

UNDERSTANDING  
BODY ARMOR,  
REICHIAN CHARACTER  
TYPES  
AND FREUDIAN  
FIXATIONS

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This is the title page, which comes after the Cover page.  
It could also be the cover itself if your cover graphic is small.

# The Three Phases Of Healing After A Whiplash Injury

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## **Introduction:**

# UNDERTANDING REICH AND FREUD

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## HISTORY OF WILHELM REICH

Wilhelm Reich was a figure who presented extraordinary contrasts. He had an international reputation as a scientist of integrity, but was often publicly slandered.

Today, more and more people are coming to see that Reich deserves equal recognition with Freud and Jung. Whereas they pioneered our understanding of the mind and the spirit, it was Reich who rooted both in the body. All modern psychotherapies that work with the body can be traced back to him.

As a child, Reich had a keen interest in biology. He grew up on his father's farm in Jujinetz, Austria. Reich served in the Austrian Army from 1915 to 1918 and was promoted to lieutenant after his first year. In 1919 he was admitted to the Vienna Psychoanalytic Society while an undergraduate at the University of Vienna. He graduated medical school in 1922.

He was recognized by Freud as a brilliant clinician, but was later excluded from the Psychoanalytic Society when his views became too socially radical. Reich was the only student of Freud's to carry his libido theory into experimental science.

In January 1929, Reich opened six sexual hygiene clinics for workers and employees. The idea was to give free advice on abortion, birth control, sexual problems and sex

education. Thus Reich fought for the right of every woman to her own body nearly forty years before such views became acceptable. He also advocated the right of adolescents to have access to information on the use of contraceptives.

As a Marxist, his political activity took the form of resistance to the Nazis. In 1933, he published The Mass Psychology of Fascism. Hitler put a price on his head, and he fled to Denmark. The Danish Communists excluded him from their party because they felt his book was an attack on revolutionary politics.

In Oslo he founded a new school of psychosomatic therapy. His observations led him to the dramatic discovery that all emotional conflicts and blockages reside in the muscles of the body, forming what he called “body armor.” Armor impedes the flow of breath, life and emotions throughout the body. Reich reasoned that if character armor, which contributed to unhappiness, actually resided in the body, why not try to relieve and dissolve the armor and, therefore, the neurosis by working directly with the body? He began to incorporate physical manipulations and breathing exercises into his therapeutic practice. The healthy person, according to Reich, was the one who regularly engaged in lovingly uninhibited sexual exchange leading to an uninterrupted wave-like motion and a complete discharge of energy during orgasm.

In 1941, while in America, Reich discovered a radiation in the atmosphere. He named it Orgone because the energy had organic effects. Einstein met with Reich and confirmed two of his findings. He said it would be a bombshell to physics if Reich's claims were true.

Reich's books were considered false labels for an experimental device he called the Orgone accumulator. The FDA considered it wrong to claim that sitting inside of it could cure cancer. (Show book burning) Most of Reich's books, research and Orgone accumulators were seized and burned in one of the most repressive witch hunts in this country's history. He refused to defend himself in a court of law, saying that the issue was science, and could therefore only be judged by the scientific community. In 1956, Reich was sentenced to two years in the federal penitentiary for contempt of court. In November of 1957, he died in prison of heart failure. But his work lives on. Today his influence has spread far and wide.

(Show pictures of Pearls and Lowen) In 1951, Fritz Pearls developed Gestalt Therapy of which many concepts derived from Reich. In 1956, after training with Reich, Dr. Alexander Lowen founded the Institute for Bioenergetic Analysis in New York. By the 1960's Ida Rolf had developed her system of deep tissue release known as rolfing. (Show shot of Rolfing or picture of Ida Rolf) Lowen, Pearls and Rolf taught these techniques at the Esalen Institute in California.



Reich said before he died that the world of his day was not ready for his work. He left it to the children of the future. Today the children of the future have come of age and are ready to explore his life affirming work.

## CHARACTER TYPES

Neurotic character structures are determined by traumatic experiences in the early life of the individual. Patients may have only a few of these traits or a combination of several from different character types.

### **1. Passive Feminine Character**

The Passive Feminine Character is the result of an authoritarian father and a mother who pampered him as a child. The boy was forced to repress his strong feelings of hostility towards his father and to hide them behind a feminine, submissive set of character attitudes. The repression of the aggressiveness towards his father involves the repression of libido towards women. He may have been pampered as a child and have a deep attachment to his mother. He is shy in approaching women sexually. He has a soft voice, a gentle manner and is polite and cooperative. He lacks masculine aggression and decisiveness.

### **2. The Compulsive Character**

The Compulsive Characters have a neurotic compulsive sense of order, living their lives according to a preconceived pattern. Any change arouses anxiety. Toilet training was carried out too soon, leading to extreme self control. They often have an above average capacity for abstract logical thinking. They are extremely sloppy, collect things, are frugal and are unable to manage their money. They often feel self-pity and guilt, and suffer from indecision, doubt and distrust. The muscles of their pelvis,

shoulders & face are often very tense. They are usually even-tempered and lukewarm in their display of both love & hate.

### **3. The Hysterical Character**

The Hysterical Character displays strong sensuality. She has a soft, feminine facial expression in her eyes, and hips that sway. She is supple and sexually provocative. Not overt sexual aggression, but sexual enticement of men. It is wrong to assume that she is expressing genuine sexual willingness. Her sexual striving is basically sexuality in the service of defense. She is nervous, anxious and indecisive. She suffers from a severe sexual disturbance. She has an intense fear of sexuality and intense but repressed sexual strivings. She may have irrational, emotional outbreaks, chaotic behavior and dramatizations. When her sexual behavior seems close to attaining it's goal, she assumes a passive, anxious attitude.

