

The Presence Between Us:  
*Working with the Disembodied Psyche*  
Video Course  
Susie Orbach

Video Course  
CPD hours: 5



Online video access remains available for 1 year or 3 years from the date you receive the video course, depending on the ticket type.

*“After a few weeks of not quite wanting to—or knowing how to—acknowledge it, I realised what it was. Each time Edgar came into the consulting room, I felt myself expand. My body seemed to grow taller, broader. I had the sensation of thick, substantial thighs and arms, and an ample belly.”*

*Surprisingly—given how hated fat is in our culture—I didn’t find this enlarged body disagreeable. On the contrary, it felt calming, even comforting. There was a heaviness to it, a kind of stolidity, that perplexed me. And yet it grounded me.”*

Before words, before theory, there is the body. It registers dissonance with precision, responds to emotional cues below the threshold of consciousness, and carries a somatic archaeology often beyond the mind’s reach. In contemporary clinical work, we increasingly encounter clients who struggle with embodiment — from dissociation and self-harm to body dysmorphia and psychosomatic symptoms. These are not merely symptomatic but constitutive of psychological distress and trauma carried over years and decades. Therapeutic trainings often leave us with insufficient tools to decode or respond intuitively to this layered tapestry of non-verbal, corporeal communication that unfolds in every therapeutic encounter. Unpeeling these layers gently often creates those moments of breakthrough that change therapy from stuck to healing and growth.

Presence is truly important in therapy, for the therapist as well as the client. It is our natural, organic pathway to attunement. Working with bodily sensations, images, feelings and thoughts provides a doorway into the clients’ internal world and experiences which the client is unable to articulate in words. Our bodies hold all our experiences inside them and so we need them to be there with us in the therapeutic space.

**This intensive one-day workshop with Susie Orbach — internationally renowned psychoanalyst, celebrated author of *Bodies* and *Fat is a Feminist Issue*, and one of the most influential contemporary thinkers on the**



**embodied psyche — offers a rare opportunity to explore how the body enters (or fails to enter) the therapeutic relationship.** With clinical acuity and theoretical mastery as well as her signature warmth, she invites us to transform our existing therapeutic presence into a somatically attuned instrument — one capable of detecting what conventional training often renders invisible. We will learn:

- Skills to identify and explore non-verbal, somatic expressions of distress, even in clients whose narratives are emotionally flattened or overly intellectualised
- **A practical framework for applying the *Body Observational Diagnostic Interview (BODI)* to map clients' corporeal histories and embodied self-states**
- Greater confidence in recognising and working with body-based countertransference, including feelings of confusion, fatigue, pleasure, or discomfort
- Tools to differentiate between personal resonance, projective identification, and neurobiological attunement in somatic responses

### **The False Body and Auxiliary Corporeality**

**Building on Winnicott's seminal concept of the *false self*, Susie introduces the notion of the *false body* — a psychosomatic construct developed to manage developmental disruptions or cultural pressures that estrange individuals from authentic embodied experience.** In therapy, this may manifest as clients who *live in their heads*, struggle with interoceptive awareness, or relate to their bodies as objects of management, surveillance, or shame.

Research in developmental psychopathology corroborates this clinical observation. Studies on early attachment disruption (van der Kolk, 2014) demonstrate that **trauma literally becomes embodied through dysregulated stress response systems**, while research on alexithymia reveals how emotional and bodily awareness can become systematically impaired (Taylor et al., 1997). The emerging field of embodied cognition further suggests that our capacity for emotional regulation is fundamentally grounded in bodily experience (Damasio, 2003).

Crucially, Susie argues, the therapist's own body can function as an **auxiliary corporeality** — a holding and sensing presence through which clients may begin to reclaim their own embodied selves. But this requires that we cultivate not merely intellectual insight but a refined somatic attention: a capacity to attune to what our own bodies are telling us in the therapeutic space.

### **The Therapist's Body as Instrument**

Whether subtle or overt, the client's body makes an impression: a particular postural configuration, a distinctive pacing, a tonal quality that reverberates in the therapeutic space. Sometimes what arrives is dissociated or defended — a body estranged from its own narrative coherence. At other times, the client's corporeal presence exerts an uncanny effect on the therapist, stirring unexpected sensations, discomfort, even aversion or pleasure. These body-to-body communications often remain unspoken, yet they constitute some of the most precise instruments of attunement available to us.

Recent neurobiological research supports this clinical intuition. Studies in interpersonal neurobiology (Siegel, 2012) demonstrate that therapeutic dyads exhibit measurable physiological synchrony — from heart rate variability to cortisol patterns — suggesting that bodily attunement operates below conscious awareness. Research on mirror neurons and embodied simulation (Gallese, 2007) reveals that we literally *embody* aspects of others' emotional states through neurological mimicry, lending scientific credence to what clinicians have long observed phenomenologically.

**Susie draws attention to this rich terrain through the concept of body countertransference — the therapist's visceral, somatic reactions as therapeutic information.** If we learn to listen to our own bodily responses not as



noise but as signal, we can begin to co-create a space where the client's bodily distress is recognised, metabolised, and spoken to – to help it find safety and release.

