Received: 29 May 2019 | Revised: 10 July 2019 | Accepted: 10 July 2019
DOI: 10.1002/ppi.1513

WILEY

# Different bodies: The problem of normativity in body psychotherapy

Nick Totton

St Blazey, Cornwall, UK

**Correspondence**
Nick Totton, 4 Middleway, St Blazey, Par, Cornwall PL24 2JH, UK.
Email: nick@3-c.coop

## Abstract
This paper primarily addresses the people of effectively mainstream embodiment who make up the bulk of the body psychotherapy profession. It suggests that we need to explore and deconstruct this subject position and to think about how it may set up oppressive assumptions about our task and how we carry it out, as well as about who is capable of becoming a practitioner. Drawing in particular on disability theory, I aim to bring into question notions of "normal," ideal or optimal embodiment and to argue for a focus instead on the real, imperfect, damaged and unique bodies which we encounter in our practice.

KEYWORDS
affordances, body psychotherapy, crip theory, disability, misfitting, normativity

*It's not our bodies that need curing. Rather, it is ableism . . . that needs changing. (Eli Clare, 2018, p. 91)*

Someone with whom I have a supervisory relationship, and who leads a body psychotherapy module on a training course, has recently had a wheelchair user attending the module. How this affected them, the trainee and the module is not my story to tell, but working with this in supervision has opened me up to what increasingly strikes me as a major difficulty in the theory and practice of body psychotherapy—not a new difficulty, but one which has always been there and has been insufficiently examined. I will call this the problem of *normativity*, by which I mean the explicit or implicit presentation of a normal, ordinary, "proper" body against which *actual* bodies may be found wanting in a variety of ways.

I am choosing to present this here, rather than in a specialist body psychotherapy journal, because I think that essentially the same problem—an intensely political one— of a "normal" yardstick occurs right across the range of psychotherapy modalities. In the body psychotherapy context the issue is amplified in ways which make it, helpfully, more visible, just as a body is inherently more visible than a mind (though no less subject to misperception). So, the following discussion should also be relevant for practitioners who do not work in a consciously embodied way.

 © 2019 John Wiley & Sons, Ltd. 

My aim is to speak to, and as a member of, the group of primarily mainstream-embodied practitioners-that is, people whose bodies and bodily capacities fall within the category of 'normal' - who make up most of the body psychotherapy profession and to argue that we need to question our assumptions about this situation, about the role of "normality," and, therefore, of "abnormality," in our work with clients and in our feelings about who is capable of becoming a body psychotherapist.

Normativity is very much a political issue, and very much in the spotlight at the moment. Assumptions that have remained largely unexamined for centuries are being dramatically challenged right across society: not just in academia (where my references are focused) but very much in the wider society. This includes, as a by no means exhaustive list, assumptions about gender (e.g. Butler, 2006; Fine, 2011, 2018), about sexuality (e.g. Atlas, 2018; Jagose, 1997), about ethnicity (e.g. Coates, 2015; DiAngelo, 2019), about neurotypicality (e.g. De Jaegher, 2013; Manning & Massumi, 2014; Silberman, 2016), about body shape (e.g. Murray, 2007; Orbach, 2016), and—perhaps the final frontier of difference—about disability (Garland-Thomson, 2011; McRuer, 2006, 2018). It is important to notice that *all* these dimensions of difference have a bodily aspect in one way or another, and several of them are actually visible as bodily attributes.

These challenges are, of course, also happening—perhaps belatedly—within the networks of psychotherapy (e.g. McKenzie-Mavinga, 2009; Moloney, 2010; Priestman, this issue; Stevenson, 2008; Tanner, this issue); and we are being challenged as well, and perhaps most cogently, by those who come to us for therapy and for training. But the fact that we as therapists will no longer be allowed to get away with our normative assumptions is perhaps the *least* significant reason for abandoning them. Much more importantly, they are unjustifiable, and also deeply cruel.

Beyond such assumptions, or in a sense *before* and *underneath* them, is the figure of an ideal body held up as a standard of assessment and a goal of treatment for *all* clients including those who would usually be regarded as "normal." Thinking about this, I am reminded of the stream of influence in body psychotherapy—on the whole very creative—which derives from dance and movement modalities in German-speaking countries in the 1920s and 1930s (Geuter, Heller, & Weaver, 2010). While the immediate sources were by no means right-wing, the whole milieu was arguably coloured by the same sort of thinking about the body which also found its way into both fascism and Stalinism—a fantasy of clean-limbed, clean-lunged, straight-backed young heroes and heroines, which is perceptible in Reich's vision of "genitality" (Totton, 2011) and faintly present in the whole field of body psychotherapy at least up to the 1980s. We should ask ourselves whether this influence is really fully dispersed. If it is not, then what is needed is, rather than some sort of grand purge of political correctness, simply for us to face and work through the unconscious fantasies affecting our work.

In what follows I will look at normativity both in and beyond body psychotherapy, using disability theory as a primary lens. I have chosen this lens partly because of the supervision experience described above, which brought my attention to the theme; partly because disability is a sort of irreducible limit case for thinking about bodily difference (the challenge to *not* treat a disabled person as "less than"); and partly because of the superb theoretical work coming from disability activists (Garland-Thomson, 2011; Jansen & Wehrle, 2018; McRuer, 2006), in particular their treatment of intersectionality. Another reason is that trying to cover all forms of non-mainstream embodiment equally in a paper of this length would make it unduly superficial. Even so, I recognise that no particular form of oppression can stand for or subsume others and that it is through the specificity of each situation that radical responses emerge.