She has muscle tension in the sub-occipital and upper thoracic muscles. The sub-occipital muscle spasm is responsible for her feelings of hopelessness. Her neck is tight and her head is held erect. Her neck is stiff and her jaw is set. As if to say, "I won't give in to my feelings of love to you, then you can't hurt me by rejecting me." She has a tight lower back and a retracted pelvis which may lead to a sway back.

The main tensions are in her breasts, her vaginal muscles and in the adductors of the thighs. She has a strong fear of

losing control. She seduces men, but doesn't give her heart. She hopes that an ideal lover will come and liberate her repression bound female sexuality.

#### **4. The Phallic-Narcissistic Character**

The Phallic-Narcissistic Character is confident, energetic, and impressive in his manner. He is athletic with hard, sharp masculine lines. However, he often has a baby face. His jaw is set forward and determined. He has wide shoulders, a full chest, a narrow waist and tight legs. His raised and squared off shoulders are a sign of premature responsibility. His respiration tends to be abdominal; his chest is held in the inspiratory position. In the back, the flow of anger into his arms is blocked by tight shoulder muscles. He has a fixation of the pelvis posteriorward. This causes a pressure of the bladder. All his muscles, but particularly those of the pelvis, the shoulders and the face are in a state of chronic tension.

His behavior is usually arrogant, either coldly reserved or aggressive and provocative. He often achieves a leading position in life. Many times he finds a career as an athlete, pilot, military man, or engineer. Napoleon and Mussolini belong to this character type. Among the phallic-narcissistic types, one often finds drug addicts, alcoholics and sex murderers.

He has a derogatory attitude towards women. He looks at every female as a possible sex object. He brags about his conquests. The phallic male has difficulty feeling deeply

satisfied with one partner. He believes that a new partner may provide greater pleasure and is forced in to continued pursuit and conquest. He does this in order to avoid being deserted.

His mother is very often the stricter parent. Because of severe childhood disappointments in love, he possesses sadistic impulses of revenge. Because of this he vacillates between moods of self-confidence and deep depression. His capacity for work is likewise severely disturbed.

## **5. The Masochistic Character**

Reich postulated that the masochistic character was the result of repressed sexual urges that resulted in a fear of bursting and the inability to release tension. There is nothing the masochist wants more than to have his tension discharged in order to relax. His fantasy is “Beat me, so that I can get relaxation without being responsible for it.”

The masochist often had forced toilet training, forced feeding, and spanking during early childhood. The forced toilet training leads to a hard knot in the stomach, spasms in the buttocks, medial thighs, and lower lumbar. The scapula, trapezius, and upper cervical muscles are held tightly to guard the throat from forced feeding. The buttocks, genitals and thighs are tensed to guard from being spanked.

The masochist has an excessive demand for love based on a fear of being left alone. They have a tendency to self

deprecation, feelings of inferiority, despair and hopelessness. They often complain and whine in order to let off steam. “See how miserable I am. Why don’t you love me?” Their longing contained within creates their suffering. (C.G.: Occiput to C2, T1-3 Hypolordotic lumbar, hamstrings, calves, and high arch)

## **6. The Schizophrenic Character**

Schizophrenia involves a split in the personality between the aggressive material drive and spirituality. It is an extreme withdrawal from an interest in reality into a fantasy life. Schizophrenics have an excellent grasp on emotional realities, but have a very low tolerance for any sudden increase in emotions. They may appear absentminded, dissociated, and murmur incoherently. Their speech is considerably slowed down.

Forces haunt the schizophrenic that may be omnipotent and godlike or maliciously tempting like the devil. These may become murderous and destructive. They appear to be under the control of another will.

Their armor in the suboccipital muscles is so strong that very little of the aggressive impulses get into their brain. They have an inhibition of aggressive instincts with the result that their spiritual life is abnormally active. Some of the energy is deflected out through the eyes causing hallucinations.

Schizophrenics typically have a far away look of remoteness when they are overwhelmed by emotion. Their eyes have a lack of expression and their face is masklike. They may hear voices and see hallucinations while looking at walls. The schizophrenic may see the aura around people. They have a loss of contact with their own body. Sometimes they have the feeling that they are out of their body. Their chest appears soft but has very shallow respiration. Their breathing is blocked in their throat and suboccipital muscles. Corresponding to the block at the base of the neck is a severe block in the muscles at the lumbosacral junction.

They are deeply engrossed in their inner life forces just as men of great genius. The genius produces lasting accomplishments out of this contact. The schizophrenic however, becomes enmeshed in it because he is afraid of it.

Using the gag reflex is often effective in softening the armor in the face and eyes. This can be used in conjunction with an intraoral atlas adjustment.

## **7. The Genital Character**

Genital characters are in touch with their primary feelings and needs and are able to love passionately. They have a capacity for joy in love & in work. They are capable of regulating their lives and of solving conflicts in an unneurotic way. They have a well developed capacity to act and react rationally. They can fulfill themselves in a mature way as an adult because they are no longer driven

by conflicting urges arising from unfulfilled childhood needs. They are orgasmically potent. In other words they have an involuntary contraction of the pelvis and an uninterrupted wave-like motion of the rest of the body prior to ejaculation.



## **Body Armor**

### **I. Feet**

- collapsed arch; collapse in rest of structure
- individual lacking energy to make a firm contact with reality
- utilizes his weakness
- rigid, contracted feet-ungrounded, balance and a sense of support, precarious, uncertain of where we stand, constant irritation and uncertainty, underlying insecurity erodes feelings and relaxed flexible foot – good tone, sure sensitive contact with ground firm yet responsive support, capable of handling changes encountered through movement.

#### **a) Flat Feet**

- Flat feet indicate an undergrounded way of relating to the world, never quite putting down roots, never quite standing.
- A person might have a difficult time staying still in relation to other people and responsibilities, and might be motivated by a nervous need to be in motion.

#### **b) Clutching Feet**

- Clenched attitude chronically. When this happens, the muscles of the feet tend to become rigid and chronically tense.
- Unresolved emotional crisis that involved the possibility of movement or running away. If the

impulse to flee is not acted upon, the muscles of the feet may register the conflict of spastically clenching the earth.

