submission or a slight anxiety; maybe you are expecting shouting which you have experienced perhaps from your father. Imbedded in the intercorporeal memory there's a lot of unconscious expectations, assumptions, or protentions, to use Husserl's term, which means being implicitly prepared for something to continue or to happen, according to one's earlier experiences of similar situations. It doesn't mean explicit anticipation but your body attitudes imply some expectations, protentions of the immediate next step in the interaction, which are very much shaped by your experiences with significant others. All of this is part of subjective body memory – *Leibgedächtnis* – and the term implicit memory doesn't cover all of that.

In my thinking *Leibgedächtnis* – subjective body memory, is a concept that includes all kinds of significant experiences that you have made while interacting with the world and others that have influenced how you experience a present situation and how you deal with it. It will shape how you behave in that situation without having an explicit memory of what it reminds you of or how you learned what you are doing now.

Most of this is excluded from our conscious memory. Not purposefully, it is simply how implicit memory and learning works. It is not explicitly present, nor is it necessary to remember it because you enact what you have experienced in the past, bringing it forth into the present situation without being aware of the former experiences. So this is, in short, what the concept implies.

Does this make it clear what the difference between implicit and explicit means? Of course explicit are all kinds of deliberate recollection or linguistic declarative memory, including all that you are aware of as an episodic memory, all you are explicitly aware of as having happened sometime in your life and you can go back and find in your explicit memory. It's an intentional act of recollecting, of reminding yourself, which you do with the awareness, "Oh, now I remember. I learned that when I... That was at that time, or that place, or with those people..." This may often be closely related to implicit memory, but it is something that you do deliberately, explicitly and this is, as psychology and neuroscience have also pointed out, a different memory system.

Roger – That means that by looking very carefully at the different concepts of memory we can recognize that implicit memory, procedural memory and *Leibgedächtnis* (subjective body memory) don't mean the same concept.

Thomas – There's an overlap, but it's not synonymous.

Roger – So you have differentiated these kinds of experience. It's not a singular experience, and if you are willing to pay attention to the differences, it is possible to develop a refined concept along the line of what Gendlin (1982) has done?

Thomas – Yes, certainly.

Roger – So the psychologist's idea of implicit and explicit memory and the philosopher's idea sound different. Let's step back to the development of your idea. You've brought your training as a psychiatrist and as a philosopher to triangulate your viewpoint and realized that the psychologists and the philosophers have different ways to approach it, is that correct?

Thomas – Yes, but in particular the phenomenologists have a different way to approach it because psychologists tend to categorize these experiences into some other kind of system. Either it is the unconscious in Freud's terminology and concepts, or, today much more frequently, it's the cognitive unconscious of some modules of the brain that do these things for you. In other words, they are looking for a *third-person* explanation of these experiences of being acquainted with something.

Roger – So these ways of describing and categorizing the experience seem to make the concept of implicit memory narrower?

Thomas – Yes exactly. To put it pointedly, I would say the accepted definition of implicit memory deprives you of your holistic way of experiencing and interacting with the world. You know, it's a bit problematic that we don't have a word in English for the German word *Erfahrenheit*, which means something like knowing how, adeptness or sophistication. It's not only that you have experience of something or that you are skilled; it is more like you are deeply familiar with a part of living in the world, and your adept responses demonstrate that familiarity with situations.

By something which has grown through repeated experiences, you are becoming an experienced person in the sense of Husserl's term, "I can". It sounds a bit cryptic, but in Husserl this kind of familiarity with one's subjective body is a whole background system of "I cans – I am able to do...such and such." This is taken from the German word *Können*, meaning ability or skill in doing, or know-how. In Husserl this was described as "I can"; as potentialities you would say – motor potentialities, sensory potentialities, affective potentialities, interactive potentialities – and all this is what makes you very essentially the person that you are. In a way, everything you have experienced is what you are now; everything that you have become aware of, what you have acted and tracked in contact with the environment, everything that you have felt in

relation towards others is somehow sedimented in your body memory and is making up your present way of being, of being disposed to act. This is *Erfahrenheit*, and its foundation is the *Leibgedächtnis*, which is thus much wider than implicit memory or procedural memory.

So, this experience of oneself is a whole system of *I cans*, which means not only motor abilities, but all dispositions that make you able to interact with your environment, and all this is what makes up your particular way of being in the world. Redefining that entire experience in terms of a third-person approach is okay, but needs to be seen as only one of the choices we can make of how to study our behaviour. After all, it comes at the cost of depriving us of all of what is inside us; of what we feel and what we are as subjects.