Having said this, I want to bring out how disability theory—"Crip Theory" (short for "cripple"; see McRuer, 2006), is the brilliantly in-your-face term which some activists use—helps lay the groundwork for a general theory of non-normativity. I am doing this, I hope, not as an act of appropriation, but in respect and gratitude, acknowledging that, in sharing this perspective with the non-disabled, these theorists are materialising the recent emphasis in both disability theory and feminist theory on universal vulnerability, dependence and reciprocal care (Butler, 2004; Fineman, 2005, 2008; Garland-Thomson, 2011; Petherbridge, 2018). In exploring this ground as a primarily mainstream-normal individual—white, male, not visibly queer, educated, usually able-bodied—I am almost certain to make mistakes and perhaps cause some degree of hurt. If so, I am extremely sorry; and it seems important to try, to fail, to learn. I will aim to keep my privileged position foregrounded and not to attempt to speak for anyone else.

## 1 | AFFORDANCES AND MISFITTING: "WHEN WORLD FAILS FLESH"

There are issues here about both theory and practice, but the ways in which normativity can become apparent in practice are perhaps revealing about the theoretical side. Thinking about their wheelchair-using trainee, my supervisee (immediately) and I (more slowly) realised that a very high proportion of the experiential exercises around which the module was constructed would, for a wheelchair user, be either impossible to do or painful and exposing. (I am of course talking here about our *imagination* of the disabled person's experience—an important exercise in empathy and an identification, but no substitute for asking them.) And yet without the practical challenge posed by an actual, visible, different body, it had been possible—in fact easy—to stay unaware of the assumptions built into the exercises about what affordances are present to the bodies of trainees.

I take the term "affordance" from the work of James and Eleanor Gibson, who argue, influenced by phenomenology, that the world we perceive is not an objective, shared universe but a universe *for us*—the world presented to us by our needs, which require that we come into active, embodied relationship with those aspects which facilitate or obstruct their satisfaction: as someone once said, to a thirsty person everything looks like a glass of water.

> *The affordances of the environment are what it offers the animal, what it provides or furnishes, either for good or ill. The verb to afford is found in the dictionary, the noun affordance is not. . . . I mean by it something that refers to both the environment and the animal in a way that no existing term does. It implies the complementarity of the animal and the environment.* (Gibson, 1979, p. 127)

The theory of affordances is closely related to that of misfitting (Garland-Thomson, 2011); and from now on I shall focus mainly on this and other work in the field of disability studies, arguing that, as so often, the perspective from this most marginalised position illuminates the whole theme of difference and normativity. Disabled people have been working hard for at least the last fifty years to establish that they are an oppressed minority, in parallel with other oppressed minorities like people of colour, LGBTQ+ people, and so on—in fact, the largest such group apart from women, who are of course not a minority at all (majorities can be oppressed too; hence my general preference for the term "non-mainstream").

It has been difficult for this demand from disability activists to be heard, at least in part because the visible, embodied differences of disability so stubbornly attract a language of inadequacy: someone is *dis*-abled, they are *in*-capable of various acts that generic others can perform, they are in a state of lack. Once discourse shifts, it becomes rapidly obvious that disabled people also have a range of abilities that the generic person lacks—*of course*: simply negotiating the world in a wheelchair or without visual or auditory information, for example, is a considerable achievement which would challenge most of the able-bodied. But to persuade the discourse to shift from one of *lack* to one of *difference* has taken many years of struggle.

Misfitting is a deceptively simple way of reframing disability as a failure not in the individual disabled person, but in the relationship between the individual and their material and social context. In other words, like "affordance," "fitting" and "misfitting" are complementary concepts which refer equally to the individual and the environment. We experience fitting when our environment accommodates our needs; in this situation, "fitting is a comfortable and unremarkable majority experience of material anonymity, an unmarked subject position that most of us occupy at some points in life and that often goes unnoticed" (Garland-Thomson, 2011, p. 597).

> *A fit occurs when a harmonious, proper interaction occurs between a particularly shaped and functioning body and an environment that sustains that body. A misfit occurs when the environment does not sustain the shape and function of the body that enters it.* (Garland-Thomson, 2011, p. 594).

Garland-Thomson describes misfitting vividly as a "formative experience of slamming against an unsustaining environment" (p. 597). It should be clear that this concept, derived from an experience which is amplified to the maximum for a disabled person, can also be generalised to many other forms of difference:

> *A misfit occurs when world fails flesh in the environment one encounters—whether it is a flight of stairs, a boardroom full of misogynists, an illness or injury, a whites-only country club, subzero temperatures, or a natural disaster*. (Garland-Thomson, 2011, p. 600)

I want to emphasise that both fitting and misfitting are contingent and often temporary experiences:

> *When we fit harmoniously and properly into the world, we forget the truth of contingency because the world sustains us. When we experience misfitting and recognize that disjuncture for its political potential, we expose the relational component and the fragility of fitting. Any of us can fit here today and misfit there tomorrow*. (Garland-Thompson, 2011, p. 597).

This flexibility makes the concept useable to understand a lot of different situations—"when the spatial and temporal context shifts, so does the fit, and with it meanings and consequences" (Garland-Thompson, 2011, p. 593)—but of course for some people (white, cis male, middle class, straight, able-bodied) the experience of misfitting is rare, and startling when it occurs, while for others it is central to their daily lives.

