

# DASEIN IST MIT SEIN: TO BE THERE IS TO BE WITH

## Stanley Keleman's Formative Approach

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Dasein Ist Mit Sein is an idea that comes from the existential thinking of Martin Heidegger. This phrase sums up for me the therapeutic experience. The interaction between therapist and client is influenced by how the therapist is present with himself and by how he perceives the client as being there with himself. Within this dynamic, the client experiences how he is present with himself and others. People usually do not experience their way of being present. Others have to reflect it back to them.

Formative psychology, which is what I call my work, states that to be present is a somatic act. It includes feeling, thinking, and behavior. To be present somatically means to be present also with one's social and personal body shapes. How we are present bodily constitutes who we are and it constitutes a field for others.

How we are present, how we form a relationship with others, sets the stage for the therapeutic encounter. Is it a healing, remedial event or a formative event? Is the encounter determined by the client's and the therapist's respective somatic styles? Or is it determined by the presenting problem?

To be there is to be with, Dasein Ist Mit Sein. For us as therapists, this means to be there with ourselves and with the forces in ourselves. When we can be bodily there, we alter the way we are present. Sharing ourselves with other people, we are there with them, for them, and together. The task is to be able to be in one's own body, to be present with one's responses, and at the same time to be receptive to another person.

We receive our clients; we do not incorporate them. To be able to receive another person is different from understanding or empathy. The therapist receives the client with the gestalt of his somatic-emotional style of being there. When the client is in the presence of this kind of stability and aliveness, he is contained. With containment comes a sense of inwardness that is neither mental, symbolic, nor linguistic. To be received by another person, to be in a room with him, to sit opposite him, brings about a deep and deepening encounter. This kind of relationship affects both people. The therapist must be able to be receptive to his own responses and to those of the person opposite him. This is not an easy task.

Receptiveness—responsiveness—has somatic structure. It is a bodily attitude. The body self of the therapist is best when it is neither hard nor rigid. It should have a porous quality without being formless. The principle of formativeness, of formative psychology, is to receive and to shape what is received.

Receptiveness does not mean just letting something happen. It is partly a volitional act. The therapist works at containing his responses. Containment is the analog for how the therapist receives the client. He creates a field in which the client can feel what it is like to be present in a contained way.

To be there is not to scrutinize or to examine. We do not use our eyes or posture to objectify clients, or keep them at a distance. We do not look for the cause of what is wrong or read signs into the face and body. We do not put on an understanding face or assume an openness that causes the client to swell up and enter our world, or conversely, allows us to be taken into theirs.

To be there is to be present with one's warmth—with one's real body warmth. It means to inhabit one's own body with all its lived experiences. To be there is to be receptive to the client's facial and body expressions or to the current of the feeling that he rides. The therapist can be present, not as a mirror, but as someone who uses peripheral vision to take in, to collect, the client's silent bodily expression and gestures. The client feels that what comes to the surface is allowed space and time to be in the room, to affect the other and to be recognized by the other.

The point that concerns me, as a therapist, is how I am present bodily, with my lived experiences, and how my responses are affecting me. The other part of Dasein is how the other person—the client—is there with himself. Therapy is what is happening in each of us and what is forming between us. We are always in the process of forming, and it is important to be truthful to what is there and to what wants to be there.

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One of the people who gave me insights how the therapist experiences his work was Dr. Medard Boss, a Swiss psychoanalyst and father of Daseinanalysis. Boss developed Heidegger's notion of Dasein to include Mit Sein. Years ago, when I had a conversation with Boss, I asked him to tell me about his relationship with Georg Groddeck. Groddeck was a German medical doctor who gave Freud the concept of the id. By id Groddeck meant the body. For him, the id was more important than the ego. Groddeck refuted Freud's concept that where id was there should ego be. He also was interested in therapeutic touch and its relationship to symbol formation and illness. He could be called the first somatic psychologist.

Since I am interested in the life of the body, I asked Boss what he remembered about Groddeck. Boss had attended Groddeck when Groddeck was dying at a sanitarium. I wanted to know what it was like to be there with him, this great somatic pioneer.

I was a young man when Groddeck, a much older man, came to the sanitarium, Boss told me. Groddeck talked about the experience of being lived by his id--that is, the body. He said that his id knew how to die. He was there with his dying. He said that the dying person has no fear if there is someone with him. He was not afraid to be with his frailty as long as he felt that someone stronger was there. As a young doctor, I was trained not to be afraid of a dying person. I saw how he was with his dying, how he was being led to dying by an ancient, innate process in him. I was taken into his dying. I was touched by his presence. I learned that one's frailty does not diminish one's being there, only how long one is there. Dying is a mystery, a mystery about people who come into existence and are then called back. I asked Groddeck how he was affected by this. He said that dying was its own way of being present. I learned a lesson from this experience. I learned that information and training is not a substitute for the simple act of being present as a bodied person with someone else.

I asked Dr. Boss if he was still seeing patients. "Yes," he said. I asked how it was for a man of over 80 to practice. He said that it was easier to be there with his patients, to receive them. It was just as it had been with Groddeck. Boss was affirming to me that in the therapeutic situation it is important to be present with the other person. Being present is physical and includes the sum of looks, gestures, expressions, and bodily attitudes.

There are precious times when the soma's depth comes to the surface and we are changed by it. Sometimes this happens as a result of a dream, or in a spontaneous intuition. There appears an unknown face, an ancient expression, an illuminating beauty, a cruel or kind expression. Perhaps there appears a tenderness or sensuality we had forbidden ourselves until now. These bodily expressions ignite a metamorphosis in our feelings, thoughts, and images. This metamorphosis alters our way of being present.

Being there bodily is a palpable emotional pulse. There are tides of bodily shapes, gestures that wax and wane, expressions that appear and disappear. These somatic-emotional intensities form the way we are present socially and intimately.

Dasein and Mit Sein is the process by which we constitute ourselves and experience a part of ourselves in the other. In this process we experience our own metamorphosis and the metamorphoses of others. Dasein and Mit Sein generates values and meaning.

The therapeutic encounter is much like a dream. A dream appears to the awake brain, which receives it or deflects it. It is possible to objectify the dream and to look for signs and symbols, meanings and associations. With our analysis, we may miss the dream as a whole--all the qualities of the dream and of the dreamer--the feel of the characters and their movement in the dream. We can receive and experience the dream on its own terms, or we can try to understand it by interpretation. The dream says what is there and how it is there. In the same way, the client is there and bodily says how he is there. As therapists we can be there with what appears bodily in the room, with the other person and with ourselves.

Dasein and Mit Sein--to be there, to be there with, to be there together. This formula brings a transcendent quality to psychological practice. In the therapeutic situation, we actively receive; we are engaged in an act of genesis. We receive what is given and help to give it body. This process of forming a somatic self with another is the basis for living in the world of work and the world of love.