

Internal Correlates of Relapse Prevention

Some Principles of Ida Rolf's Work Used in Healing of Convicted Sex Offenders

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When, at an Evergreen Foundation seminar in Salt Lake City in 1990, I heard Jeff Konrad describe how he was healed from a life of aberrant sexual behavior by being taught healthy ways to connect with other people and finally achieve the friendship he had always craved, I was deeply moved. Like Jeff, I had grown up not knowing how to make friends. When the other boys rode off on their bicycles together after school, I stood there miserably lonely, not knowing how to join them. Although I had not strayed onto the sexual deviance path that he had, I understood very well the crucial lack that lay behind it.

Starting in 1963, I had learned from Virginia Satir how to use family therapy to help my psychiatric patients learn the missing functions they needed for healing. My life changed in 1967 when I realized that I needed to learn these skills as much as they did. I began to see that the most helpful learning always involved becoming more consciously connected with one's own body, more structurally integrated. In 1969 I received the ten-series from Ed Maupin. In 1971, the year I turned 41 and met my present wife Bonnie, the bright light of real friendship entered my life, the payoff from the previous eight years of seeking. That same year I received my training from Ida Rolf; words cannot convey the depth of change this brought to me.

Working with Ida deepened what I had already learned from Virginia: that what people need for healing is already within them, as a potential to be activated by whatever healing method is used. Becoming a Rolfer (a lifelong process) enabled me to feel at home inside the human body, unafraid of intense feeling. Part of Ida's vision was that there is a wisdom in our intended structure that far surpasses any practitioner's cleverness. I saw that, likewise, what makes good men good is already within them, part of their original design, and can be brought to light by proper lessons. I knew that the standard treatment of sex offenders aimed in an utterly different direction, and I became fired up to show that the principles I had been learning would work much better, which they did.

My disappointment was that not one of the other sex offender therapists in Oregon, some of whom were my friends, took an interest in this work, even after I presented it at meetings and they knew it was working. I guess that preparing for this kind of work came more from being a Rolfer than from my extensive mental health credential program training.

The following article is presented exactly as it was written in 1993 for publication in a professional journal for sex offender therapists. The name "Internal Correlate" was invented by me on the advice of a colleague who said that, for my work, to be taken seriously by other mental health professionals, it needed a name. So I made one up. My article was refused by each of the three editors to whom I offered it. The one editor who gave a reason said that his editorial board of academics rejected it on the grounds that it did not reflect a standard research format. Similarly, when the local director of probation and parole prohibited further offenders from working with me, he told me he feared that someone might criticize him for allowing those under his supervision to be treated by a method that did not come from published scientific research. Which indeed it did not.

That there be no repeating of sex offenses is, of course, the foremost aim and goal of the treatment of sex offenders. It comes ahead of goals such as the abatement of other pathologies, increasing self-esteem, or reunifying families.

Toward this goal, there has been a great deal of study of the causes of sex offending. The most highly regarded treatment programs today enlist the participation of the offenders in this process, requiring them to examine their patterns of deviant arousal, their offense cycles, and their cognitive distortions (thinking errors) such as the objectification of victims. Then strategies of relapse prevention are crafted from these causes.

For the past three decades, the author has studied the question of what causes healthy behavior, and for the past three years has applied his findings to the question of what keeps non-sex-offenders from sexually offending. This is the first formal publication of results of this search, which found that educating sex offenders to connect with the internal correlates of their elements of offending leads to abatement of offending.

In the 1960's, the author learned from Charlotte Selver, Virginia Satir, and Fritz Perls the value of consciously connecting with one's sensations and emotional feelings in the body. Consider the well-known statement that psychotic persons are "out of touch with reality." Being *in touch* with reality involves paying attention, which is done through the senses. Simply asking patients and clients of all kinds, for the past 25 years, to locate and describe their bodily sensations has produced a unique set of observations. One pattern seen was that there is a positive correlation between the degree of bodily sensory awareness and the level of healthy functioning – physical, mental, emotional and behavioral. Connecting people with their internal sensory experiences seemed to connect them with their innate potential for doing well. It was also observed that substance abusers and sex offenders presented major gaps in these connections; they habitually did not notice the bodily sensations (the internal correlates) associated with their pathological urges and behaviors. The following paragraph describes a typical set of instructions used with them.