We tend, too much in my point of view, to think of who we are in terms of what we *think* we are, of what we can attribute to ourselves in terms of episodic autobiographical memory, self-concept and so on, which are terms that are part of explicit memory. We tend to overemphasise this. You will see it in our thoughts about dementia, for example, where we tend to say, well, a person who cannot attribute certain information to himself, who doesn't know what his major autobiographical events are, is not a person any longer. On the other hand, emphasising what a person is in terms of all his grown experiences gives a different view on the person. Even a demented person is still someone who has acquired all these experiences and skills, habits and familiarities, even though he might not remember where, how or when he has acquired them. So, I think this offers a fundamentally different view on who we are; in Kant's classic question: Who is a person? We have then a much richer understanding of how we can answer.

Roger – And it raises a real fundamental question. If the psychological view is coming from a set of assumptions about the person that, like academic psychology, is grounded in the third-person view of looking from outside, where there is a lot of research, it is still that outside view. If you shift the question to the inside view it raises other complex questions if one is working therapeutically or with the Feldenkrais approach, about who is this person I am with, I as a subject with a second subject? What do they need?

Psychology gives us interesting concepts, and the other point of view taken from phenomenology that you are coming from, they are saying, "Well what will happen if we would open up our peripheral view to all the experiences that we don't yet have precise concepts for, but the experience, if one is willing to explore, is undeniably there."

That brings up some fascinating questions. First, is it undeniably there? If we don't have concepts for something can we even perceive it? This is something Ludwik Fleck (1935) outlined, building, I am certain, on others before him. Fleck pointed out that, as a community of knowledge, without some kind of basic concept of what we are looking at, as often as not, we cannot perceive something. We don't have the categories to distinguish what we are observing from the background. By differentiating these ideas, as we are doing now, we can see that we

are talking about different viewpoints. The one is that of psychology, and the other is drawing on phenomenology, which has other roots from the philosophical tradition.

We could take one or the other perspective, but you could also ask yourself, “Well, what would happen if we go back and forth, moving between viewpoints and comparing how they affect our perception and understanding of what we are observing?” So we can change our way of looking if we choose and if we have the necessary background knowledge. It sounds to me like part of what you did in developing your idea of *Leibgedächtnis* was to move back and forth between these two distinct viewpoints.

Thomas – Yes, we are talking about moving between the phenomenological and the psychological perspective. However, psychology can certainly be richer. For example, developmental psychology, which is in many ways a third-person psychology, has brought enormous insight into early interaction. There is the tradition of psychotherapy as well, including a second-person interactive psychology – a “we” which relies on the intercorporeal experience of the therapist as a source of knowing. So it’s definitely not something which is only philosophical; the concept of body memory has a wider foundation. I think it should also be informed, at least, by psychology and also by the more than 100 years of know-how in psychodynamic psychology when trying to give a more phenomenologically-sound description of subjective body experience. The other way round, the concept of *Leibgedächtnis* can also give Freudian concepts like repression or superego, and id, and so on, a new meaning. All of this demands from us that we take a close look at what kind of experience is behind any of those concepts.

Thomas – So if you are looking at phenomenal experience and ask yourself where you can find all of Freud’s unconscious drives and needs and avoidances and repressions and so on? Then as a phenomenologist you would say, well, those experiences are in the lived body, where else should they be? There is no soul substance or soul space somewhere if you don’t attach it to bodily experience, even if it might be in a subconscious or unconscious bodily experience. It’s hard to say where all these meta-psychological things like id, ego, superego, object representations and so on should reside. If they are not ultimately experienced within the realm of the lived body and its relation to the world, where else should they be?

Sabina – For the brain scientist it would be the brain.

Thomas – Yes, of course. That’s why many psychoanalysts have taken their refuge in neuroscience today because they hope to find their concepts somehow materialised in the brain. To a certain extent this is fine, however if you redefine psychoanalytic concepts into neurobiological concepts, they are completely alienated from the person, from the subject; they are not part of my subjectivity any longer. They are mechanisms that might determine what I do, and besides the fact that this kind of determinism is also a problematic issue, I have no experiential relation to these brain events, just as I don’t have any relation to my blood cells. I know I have red blood cells in my body; I know about that, but what should I do with them?

