

# AIKIDO AND PSYCHOTHERAPY: A STUDY OF PSYCHOTHERAPISTS WHO ARE AIKIDO PRACTITIONERS

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*ABSTRACT:* Eight psychotherapists who were also highly skilled in Aikido, a non violent Japanese martial art based on the principles of harmony and the peaceful resolution of conflict, participated in this semi-structured interview study investigating how their practice of Aikido informed their psychotherapy practice. Eight themes emerged: Aikido resulted in a mind-body unification which was described as being physically and psychologically healing; being centered in Aikido was essentially the same as being present in therapy; the Aikido strategies of “getting off the line,” blending, and extending were translated and utilized in psychotherapy; *takemusu*, the ability to spontaneously manifest technique or form in Aikido was observed to transfer into therapy practice; Aikido was described as a synthesis of a martial art and spiritual practice, both of which inform their psychotherapy practice; Aikido was viewed to be metaphorically and isomorphically related to psychotherapy. Implications for utilizing Aikido practice in training psychotherapists are discussed.

The moon does not think to be reflected  
nor does the water think to reflect  
in the Hirowasa Pond

-Tesshu

This study of psychotherapists who were also highly skilled Aikidoists investigated how their practice of Aikido, a nonviolent Japanese martial art, informed their psychotherapy practice. Aikido has been practiced by Westerners since shortly after the Second World War. During that time a number of transpersonal psychologists and pioneers including Robert Frager, who founded the Institute of Transpersonal Psychology, and Charles Tart, a leading transpersonal theorist, have been deeply involved in Aikido practice. They have practiced an art, rooted in Asian martial and religious traditions, which overtly states that its aim is to train practitioners to peacefully resolve conflict, or even “to manifest love and harmony in all actions” (Tart, 1987, p.334).

The competent psychotherapist needs to deal effectively, powerfully, and caringly with his or her clients, often in potentially volatile and highly charged emotional situations. Because Aikido deals specifically with conflict and its peaceful resolution, the study of Aikido, complete with its philosophy and practice methods, was seen by the authors as potentially being helpful in keeping therapists grounded, centered, and connected within themselves while simultaneously being more sensitive and aware of the client.

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The importance of developing a certain consciousness in which one is present and autonomous while being intimately interconnected with larger meaning is an important dimension of transpersonal approaches to psychotherapy. Humanistic psychology and humanistic psychotherapists have maintained the importance of being fully present in the existential encounter of therapy. For example, James Bugental (1978) described the therapist's need to be "totally in the situation . . . in body, in emotions, in relating, in thoughts, in every way" (p. 37). This is an excellent description of being centered in Aikido. It is also similar to Rollo May's "total relationship," Carl Rogers' "being present" and Freud's "evenly suspended attention" which they identified as fundamental elements of psychotherapy. The mind/body coordination required in Aikido trains the attention and brings about other changes in consciousness that are central to creating the healing presence so important in therapy. A therapist who can maintain a calm state of mind, free from fears and illusions of the past or of an imagined future, can relate to others compassionately and empathically.

The objective in Aikido is to join one's personal *ki* (energy) with universal *ki* to achieve ultimate harmony (*ai*). Aikido emphasizes working with a partner, rather than grappling or fighting against an opponent as in competitive tournaments. The essence of the practice is the blending of movements and breathing (*waza*) which physically creates harmony in conflictual encounters. Aikido techniques neutralize and control rather than violently defeat an attacker. Training emphasizes form, mutual cooperation, awareness of others, and the coordination of the body's movement with a calm state of mind. Training in Aikido works to establish access to a psychophysiological state in which one responds quickly, precisely, and courageously to physical attacks, including those by multiple attackers.