"Sit up straight, put your feet flat, close your eyes, search inside your body, and tell me where you feel something." The answer is given either verbally or by pointing. "Describe the feeling." If the answer is in terms of an explanation or an emotional label, "Describe it as a physical feeling, like heavy

or light, loose or tight, hot or cold, shaking or aching, empty or full or electrical." This demands of the client a high level of sensory awareness and focused attention; if he is not accustomed to this, more coaching like the above is given. We find that anyone, with help, can do this, unless intoxicated from drugs or alcohol, or actively psychotic. Developmentally disabled can do this well. Next, "Let the feeling seem endless. Let it penetrate all through your body. Is there any part of your body not feeling?" If yes, "Pay attention to the lack of feeling in that part of your body." This connects him there.

Almost always, the client reports the feeling spreading through his whole body, and, within a few seconds to a minute or so, being transformed into a sense of peaceful energy. The client feels relaxed and alive, often more so than he has felt for years. When asked, "Did you know that you could do this?" sex offenders (and drug and alcohol abusers) invariably answer that they did not. This opens the door for presenting this new skill as a desirable alternative, explaining to him that he will not abuse or offend while consciously connecting inside his own body. Besides, it feels good. Giving the client these focusing lessons provides him with the basic procedure to be applied to his deviant arousal, cognitive distortions, and all his acting-out behaviors. He may be given the explanation that, when he has painful or frightening feelings, he will "let them in or act them out – this is how to let them in."

Application of this procedure is then made to every element of his sex offending pattern, both in group and in individual treatment sessions, along with the usual taking of history, reporting of current problems, rational discussion, giving of homework assignments, group interaction, etc. Major abatement of the sex offending behavior (both the urges and the actual acting out) generally occurs within the first month, and solidly reliable relapse prevention (with other signs of maturity and health) is seen within six months. Typically, clients like this work and are motivated to pursue it. Some clients (and some professionals) are too afraid of feelings to allow themselves to participate; however, once people have "tasted" this work they find that it is good for them.

The work of Stanton Samenow¹ on criminals' thinking errors helps us understand how they can be so attracted to this work. Of his successful offender clients, he says (page 241) that what they "prized most

was...the feeling of being clean." Internal correlate work gives offenders that feeling. Samenow says (pages 6-7), "...a criminal is not equipped to be responsible. A drastic alteration must occur, and to accomplish this, a criminal requires help... He must be taught new thinking patterns that are self-evident and automatic for responsible people but are totally foreign to him. Short of this occurring, he will continue to commit crimes." In the opinion of this author, offenders *are* equipped to be responsible, in the sense that the potential is within them, but they require help in how to connect with that potential. And when they do, they achieve that "clean" feeling Samenow described. Here are two examples of Internal Correlate work with typical thinking errors.

"How you just described your offense sounded vague and minimizing. Repeat the exact same words and, as you say them, notice what you feel in your body." Then, "Now describe what you did to her in much more specific detail (they usually find this difficult, yet always can do it) and, as you do it, notice what you feel in your body." Then, "Which feels better?" In the author's experience, invariably the more specific statement feels better, even when the client really had to sweat to do it.

"Imagine your wife (or anyone) sitting in that empty chair, and say something meaningful to her that you know is not true. Notice the feeling in your body." Then, "Now change that to the true statement, and notice the feeling in your body. which feels better?" Without exception, the truth feels better. The author finds that clients who habitually lie, even when the truth would serve them better, change this behavior quite quickly after being given this learning experience.