> *Although misfitting can lead to segregation, exclusion from the rights of citizenship, and alienation from a majority community, it can also foster intense awareness of social injustice and the formation of a community of misfits that can collaborate to achieve a more liberatory politics and praxis. Indeed, much of the disability rights movement grew from solidarity born of misfitting*. (Garland-Thompson, 2011, p. 597)

## 2 | REFERENCE MAN

The reality of misfitting can be vividly illustrated through the "Reference Man" (Criado Perez, 2019, from which all the following material is taken unless otherwise indicated). Reference Man incarnates, so to speak, the generic human being I referred to earlier: he is a standard of normality employed in a number of industries to guide design and safety standards. Conventionally, Reference Man is Caucasian, aged 25–35, and weighing 70 kg. It is immediately obvious that he "references" only a small minority of human beings; yet this figure is the default for enormous bodies of data, for example on toxicity, transport, tools and protective gear.

One result is that a great deal of physical equipment literally does not fit most women or relatively fat or small men (the latter including a high proportion of ethnic Asians). One woman police officer in the UK had breast reduction surgery in order to wear the standard stab vest, and many others have pointed out that it is not designed for people with breasts. An all-women space walk planned by NASA in 2019 had to be cancelled because only one space suit for a woman could be found (Cantor, 2019). And most women are described as driving "out of position," because their legs struggle to reach the pedals, and they need to sit more upright to see over the windscreen edge—a misfit which makes driving intrinsically more dangerous. Crash-test dummies are a classic example of Reference Man: until 2011 these dummies, used to design cars, were all 1.77 m tall and weighed 76 kg, with male muscle-mass proportions and a male spinal column. When a Reference Woman was finally introduced, she turned out to be a scaled-down Reference Man retaining male proportions.

Reference Man, as a symbol of a much wider cultural attitude, creates much of the context for misfitting by establishing a narrow definition of what constitutes a fit:

> *Fitting occurs when a generic body enters a generic world, a world conceptualized, designed, and built in anticipation of bodies considered in the dominant perspective as uniform, standard, majority bodies. In contrast, misfitting emphasizes particularity by focusing on the specific singularities of shape, size, and function of the person in question.* (Garland-Thomson, 2011, p. 595)

Whether consciously referring or not to Garland-Thompson on particularity, Christine Caldwell (2018) coins the helpful term "somaticism," meaning "making particular bodies wrong" (p. 36)—not just *particular* particular bodies, it seems to me, but *all* particular, individual, flawed human bodies, by virtue of their being non-generic. To be particular is to be lacking: this is the impossible position currently being foisted on people in Western cultures, especially young people, and producing an inevitable epidemic of eating disorders and cosmetic surgery (Creighton & Liao, 2019; Heyes & Jones, 2009; Orbach, 2016).

Reference Man as crash-test dummy immediately summons up for me the smashing impact of discrimination and denormalisation, of "slamming against an unsustaining environment" (Garland-Thomson, 2011, p. 597), eloquently described in the context of race by Ta-Nehisi Coates (2015):

> *But all our phrasing … serves to obscure that racism is a visceral experience, that it dislodges brains, blocks airways, rips muscle, extracts organs, cracks bones, breaks teeth. You must never look away from this. You must always remember that the sociology, the history, the economics, the graphs, the charts, the regressions all land, with great violence, upon the body. (p. 10).*

Similarly, Carla Sherrell (2018) describes a "structural pressure loaded on my body to restrict and remove my control of my own body," deriving from "the demand to simulate white bodies," which she argues is directly related to the appropriation of the term "embodiment" by "whiteness" (p. 148). This line of understanding goes back at least to Franz Fanon, who writes in *Black Skin White Masks*:

> *And then we were given the occasion to confront the white gaze. An unusual weight descended on us. The real world robbed us of our share. In the white world, the man of color encounters difficulties in elaborating his body schema. The image of one's body is solely negating. It's an image in the third person. All around the body reigns an atmosphere of certain uncertainty.* (Fanon, 2008, p. 90)

Feminist writers have also long explored the somatic impact of misfitting. As just one influential example, in her 1980 paper "Throwing Like A Girl" Iris Marion Young argues that the supposedly universal, validating, foundational motoric experience of "I can" proposed by Merleau-Ponty and others (discussed in Weiss, 2015) is really an attribute of Reference Man and that girls and women instead often internalise "I cannot" in the fabric of their motoric identity.

> *The girl learns actively to hamper her movements. She is told that she must be careful not to get hurt, not to get dirty, not to tear her clothes, that the things she desires to do are dangerous for her. Thus she develops a bodily timidity that increases with age. In assuming herself to be a girl, she takes herself up as fragile.* (Young, 1980, p. 153)

"She takes herself up" is a lovely image of the girl protecting and cherishing her self-perceived fragility; but this perception is of course self-fulfilling, and blends into the "assuming" of femininity, a word which refers simultaneously to a disguise, a rank or dignity, and an unexamined belief. Young analyses the detail of the "feminine" motor style which arises from this, identifying what she calls "discontinuous unity":

> *Many of the observed differences between men and women in the performance of tasks requiring coordinated strength . . . are due not so much to brute muscular strength, but to the way each sex uses the body*

> *in approaching tasks. Women often do not perceive themselves as capable of lifting and carrying heavy things, pushing and shoving with significant force, pulling, squeezing, grasping, or twisting with force. When we attempt such tasks, we frequently fail to summon the full possibilities of our muscular coordination, position, poise, and bearing. Women tend not to put their whole bodies into engagement in a physical task with the same ease and naturalness as men.* (Young, 1980, p. 142)

So women will tend to use only the arms to lift heavy weights, rather than coming from their legs; or to use the hands and wrists, but not the shoulders, to turn or twist something (Young, 1980, p. 143). The same applies, of course, to the many men who are perceived as performing such actions "like a girl"—men who, for one reason or another, have not "assumed" the embodied masculine role. The "ease and naturalness" which Young finds in masculine embodiment is only partially, at best, about what is often termed "good use" of the body; it is also the ease which accompanies an apparently natural entitlement. A privilege which should be a universal right and which, by not being universal, is corrupted.