- An overdeveloped need to hold on and to keep things under control.

### **c) Weight on Heels**

- pushover
- deep feelings of fear and instability
- feel anxious, somewhat afraid
- hard time relaxing and feeling comfortable in spontaneous situations

### **d) Tiptoers**

- walking mostly on their toes and hardly put any weight at all on their heels
- to be like fairy princesses
- often floaters, dreamers, highly imaginative and possess artistic abilities

### **e) Lead Feet**

- people with lead feet seem to have created lives that keep them
- weighted down
- a strong need to be grounded, to be stable, to know one's position in life
- a difficulty in dealing with motion and change, these people are usually more reliable and set than they are creative and active

## **II. Ankles and Knees**

- mortice of ankle joint not centered over middle of foot – weight of body falls to inside or outside
- uncertainty in taking any step, particularly a new one
- locked knees – will not bend, I will not beg
- reflect the sense of ease with which we progress through our lives and move through the world. When these aspects' of our lives are flowing and open, our ankles and knees are flexible and vital; when we are stuck, or tentative or conflicted, our ankles and knees will have a tendency to rigidify and thereby become more susceptible to injury

## **III. Legs**

### **a) Weak, Underdeveloped Legs**

- weakness and frailty of his self-support system
- hard for him to stand on his own two feet

### **b) Massive, Overmuscled Legs**

- rigid personality
- spent a great deal of time holding on
- he may have a difficult time with change, movement, and any form of unstructured, spontaneous activity
- weighed down by his own compulsiveness and rigidity

### **c) Fat, Underdeveloped Legs**

- extremely sluggish in his ability to move through the world
- difficult initiating action and following through

### **d) Thin, Tight Legs**

- go-getters, intense and vital
- this person will probably move through life in a somewhat erratic and inconsistent fashion, sometimes with great flow and motivation and other times with utter clumsiness
- this person usually has developed a need to mobilize himself through the world but has not fully developed the corresponding ease and fluidity that would allow him to move in an integrated and consistent fashion

## **IV. Pelvis**

- tucked under, tight buttocks – dribbling out of feeling and emotion
- unable to allow the pelvis to swing back – emotions squeezed out
- held back – a gun cocked and ready to fire, afraid to let go – what will happen if I let go?
- fears of sexual promiscuity or violence towards others

- pelvis too small or too large relative to the rest of body: tight contracted small pelvis
- feelings of immaturity, lack of development of feelings of sexuality

### **a) Pelvis Tipped Upward**

- causing a flattening of the lower back, there tends to be a lessening of sexual energy and focus
- holding in of sexual feelings
- inability to stay focused or grounded in any emotional activity
- the sexual encounter tends to be just another form of challenge and achievement
- feelings are constricted and constrained
- frequent leg injuries, sexual dysfunction, bladder irritability, abdominal tension, hemorrhoids, lower back pain, and tension headaches

### **b) Pelvis Tipped Downward**

- heightening of sexual energy and sexual focus
- be very sensual and feeling-oriented and might even lean toward being obsessed with sexual contact
- seek frequent sexual release
- when the pelvis is excessively tipped in this fashion, it is often accompanied by over-developed legs, expressing a strong need for security
- rigid diaphragm, expressing withheld anger, and a weak chest region

- eliminative disorders, hemorrhoids, lower back pain, gastrointestinal stress
- chest-related disorders such as asthma, chest colds, and bronchitis
- many authorities feel that the undifferentiated muscular armor in the pelvic region comes from toilet training that was forced on the child too early by the controlling or insensitive parent
- sphincter control is not attained until eighteen months of age so that earlier toilet training (some mothers start at four months) requires contraction of the body musculature, especially the muscles of the thighs, buttocks, pelvic floor, as well as retraction of the pelvis and further respiratory inhibition
- this is a familiar example of the armoring process, it effectively diminishes natural emotional expression, and especially the pleasurable sensations from the pelvis

### **c) Pelvis Excessively Wide**

- great deal of deep warmth
- soft, pasty, hips buttocks and thighs
- others, while possessing this fundamental trait, struggle with this
- passivity and attempt to overcome their flabbiness with action
- harmony between receptivity and action

## **V. Buttocks**

### **a) Tight-Ass**

- holding on to all his expressions and feelings
- develop hemorrhoids
- lower back pain due to the over contraction of the muscles of the anus and lower back

### **b) Pelvic Diaphragm Tightness**

- along the bottom of the gluteus maximus muscles
- usually contracted in conjunction with holding in the back of the legs (hamstring muscles)
- the holding often has to do with controlling one's position in life in an attempt to create a secure and comfortable environment in which to function
- restrict sexual functioning

### **c) Abdominal and the lower back**

- suppresses his emotions with overemphasized intellectual control, as a result, the abdominal muscles, the psoas muscle, and the muscles of the lower back
- lower back pain, blocked feelings, digestive disorders, sexual dysfunction
- backside that looks weak and undeveloped

## **VI. The Genital Region**

- much that Reich postulated in the twenties and thirties is just now being recognized and appreciated
- contributions Reich made to the understanding of the bodymind in terms of character armor and psychosomatic tension have not been matched by any other contemporary Western thinker or healer
- the healthy person, according to Reich, was the one who regularly engaged in lovingly uninhibited sexual exchange leading to a thoroughly satisfying orgasm
- Reich began to pay more attention to the various ways in which character armor seemed to be related to physical structure
- his observations lead him to the dramatic discovery that all psycho emotional conflicts and took up residence in the muscular tissue of the body, forming what he called body armor
- body armor served the function of encasing the person in his own protective muscular shell, this shell not only kept out harmful or painful stimuli but also served
- the more armor there was, the less were the feeling able to flow through the bodymind
- armoring served to impede the flow of life through the organism for if character armor, which contributed to bodymind unhappiness, actually took up residence in the body, why not try to relieve and dissolve the armor and, therefore, the neurosis by working directly with the body? he began to



incorporate physical manipulation and breathing exercises into his therapeutic practice