Some of the offenders that author has worked with report an obsession with looking at the breasts of young teenage girls and fantasizing erotically about them. (Therapist:) "Picture one of those girls walking up to you now. Where is your attention focused?" (Offender:) "On her breasts, and the fantasies are there. How do I stop this?" (Therapist:) "Keep looking at her breasts, and let all the energy of looking at her breasts spread all through your body." After a minute, "What's happening?" The fantasies are gone; he doesn't see her breasts any more, but sees her (even more clearly) as a whole person. "You see, when you are connected with your whole body, you see her as a whole person, and not just a pair of breasts floating in the air."

The foregoing actual example illustrates the principle that objectification of the victim reflects objectification of the offender – that is, disconnection of the offender from his own body. Inquiry into the actual experience (not the fantasies) of someone using pornography for purposes of sexual arousal bears this out. While pruriently looking at pictures, whether or not masturbating, men are aware only of the aroused part of their bodies and do not notice that all the rest of them has been emptied out and has gone dead. Typically after six months or less of weekly group therapy using internal correlate training, men notice that they have actually lost interest in pornography and often find it repulsive.

Sometimes a more dramatic therapeutic intervention shows the power of Internal Correlate work to prevent sex offending. "Sit up straight, put your feet flat, close your eyes, and picture your victim. Do you see her?" They always find it easy to picture their victims. "Do it to her again. Repeat the offense. Do everything to her that you did. And, while you are doing it, let all the energy of doing it penetrate into your own body and feel it in every part of your body." After waiting a minute or so, "What's happening?" He answers, "I can't do it." They cannot offend while paying attention to their own bodies.

Sex is wordless. Alcohol and drugs are wordless. We all know that. What surprises many of us is to realize that our innate sense of right and wrong is also wordless. It's located in our bodies, not in our intellects or in our words. What is interesting to discover is that much of the damage done to the victims of sexual abuse is also wordless, in the form of disconnection from part of their bodies. A little girl who is raped by her uncle or stepbrother, having had her sense of trust violated, disconnects from her chest (where trust is felt), and thereafter finds it hard to trust people or feel intimacy.

The successful treatment of this phenomenon is the topic of the book *Embodying Healing*², which describes the highly effective work of a clinical psychologist and a massage therapist jointly working with clients who are survivors of childhood sexual abuse. They regularly observe that helping clients to consciously connect with their bodies enhances the effects of the psychotherapy. They say, "In the bodywork component of treatment, body awareness is an end in and of itself. Touch is relearned and the body reclaimed and restored from violation of the abuse... Body work thus becomes a powerful adjunct to talk and in-

sight-focused therapy." In their work, the connection with the body is sought primarily through wordless touch. In this author's "Internal Correlate" work, the connection is sought primarily through verbal instruction.

What makes men good (and keeps them from sex offending) is found more in the writings of novelists and essayists than in professional literature. In concluding his essay on this³, C. S. Lewis writes, "The head rules the belly through the chest." (p. 34). Of intellectuals whom he regards as having perverted the truth about human beings, he writes, "It is not excess of thought but defect of fertile and generous emotion that marks them out. Their heads are no bigger than the ordinary; it is the atrophy of the chest beneath that makes them seem so." (p. 35) And, finally, "In a sort of ghastly simplicity we remove the organ and demand the function. We make men without chests and expect of them virtue and enterprise. We laugh at honor and are shocked to find traitors in our midst. We castrate and bid the gelding be fruitful." (p. 35). Lewis's whole book is devoted to the belief that there resides within each of us a "Tao" that, when connected with and listened to, will wordlessly guide us to right actions. He regards this inner quality as superior to anything that can be invented by "the conditioners" to be imposed upon us.

