

## Principles of Connective Therapy III

### Dr Alain Abraham Abehsera Do MD

In our precedent lecture, we have raised some fundamental questions on the “pedagogy” of connective therapy. We have underlined some of the properties of the visualizations needed: they are made of a mixture of “images” that can be “touched”; furthermore, these images have an ingrained quality called “analogy”, ie they have the property of being applied to very different systems, objects. They “glide” without resistance from one object to another. For instance, we may make analogies from agriculture to muscle, and not feel a resistance in our mind whilst doing it. We may feel that it takes an effort to do it but we must not feel that it is not justified. In other words, connective therapy draws its images from a level of reality where all things are continuous, intermingle, are not separate. We have seen that this level of reality is perceived more directly by the right brain.

Do we have to understand that this is just an invention of the right brain or is it real?

Does it exist separately, as a distinct reality from the one we perceive with our eyes.

Here, we will suppose that this level is as real as the one perceived with our eyes.

Both are either real (objective) or not real (subjective) but they are so *together*. So far, we have paid little attention to that part of reality seen by the right brain. Although, we may remember that some aspects of physics (waves/particles), some aspects of philosophy (the world of Ideas/the perceived world) seem very close to the right brain/left brain question. Our society and education is very much left brain orientated. It favors arithmetics, exact sciences, business i.e. fields where objects are dissociated and frontiers clearly traced. Analogies are considered as “poetic”, ie unreal.

In cultural terms, it is this type of reality that has been explored in the Far East in the past (Chinese), and in so-called primitive or polytheistic cultures, but also in all mystical systems based on the perception of the Oneness of the world (ie there are no absolute divisions between “irrigating a field” and “irrigating a muscle”). The latest and most articulate proponent of it in our own western culture was C.G. Jung. In a research that took me a few years and that was -partly - written in book form<sup>1</sup>, I feel that I have offered an even more detailed description of this level of reality. It is probably the most dynamic aspect of reality. It can be described as a “volcano” where things exist in an eruptive form and not in the quiet, distinct form we are used to see with our eyes. This reality-volcano is a source where everything exists as analogy. The visualizations we shall learn to make have the fundamental property of being analogic, ie they participate directly of that level of reality.

I understand that all the attempts of past philosophers to describe some Unique principle (water, fire, elements etc. ) is their way to refer to that type of reality. They tried to find, in this world where things look so different, what is the substance that is common to all, that *allows all analogies*. Some thought it was water, other thought it was fire. Others thought this source where all reality is one, is immobile. Etc.

You must understand that these people’s ideas are direct visualizations of a certain level of reality, one due to that part of our consciousness that refuses categorically (it

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<sup>1</sup> *Babel or The Language of the XXIst Century*

does not have even to refuse, it is built that way) to sees things as being essentially different.

These notions will be further explored. At this point, I wish to raise some of their consequences on the teaching of CTh.

Teaching is an activity that supposes that there is a *teacher* and *taught people* with a basic one-way communication. It supposes a given place (a “school” or any other structure of meeting) and given times. These are the minimal structures. Then, there is the “function”, how do these structures function. This depends on such variables as the nature of the subject taught, the nature of the teacher and of the taught. An extremely important factor is what type of relationship exists: authoritative, paternalistic (eg elementary school) or more anarchistic/creative. Generally, a teaching structure adapts or resists adaptation to its time according to past experience. A school of art follows the tradition of teaching begun by predecessors. Every school has thus its historical references. A system is chosen as against another.

With relation to the above, and as a further reflection on your examination papers, our “school” (teaching structure) poses a certain number of problems. First, it has no preceding model. The closest one, Osteopathy, has been rejected and no other model retained.

Second, its content: it is not defined. Is it a school of therapy, of medicine, of liberal arts, of philosophy? The answer is not obvious at all since, although the purpose is therapy (the end), the means are anything between art, physics, anatomy, philosophical reflection etc.

This means that the program of the teaching cannot be precisely defined and can only be “interactive/creative”. We know what information has to be transferred but we don’t know how since there are no previous models. Should anatomy precede physiology or the opposite? Should embryology be taught as an important subject? These are questions that have obvious answers in other teaching institutions of this kind. They are not obvious to us here.

