

# Seiki, The Condition of Spring

Alice Whieldon 2002

As body-based therapists, as creative people, we need to be uncompromising in our pursuit and propagation of the truth. We need to be asking ourselves some basic questions and we need to be unflinching in offering and debating answers. This is the way to our own health, the health of our clients and the health of Shiatsu.

One of these questions is simply: what do we think we're doing? It is one we often assume we know the answer to but can rarely articulate. Indeed, I have met hostility from therapists on asking this question – I find this breathtaking. What business do we have being therapists if we are unable to approach the most basic questions about what we are setting out to do?

There are all kinds of answers that Shiatsu therapists offer, but: 'I want to help/rescue people' is the most common one in some form or another.

Well - you can't help people, you can't rescue people, you can't make it better for people, you can't cure them, you can't heal them.... This is not possible and we need to understand this and know it in our hearts. You can't change people and there is always an ulterior motive behind the desire to do so. This motive is not bad or wrong; it is simply about our own pain. I am not dismissing compassion here, but compassion is an attitude, an understanding, not a verb.

Yet health is our business. But real health is not about eating the right things and getting enough exercise and conforming to some idea of balance... this is all window dressing. Health is about becoming more ourselves in whatever twisted or serene form we are manifested in. This being the case, how can Shiatsu contribute to our health? Tricky. Yet not being able to help actually relieves us of a considerable burden and forces us to keep asking questions. Something clearly happens in Shiatsu sessions, so what is that 'something'?

The therapy situation works in the following way: pain (in the sense of life condition perceived as problem) is blindness to how it really is. The pain condition is actually a very small thing, but, when right in front of our eyes, it appears to take up all space and we identify with it.

While no one can help us out of that condition, since it depends on our becoming conscious, what we can do is set up space in which we might recognise ourselves more and so come into a different relationship with our pain condition. In therapy, the therapist is that space, which means that the therapist must be internally spacious, a task previously left to priests - a sacred task - and no mean feat. A good therapist is a rare treasure and the space offered can be real balm to our troubled body-minds.

We need to achieve enough engaged distance from our pain condition to begin to see a wider context greater than what is, actually, an infinitesimal pain event in a universe of change. Sitting in meditation/reflection we can begin to see this.

But we are also communal and it is the reflection of ourselves in others, in particular, that helps us to become more ourselves. The therapy situation is a microcosm and an intensification of this natural process. That is why it works in any but the most fleeting sense.

Pain perceived as problem is turned in on itself, like an ingrown nail, and, when we are in the condition of pain (as we are in some way most of the time) we think that the pain takes up all or most space and that we are alone since we do not, in this state, differentiate self from world. But this is not true and if we can glimpse that this pain is only a dot in infinite space, then we can uncurl and begin to see the problem in a new light.

In the therapeutic space, the therapist takes up a consciously conscious position in relation to the other with their whole, disinterested, attention. This space is the only kind of 'help' that can be offered, and is an example of true compassion.

This does not mean that the therapist needs to be an enlightened being. It is enough to choose to take up a position in relation to the other. By taking up this position one effectively says, "I am here and you are there and I am going to reflect your condition back to you". This creates a conscious (on one side, which is all that is needed initially) subject-object situation. It intensifies, and makes manifest, the previously unrealised duality, the two of us.

Now, dualism has become a dirty word these days, everyone wants to talk about unity and the beauty of Oneness. But you can't have unity without dualism, nor dualism without unity. They are one and the same, but we make a mistake in thereby assuming that all is unity. We, in our unconscious or semi-conscious states, can only begin by setting out to understand duality, which is the condition of human consciousness.

Otherwise it would be like being so fixed on studying the moon that we miss the fact that we see it through a telescope and so assume that the image we see is the real thing.

So, as human beings it is necessary to develop duality as a priority. As therapists this must be central to our understanding - it must drive us and commit us to rigorous self-examination.

Psychotherapy has known this for years. In that jargon, we must learn to recognise and withdraw our projections in order to become truly ourselves. That most Shiatsu therapists have settled for less self-examination than even the most mediocre psychotherapist is unacceptable.

Asking about what we are doing is essential to developing both personally and professionally. Also, while I believe that even a flicker of understanding of the nature of the therapeutic space is enough to make a good-enough therapist (as this merest hint or sliver of a crack between watcher and watched is the beginning of space), the more internally spacious a person is, the more powerful the space they offer will be.

Duality needs to be developed because unless we are truly two (you and I), we cannot recognise one other. Unless we are truly two there can be no real relationship as there is no space between us and, as therapists, we will be fixed in a hierarchy and identity of doctor/patient. But in a relationship of two we are one and One (or three, the holy trinity of you, me and us). Yet, how do we achieve this?

The therapy situation artificially sets up this duality of you and I. The degree to which this artificial set-up collides with the reality of the duality, (i.e. the length of time and degree to which the therapist is present in that reality) dictates the powerfulness of the therapeutic space. But the mere set-up is also enough to magnify the process in the same way that cleaning a very dirty mirror just a little will nevertheless improve the reflection, though the reflection still be ever so murky. For in this situation, we choose to be subject and object, seer and seen, you and I. Here, I surrender to your gaze, to your touch. There, I see you, I touch you. So we are two and true dualism naturally unfolds into unity; one doesn't have to try to achieve it.

As the therapist, my hand/gaze reflects your self-absorbed pain and offers your projections back to you. When we see ourselves in a mirror, we are contextualised, we become aware of our borders and so the space around us. The hand/gaze offers another viewpoint; we offer objectivity to unconscious solipsism. This is an offering of space to something that thinks it takes up all space. Like roots transferred to a larger pot, we can uncurl and recognise borders to our pain where we had thought the pain was infinite. As e.e.cummings writes so beautifully, "...open always petal by petal myself as spring opens/ (touchingly skilfully, mysteriously) her first rose". As therapists, the best and the most we can do is be the condition of spring.

Thus we can begin to recognise ourselves. We can begin to recognise that we can have distance from our pain condition, that we are both watcher and watched. Gradually this extends to others and is helped by submitting to the therapeutic situation as patient or therapist (though there is a moral imperative on the therapist to do so consciously; this is the difference between patient and therapist). Thus, Shiatsu is a Practice or Way.

Finally, as two, we can begin to relate for perhaps the first time as "I" relating to "you" rather than me relating to my own projections in a false (because unconscious) unity of me and you. It is only when there are really two that there can be relationship and, thus, unity. Here, also, the loneliness of the unconscious condition is relieved. Where we had experienced ourselves as alone in the universe when 'we' were the

whole of experience, now there is the possibility of relationship. So now we can be truly alone and together.

Touch therapy is particularly powerful as it also asserts the here and now of the embodied state. It concretises our experience of the world and reminds us of the physical borders between 'me' and world. So, while therapy is also other things such as comfort, relaxation and even medicine, central to it is the set up of you, me, us, the physical representation of dualism and the promotion of my conscious objectivity to your unconscious subjectivity with the aim of separation - which is true unity.

This is how and why therapy 'works', this is how and why Shiatsu 'works'. This work is inherently radical and not for the faint-hearted. Shiatsu is not medicine and, while the language of medicine may perhaps serve us from time to time, it is a waste of time to think that this is what we are doing. There is no point in practicing unless one has at least some of this understanding; some understanding that goes beyond mere mechanics.

Mechanics are just scaffolding that might help us to appreciate a deeper reality, in which case they can be dispensed with. But this is left to chance unless teachers themselves understand the nature of therapy and, even if they don't teach it explicitly, exude it powerfully.