Nothing. So adopting this kind of thinking because it is easier to make psychoanalytic concepts seem like objective facts, would be a loss for our humanity, because then all these less precise experiences, these unclear dispositions and hidden sides of me, these marginal zones of my subjectivity would be lost because they are now becoming just brain events; things that happen in my brain, but not to me.

Roger – Meaning, if they are not measurable with the available methods they are not considered to be real experiences at all.

Thomas – These are some of the distinctions that philosophy makes possible and can help to clarify. It's a bit difficult to describe, but I have tried to analyse, at least to a certain extent, how the concept of subjective body memory and the bodily unconscious could be suitable to reconceptualise some of the psychoanalytic terms such as repression or avoidance. By reconceptualising the psychoanalytic unconscious, not in terms of something deep inside us but as being embedded in our actual behaviour towards others and the world, we can attend to these experiences in a new way. These concepts are about what we do, what we enact, what we experience without explicit awareness in our relations with others, and this is very much enacted by the body, by unconscious postures, gestures, attitudes, dispositions and protentions. Here we can see how the idea of *Leibgedächtnis*, with its many dimensions, helps show how our present behaviour is bringing the implicit learning from the past into present behaviour.

Roger – That's interesting because Moshe Feldenkrais' first book about his work was called, 'Body and mature behaviour' (Feldenkrais 1949). At the time he was writing it in the 1940s, he was in England, and he became familiar with various schools of psychology and psychoanalysis (Reese 2015). However, I think he ran into a fairly rigid set of ideas in psychoanalysis in England at the time. Apparently he didn't agree with many of the attitudes he got to know, but his book was predicated (Feldenkrais 1949: Ch. 1 and 2) on the idea that if you do talk therapy and become aware of your emotional behaviour but keep your movement habits, then as soon as you get into a situation where you shift back in your movement habits to a particular way of organising yourself, you have to shift back to the emotional habits that were associated with those movement patterns in your learning process.

Seen from the point of view of what you are suggesting in the idea of *Leibgedächtnis* then Feldenkrais' description makes sense. He says we need to reorganize the way we experience ourselves in action and that our kinesthetic experience is a fundamental part of our sense of ourselves. This would match Daniel Stern's (1985) ideas about core sense of self too. This brings us up to date with some of the theoretical models we find today.

Thomas – Exactly. That is confirmed today by an increasing amount of research being done on the embodiment of emotions, which means the impact of bodily postures, gestures, sensory experiences, on our affective evaluation of situations. Usually we think in the reverse direction,

so to speak. So we will normally say, “Well, I experience a certain feeling and I also felt it in my body, or I’ve felt strained and I caught my breath and couldn’t get enough air”, and so on.

So we normally tend to think of our bodily experiences as reactions to a primary affective experience, but the body is not a reacting entity but it is the *resonant* entity, that means it is the resonance of our emotional relations to a situation that we experience bodily and which makes up the affect. The affect is not something which can be separated from bodily resonance, but body resonance is an intricate part of what we experience as affects or emotions. Even the slightest emotions are somehow felt within the body. And the interesting thing is that it turns out more and more that the way we experience the body, the way we hold our limbs, the way we organize our postures, have their impact on our whole affective relation to the world.

So the direction runs both ways. For example, taking a warm cup of coffee in your hand will make you evaluate faces of people that you don’t know “warmer”, that means you will find them more friendly, warmer than if you take an iced cup of coffee in your hand. There are many research reports like that. Or being touched by a friendly person...

This gesture that you did right now, this gesture makes you more open to others for example.

[Note for the reader: We are sitting here and I (Roger) just opened my arms and turned my hands with my palms up.]

Yes exactly. The same gesture, even if you don’t know that you do it, lets you experience certain things, like for example, Chinese pictograms, as more funny and more interesting than if you turn your hands down. You’re more open to new or strange experiences if you just turn your palms up. Well, the best example of course is given by Charlie Brown: If you really want to be depressed you need to adopt a bowed posture, otherwise you can’t stay depressed or you won’t get anything out of your depression.

Sabina – I like the description in your book concerning anger because this is very obvious. A common expression is that people say, “I first feel angry and then start to get red in my face.” However, the experience of anger is one single expression as a whole, not a cause and effect type of event.