Among other things, Young's paper constitutes a politicisation of the concept of affordances, and a critique of the "ungendered" human conceived by so many thinkers (which is entirely different from nonbinary gender). The supposedly ungendered human, in this context, is just another version of Reference Man—a human who doesn't *need* to be gendered because their gender is assimilated to the generic masculine: indeed, as Gail Weiss puts it, "this ungendered body ultimately isn't even a masculine body but a masculine fantasy of a masculine body that is really no one's body at all" (2015, p. 83 fn.).

One of the specific contributions of disability theory is to foreground and deconstruct the issue of *lack*. In patriarchy, everyone has a Reference Man embedded in their psyche, in relation to whom we are defined by which of its attributes we lack: a penis, white skin, cis gender, youth, ability to speak English, neurotypicality, able-bodiedness, conventional good looks, a job, money or many other things. As many have pointed out, these lacks can be reframed as *presences*—of a clitoris, black or brown skin, a chosen gender, age, other languages, neurodiversity, freedom. But generally they are not so reframed.

## 2.1 | "Landing with great violence upon the body"

At this point, then, my question is: how does body psychotherapy relate to the experience of misfitting? Does it ally itself to the "community of misfits"? Or does it contribute to the violence of their misfitting by constructing the space of body psychotherapy as one which welcomes—as clients or trainees—only those "fit for purpose," refusing affordances to those who are disabled, non-white, transgendered, neurodiverse . . . ? In this section, and indeed throughout, I am gratefully following the lead of two pathbreaking new body psychotherapy texts, Johnson (2018) and Caldwell (2018).

Going back to the textbooks of body psychotherapy, it very quickly becomes apparent that we have our own Reference Man. He is not (any longer) entirely male, although some masculine assumptions still attach to him; nor is he entirely white, although there is very little discussion of how white people and people of colour might be differently embodied; similarly for straight and gay. He is, however, very clearly able-bodied. Our profession, in fact, suffers severely from what Robert McRuer calls, by analogy with Adrienne Rich's coinage "compulsory heterosexuality," "compulsory able-bodiedness" (McRuer, 2006, pp. 6ff).

In preparing for writing this paper, I took a fresh look at several body psychotherapy books, very much including my own. I felt compelled to conclude that most people reading them from a position outside the mainstream would feel themselves alienated—in effect, *unwelcome*. I checked indexes for words like "disabled," "blind," "deaf," "black," "gay," "transgender"; they were hardly present—except that in the older texts being gay was sometimes actively pathologised. Examples and exercises very largely assume able-bodiedness, as do the great majority of clinical illustrations.

Here are a few random examples of how ableist assumptions are unconsciously incorporated:

> *In order for the upper body to "let go," the support of the lower body needs to be felt, and so we also work on the legs with the body-standing-up.* (Conger, 1994, p. 33)

> *The simplest possible exercise for checking out your pelvic segment is to stand with your knees loose and rotate your hips as widely as you can—as if you were doing a hula dance.* (Totton & Edmondson, 1988, p. 50)

> *Take a moment to check in with the overall state of your muscles. If they are feeling bound, give them the opportunity to stretch, breathe and release. . . . Allow your muscles to experience this: active, but not yet moving through space; ready, but relaxed.* (Aposhyan, 2004, p. 158)

In contrast to the above passages, equivalents of which can be found in many further texts, here is a rare statement of a counter-position:

> *To work through the body is not to perfect the body or to glorify it. . . . A quadriplegic, confined to a wheelchair, can be fully embodied. . . . Someone without arms can still possess the ability to reach out, to give and to receive . . . being grounded is not necessarily a function of the legs.* (Heckler, 1984, p.16)

Heckler acutely identifies body psychotherapy's strong historical tendency to "perfect" and "glorify" the body. However, he doesn't seem to fully recognise the need to change our *language* in order to change our *attitude*: "reaching," like many other commonly used expressions, is an ableist metaphor, even or especially when consciously used, while "confined" simply does not capture many wheelchair users' experience of the comparative freedom which it can offer, of how the chair can become an extension of the bodymind.

Alexander Lowen's description of the "arch" or "bow" posture, which is used extensively in bioenergetics, illustrates a much more generalised normativity, one which manages to include most of the general population in the category of inadequacy. I will quote a few significant phrases from a much longer passage:

> *The line superimposed on the figure shows the correct arc or bowing of the body. . . . When the body is in this position, its parts are perfectly balanced. . . . We also use the position diagnostically, for it immediately reveals a lack of integration in the body. . . . A common problem I encounter in people is an overall body rigidity that doesn't let the person arch his* [sic] *body. . . . The opposite condition is a hyperflexibility of the back which bends too much. . . . In both cases the arch is improperly executed . . . I have never seen a person with a major emotional problem able to do it correctly. It is not a matter of practice, for the position cannot be learned.* (Lowen, 1976, pp. 74–81)

The entire passage seems calculated to soften the reader up, to render them insecure and establish the author as Master—there is, in fact, a long section about how "correct" performance of the exercise, as measured by Lowen and his acolytes, places one in harmony with the Tao. This is Lowen's version of Reich's well-known idealisation of "genitality," the supposed capacity for total discharge of tension through orgasm, indicated (in Reich's view) by subtle involuntary movements while breathing (Totton, 2011). It also assumes a total and simplistic identity between physical and emotional structure which offers a foundation for discriminatory attitudes.