Aikido has been translated as: "the way of Spiritual Harmony" (Ueshiba, 1984); "the way of being in harmony with universal energy"; "the method or way (do) for the Coordination: Harmony (ai) of Mental Energy or Spirit (ki)" (Westbrook & Ratti, 1970); the "way to union with ki" or the "way to harmony of spirit" (Reed, 1986, p. 104). Reed (1986) provides an interesting discussion of the meaning of the characters comprising Aikido (see Figure 1):

Ai means to fit, harmonize or agree with. The top three strokes were originally joined as a triangle, meaning to combine or close. The square below represents a mouth or opening. The combination suggests sealing an opening, like a lid on a teapot. Ki means spirit, mind, or energy. The top four strokes represent the wavy lines of steam, to which was added the eight-stemmed cross representing four rice grains on a stalk. This combination originally represented the steam rising from cooked rice (the combination of the two is quite similar to the idea of the crucible in alchemical texts representing the place in which transformation occurs, which is of course an important concept in Jungian Therapy). The last character do, means road, path or way of life. The top portion represents hair on top of a human head. The lower left portion once meant legs walking along a path. The combination came to mean a person walking down a road; in a broader sense, a way of life. (p. 105)

Aikido was founded by Morihei Ueshiba who is respectfully referred to as O-Sensei (literally great teacher). In the spring of 1925, 42 year-old-Ueshiba described being



*Figure 1. Aikido calligraphy by Satome Sensei (courtesy of Two Rock Dojo).*

transformed by a divine vision. Ueshiba gave several different accounts of the event over the years and seemed to have gradually fused several separate recountings into this final version:

One day a naval officer entered into a minor disagreement with Ueshiba resulting in his challenging Ueshiba to a kendo (sword) match. Ueshiba consented but remained unarmed. The officer, a high-ranking swordsman, was naturally offended at this affront to his ability and lashed out at Ueshiba furiously. Ueshiba easily escaped the officer's repeated blows and thrusts. When the exhausted officer finally conceded defeat, he asked Ueshiba his secret. "Just prior to your attacks, a beam of light flashed before my eyes, revealing the intended direction. All I did was avoid the streams of white light." (Ueshiba, 1984, p. 38)

Following the contest, Ueshiba went out to his garden to draw water from the well to wash the sweat from his face and hands. Suddenly Ueshiba started to tremble and then felt immobilized.

I felt that the universe suddenly quaked, and that a golden spirit sprang up from the ground, veiled my body, and changed my body into a golden one. At the same time my mind and body became light. I was able to understand the whispering of the birds, and was clearly aware of the mind of God, the Creator of this universe. At that moment I was enlightened: the source of budo is God's love – the spirit of

loving protection for all beings. Endless tears of joy streamed down my cheeks. . . . I understood, Budo is not felling the opponent by our force; nor is it a tool to lead the world into destruction with arms. True budo is to accept the spirit of the universe, keep the peace of the world, correctly produce, protect and cultivate all beings in Nature. I understood, the training of budo is to take God's love, which correctly produces, protects and cultivates all things in Nature, and assimilate and utilize it in our own mind and body. (Ueshiba, 1985, p. 154)

Aikido emerged from a longstanding martial culture which had transformed a system of fighting arts (bugei), devised to inflict injury and death, into martial arts (budo), dedicated to developing self perfection by integrating mind, body, and spirit. In fact, there are many forms of budo, such as Judo (the way of gentleness), Iaido (the way of drawing the sword), Kyudo (the way of the bow), and Wado-ryu Kara-te (school of the way of harmony), that would be worthwhile to study in connection with psychotherapy. Additionally, arts such as Ikebana and Calligraphy are also methods of self-transformation that may be useful to study in relation to psychotherapy. Aikido should not be privileged as a "superior" practice as some authors have seemed to imply (see Friedman, 2005 for examples of romanticizing of Aikido in transpersonal psychology). However, the authors do maintain that Aikido may be particularly attuned to psychotherapy because of its approach to conflict, as well as to intimacy and vulnerability, issues which are also important foci of psychotherapy.