Thomas – Yes, of course. Another clinical example: I have a patient with a paralysis of the facial nerve, which makes him unable to smile naturally. He often complains that he is not able to find things so funny as before, because he can’t experience the smile – which is necessary for the experience. This is confirmed by a study (Strack, Martin, and Stepper, 1988) where subjects are told to hold a pencil in their mouth in different ways. In one series they hold it with their lips like this... [Note for the reader: Holding the pencil between the lips as if sucking on a drinking straw.] The other series, they hold it between their teeth with the lips opened, as if biting the pencil. You can see that I’m somehow smiling when I hold it like that with the teeth

and the lips open. So, when the people holding the pencil between their teeth are shown cartoons, they find them significantly funnier than if they hold the pencil with their lips.

This is exactly what my patient describes: If you can't smile, then somehow the feeling of funniness or humour gets lost. Therefore Parkinson patients often get depressed. They have this mask-like expression on their face, and without their familiar expressions they can't experience bodily resonance. This in turn makes them feel more distant to situations which are normally affectively relevant. They are not able to take part affectively, to be attuned to situations like they were before. It is simple: all our affective relations to the world are mediated and enabled by our bodily postures, expressions and gestures.

Sabina – It reminds me of something we do a lot with people in our Feldenkrais explorations. We might, for example, invite them to become aware of how they do a certain movement while they think of smiling or prepare to smile. Then we ask them to compare this experience with doing the movement while clenching the teeth, and it's a different experience of the movement *as a complete experience*. It changes the entire tone of the muscles and this change has a big impact *on the whole*, not the movement as such, which is visible from outside, but how people experience themselves moving.

Thomas – Yes. As a Feldenkrais teacher or a psychotherapist you often have to deal with what can be called body defence mechanisms, which does not mean a movement but rather a counter-movement so to speak, the rigidity that is put up against possible movements. In obsessive-compulsive patients, you often find that they are very stiff in their posture, their breathing and their belly, and they show these rigid jaw muscles. There is a stiffness, a rigidity that is obviously meant to suppress an unwanted affect which would be expressed by more expansive body movements. In terms of classic psychoanalytic thinking you would say obsessive-compulsives are repressing aggressive affects, confining them in the body because they have acquired habits of bodily rigidity which inhibits a certain kind of bodily expressiveness. You could call it a bodily defence mechanism, a defence against dangerous aggressive impulses. This is a psychodynamic viewpoint transferred to what I call body memory.

Sabina – As I understand what you are saying, then that's an assumption, that there is a suppression of something, a certain way of looking at the person.

Thomas – Yes, but don't we all do that in many cases? This is normal in a way, nothing special. Don't we have the term "pull yourself together"? You pull yourself together in some situation in which you cannot lose face or be ashamed. But it's not only the face, it's the whole posture that you have to keep under control in order not to indulge to certain affects which make you, for example, cry in front of others, so you pull yourself together. How do you do that? You might stiffen your mouth, pull your lips together, tighten your belly; you won't breathe much, and so on. You do that automatically; it's quite intuitive. You inhibit bodily resonance with that affect and if

you do it a hundred times you will find that in the habits of body memory. And it's nothing special; it's part of normal behaviour.

Sabina – Maybe you misunderstood what I wanted to say. It seems that because people did a habit so many times that in the moment, once they are lying on the floor and doing a Feldenkrais lesson, they resort to that habit and pull themselves together. It's not that now they are repressing something, some kind of aggression, but it's just that their embodied reaction years ago has become part of their habitual way of living. However, working with the Feldenkrais Method, I'm not addressing this person's suppressed feelings or anger, but rather how it would be if this person experiences himself differently? If the person experiences something else that they can act differently, the whole way of acting can be different, also the affective experience. When I walk out and meet you, I meet you differently with my hands like this and not like that. So we don't need this assumption of a person with suppressed anger, for example. We can also look at it on the basis of what they are doing now, and how they could do that in a different way, now.

Thomas – Yes, I agree and I wouldn't contend that this person, which I have schematically described before, would suppress aggressive affects all the time; of course not. He or she is not a container full of aggression so to speak, but the way they use their body has shaped their body memory. This memory influences whether and how the person lets these expressions come through. The habit which was shaped by past experiences now shapes the present way of interacting, of resonating with others and enacting one's being. It's more difficult for these persons to experience that they are angry, for example, if they habitually inhibit the expression.

If in certain situations they can give up this defence or inhibition, next time they may have better access to certain feelings which they normally tend not to experience because the bodily resonance is lacking or inhibited.