Observers of "Internal Correlate" sessions, if they are accustomed to the prevailing cognitive-behavioral *words*, may have difficulty perceiving that essentially the same elements (confrontation, contrition, cycle, etc.) are present in I. C. group work, because the crucial happenings there are *wordless*. Understanding the power of the "Internal Correlate" enhancements comes both from experiencing the work oneself and from seeing the clinical results over a period of time. Readers of this article who have had neither may fail to grasp the connection between the technique described and the basic goal of relapse prevention in sex offenders. As C. S. Lewis said, "Only those who are practicing the *Tao* will understand it." (p. 61)

And yet the "Internal Correlate" phenomenon is really not new to the sex offender treatment literature. Something very similar is the "urge surfing" technique of Alan Marlatt, described by Chiauzzi as follows: "Urge surfing takes place in three steps: (a) assuming a relaxing position to notice which parts of the body are experiencing the urge, (b) focusing on one part of the body where the urge is felt and labeling the

sensations, and (c) continuing in this way through each part of the body that is affected by the urge. This method helps the individual 'surf' through the cravings until they disappear naturally."⁴ The same process appears to be at work here.

I. C. work is profoundly confrontive. The author had the privilege of being a participant in a Synanon group session in San Francisco in 1967, and remembers his own confrontation. It felt like being kicked in the belly, although it was entirely verbal. What came next was the after-group gathering for coffee where the behavioral message might be stated as, "You survived it, didn't you? You didn't think you could handle it, but you did. You're OK." One sex offender, after receiving his first I. C. lesson, exclaimed at the next group session, "That guy put me into the most intense pain I ever felt in my life." He went on to display and report week after week how he was improving, which he had not experienced from his previous therapy. This is as confrontive as a Synanon group of 25 years ago. To feel and connect with the energies and feelings in your gut that come when picturing your victim, from remembering your abuser, or while imagining what you most fear happening, is to be powerfully confronted. It is the essential experience, "the guts" of the Synanon group. The wordless part (like in the Synanon post-group message) is the implied instruction in I. C. work: "You survived it, didn't you? You didn't think you could handle it, but you did. You're OK." The genius of Synanon was in this message.

Contrition and empathy likewise are central to I. C. work. Let the reader ask himself whether he has ever said anything unkind to a member of his family, and whether he didn't then feel bad in his heart or the pit of his stomach. This is the essence of contrition, which is a common part of the everyday life of most people. What the author observed, after 25 years of asking people where they felt things, was that sex offenders do not notice this feeling in their bodies. It is not difficult to teach most of them to notice it. The contrition that ensues is wordless (as it should be), and its beneficial influence on behavior is much vaster than the verbal displays of contrition and remorse that are sometimes demanded of sex offenders. One client in his 30's reported that he is beginning to feel real love toward his present family and realizes that he never experienced it before, even toward his wife and children previously. Other tell similar stories, which ring true as they describe their experiences in detail in group.

Objectification of victims and other females abates without its being discussed verbally. A typical report in group would be, "Now when I look at young teenage girls I see them as children, not as sex objects any more. Now the idea of sex with them repels me." Such repulsion is desirable and natural, but cannot be instilled verbally. It is "in the gut."

Relapse prevention is the ultimate focus of I. C. group sessions. Over and over, each man is asked to describe a high risk situation from the preceding week and to report how he handled it. For new members, this is an opportunity to give a lesson in connecting the internal correlate of that high risk situation, and to learn that letting the feeling into his body will "detoxify" the situation and abate the urge to act out. More experienced members report how they used this skill to stay out of the previous abuse cycles. As with the learning of any new skill, it takes many repetitions over many months to produce a solid and reliable habit. Eventually it's there; typically after six months, they report being literally unable to act out in the old ways.

Finally, a word about the therapist's experience. There is tremendous satisfaction and no "burnout" in doing this work, which regularly leads to both the therapist liking the clients and the clients liking themselves better. Clients report no longer "feeling like the scum of the earth" and instead steadily improving in all their interpersonal relationships.

For the author, the successful application of his clinical methodology to the treatment of sex offenders is rewarding beyond words. □

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