Given this overlap, Aikido offers a possibility of circulating well with psychotherapy. Varela (1989) uses the word "circulation" to refer to a "highly complex dialogue and reciprocal influence between two disparate communities that share a new common ground" (p. 15). One implication of the concept of circulation is that when a person becomes deeply involved in two disparate communities, the circulation between these fields can occur on an internal, personal, even ontological level. While this study primarily focuses on one direction—the circulation between Aikido and psychotherapy, it should be noted that the influence between the two fields is circular and reflexive, not linear.

## METHOD

### *Design*

To study the full range of experiences and conceptualizations of psychotherapists encountering and making use of Aikido in their psychotherapy, a research approach based on Polkinghorne's (1988) narrative method and informed by van Manen's (1990) hermeneutic phenomenology was employed. Semi-structured interviews were conducted in-person with the exception of two telephone interviews, and the results were analyzed thematically. The central question of this research was, "In your experience, does the practice of Aikido inform or affect your practice of psychotherapy? If so, how and in what ways?"

### *Participants*

The study included eight participants, who had practiced Aikido from 7 1/2 to 30 years, and had attained ranks ranging from first kyu (brown belt) to yandan

TABLE 1  
*Years and Type of Aikido and Psychotherapy Practice, and Geographical Location*

Name	Aikido	Psychotherapy	Location
Bob	8 years 1 <sup>st</sup> kyu (brown belt) Yoshinkai (hard)	20 years Jungian Analyst	Eastern Canada
Robert	16 years black belt (first degree) Hombu (softer)	20 years Family Therapy/M. Erickson	Northern CA
Tom	9 years black belt (first degree) Hombu (softer)	19 years M. Erickson, F. Perls, Jung	Northern CA
Earl	15 years black belt (second degree) Hombu (softer)	14 years object relations, Jung, existential, family	Northern CA
Sally	23 years black belt (first degree) Hombu (softer)	25 years Body oriented/energy/breath	Northern CA
Mary	15 years black belt (second degree) Hombu (softer)	15 years body oriented, bioenergetic,	Northern CA
Bruce	30 years black belt (fourth degree) all styles	5 years cognitive-behavioral, NLP, Jung, systemic	Eastern Canada
Rick	16 years black belt (second degree) all styles	17 years existential, Rogerian, family, play, long term insight,	East Coast. USA

*Note:* All participants were given pseudonyms.

(fourth-degree black-belt). Five of the participants practiced in Northern California, one in New England, and two were Canadians from the Toronto area. Six participants were men and two women. Although different styles of Aikido were represented by the participants, from very “soft” to very “hard or severe” there were no noticeable differences in how the subjects viewed aikido informing their psychotherapy practice. The participants had been practicing psychotherapy from 15 to 25 years, including the period before they were licensed. Many had worked in residential or other settings where they practiced counseling under supervision before finishing masters or doctoral work. For example, at the time the interviews took place, one person had just finished a masters program in psychology, but had been practicing counseling for 15 years. The schools of psychotherapy represented by the participants include Jungian Analysis, Cognitive-Behavior Therapy, Existential Therapy, Phenomenologically-Based Therapy, Structural and Strategic Family Therapy, Play Therapy, Body-Oriented Therapy, and Radiance Breath Work. See Table 1 for more information about participants.

### *Data Collection*

*Approach to interviewing.* Semi-structured interviews were conducted to gather accounts focused upon how Aikido practice affects psychotherapy practice, if at all. The goal of these interviews was to gather rich descriptive accounts of each participant’s experience in relation to Aikido and psychotherapy.

To explore the primary issue of Aikido and its relationship with therapy, specific areas to be explored were targeted. The interviewer emphasized personal responsiveness and involvement in order to facilitate an in depth conversation. This approach was based on two considerations: (a) the dynamic unpredictable quality of two human beings meeting in an open, attentive context; and (b) the very special knowledge and experience of the practitioners interviewed. The hope was to

encourage these very well trained practitioners to bring forth experience, ideas, and knowledge not necessarily considered by the researcher.