I have focused in these examples on passages referring to musculature and in particular to standing; but similar examples exist around sight, hearing, speech and other faculties. The deep background ableism which I have described is, not surprisingly, matched by a dearth of explicit attention to disability. I have found a total of *two* English-language publications (Keary, 2009; Linington, 2014) which directly address body psychotherapists working with disabled clients—there are actually a lot more about *verbal* therapy with disabled clients (e.g. Artman & Daniels,

2010; Grzesiak & Hicok, 1994; Wilson, 2002;), including intellectual disability (e.g. Corbett, 2015), and even one or two about disabled (verbal) *therapists* (Beck, 1991; Chaudhuri, 1999; O'Connell, 2011).

Personally, as someone who has written about and taught body psychotherapy for decades, I feel ashamed of my own role in passively maintaining this situation and appalled that body psychotherapy has so far largely failed to notice its problem with normativity. These feeling responses are useful insofar as they move me, or hopefully us, to action (and useless if they don't!). So, beyond this basic act of trying to identify the problem, what sort of action is appropriate? I have so far come up with four dimensions of response.

1 *Recognising, critiquing and changing our own somaticism and normativism*

The basic liberal requirement here—which is not by any means sufficient—is that we accommodate people with non-mainstream embodiments. This means accommodating them in our language and thinking, so that we no longer use language which makes unconsciously ableist, sexist, racist, heterosexist, etc. assumptions, and also making provision for their physical and psychological needs. For this to have any meaning at all, it must apply to trainees as well as to clients, otherwise there is an implicit higher valuation of mainstream embodiment built in—a non-mainstream embodiment entitles a person to be a client, but not to be a practitioner.

However, it is perfectly possible to take all these sorts of steps without getting anywhere near our core normative bias. Mainstream groups may quite genuinely and without reservation seek equal treatment for non-mainstream groups, while still withholding equal existential status from them. Nineteenth-century white abolitionists fought a sincere and costly campaign for justice for black people, but few of them believed that blacks were the equals of whites. In the 1950s many straight people campaigned for the decriminalisation of homosexuality, while still convinced that it was an illness or moral weakness. Changing our somaticist/normative beliefs means accepting *differently* embodied people as *equally* embodied. As I have said, one reason for focusing on disability theory in this paper is because disability forces us to confront our cognitive bias in favour of the normative body.

2 *Arguing and campaigning actively against all forms of somaticism*

Getting our own house in order is a good start, but again, not sufficient. I suggest that body psychotherapy, as a profession that works directly with the painful and sometimes shattering effects of somaticism (Caldwell, 2018), has a clear responsibility to take explicit public positions on discrimination against, and exclusion of, differently embodied people.

As with other forms of discrimination, although their voices should obviously be heard, it shouldn't ultimately be left up to the victims of somaticism and normativity to protest against it and to explain why it is unacceptable. Afua Hirsch, in a recent article in *The Guardian* newspaper, explains this very clearly in relation to colour, in the context of being asked to explain on TV why comparing Megan Markle's baby to a chimpanzee was unacceptable:

> *On the whole [current affairs debate shows] rely on participants discussing matters that are separate from their personal lives—the Brexit withdrawal agreement, say, or nationalisation of the railways. But race is a topic on shows such as the one I am in almost every week, almost never introduced by me. There is now an implicit understanding that panels discussing such issues should be "diverse," that is to say, should include one person who is racialised as something other than white. Being not white becomes that person's role, their personal experiences of being racialised have been commoditised into a necessary part of the output.*
> (2019; see also Eddo-Lodge, 2018)

3 *Recognising and supporting the ways in which disability activists in particular are creating a new basis for contesting normativity and neoliberal capitalism in general*

Probably because the group of disabled people is so large and therefore includes many members of other discriminated-against groups, disability activism strongly emphasises intersectionality. It is clearly not right to say

that any form of discrimination can represent or stand in place of other forms, but nor is it right to say that all forms of discrimination are distinct and independent from each other. Rather, each group's experience, and the lessons they have drawn from it, can produce general principles which illuminate other groups' experience without displacing it. Hence, disability activism carries forward the project articulated by the Combahee River Collective:

> *[We] see as our particular task the development of integrated analysis and practice based upon the fact that the major systems of oppression are interlocking. The synthesis of these oppressions creates the conditions of our lives.* (Combahee River Collective, 1978)

Disability activism takes on the ways in which the "synthesis of oppressions" has developed and changed over the 40 years since that statement helped launch intersectional analysis: specifically, the emergence of neoliberal capitalism, which has moved (using Foucault's terminology) from an imposed, disciplinary normativity to a sort of entrepreneurial self-care, understood as an optimisation of individual social capital.

> *In neoliberal societies, governing is no longer a negative and exclusionary practice of surveillance and discipline, but its aim appears as "positive" and "productive": it supports individual interests through supporting a specific economic regime and proclaims to have the welfare of the "population" . . . as its purpose. It uses practices of organization, rationalization, enhancement, or limitation according to the principles and needs of the economy: now every subject "freely chooses" to normalize or optimize itself, to enhance its gains (human capital) and reduce its losses in the economic market.* (Jansen & Wehrle, 2018, p. 46)

I suggest that we can see exactly the same movement occurring in body psychotherapy: while critiquing these phenomena we simultaneously mirror them, in a shift from a "disciplinary/surveillance" approach—"I can see how you are holding yourself wrongly and I'm telling you to do this instead"—to a neoliberal "self-care" approach—"enjoy your body, be well, be expressive, be fit, be sexual"—which blends into gym culture, taking on a narcissistic and apolitical tone. But really there is no "apolitical" position; it always masks conservative or reactionary attitudes, generally linked to the sort of normativity I have been discussing—"this is just the way things are, always have been, always will be."