Roger - Another possibility is that if they no longer use their habitual body pattern of organising themselves, the affective associations may feel irrelevant in another subjective body state. Something along the lines of "Well, yes that's what I used to think or feel, but now that I sense myself, my subjective body state differently, I feel emotionally different and my history of that past emotional experience is not really that important for me anymore".

Thomas – Yes, it's a possibility of course.

Roger – This discussion demonstrates that we can take a number of different points of view, which brings me back to the Polish medical doctor and philosopher Ludwik Fleck (Walach 2013; Fleck 1935; Cohen and Schnelle 1986)¹. I was intrigued with his idea about how we learn a way of looking and conceptualising things, based on specific ways of looking, which are defined by the community of knowledge that you belong to; the way of observing and thinking into which

¹ See Walach, 2013, Ch. 2, 47 -71, concerning Fleck, Collingwood, and Kuhn.

we have been initiated by our training. This seems to be ignored in all sorts of professional fields which cannot or will not stand outside of their own community and look around.

For example, when you were talking about the academic psychology perspective, they learn a way of conceptualising which forms how they're looking at the behaviour of the person and what their categories tell them about what they are seeing. If they remain within that community they cannot see another possibility. This is often the case with our Feldenkrais community too. Now, Fleck points out that this is a natural result of science, or any epistemological system, being inherently a social, a community, activity... In order to participate in a particular community, you need to adopt that community's perspective and way of observing. Otherwise you are not an insider and cannot participate in the activities of that professional community, or are not taken seriously as someone who can contribute with thoughts, methods or theories.

The phenomenological view that you've been talking about is about standing somewhere else to get a different viewpoint than academic psychology. Not that either is necessarily better than the other, but that you were taking different perspectives, or as Fleck might say, getting another education with another community of thought. We can say, "Well, I'm going to look through a different lens, from somewhere else, and I may see something really different." Then the question becomes, how can I bring these two different viewpoints into some sort of relation with each other? Because I may be seeing differences but they're not two worlds; it's two sets of concepts, assumptions and observations.

Thomas – Yes, it's still the same world and it's still the same body. For one individual, the subjective body and the objective body, in the end they must be the same, even when experienced quite differently.

Roger – In other words, one description and the other description cannot be so different that they have nothing to do with each other. The question is: what brings them together? What kind of thinking brings the two perspectives together into some kind of coherent relationship?

I know that I am skating on philosophically thin ice here, but it brings me to another author, Robin Collingwood, (Walach 2013) and his idea concerning absolute pre-assumptions. Collingwood pointed out that when we are seeking to understand something we bring a set of thinking tools, which Fleck would say we learned as a member of a particular community of thought. However, Collingwood points out that we also build our use of those thinking tools upon a foundation, which we are often not aware of, which he calls absolute pre-assumptions. Collingwood pointed out that the crux of the matter is that the thinking tools we apply within our community of thought cannot be used to logically prove the truth of the absolute pre-assumptions that the community is standing on. This brings up all sorts of headaches to say the least. How do we examine those absolute pre-assumptions (Collingwood 1940) and start rethinking what we are doing?

That's the one set of especially interesting, I guess, epistemological questions. And the other ones are pragmatic questions in the sense, as I understand the pragmatism of Peirce, James or Dewey. "If I know something, then how is it going to make a difference to what I do or experience or what I can imagine?" (Blackburn 1996: 296-297). So, all of these questions raise more questions, but the pragmatic question remains: what do we do with this person who's got this certain way of experiencing himself? What difference will it make in his or her life if we claim we know something from any of these perspectives we are speaking of? Someone talks about his emotions, and the psychiatrist or psychologist taking one perspective asks, "How do you feel?" Another professional, let's say for example someone whose community of thought deals with movement or the body says, let's take a look at how you move or how you experience your muscles or your bones. If these two observers described to each other who they talked to but didn't give a name, they might not realise they had been talking to the same person.

So my question would be, what's the way of looking that could pull in both perspectives? And what I'm hearing is your idea of *Leibgedächtnis*, or subjective body memory, was an attempt to pull together the perspective of the phenomenological philosopher and the perspective of the psychologist, and the biologist, and furthermore not consider first-person and third-person viewpoints as opposed to each other but that they complement each other.