After having asked you the oral question, I have asked from each of you what his personal impressions were on the course so far. As expected, I received the entire scope of possible answers: from unbound interest and enthusiasm to qualified support or even some disappointment. From remarks like “it is going to fast” to “it is going to slow”, from “very difficult to follow” to “easy”. How am I supposed to react in front of varied and opposite reactions. I could possibly choose to ask only those who have no criticism to stay on the course, a form of “dictatorial” decision that would lead in the production of “clones” of myself. This is obviously against all rules of “ethics” and very dangerous in the long term.

Let us translate some of these remarks in the language we have described above, ie. Right vs. Left reality. Those who have a natural tendency not to differentiate, who have a weak sense of criticism, will react very positively to the course and ask for more information of this type, more creativity, more spontaneous teaching. This is typical right side reaction. Those who have a stronger sense of criticism, that tend to differentiate subjects, to set clear limits will feel somehow disoriented by this course. This is a left side reaction.

Both are justified, if they are honest (and not because of lazyness, ill-faith etc.).

I must relate to both equally. To the first group, and their answers in the written examination paralleled exactly what they felt about the course, I can only say that they must make an effort to be more precise, to make efforts to set clearer limits. To

the second group, the opposite, they should set less limits, allow information to flow from physics to therapeutics etc.

I will constantly resort to analogies in our theoretical and practical teaching. But I will always have to respect the limits to these analogies. The best way to do it is by making analogies between subjects or ideas that have been precisely delimited. For instance, we must not draw analogies between vague notions of physics or philosophy and therapeutics. This leads to largely useless technique. We must gain as precise as possible a knowledge of parts of physics, of ideas about reality that have been presented coherently (such as Parmenides etc.) and then draw the analogies with therapeutics. In other words, we must use the best of the left-side with the best of the right side, and not wishy-washy relationships. That is why I insist on the fact that we must know some subjects precisely: those that are going to be the sources of our analogies.

I return to your remarks on the course. Confronted with the opposite answers I receive, I can only wish that everybody should make the effort of “going a little to the other side”, because the “other side” is what he is weak in. I am not looking for “peace” between students for the sake of it, but for the sake of learning the content.

This problem has a deeper root, one we have mentioned several times: we are trying to teach here how to “think” in a specific way ( a thought with physical effect). This sounds obviously horrible, how can one teach how to think? It must be done with great care and, I believe, that the safest way to do it is to go through as many opposite systems of thoughts as possible, from the smallest oppositions (think in 2D or in 3D) to the widest (Far Eastern thought/Western thought, Mystic/Scientist etc). This should leave everyone’s mind in balance. May I remind you of the fact that we are learning is possibly dangerous (to the health of the practitioner, of the patient, there is the risk of using these powers in order to become a “guru” etc). We must be very careful of the context in which it is presented.

There is a given psychological state we shall try to cultivate here: one of first “clearing everything in the mind” and then “acceptance of information”. It is important that you should, for the duration of the lecture, and for the duration of the time that you try to understand the subjects we learn about, you should clear all resistance, and then accept the information. To get enthused by it, to see its justification. That means that you will give the opportunity to your right brain to draw some initial analogies. Afterwards only, let your sense of criticism work on it, not on the relevance of the information (should we have learned it ?) but on its degree of reality (I don’t agree with it, but I am glad that I have learned about it). When we will turn to therapeutics, all these ideas will be tested against the reality of the patient. To test them, you must be able to visualize them and *believe* that they can work.

We have another particular situation in this school, the fact that the entire teaching staff is made of one man (except for occasional other lecturers). This has advantages and inconveniences for both students and teacher.

*For the student* •

The advantage is obviously the fact that this will not happen again. We reproduce the situation that Still knew when he founded Osteopathy with very few students for a two or three- year course. With a one-teacher situation, you are close to the “source of

information” at its freshest, and in its most dynamic form. The inconvenience is that you have to depend on his good faith and you may inherit his insufficiencies.

*for the teacher* •

This is an exceptional situation where I have to stand on my one and expose all that I have thought and worked for for the last twenty years. I literally feel that I am pregnant, close to delivery, and that you are my midwives. This, obviously, will not happen again. The inconveniences is the pressure set on me, the constant feeling of “am I doing the right thing?” “am I good enough for this?” “ am I sure enough of what I say to teach it?” etc.