- armoring diminished the flow of sexual energy or orgone through the bodymind, thereby thwarting the completion of the full orgasm cycle
- the degree to which his patients had blocked and armored themselves seemed to reflect the degree to which they were fully alive and healthy, and , therefore, able to experience open and mature love with another person
- Gestalt therapy, encounter, sensory awareness, Rolfing, primal therapy

## **VII. Abdomen**

- relaxed evenly toned belly allows the respiratory wave throughout, full vitality and openness to feeling

### **a) Belly Enlarged in Upper Half**

- physical labor, rugged, masculine in appearance, carry about with them the child they once were

### **b) Lower Half of Belly Enlarged**

- energy flow into the lower pelvis and legs strongly blocked

### **c) Abdominal and the lower back**

- warm to touch, receptive to flow of breath, good contact with lower belly center

**d) Extreme Enlargement in Female**

- deep unconscious desire for pregnancy

**e) Overweight with Heavily Padded Abdomen**

- lack of contact with belly center, lack of contact makes for the individual who constantly eats to fill up

**VIII. Lower Back**

**a) Tight Muscles**

- feelings of sexuality, self-control, self-support, and self-stability are among the \*\*\*\*\*
- withheld sexuality
- people who are extremely compulsive frequently have tight muscles in their lower back

**b) Flexible Muscles**

- people who are extremely impulsive usually have lower back muscles that are relatively flexible
- easily detected by asking the person to bend over toward the floor without locking or bending his knees, the compulsive person will usually be severely limited in the degree to which he allows his lower back to bend and stretch
- impulsive person will display a great deal of flexibility in this bodymind region

- the overly compulsive person will tend to be too structured, the overly impulsive person not structured enough

## **IX. The Diaphragm**

### **a) Tight Diaphragm**

- when this region is open and unblocked, energy flows freely and the bodymind experiences health and pleasure
- when this region is tight or restricted, the result is a limitation of feelings, breathing potential, and energetic flow
- when the diaphragm is flexible and well functioning, emotions flow through it naturally and spontaneously
- severe armoring in the ... potentially violent rage
- nervous stomach disorders, nausea, inability to vomit, peptic ulcer, gall bladder disease, liver conditions and diabetes

## **X. The Lungs**

### **a) Shallow Breathing**

- Nervous and upset
- Breathe is to feel; and conversely, to limit breathing is to limit feeling
- anxiety, breathing difficulty

- diaphragm against tendencies to sob

## **XI. The Heart**

### **a) Tension in the Area of the Heart**

- chronic over-self-protection
- armor guards against hurt and attack but also locks away feelings of warmth and nourishment
- left shoulder will often, rotating slightly forward in a posture that suggests a guarding actions
- long-held-fears and pockets of sadness

## **XII. The Chest**

### **a) Contracted, Collapsed**

- lack of emotional vitality, low energy level, deeply hurt, project tiredness, hurt and need for support
- deep breathing brings into contact with hurt
- limiting breath avoids pain, once he breathes more fully and integrates deep hurt, pain and fear of pain that goes with it, energy level changes
- more alive
- pectoral muscles are often underdeveloped
- insecurity and depression
- will be more passive than aggressive
- chronic sense of fear and inferiority
- asthma, bronchitis, and chest colds and pains

- taker rather than giver
- this person to feel more whole, develop the breathing and feeling aspects of this region, love, independence, and self-confidence
- fear of being alone, and a difficulty in making it out there in the world

### **b) Overexpanded**

- shows little collapse during expansion
- heart feelings locked up behind this wall
- rigid system of attitudes, logical, intellectual framework
- strong emphasis on performance and success
- do not let go easily, when they do, deep sobbing results, a longing to be free
- hard for the chest-expansive person to receive energy from other people has no trouble expressing his feelings of power and rage
- overpowering need to be in control and to appear strong, feelings of tenderness and receptivity
- chronic anxiousness, hypertension, high blood pressure

### **c) Asymmetric Type**

- lack of balance, splits in attitudes

## **XIII. Shoulders**

### **a) Forward, Hunched Shoulders**

- attitude of shame, embarrassment, self-protection
- reflect a chronic attitude of self-protection and a fear of being hurt
- when the shoulder are rotated in this fashion, however, the muscles of the chest tighten and contract, thereby causing them to be even more vulnerable and sensitive

#### **b) Raised Shoulder**

- Indicated an attitude of fear
- Upward & forward-withdrawing into self, fear, lack of assertion

#### **c) Retracted, or Pulled-, Shoulders**

- holding back anger, fear of striking out
- someone who looks as though he is forcing himself not to lose his temper and hit someone
- your arms radiate out from your heart and serve to ground you with respect to the world of people and things

#### **d) Square Shoulders (overdeveloped)**

- prepared to take on the challenges of producing and being a “man”, having to accomplish
- sense of power and self-assurance and an ability to “shoulder the burden”

#### **e) Shoulders Too Narrow**

- feels weak and unable to take action, “doing” functions impaired

#### **f) Rounded Shoulders**

- overburdened, great difficulty in self expression
- lack of grace or sensitivity in an individual's means of expression and contact
- tend to relate to people in an insensitive way, treating them as "objects"
- such relationships will suffer from a lack of honest contact and direct communication

### **XIV.Arms**

#### **a) Weak, Underdeveloped Arms**

- shows a lack of ability to reach out and take hold of his life
- sense of powerlessness in one's relationships to people and things
- a general lack of initiative

#### **b) Massive, Overmuscled Arms**

- lack of grace or sensitivity in an individual's means of expression and contact
- tend to relate to people in an insensitive way, treating them as "objects"
- such relationships will suffer from lack of honest contact and direct communication