*Interview schedule.* Several questions designed to open communication between the researcher and the participants as well as provide a situated context for the discussion were formulated prior to the interviews. These orienting or contextualizing questions were as follows:

1. How long have you been practicing Aikido?
2. What type/style of practice are you doing?
3. Could you describe what appealed to you about Aikido initially?
4. Some people understand Aikido to be a movement practice, a spiritual practice, a martial art, an awareness practice, or something else. How do you view Aikido?
5. How long have you been practicing psychotherapy?
6. How would you briefly describe the type/style of psychotherapy you do?

The central or overarching question, “In your experience does the practice of Aikido inform or affect your practice of psychotherapy? If so, how and in what ways?” was then asked. Interested both in the participants’ experience and their interpretations of that experience, follow-up questions were formulated prior to the interviews as a point of reference and means for organizing thoughts. This interview protocol combined aspects of an open-ended interview as well as a semi-structured interview.

The intent was to elicit rich phenomenologically sensitive descriptions which would also capture the interpretations participants have made of their experience doing Aikido and psychotherapy. While it is important to honor the integrity of the interview process as an exploration of an open horizon without being bound to pre-determined questions, such questions were used to assist in focusing the interviews. In addition, questions which emerged spontaneously during the interview were asked, when appropriate, and the researcher was not constrained to ask any of the preformulated questions if it did not seem appropriate.

As a result of the first author’s experience, study of the literature, and a pilot study, this combination of an open-ended and structured format emerged along with the follow-up questions. The primary research question was purposely asked in as broad a manner as possible in order to ascertain the breadth and depth of how Aikido practice informs psychotherapy practice in the lives of the research participants.

Follow-up questions served to focus the interviews more directly to open areas of exploration without prejudicing the answer. The follow-up questions addressed the relationship between being centered, blending, “getting off the line” and extending, the role of *uke*, spirituality, the dojo and *musubi* in Aikido to psychotherapy.

### *Data Analysis*

The participants’ descriptions were audiotaped and transcribed, then subjected to a multi-step analysis based largely upon narrative (Polkinghorne, 1988) and

phenomenological methods (Giorgi, 1985; Kvale, 1988; van Manen, 1990), focused on eliciting themes. This analysis included an impressionistic, intuitive listening to and transcribing the tapes; categorization and coding the transcripts; condensation of the content and structure of meanings expressed; expansion involving theoretical interpretation, conceptual analysis, drawing out metaphors, and explicating narrative structures. Feedback from others during this process was also elicited.

## RESULTS

The central question of this research (“In your experience, does the practice of Aikido inform or affect your practice of psychotherapy? If so, how and in what ways?”) was met by a range of affirmative responses.

It’s in such a total and complete way; it’s so vast for me that it’s like saying how does air affect you? (Mary)

Absolutely, the qualities of flow, of centering; I see energy coming towards me. In any situation that becomes a practice, to listen to the undertows, to listen to fine-tuning, Aikido builds that ability. (Earl)

Yes, it does. There is an interface between the two ... Aikido is a physical manifestation of the intellectual process of psychotherapy. (Rick)

Three participants (Bob, Sally, and Bruce) had not consciously connected Aikido and psychotherapy. One participant (Rick), on the other hand, teaches Aikido to some of his psychotherapy clients. Between these extremes were Robert, Tom, Earl, and Mary who had all consciously connected Aikido and psychotherapy.

Bruce reported that initially he had believed that Aikido was only metaphorically connected to psychotherapy. Some of Sally’s clients who had trained in Aikido had commented to her that Aikido influenced her work more than she herself was aware. It was interesting to observe the effects of questioning the participants during the course of the interview process. Bruce went from being quite cynical and dismissive regarding the connection between Aikido and psychotherapy in the beginning of the initial interview, to actually taking notes and delivering a thoughtful, passionate monologue during the follow-up interview about how Aikido does inform his psychotherapy. All the participants stated that their Aikido practice had impacted their psychotherapy practice a great deal. The specific effects are discussed in the thematic analysis below.