Body psychotherapy then risks becoming a sort of niche consumerism, which McRuer (2018) links with the neoliberal concept of *flexibility* (cf. Martin, 1994): paralleling zero hours working, the desirable form of embodiment is a flexible one which adapts to the short-term needs of the market.

> *Niche consumerism is one of the ways in which individualism has been reinvented or repackaged for our times (consumption, in other words, has been hyper-individualized). The other dominant way in which individualism has been repackaged is more obviously punitive, as neoliberalism depends not only upon fetishized notions of consumer "choice" but also upon related notions of "personal responsibility" . . . . The neoliberal mandate for "personal responsibility" implicitly calls for and explicitly generates a constant monitoring of both self and others.* (McRuer, 2018, p. 16)

Disability activists often employ the intellectual strategy of "cripping": parallel to "queering," cripping means identifying and foregrounding those aspects of any given terrain which involve ascriptions or experiences of deficit, of abnormality, of damage—aspects which are often backgrounded and even erased, but which, once included, radically alter our sense of the whole. A particularly powerful example of cripping is its application to ecological and environmental issues (Alaimo, 2010; Ray & Sibara, 2017). In a brilliant paper, Eli Clare (2017) uses the comparison

between a disabled body, a prairie, and a cornfield to critique conventional ideas of the normal and the natural in the world and in human culture:

> *Environmentalists have named biodiversity a central motivation for ecosystem restoration and a foundation for continued life on the planet. But to declare the absence of disability as synonymous with a monoculture disregards the multiplicity of cultures among humans. It glosses over the ways culture and nature have been set against each other in the white Western world, as if the human ferment we call culture and the wild, interdependent messiness we call biodiversity are distinct and opposing entities. It does not acknowledge how culture dictates which bodily characteristics are considered disability and which are considered natural variation. (p. 258)*

4 *Receiving with gratitude and respect, and* learning from, *the contributions of people with non-mainstream embodiment to the reframing of body psychotherapy's purpose and function*

Really taking on the contributions of non-mainstream means *cripping and queering body psychotherapy*. Instead of seeking to get people as close as possible to the norm/ideal, it means appreciating and supporting each person's particular response to the affordances that have been available to them: the strength and courage of both adapting to and transcending misfitting between oneself and one's context.

In their enormously important book *Embodied Social Justice*, the body psychotherapist Rae Johnson offers a very helpful account of their experience of misfitting as a person temporarily disabled by a knee injury—how they experienced oppression as a bodily "felt sense" (Johnson, 2018, p. 6). At first, this manifested as:

> *a cascade of surrender in my cells that served as a kind of somatic undertow. I was being dragged down and away from other people, and my body felt powerless to prevent it. . . . I was cut loose from the herd, and the ties that had bound me to it had unravelled.* (Johnson, 2018, p. 48)

Then, slowly, after several months, they adapted to their situation and began to find themself again within it:

> *I noticed something else emerge . . . I found myself reorienting to my disabled condition . . . I stopped trying to make my body different from what it was. . . . [T]he place I came to rest was in my body. I started breathing again. I stopped worrying about how I looked to others, and started to move.* (Johnson, 2018, p. 49)

Johnson summarises how, almost with a kind of relief, "I understood myself as essentially powerless, and as someone who could no longer benefit from the kind of power that others could provide—the tribal power to protect, affirm, include, or defend" (2018, p. 49) This understanding, Johnson found, allows "a connection to another source of power" in one's own embodiment (p. 49).

All of us, surely, at some point in life experience the oppressive impact of disability. This is often temporary and, of course, doesn't entitle us to identify as "disabled"; but it does bring home that misfitting and its consequences for our embodied sense of self are core human experiences. In writing this piece, I have found myself reconnecting with the experience in childhood and young adulthood of having a severe stammer (traces of which remain in the present): as luck would have it, a particularly difficult word to produce was my own surname, and I found myself remembering very vividly the dreadful stress of knowing that at some point soon I would have to attempt it, or some other predictable utterance such as asking for a bus ticket—the way in which anticipated humiliation tensed my body and ensured its own fulfilment. The memory turned out to be still freshly painful.

## 3 | CONCLUSION: WORK IN PROGRESS

I am deeply aware of the failings of this paper. I set out with high hopes of transcending the limitations in my embodied emotional response to difference—filling in the blank spots, resolving the contradictions, and reaching some sort of unconflicted resting place. Of course, I haven't done so, because our *society* hasn't done so; who do I think I am? Ways forward will emerge from the concrete struggles of differently embodied people, and from the alliances and linkages which they achieve. This, of course, doesn't mean that people with mainstream embodiment should just wait around to be handed the answers; but we do need to recognise that we will not ourselves come up with answers for those who experience continual misfitting. We will experience ongoing confusion, uncertainty, unstable emotions, guilt and shame.

All this is inevitable; it is also, I suggest, an example of the central argument I am making, that body psychotherapy, and psychotherapy in general, should align not with the normative ideal, but with the particular, imperfect, damaged, material, wounded and inadequate nature of human existence. No matter how we try, our support for the imperfect will be *itself* imperfect and full of holes. We should get used to it.