#### **c) Thin, Tight, Muscular Arms**

- reflects a kind of grasping, clawing, clutching quality about a person's attitudes
- although the person is able to reach out and make contact, he has difficulty holding on to anything for extended periods of time

#### **d) Fat, Underdeveloped Arms**

- reflect a deadness or sluggishness of action
- difficulty initiating action and sustaining energy throughout an activity
- when this person does reach out, the expression tends to be overdramatic and clumsy

### **XV. Back Muscles**

- the muscles that surround the thoracic region of the spine hold anger

#### **a) Tight, Tense Back Muscles**

- chronic state of tension in my back
- when I relax my hold on things and allow the world to flow, I feel relaxed and comfortable

#### **b) Relaxed Back Muscles**

- trusting and appreciative of others, let go of some of my control
- feelings more balanced, heart more available

### **XVI. The Neck**



**a) Held Forward**

- reflects an individual who encounters the world first with his head, his rational self, and then later with his body, with his feeling self
- the neck and head are bent over forward
- this person will have a great deal of difficulty facing up to the demands and needs of everyday living
- a statement of partial defeat and emotional exhaustion
- driving aggressive attitude

**b) Head Tilted Back with a Shortening at the Base of the Skull**

- holding energy back

**c) Head Tilted to the Right**

- feeling arrogant and defiant, have a chip on my shoulder
- cannot approach anyone or anything directly-not being “straight”

**d) Head Tilted to the Left**

- Projecting a cute and playful attitude
- cannot approach anyone or anything directly-not being “straight”

**e) Long, Graceful Neck**

- Long, proud attitudes

**f) Stout, Bull Neck**

- Indicate a tight, aggressive approach to life's demands

**XVII. Throat Muscles**

**a) Tight Throat Muscles**

- fears of expression
- tight throat, shallow breathing prevent a true belly laugh

**XVIII. The Jaw**

- the bottom of the jaw is often where tears are held
- violence and anger are held in the jaw

**a) Receding Jaw**

- weak – lack of assertion, unable to take what he wants, deep seated insecurity regarding ability to perform
- withheld sadness or anger, an urge to scream or scream
- this person might tend to have a great deal of difficulty speaking up in groups, defending himself, and voicing his opinion

**b) Protruding Jaw**

- naso-labial fold

- defiant character attitude
- slightly forward it indicates that the person has an extremely “determined way of being in the world”
- as the jaw moves farther forward, the attitude becomes increasingly one of defiance and arrogance

**c) Clenched Jaw**

- over-self-control
- a great deal that I want to say but I am holding on to it by clenching my jaw I can swallow or dissolve the emotion or information that has made its way to my mouth

## **XIX. The Face**

**a) Full of Expression**

**b) Expressionless**

**c) Left-Right Split**

## **XX. Ears**

**a) Hard of Hearing**

- when you decide that you “don’t want to hear anymore”, you will withdraw your attention, diminishing your ability to hear
- people often hear just as much as they wish to hear for just as long as they want to hear it; after that point, they may begin to develop hearing difficulties

## **XXI.Eyes**

### **a) Large, Round Eyes**

- warm, loving personality. caring, usually make other people feel comfortable in their presence

### **b) Bulging Eyes**

- nervous, penetrating way of being in the world
- will often make other people uncomfortable and anxious

### **c) Deeply Set Eyes**

- withheld expressions and withdrawn sadness
- person spends a large amount of time critically observing the actions and activities of others

### **d) Bay Eyes**

- mamma’s little boys and daddy’s little girls
- seductive and manipulative

## **XXII.Vision**

**a) Nearsighted**

- inwardly focused or shy and highly rational and introspective
- fears of being rejected, unloved, unappreciated
- fear of self-rejection
- nearsighted person needs to learn to extend himself more comfortably into the world

**b) Farsighted**

- involving himself with activities that keep his attention focused away from himself and looking outward
- extroverted, outgoing
- extend himself into activities and relationships and future oriented thinking as a way to avoid having to engage and develop his inner self

## **XXIII. The Forehead**

**a) Tight Frontalis Muscle**

- superimpose their rationality upon their spontaneous feelings and excitations, these muscles can become armored and tense
- suppressing feelings with thought and exaggerated rationality

**b) Furrowed Brow**

- diligence and intense concentration

**c) Tight-knitted Brow**

- intense, highly focused way of being in the world
- anger

**d) Smooth Brow**

- inner peace, untroubled existence

**e) Raised in Fear**

- deep and permanent, long-felt cares and troubles, fear for one's loved ones and a way of life

- 1) The function of the orgasm – W.R.
- 2) Character Analysis – W.R.
- 3) Reich the and his work – Boadella
- 4) Bodymind – Ken Dychtwald

**FREUDIAN FIXATIONS**

**AND**

**THE STAGES OF**

**CHILDHOOD DEVELOPMENT**

## **OVERVIEW**

There are two great vital drives – the drive for self-preservation and the drive towards procreation (i.e., the preservation of the species). The latter, which Freud gave the name libido or sexual energy, was frequently blocked by the repressing forces of civilization. Freud originally meant “sex” to be understood in the ordinary everyday sense, but later he decided to use it in a much wider connotation to apply to any pleasurable sensation relating to the body functions, and, also, to such feelings as tenderness, pleasure in work, and friendship. Noting that three orifices of the body – the mouth, the anus, and the genitals – were particularly associated with libidinous satisfactions, he postulated that interest in them developed in a definite chronological sequence from the moment of birth onwards.

### **I. ORAL**

The first infantile stage of development is the oral phase. This phase extends from birth to approximately 18 months and centers around feeding and the organs



connected with that function – the mouth, the lips, and the tongue. The infant obtains life-sustaining nourishment and also gains pleasure through the act of sucking. To the new-born child the mouth is the primary organ of pleasure for it is through the mouth that he makes contact with his first object of desire, the mother's breast. As the baby grows older feeling of frustration and anxiety are more likely to be experienced as a result of scheduled feedings, increased time lapses between feedings, and eventual weaning. When the breast is withdrawn or not available he gains a substitute satisfaction by sucking his thumb. Gratification of oral needs brings about a state of freedom from tension and induces sleep. Adults take pleasure in eating, smoking, kissing, and the more overly sexual acts connected with the mouth. According to Karl Abraham (1924) people whose early oral needs have been excessively frustrated turn out to be pessimists. Individuals whose oral needs have been gratified tend to have a more optimistic view of the world.