### *Major Themes*

Eight major themes emerged from the data:

Theme #1: The practice of Aikido results in a mind-body unification which is physically and psychologically healing.

Theme #2: The Aikido practice of being centered is essentially the same as being present in therapy.

- Theme #3: The Aikido strategy of “getting off the line” creates a safe space within conflict. This feeling of safety allows one to be more completely present in Aikido and in therapy.
- Theme #4: The Aikido strategy of blending by-passes resistance, and is metaphorically transferred and utilized in therapy.
- Theme #5: The Aikido strategy of extension unbalances one’s partner, allowing for successful redirection and completion of technique. Extension is utilized psychologically in therapy to depotentiate resistance and to allow clients to fully explore their internal or interpersonal reality.
- Theme #6: Takemusu (spontaneously dealing effectively, safely, and compassionately with conflict in Aikido) transfers directly into the ability to be relaxed, present, flexible, and spontaneous in therapy while being connected with self and other.
- Theme #7: Aikido and psychotherapy stem from the same source, love. Aikido is perceived as a synthesis of a martial art and a spiritual practice advocating love and peaceful resolution of conflict, which deeply affects their psychotherapy practice.
- Theme #8: There is a metaphorical and isomorphic relationship between Aikido and psychotherapy on a feeling and a process level.

### *Thematic Analysis*

- Theme #1: The practice of Aikido results in a mind-body unification which is physically and psychologically healing.

The participants in this study reported that Aikido practice facilitated some form of energy movement into and through split-off or repressed areas of their psyche-soma such that whatever was out of balance or stuck was somehow rebalanced, freed up, and “purified.” Seven participants specifically reported having some aspect of their lives balanced, transformed, or healed, as a result of their Aikido practice. Tom, Earl, Sally, Mary, Bruce, and Rick all discussed healing in Aikido relating to fear. For Mary, the fear was of being joyful. For Tom, Earl, Sally, Bruce, and Rick the fear was connected to physical attack, and was also connected to their relationship with anger. Bob felt that Aikido was physically as well as emotionally healing. Robert was the only participant who did not report that Aikido balanced, transformed, or healed him in some way.

Mary remembered being taught in her first week of training that “Aikido is an art that was designed to flush to the surface any emotions and unfinished business that you have as regards violence . . . so don’t be surprised if you find yourself experiencing some very deep emotions on the mat that you would never have expected.” Mary indicated that she was very serious, intellectual, and joyless; her unfinished business revolved around “love, beauty, flow, bodies in motion like big cats, and joy.” Her first openings in Aikido were “at the heart chakra”; they were “openings of joy.”

This surfacing of emotions can come in many forms. Earl stated that Aikido saved his life. He reported being full of tremendous anger, rage, and hard, bitter energy,



which Aikido helped soften and loosen. When Earl found Aikido, “it was like coming home. I could work with my aggression.”

The surfacing of unfinished business appears to be connected with balance, flow, and movement of energy into previously “stuck” or split-off places in the psychesoma. The participants in this study indicated that during the practice of Aikido, whatever was out of balance for them was somehow rebalanced.

Theme #2: Being centered in Aikido is essentially the same as being present in therapy.

In order to skillfully execute certain movements in Aikido, such as blending and harmonizing with one’s partner, one cultivates a certain state called “being centered.” The participants described being centered as a particular experience of embodiment characterized by feeling unattached and balanced while possessing freedom of movement. This experience includes a connection to the universe or ground which is greater than an interpersonal connection. Mary stated that during Aikido practice, she works to be centered, relaxed, and safe. When she succeeds, she is able to respond calmly and effectively to the most vigorous attacks. She does the same thing in therapy. Aikido provides physical cues to assist her in knowing if she is centered and present. These physical cues also assist her in returning to a centered state if she has retreated into her own fear, anger, or desire to please.