There is the time pressure, the engagement for several years, the possibility that I won’t be able to finish for practical, personal reasons etc. All of these do not exist when several teachers participate. This is why I refused to do any publicity about this course and to do anything to persuade you to come. Your free will was important to me.

We will decide near the end of next term whether a new class should be taken in or should we first graduate this one?

There is the financial responsibility, I do not know who will continue. On the other hand, the financial factor cannot be the only criterion for the number of students: improper ethics, lack of effort in learning the subjects etc. on the part of the student are causes for the interruption of studies.

The question of the “money’s worth” of these studies is also extremely important.

What are the criteria to decide whether a given set of subject is worth what you pay or not? I have my criteria, I feel deep down that some of the things I say or write come from so deep down that no money can “buy” them.

Since this subject was brought to my attention by one of the students, I have to relate to it (to be done in class).

Money, time and content pressure can be heavy to the point that teaching can become unpleasant. It is therefore extremely important psychologically that such factors should not be considered. The sense of openness I asked for above must also be applied in these matters. The teaching must be first and foremost a pleasure and a sacred duty for me (the transmission, amplification and renewal of a tradition) and to the same degree, for you.

### **On the Practice of Connective Therapy**

For the last two years, I have worked regularly as a therapist. I have ceased my research on *synchronicity in linguistics* and returned to medicine. The beginnings were slow but now patients come in numbers. There are certain difficulties specific to this technique that you will know

- you are not something defined (osteopath? Healer? None of these in fact) ■
- patients may be surprised and shocked, which means that you have to prove yourself more than others. People do not expect instant results from drugs (natural or not), acupuncture, massage, healing etc. since these therapies either use something concrete or make it a point that the effect will be slow. You will have to be faster. At this stage of the technique, I can affirm that if there is no immediate effect on the patient, you have achieved nothing or no more than placebo tiredness. This therapy can be extremely tiring, of a tiredness that has special qualities (not the one after hard physical work). As if something had been “consumated”. We will discuss this and ways to avoid it. I do not believe that one can see twenty patients a day (with the technique as it stands now, 1996). Ten ■

patients is the maximum number I find to avoid tiredness. But mostly, tiredness and even pain in articulations can be avoided according to your state of mind. Since this is a “thought” technique, you must be careful of the type of thoughts you project. You must have some measure of *indifference to the fact that you will succeed or not* and invest all your efforts in the analogies you are making and in the technique.

variety of work. Connective therapy is a general form of medicine. I see literally every type of disease. You must be prepared for this. It is not knowledge in anatomy that is going to guide you here, but the knowledge of principles and the capacities to find ever new analogies. This will allow you to adapt to every new case that presents itself. ■

I would like to summarize in a few words what I think should be the proper frame of mind for learning osteopathic or CTh skills. This is drawn from experience both as a student (I still consider to be one) and as a teacher. I will draw an analogy with treatment. When you will treat patients, you must not expect to get a result. The energy you put in hoping for a good result is energy lost for the treatment. You are doing this treatment with your thought and there is only limited place in your thought. All of it should be taken by your treatment effort and not by questions like “will I make it?” “will I pass for an idiot?” “what will he think of me?”. This attitude we have learned from the Stoics. Our freedom of action exists only in relation to things that depend on us. When we treat, lots of elements do not depend on us. This will guarantee that we will not tire or despair ourselves as it happened so many times to me. The same goes with learning. We must not hope to get a result. We must put our energy into understanding, that is what depends on us. Being good at the technique largely does not depend on us. When we will reach the stage when we will do techniques, I hope that you will all have reached a certain peace of mind, that you will not feel that you stand on judgment (am I good? Effective? Etc.) This is the plague of osteopathic schools. We have already begun to learn techniques through the various visualizations we have made. Adding anatomy will not change anything except that you will be able to check if your visualization has instant efficacy. But the transition between therapeutic visualization (on a patient) and pedagogic visualization (in class, on physics or philosophical models) must be soft, so soft that you should not feel the difference. It is my duty to make it soft and there must be some trust between us. I would like to have you ready with all the basic principles before we launch into actual therapeutics.