### ORCID

*Nick Totton* https://orcid.org/0000-0002-5982-9345

### REFERENCES

Alaimo, S. (2010). *Bodily natures: Science, environment, and the material self*. Bloomington, IN: University of Indiana Press.

Aposhyan, S. (2004). *Body-mind psychotherapy: Principles, techniques and practical applications*. New York, NY: W.W. Norton.

Artman, L. K., & Daniels, J. A. (2010). Disability and psychotherapy practice: Cultural competence and practical tips. *Professional Psychology: Research and Practice*, *41*(5), 442–448. https://doi.org/10.1037/a0020864

Atlas, G. (2018). *The enigma of desire*. Abingdon, UK: Routledge.

Beck, R. L. (1991). The hearing impaired psychotherapist: Implications for process and practice. *Clinical Social Work Journal*, *19*(4), 417–426. https://doi.org/10.1007/BF00757443

Butler, J. (2004). *Precarious life: The powers of mourning and violence*. London, UK: Verso.

Butler, J. (2006). *Gender trouble*. London, UK: Routledge.

Caldwell, C. (2018). Body identity development: Who we are and who we become. In C. Caldwell, & L. B. Leighton (Eds.), *Oppression and the body* (pp. 31–50). Berkeley, CA: North Atlantic Books.

Cantor, M. (2019). Nasa cancels all-female spacewalk, citing lack of spacesuit in right size. Retrieved from https://www.theguardian.com/science/2019/mar/25/nasa-all-female-spacewalk-canceled-women-spacesuits

Chaudhuri, R. M. (1999). Dynamic psychotherapy and the disabled psychiatrist. *Journal of the American Academy of Psychoanalysis*, *27*(2), 239–251. https://doi.org/10.1521/jaap.1.1999.27.2.239

Clare, E. (2017). Notes on natural worlds, disabled bodies, and a politics of cure. In S. J. Ray, & J. Sibara (Eds.), *Disability studies and the environmental humanities: Toward an eco- crip theory* (pp. 242–265). London, UK: University of Nebraska Press. https://doi.org/10.2307/j.ctt1p6jht5.11

Clare, E. (2018). Stolen bodies, reclaimed bodies: Disability and queerness. In C. Caldwell, & L. B. Leighton (Eds.), *Oppression and the body: Roots, resistance, and resolutions* (pp. 89–95). Berkeley, CA: North Atlantic Books.

Coates, T.-N. (2015). *Between the world and me*. New York, NY: Spiegel & Grau.

Combahee River Collective (1978). Combahee River Collective statement. http://circuitous.org/scraps/combahee.html

Conger, J. P. (1994). *The body in recovery: Somatic psychotherapy and the self*. Berkeley, CA: Frog Ltd.

Corbett, A. (2015). The politics of intelligence: Working with intellectual disability. In T. Warnecke (Ed.), *The psyche in the modern world: Psychotherapy and society* (pp. 22–41). London, UK: Routledge.

Creighton, S. M., & Liao, L.-M. (Eds.) (2019). *Female genital cosmetic surgery: Solution to what problem?* Cambridge, UK: Cambridge University Press. https://doi.org/10.1017/9781108394673

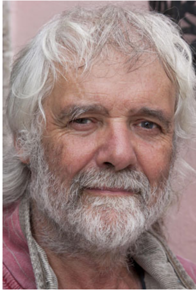
Criado Perez, C. (2019). *Invisible women: Exposing data bias in a world designed for men*. London, UK: Chatto & Windus.

De Jaegher, H. (2013). Embodiment and sense-making in autism. *Frontiers in Integrative Neuroscience*, *7*(15), 1–19. https://doi.org/10.3389/fnint.2013.00015