## **IA. ORAL SADISTIC PERIOD**

At this time the baby passes into a second oral phase after the teeth emerge. This phase is characterized by the manipulation of others, through such diverse means as biting, cooing, closing the mouth, smiling, and crying. The baby's initial defense against anxiety takes the usual form of thumb sucking.

Oral needs are gratified in a variety of ways, including sucking on candy, chewing gum, biting pencils, overeating, smoking cigarettes, "chewing out" other people, and making biting, sarcastic remarks.

## **II. ANAL**

The oral phase is succeeded by the anal phase. It occurs between the ages of 18 months and 3 years. It is characterized by an aim to expel aggressively and later the ability to control the anal sphincter developing towards the end of the first year.

The disgust that those who train the child and the shame the child is made to feel may contribute toward a lowered sense of self-esteem. In reaction, the child may respond by stubborn assertiveness, contrary rebelliousness, and the determination to be in control,

meticulously clean, excessively punctual, and quite parsimonious in handling possessions.

## **II. SADISTIC-ANAL PHASE**

Because this period is characterized by satisfaction gained through aggressive behavior and through the excretory function, Freud called it the sadistic-anal phase of development.

The active orientation is often characterized by what Freud considered the masculine qualities of dominance and sadism, while the passive orientation is usually marked by the feminine qualities of voyeurism and masochism.

### **IIA. EARLY SADISTIC ANAL**

During the period, the child receives satisfaction by destroying or losing objects. The child takes revenge on the parents for initiating the frustration of toilet training.

### **IIB. LATE SADISTIC ANAL**

A friendly interest towards objects develops, which stems from the erotic satisfaction experienced during toilet training. The act of defecating is pleasurable. If the parents are loving and praise this behavior, the child is

likely to grow into a generous adult. If the parents reject the “gift” in a punitive fashion, the infant may obtain another method of obtaining anal pleasure – withholding the feces until the pressure becomes both painful and erotically stimulating. This lays the foundation for the *anal character* who, as an adult, keeps and possesses objects in an excessively neat and orderly fashion. This becomes transformed into an anal triad of orderliness, stinginess and obstinacy.

### **III. PHALLIC**

At approximately age three or four the child enters into a third, or phallic phase of infantile development, in which the genital area becomes the leading erogenous zone.

The child’s experiences with masturbation and its subsequent suppression help to form the foundation of psychosexual development as did earlier experiences with weaning and toilet training. The child loves and wants to possess those who give him pleasure. He hates and wants to annihilate those who stand in his way and frustrate him. He becomes curious about sexual differences. He wants

to love and be loved, to be admired and to be like those he admires.

At puberty, there is a reawakening of the sexual aim and the genital period is begun. The aim of *Eros* is usually genital union with a person of the opposite sex. Also, the vagina finally obtains the same status for girls that the male organ had for them during infancy.

This is a phase from which fear of the female genital and envy of the male genital originate.

### **III. OEDIPUS**

The phallic phase begins about the end of the third year when the boy's interest becomes centered upon his penis. The Oedipus complex finally comes to an end about the fourth or fifth year, primarily because of the boy's fears that his illicit desires might be punished by his father with castration (the castration complex), and is succeeded by the latency period, during which sexuality becomes virtually dormant or at any rate ceases to show any further qualitative developments and remains so right up to the period of puberty.

Freud believed that preceding the phallic stage, the infant boy forms an identification with his father – he wants to be his father, he wants to have his mother.

Inevitably, identification takes on a tone of hostility. The father is seen as a rival and the boy desires to do away with him and to possess the mother in a sexual relationship. This condition of rivalry toward the father and the incestuous feelings toward the mother is known as the Oedipus complex. During the Oedipal period, his feminine nature may lead him to display affection toward his father and hostility toward his mother, while at the same time, his masculine tendency disposes him toward hostility for father and lust for mother.

To Freud, the castration complex begins after the young boy, who has assumed that all other people, including girls, have genitals like his own, becomes aware of the absence of a penis on girls. This becomes the greatest emotional shock of his life. He is forced into the conclusion that the girl has had her penis cut off. He may develop castration anxiety – the threat of castration. The boy represses his impulses toward sexual activity,

including his fantasies of carrying out a seduction of his mother.

This interest soon gives rise to a feeling of sexual attraction towards the mother associated with the feelings of jealousy or resentment directed against the father, who has thus become the boy's rival in his mother's affections. This is the Oedipus complex, named after the king in Sophocles' play Oedipus Rex who killed his father and married his mother.

#### **IV. ELECTRA**

The Electra complex, from a Greek myth in which Elektra connives at the death of her mother Clytemnestra who had murdered her father Agamemnon – only occurs when she had renounced the hope of masculinity and reconciled herself to castration as an accepted fact. In Freud's interpretation the masculine Oedipus complex is resolved by the castration complex and is given up because of castration anxiety, while the feminine complex is *brought about* by the castration complex, when out of the disappointment over the lack of penis the girl turns her love towards the father and rejects the mother. Freud

prior to 1910 believed that each type of neurosis was the result of the regression of libido which had been dammed up by a frustrating environment and therefore flowed back to an earlier stage at which during the course of development it had been partially fixated. Frustration may bring about regression to a stage that was more successfully experienced in the past, one at which large amount of libido remains fixated, and in each neurosis there is assumed to be a specific point of fixation such that the hysteric is said to have regressed to the phallic level, the obsessional to the anal.