This raises questions which are difficult because they are almost like second order questions. They are questions about how we ask questions and what we think we know about who a person is, about understanding their history and about who they can become. Then, if we could answer that second order question about how we can weave together our answers taken from different perspectives, what would we do to help the person? What does this person need to be able to do, and what would I need to know to be able to help them? It becomes a very pragmatic question because it would make a personal difference for that individual. I find that all very interesting both in reflecting about what the issues are. But then getting down to the brass tacks, what are we going to do with this person, what could help them live easier?

Thomas – As a philosopher, I would say the most basic recommendation that would follow from these concepts is that *in order to see the world differently, to see yourself and experience yourself differently, you have to act differently*; have a different experience of interacting with the world. We could find all kinds of theoretical representations or ideas or fantasies of what I could possibly be or how I can possibly be different. However, *not much will change unless you somehow start to act in a different way and interact in a different way, because that is how the body memory changes.*

Now, the two complementary views of looking at the body from the objective, third-person point of view and the subjective, first-person point of view, can best be reconciled or integrated when looking at the temporal dimension, when looking at the process dimension. There is a continuous process of experiences, actions, turning into different bodily dispositions, and this, of course, changes your objective body as well. Doing different things will influence the kind of sedimented experiences that are finally somehow ingrained in your brain structure or neural

excitation patterns or whatever you might call it. In other words, the process of experience changes your bodily dispositions, your body's structure, and this in turn enables new experiences. So there's a continuous interaction between first-person experience and third-person patterns or structures, or you could say, between *process* and *structure*. So there's process, continuous interaction, which is very much dependant on your experience, and processes are continuously transformed into structure, which is the more constant, the more continuous, stable result. But changed structure already enables new experience, so that's not just a one-way street.

This is one way in which I think these two seemingly opposed contradictory poles can be brought into a process of interaction and can be integrated, and that is what I think you do as Feldenkrais teachers.

Roger – That's a nice way of describing the Feldenkrais lessons. We agree to be interested in an experience that we've never experienced before. Seen from neuroscience, we engage our prefrontal attention systems to help reorganise the neurological habitual patterns and change, what I'm going to call it body image right now, although it doesn't encompass the whole idea of *Leibgedächtnis*. However, in a Feldenkrais lesson the change is almost immediate. In an hour you can shift the way you sense your body experience and the personal meaning of the experience too; the way you feel about your body experience and the way you imagine your possibilities. You might say, "Wow, I can do that!" because the world – in the sense of other people in your social world – might have been telling you, no, you cannot do that, or you cannot learn that in any simple process or short time. And then here you are, clearly experiencing that this is not true.

In Feldenkrais lessons, opening the opportunity to make a new experience is central to what we do. Now I hear from you that this is also central to how *Leibgedächtnis* functions and how new experience affects our behaviour in the world.

Thomas – Yes.

Ulla – I had a good example today with a woman I was working with, because she felt like she didn't have anything where she said I'm concerned about. She didn't know what she wanted in the lesson. However, as we continued to talk, she said that the moment she gets up and walks through the room, and even though other people are not looking at her, she feels shame, and feels like she is clumsy in her movement because she thinks they are watching her. After the lesson, she could clearly sense her spine and pelvis moving gracefully, and her head easily upright; which really surprised her that she could do that in such a short time. Surprisingly to her, that sense of shame was no longer part of her experience. She could walk through the room with me watching her, other people watching her. She knew that others were watching her now and she didn't experience the same clumsiness or shame. She felt she was simply there and could walk and it was fine. That seems like your description in practice. She could act

differently, and she could experience herself differently, but she was immediately also seeing the others watching her and experiencing that differently too.

Roger – Another question comes up for me, which we will have to talk about another time. It is about practical methods of addressing *Leibgedächtnis* issues; for helping the person find more effective and satisfying ways of action in their world. Because if this sense of subjective body memory is implicit and often even unconscious, which means the person can't gain access to their way of bringing their past into the present, as you say, then how can we approach their need for help in discovering themselves in more depth, in more possibilities?

We have seen now that there are different ways of conceptualizing and observing. The perspectives of academic psychology, of psychiatry, the brain-based concepts of autobiographic memory of Markowitsch and Welzer (2005) or Damasio (2010) or Panksepp and Biven (2012), for example, or the developmental ideas of Daniel Stern (1985) with his ideas of core sense of self, intersubjective sense of self or the narrative sense of self. Then there are other third-person perspectives of the body that are associated with physical therapy, sports training theories, and physiology – as examples, which seem to turn the body into a mechanical system that can be repaired with the proper methods. Now with your multidimensional perspective of *Leibgedächtnis* first and third-person perspectives cross paths by bringing phenomenology into the picture.