DiAngelo, R. (2019). *White fragility: Why it's so hard for white people to talk about racism*. London, UK: Penguin.
Eddo-Lodge, R. (2018). *Why I'm no longer talking to white people about race* (Revised edition). London, UK: Bloomsbury.
Fanon, F. (2008). *Black skin white masks*. New York, NY: Grove Press.
Fine, C. (2011). *Delusions of gender: The real science behind sex differences*. London, UK: Icon Books.
Fine, C. (2018). *Testosterone rex: Unmaking the myths of our gendered minds*. London, UK: Icon Books.
Fineman, M. A. (2005). *The autonomy myth: A theory of dependency*. New York, NY: The New Press.
Fineman, M. A. (2008). The vulnerable subject: Anchoring equality in the human condition. *Yale Journal of Law and Feminism*, *20*(1), 1–23.
Garland-Thomson, R. (2011). Misfits: A feminist materialist disability concept. *Hypatia*, *26*(3), 591–609. https://doi.org/10.1111/j.1527-2001.2011.01206.x
Geuter, U., Heller, M. C., & Weaver, J. O. (2010). Elsa Gindler and her influence on Wilhelm Reich and body psychotherapy. *Body, Movement and Dance in Psychotherapy*, *5*(1), 59–73. https://doi.org/10.1080/17432971003620113
Gibson, J. J. (1979). *The ecological approach to visual perception*. Boston, MA: Houghton-Mifflin.
Grzesiak, R. C., & Hicok, D. A. (1994). A brief history of psychotherapy and physical disability. *American Journal of Psychotherapy*, *48*(2), 240–250.
Heckler, R. S. (1984). *The anatomy of change: East/west approaches to body/mind therapy*. Boston, MA: Shambhala.
Heyes, C. J., & Jones, M. (Eds.) (2009). *Cosmetic surgery: A feminist primer*. London, UK: Routledge.
Hirsch, A. (2019, May 22). Expecting me to explain racism is exploitative—that's not my job. *The Guardian.* Retrieved from https://www.theguardian.com/commentisfree/2019/may/22/racism-tv-debate-exploitative
Jagose, A. (1997). *Queer theory: An introduction*. New York, NY: NYU Press.
Jansen, J., & Wehrle, M. (2018). The normal body: Female bodies in changing contexts of normalization and optimization. In C. Fischer, & L. Dolezal (Eds.), *New feminist perspectives on embodiment* (pp. 37–56). London, UK: Palgrave.
Johnson, R. (2018). *Embodied social justice*. London, UK: Routledge.
Keary, A. M. (2009). Do we? Can we look at the disabled body. In L. Hartley (Ed.), *Contemporary body psychotherapy: The Chiron approach* (pp. 164–176). London, UK: Routledge.
Linington, M. (2014) The body I want: A psychotherapy with a disabled man). In K. White (Ed.), *Talking bodies: How do we integrate working with the body in psychotherapy from an attachment and relational perspective?* (pp. 125–141). London, UK: Karnac.
Lowen, A. (1976). *Bioenergetics*. Harmondsworth: Penguin.
Manning, E., & Massumi, B. (2014). *Thought in the act: Passages in the ecology of experience*. Minneapolis, MN: University of Minnesota Press.
Martin, E. (1994). *Flexible bodies: The role of immunity in American culture from the days of polio to the age of AIDS*. Boston, MA: Beacon Press.
McKenzie-Mavinga, I. (2009). *Black issues in the therapeutic process*. London, UK: Palgrave.
McRuer, R. (2006). *Crip theory: Cultural signs of queerness and disability*. New York, NY: New York University Press.
McRuer, R. (2018). *Crip times: Disability, globalization and resistance*. New York, NY: New York University Press.
Moloney, P. (2010). "How can a chord be weird if it expresses your soul?" Some critical reflections on the diagnosis of Asperger's syndrome. *Disability & Society*, *25*(2), 135–148. https://doi.org/10.1080/09687590903534254
Murray, S. (2007). Corporeal knowledges and deviant bodies: Perceiving the fat body. *Social Semiotics*, *17*(3), 361–373. https://doi.org/10.1080/10350330701448694
O'Connell, C. T. (2011). Self-disclosure and the disabled psychotherapist: An exploration of how psychotherapists with visible physical disabilities or differences speak to their clients about these issues. Dissertation, Massachusetts School of Professional Psychology.
Orbach, S. (2016). *Fat is a feminist issue* (Revised and updated). London, UK: Arrow.
Petherbridge, D. (2018). How do we respond? Embodied vulnerability and forms of responsiveness. In C. Fischer & L. Dolezal (Eds.), *New feminist perspectives on embodiment* (pp. 57–79). London, UK: Palgrave.
Ray, S. J., & Sibara, J. (Eds.) (2017). *Disability studies and the environmental humanities: Toward an eco- crip theory*. London: University of Nebraska Press.
Sherrell, C. (2018). The oppression of black bodies: The demand to simulate white bodies and white embodiment. In C. Caldwell, & L. B. Leighton (Eds.), *Oppression and the body: Roots, resistance, and resolutions* (pp. 141–155). Berkeley, CA: North Atlantic Books.
Silberman, S. (2016). *Neurotribes: The legacy of autism and the future of neurodiversity*. New York, NY: Avery Publishing.
Stevenson, C. (2008). Psychotherapy: A queer space. *Smith College Studies in Social Work*, *78*(2–3), 243–262. https://doi.org/10.1080/00377310802112027
Totton, N. (2011). Wilhelm Reich's theory of sexuality. In G. Heuer (Ed.), *Sexual revolutions: Psychoanalysis, history and the father* (pp. 141–154). London: Routledge.
Totton, N., & Edmondson, E. (1988). *Reichian growth work: Melting the blocks to life and love*. Bridport, UK: Prism Press.

Weiss, G. (2015). The normal, the natural, and the normative: A Merleau-Pontian legacy to feminist theory, critical race theory, and disability studies. *Continental Philosophy Review*, *48*(1), 77–93. https://doi.org/10.1007/s11007-014-9316-y
Wilson, S. (2002). *Disability, counselling and psychotherapy: Challenges and opportunities*. London: Palgrave Macmillan.
Young, I. M. (1980). Throwing like a girl: Throwing like a girl motility and spatiality. *Human Studies*, *3*, 137–156. https://doi.org/10.1007/BF0233.1805

## AUTHOR BIOGRAPHY



**Nick Totton** is a body psychotherapist and trainer with over 35 years experience. Originally a Reichian body therapist, he has explored widely in a number of therapy modalities, and now practices and teaches his own syntheses, Embodied-Relational Therapy and Wild Therapy. He has a grown up daughter. He has written several books, including *Body Psychotherapy: An Introduction; Wild Therapy; Not A Tame Lion; Embodied Relating: The Ground of Psychotherapy; and Press When Illuminated: New and Selected Poems*. He was founding editor of *Psychotherapy and Politics International*, and is a previous chair of *Psychotherapists and Counsellors for Social Responsibility* (UK) and the *Psychotherapy and Counselling Union* (UK). He lives in Cornwall with his partner and grows vegetables.

**How to cite this article:** Totton N. Different bodies: The problem of normativity in body psychotherapy. *Psychother Politics Int*. 2019;17:e1513. https://doi.org/10.1002/ppi.1513