### ***The Therapist's Body Listens: Returning to Edgar***

*I was confused, not just by the stolidity, but by the transformation itself. It's always unnerving to feel physically altered during a session. I had experienced this before — the body picking up on something unspoken, even registering pain that wasn't mine. So I knew how deeply the body could resonate with the therapeutic field. But this was something else. As Edgar slimmed down—shedding weight both physically and emotionally—it was as though I was taking it on. Filling out. Carrying something on his behalf. I couldn't say for sure, and I didn't know why it was happening.*

*Clearly, I wasn't literally growing and shrinking in the room. But the sensation was real. If anything demonstrates the power of imagination to shape our sense of self, this was it. And yet, even that felt beside the point.*

*What mattered was the reality of the encounter: that his body was registering in mine. That his states—conscious or unconscious—were living briefly inside me. I couldn't explain how it worked, and none of the professional theories satisfied me. But I knew this: it was valid, and it had meaning. And so I listened.*

### **What the Day Will Cover**

Structured across four clinical sessions, the workshop will include theoretical exposition, case vignettes, and practical reflections:

- **Session 1 | How Do We Get a Body?**  
Exploring the developmental phenomenology of the bodily self and how disruptions to this process shape both psychic and somatic symptomatology. Drawing on attachment theory, developmental neuroscience, and psychoanalytic object relations.
- **Session 2 | Using the Body Observational Diagnostic Interview (BODI)**  
Introducing a structured methodology to help therapist and client co-investigate the client's somatic history, bodily identifications, and sensory worlds. Integrating insights from somatic psychology and phenomenological approaches.
- **Session 3 | When the Client's Body Affects the Therapist**  
Making sense of body countertransference: the therapist's somatic reactions as diagnostic material, emotional resonance, or cultural interference. Exploring the neurobiology of empathy and projective identification.
- **Session 4 | Mapping the Terrain of Somatic Responses**  
Working with diverse therapist reactions — from delight and warmth to dread, disgust, or bodily discomfort — and what they require of us clinically. Developing a differential diagnosis of somatic countertransference.

### **What Participants Will Learn**

By the end of the day, participants will have:

- A nuanced understanding of how the embodied self develops, and how that development may be disrupted — grounded in neuroscience, developmental theory, and clinical observation
- Skills to identify and explore non-verbal, somatic expressions of distress, even in clients whose narratives are emotionally flattened or overly intellectualised



- A practical framework for applying the *Body Observational Diagnostic Interview (BODI)* to map clients' corporeal histories and embodied self-states
- Greater confidence in recognising and working with body-based countertransference, including feelings of confusion, fatigue, pleasure, or discomfort
- Tools to differentiate between personal resonance, projective identification, and neurobiological attunement in somatic responses
- Deepened insight into the "false body" and how to support clients in moving toward authentic embodied presence
- An expanded capacity to use one's own body as a finely calibrated clinical instrument — not simply for self-regulation, but as a site of clinical listening, relational depth, and transformation.

### An Embodied Imperative

This is not a training in somatic techniques, nor does it ask us to adopt a new therapeutic modality. Rather, it invites a radical shift in how we understand and utilise what we already bring to every session: our embodied presence. Susie Orbach's brilliance lies in illuminating what hidden in plain sight — the tension in our shoulders, the constriction in our throat, or the impulse to turn away are not distractions, but messages from the therapeutic field itself.

For seasoned therapists who wonder what remains to be discovered after years of practice, this day offers something rare: not new tools, but a transformed lens for using the ones we already possess. The body, it turns out, has been our most sophisticated clinical instrument all along — we simply haven't been trained to hear it.

**In Susie Orbach's hands, the body becomes not only a site of suffering but a site of profound relational possibility — a way of knowing, connecting, and healing that honours both the wisdom of psychoanalytic tradition and the insights of contemporary neuroscience.** This is therapeutic work deepened, not displaced.

### About the speaker

**Dr Susie Orbach** is a psychoanalyst and psychotherapist with a practice seeing individuals and couples in Hampstead and online. She has been a consultant/coach to Unilever, the Kings Fund and Amazon as well as Museums and Arts organisations. She co-founded, with Luise Eichenbaum, The Women's Therapy Centre in London in 1976 and The Women's Therapy Centre Institute (WTICI) in New York City in 1981, with Luise Eichenbaum and Carol Bloom.

Since writing *Fat is a Feminist Issue*, she has published a further 12 books, the most recent being an annotated version of the BBC Radio 4 Series *In Therapy: The Unfolding Story*. Her book *Bodies* which won the Women in Psychology award for best book, was updated in 2019. She has also published many papers and frequently writes for the press. She was a columnist for *The Guardian* for ten years.

She is the recipient of the Lifetime Achievement Award for Psychoanalysis given by the British Psychoanalytical Society and is a Fellow of the Royal Society of Literature. She has a strong interest in social policy, co-authoring recent government papers. She was also a member of government expert panels. For ten years, she was Visiting Professor of Psychoanalysis and Social Policy at LSE. She was an Academic Visitor at Hertford College, Oxford.

With American colleagues from The Women's Therapy Centre Institute and from The New School where she had a Visiting Scholar position, she co-devised The Body Observational Diagnostic Interview (B.O.D.I.), an assessment and clinical tool useful in addressing the intergenerational transmission of body and eating issues.



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