The question is: what kind of practical methods might be available to address all those issues? The philosophical, the psychological, and the biological? What kind of methodology could capture that whole experience?

Thomas, this has been both interesting and enjoyable, and we want to continue the conversation. There are a lot of Feldenkrais teachers who are very interested in bringing these many different points of view together.

Thomas – I can gladly contribute to that.

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Transcription and Editing

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Biographies of Participants

Dr. med. Dr. phil. Thomas Fuchs is a native of Munich, Germany where he studied medicine from 1981-1988. During his medical studies he was troubled by the exclusive objectification of the living body, and became interested in the first-person, subjective perspective of our embodied self. He broadened his studies beyond medicine to include philosophy and the history of medicine. It was in this later field that he received his first doctorate (MD).

In the following years he received training in neurology, psychiatry and psychotherapy in Munich. In 1997, he became supervising psychiatrist at the Heidelberg University Hospital and holds that position until today. Continuing his studies in philosophy, he received a Ph.D. in philosophy with a dissertation about the phenomenology of the subjective body, space and the concept of the person. In his work as a psychiatrist he has been able to weave together his fascination with medicine and the philosophical tradition of phenomenology, which goes beyond the objective physiology of the body to the subjective experience of what the Germans call the *Leib* or *Leiblichkeit* – the personal experiential dimension of one's own body.

Since 2005 he has been professor for psychiatry and psychotherapy in Heidelberg. In 2010 he was appointed Karl Jaspers Professor of Philosophic Foundations of Psychiatry and Psychotherapy in Heidelberg. He has led two major research projects, funded by the European Union, concerning the subjective, first-person experience of one's own body and the experience of self. These projects have included several conferences in Heidelberg with researchers and therapists from around the world. Since 2008 he has been a fellow of the Marsilius Center for Advanced Interdisciplinary Studies in Heidelberg. Since 2010 he has also been head of the German Society of Phenomenological Anthropology, Psychiatry and Psychotherapy (DGAP).

He serves as editor of several professional journals, is a member of several professional associations and has published several books, conference volumes and countless articles. A popular lecturer, he has given talks at conferences on several continents; he is an avid traveler.

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Roger Russell MA, PT is a Feldenkrais trainer. He is American, and is educational director, with his partner Ulla Schläfke, of the Feldenkrais Zentrum Heidelberg. He had the luck to learn the Feldenkrais Method with Moshé Feldenkrais in San Francisco and Amherst (1975-1982). Since his first experience of Feldenkrais lessons he has been intrigued by the ideas and the way of thinking that led Feldenkrais to his extraordinarily creative methods. He has studied physical therapy, movement science, evolution, sensory-motor development, psychotherapy and neuroscience in pursuit of more understanding of Moshé's ideas. Realizing that these different fields of study needed to be understood in a larger frame he became interested in epistemology and philosophy, which led him to the door of Thomas Fuchs at the University of Heidelberg.

Ulla Schläfke is German and has been fascinated with people and their individual differences since she was a teenager. She learned languages (Spanish, French and English) in order to engage with people in different cultures. Leading the administration of a training institute for teachers and psychologists, she recognized that many of the methods of humanistic psychology could give her new insights into human nature, and she learned many of those methods, including Transactional Analysis, Theme-Centered Interaction, Neuro-Linguistic Programming, Coaching and Organizational Development. An encounter in a conference led her to the Feldenkrais Method which she learned in Hawaii, Paris and London (1988 – 1991). She is a Feldenkrais trainer and leads the Feldenkrais Zentrum Heidelberg together with Roger Russell in Germany.

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Sabina Graf-Pointner, Dipl. Soz.Päd (FH) is a Feldenkrais practitioner and complementary health practitioner. She was born in Munich, Germany and has been a teacher of dance and movement since 1984. She has been a curious practical researcher of human behaviour in many parts of the world and has studied dance and movement in Munich, Bolivia, Barcelona, Boulder, Colorado, San Francisco and New York. Understanding movement and approaching it from the mind's side was equally important for her, which led her to study philosophy, psychology and pedagogy. A Feldenkrais Assistant Trainer since 2005, she is presently seeking

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