Penis Envy – She discovers that boys not only possess different genital equipment, but apparently something extra. She becomes envious of this appendage, feels cheated, and desires to have a penis. Penis envy is often expressed as a wish to be a boy, or later it may show itself as a desire to have a man, carried over into a wish to have a baby.

Female Oedipus complex – desire for sexual intercourse with the father and accompanying feelings of hostility for the mother.



It is possible that the girl will refuse to recognize her femininity, hold permanently to the masculine complex and resist attempts to suppress masturbation. Or, the girl will completely inhibit her masculine disposition, renounce masturbatory activity, turn away from the mother, and repress the greater part of all her sexual instinct.

The female Oedipus complex is only incompletely resolved by a gradual realization that the girl may lose the love of her mother and that sexual intercourse with her father is not forthcoming.

## **V. LATENT**

From the fifth or sixth year until puberty there is a standstill in sexual development. This period in the child's life is the latency stage.

When there is a particularly strong and persistent attachment to libidinal gratification from a particular object of infancy, one speaks of fixation. Fixations are usually unconscious and often serve as a focus for symptom formation later in life. Conflicts or difficulties

experienced at these stages may lead to fixation of libido at this point or at a later period cause a regression to it. <sup>1,2,3</sup>

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## GLOSSARY

The following abbreviations are used to indicate primary associations: (B) Bioenergy; (J) Analytical Psychotherapy; (PA) Psychoanalysis; (PC) Person-Centered Therapy; (TA) Transactional Analysis.

**Actualizing Tendency (PC).** An innate human predisposition toward growth and fulfilling one's potential.

**Adapted Child (TA).** An ego state with two functions, either conforming or rebelling. One's adapted child is highly complex and contains one's script.

**Agape.** Unconditional love for humanity (literally, "love between friends").

**Anal Phase (PA).** Freud's second phase of psychosexual development, extending roughly from the ages of 18 months to 3 years, in which libidinal pleasure is derived from retaining and expelling feces.

**Anima (J).** The feminine component of the male personality.

**Animus (J).** The masculine component of the female personality.

**Archetypes (J).** Primordial images that serve as the building blocks of the collective unconscious. Examples include the Wise Old Man, The Earth Mother, the Anima, the Animus, and the Shadow.

**Catharsis (PA).** The expression and discharge of repressed emotions.

**Character Structure (B).** One's habitual way of being or common way of behaving; the five major types are oral (dependent, fearful of abandonment), schizoid (thought and emotion split off from one another), narcissistic (sense of superiority), masochistic (submissive, fearful of emotional expression), and rigid unable to give, holding back).

**Ego (PA).** The part of the mind that mediates between external reality and inner wishes and impulses. The ego or self, the prime function of which is to test reality in order that organism's reaction shall be in terms of what is, rather than uncoordinated responses or those aiming at direct or immediate satisfaction.

**Electra Complex (PA).** Erotic attraction of the female child for the father, with accompanying hostility for her mother; the female equivalent of the Oedipus complex.

**Empathy.** Accurately and deeply feeling someone else's expressed emotions, concerns or situation.

**Eros (PA).** The life instinct, fueled by libidinal energy and opposed by Thanatos, the instinct.

**Genital Stage (PA).** The final stage of psychosexual development, usually attained in the late adolescence, in which sexual gratification occurs through intercourse and is not limited to specific body areas.

**Hidden Agenda.** The actual goal of an interaction between people which is different from what superficially appears to be the goal.

**Id (PA).** The sum total of biological instincts, including sexual and aggressive impulses. At birth, the id represents the total personality. The new-born baby is a seething mass of impulses or instinctual drive entirely lacking in any directing or guiding consciousness, and because of its impersonal nature is described as the 'id'. Freud leaves little doubt about his belief in a collective unconscious mind. Thus, the 'id' which is capable of being inherited, are harboured residues of the existences of countless egos.

**Inferiority Complex (A).** An exaggeration of feelings of inadequacy and insecurity resulting in defensiveness and neurotic behavior. It is usually, but not always abnormal.

**Latency Period (PA).** An inactive time in psychosexual development that follow the phallic stage and lasts till puberty.

**Libido (PA).** The basic driving force of personality in Freud's system. It includes sexual energy but is not restricted to it.

**Fixation (PA).** A strong attachment to a source of gratification in infancy that persists in adulthood.

**Free Child (TA).** That part of personality that is spontaneous, eager, and playful. People who possess too much Free Child lack self-control.

**Natural Child (TA).** A form of the Child ego state that is impulsive, spontaneous and creative. Contrast with adapted child.

**Negative Ego.** This is the part of your ego that feels better than or worse than everyone else. It will do anything to destroy love and relationships.

**Oedipus Complex (PA).** Erotic attraction of the male child for his mother, accompanied by hostility toward the father.

**Oral Phase (PA).** The earliest phase of psychosexual development, extending from birth to approximately 18 months, in which most libidinal gratification occurs through biting, sucking and oral contact.

**Persona (J).** A disguised or masked attitude useful with interacting with one's environment but frequently at

variance with true identity, e.g., the super sweet mask we put on when beginning a new relationship.

**Phallic Phase (PA).** The third stage of psychosexual development in which libidinous gratification occurs through direct experience with the genitals. This phase occurs between the stages of three and seven and involves a desire to possess the parent of the opposite sex and to replace the parent of the same sex.

**Self-actualization (PC).** A basic human drive toward growth, completeness and fulfillment.

**Shadow (J).** That aspect of the unconscious that contains the opposite of what we feel ourselves to be. The shadow is that part of ourself to which we are not sufficiently well related.

**Superego (PA).** A portion of the personality structure that grows out of the ego and reflects early moral training and parental injunction. It arises out of the need to face society's moral prohibitions.

**Thanatos (PA).** An instinct toward death and self-destruction, posited by Freud to oppose and balance Eros, the life instinct. Suicide is a failure to preserve the self by forms of self-damage from unconsciously motivated accidents, self-inflicted diseases, addictions, and failures, to the more dramatic but not infrequent crimes committed with the unconscious intent of being found out.





## **Chapter 1: Phase I**

The Acute Inflammatory Phase: The initial reaction to injury is inflammation. Joints become swollen and tender. We refer to this as the acute inflammatory phase, which may last up to 72 hours. Signs of inflammation include heat, pain, swelling and redness.

Inflammation results from damage to nerves, muscle tissue and ligaments. Ligaments are fibrous tissue that attach bones together. Torn ligaments allow excessive movement which can create pinching of nerves. This in turn can cause weakness, pain, tingling and numbness. Completely destroyed nerve cells cannot regenerate. Consequently, muscle fibers that attempt to grow cannot mature in the absence of nerve supply.

## **Chapter 2:Phase II**

***The Repair or Regeneration Phase:*** This lasts from 72 hours to eight weeks. During this phase the body seems to lay down scar tissue to correct the injury. It's laid down in an irregular pattern different from that of the original injury. The repair tissue is thus less elastic and less flexible. This results in stiffness and pain. Rigid scar tissue can interfere with the growth of nerves. The lack of nerve supply results in useless muscle tissue



### **Chapter 3: Phase III**

***The Remodeling Phase:*** The scar tissue takes its final form in the remodeling phase. This last stage takes from three weeks to 12 months to complete healing process. Scar tissue initially forms to help muscles withstand stress but can continue to contract up to six months following an injury. Unless continually mobilized, the scar tissue fibers can stick together inhibiting movement. An inactive lifestyle can further lessen mobility and range of motion.

**Summary:** To summarize, the initial reaction to injury is inflammation. Repair of damaged tissue begins within 72 hours. Scar tissue, rigid and less flexible can interfere with nerve supply, resulting in weak and useless muscle. Finally, the collagen fibers composing the repair tissue contract to protect the muscles from additional stress. This results in less and less range of motion. Although standard emergency room treatment may be necessary following an accident, chiropractic reconstructive care is essential to recovery.

## **Chapter 4: Medical Treatment**

**Medical Treatment** is usually limited to immobilization of the injury with a cervical collar. Pain medication, muscle relaxants and bed rest are often prescribed. Scar tissue formed in an immobile state results in sore, weak less flexible and more sensitive muscles. There is an increased chance of flare ups and re-injury. Lack of motion in one level of the spine causes excessive motion in other areas.

According to studies, 39% of whiplash victims develop degenerative disc disease or thinning of the discs. This results in osteoarthritis. Osteoarthritis forms in the neck as a result of disc degeneration. It can cause pain and stiffness and limitation of motion. Degenerative disc disease caused by immobile scar tissue ensures future pain and disability.

## **Chapter 5: Reconstructive Chiropractic Care**

**Reconstructive Chiropractic Care** is essential for total recovery and ideally begins within eight weeks of injury. Mobilization of the joints of the neck aids in the laying of collagen which enables fibers to glide rather than stick. Looser scar tissue allows for greater freedom of movement. What's unique about chiropractic care is spinal manipulation. That is gentle realignment of the parts of the spine to restore good posture and natural movement. Pettibon fulcrum exercises use foam wedges to allow you to stretch injured areas. Isometric exercises can be used to increase range of motion in the ligaments of the neck. Deep tissue and trigger point massage can soften and relaxed tight, stiff muscles. Chiropractic Biophysics, cervical tractioning and regular adjustments can help to restore normal curvature of the neck and improved posture. Ligament rehabilitation is not complete until the muscles spanning the joint are fully restored to their former power. The goal of soft tissue rehabilitation is recovery of full strength, normal range of motion and freedom from pain.

Depending on the severity of the damage, chiropractic care may be needed up to one year following your injury to keep scar loose you and maintain range of motion.

## **Conclusion:**

Whiplash injury can be dangerous and debilitating. Chiropractic care seeks to restore normal range of motion and full muscle strength. Freedom from pain, improved posture and the prevention of disc generation are the direct results of your commitment to honor your chiropractor's plan for healing. Honor your body. Take the time to explore chiropractic care for your whiplash injury and recover the right way.

## **About the Author**

**Dr. Raphael Rettner**, a Palmer College of Chiropractic West graduate and in practice since 1982, is dedicated to providing compassionate, quality health care. The Healing Center is a place where you can get assistance in dealing with your health issues. He is motivated to assist you in attaining and maintaining optimal health and uses chiropractic to take away interferences from the nervous system so your body can heal itself.

The result of a thorough examination is to determine what is causing your spine to be unstable, so you won't have to keep coming back for the same problem. Gentle, effective adjustments result in optimal performance and relief from pain without having to be painful. Dr. Rettner is committed to getting results. He is dedicated to finding the cause of your health problem rather than just treating the symptoms.

A partnership, with specific goals, is formed between Dr. Rettner and each patient, thus sharing the responsibility of an individual's health. This creates a process whereby both parties become committed to achieving their health related goals. Corrective postural exercises and yoga are incorporated into the treatment, allowing you to take an active part in your healing process.

Dr. Rettner is one of the most highly skilled and respected chiropractors in the United States. He has made numerous radio and T.V. appearances, is the author of *Vegetarian Cooking for People with Allergies* and has produced several DVDs including: *Applied Trigger Points*, *Advanced Healing Techniques*, *Cranial Osteopathy*, *Nurturing Massage* and *Twelve Causes of an Unstable Spine*. He has studied both force and non-force techniques such as Advanced Biostructural Correction, Activator, Applied Kinesiology, Pettibon, Vector Point Cranial and over a dozen others. With a combination of creative thinking and an insatiable quest for knowledge, Dr. Rettner has developed several new and exciting chiropractic techniques. Since 1994 he has taught these in his Applied Trigger Points seminar to chiropractors all across the United States, Australia, Canada and England. You can reach Dr. Rettner at [drrettner@sbcglobal.net](mailto:drrettner@sbcglobal.net)