Conversely, the participants indicated that if they are not centered, neither Aikido nor therapy works as well. In a statement echoed by all the participants, Tom stated, “If I’m not present in Aikido, Aikido does not work.” In addition, one may get injured or injure someone else. While true in therapy, the feedback may be less clear and immediate. While all the participants in this study stated that being centered in Aikido parallels being present in therapy, some participants noted a physical difference. When practicing Aikido, people are physically moving around, while in therapy, people mostly sit. Sally said she will literally move to be next to her clients when she literally wants to share their perspective, which is similar to the Aikido move of blending.

Earl noted that Aikido, as a partnership practice, builds a quality of listening that can extend to any encounter or intimate relationship including the therapist/client relationship. Tom stated that “Aikido practice promotes listening, a quality of aliveness; it’s the opposite of being in a hypnotic trance.” Listening for him is alive, alert, and aware. Physiologically he looks at this as wide peripheral vision: “I can see the entire situation. And my ability to do that really has profound effect on how I deal with the world because I can see a lot instead of just being narrowed.”

Most participants would agree with Robert, who noted that,

Aikido is not just a mat practice; the mat practice is a practice to learn a certain state of being. Aikido is no longer what you do on the mat, Aikido is what you do. In Aikido you have some crazy attacker coming at you, and your goal is to be relaxed and centered and calm and able to absorb and join with, just be there with that energy, in a way that can accept and redirect it. A lot of what you do in

therapy is the same thing – just be there and not be overwhelmed by what’s going on, and that has a very calming effect.

In discussing presence and the quality of the encounter in Aikido and therapy, Earl stated a common opinion regarding presence:

A lot of psychotherapeutic work is training people how to be good clients. Learning how to learn is inherent in Aikido because the practice is one of going back again and again and again to the same simple techniques. It’s the same simple facing another person and energetically meeting, that is physically meeting and dealing with that energy, in certain characteristic patterns (katas) that aren’t all that complex. But what is subtle and deep is the quality of the meeting. How present we are, how open we are to change, how open we are to really being there fully.

Theme #3: The Aikido strategy of “getting off the line” creates a safe space within conflict. This feeling of safety allows one to be more completely present in Aikido and in therapy.

On the most basic level, “getting off the line” is just that, getting out of the line of attack and moving out of the way. In Aikido, one makes space by physically moving out of the way, blending such that the attacker freely moves by. Several participants discussed making space by allowing the client to freely explore their own process, while the therapist gets out of the way. Participants have different ways of creating space for their clients depending on personal preference and theoretical orientation. They indicate that the way they do it in therapy is consistent with how they create and maintain space in Aikido. Sally and Rick stated that they will sometimes get up and move to sit beside their clients; others said that they imagine themselves moving aside; and Mary stated that she regards and visualizes herself as being permeable. Her clients’ “emotions can blow through me like the wind.” This permeability has allowed her to be present and compassionate in therapy without absorbing the impact of their emotional expression. The participants in this study shared the common theme of opening up space for their clients to completely express their energy.

“Getting off the line” and experiencing the attacker moving through without hurting the practitioner has been a transformative experience for several of the participants in this study. Mary had the experience in Aikido of discovering that there were ways that she could change herself, rather than the outer world, which instantly solved a problem. Up until that experience, Mary had focused more on how she could change the outer world. It was a new insight for her that she could change how she did things without compromising herself.

Theme #4: The strategy of blending in Aikido by-passes resistance and is metaphorically transferred and utilized in therapy.

In Aikido, resistance is not bad; it is energy directed in a certain direction. Any energy can be met, blended with, and peacefully redirected if one is centered. The other is not to be blamed for resisting. As Robert stated,

In Aikido if something doesn't feel right in your interaction with your partner, you adjust something. You don't blame them for doing it improperly. In traditional psychotherapy, there is a lot of discussion about client resistance, understanding, interpreting and frequently blaming the client for their resistance, instead of looking at why they are resisting: 'What is it that I'm doing that may be provoking the resistance?'

In Robert's experience, if the client is resistant, that usually means he is missing something. He reframes resistance into energy which he needs to skillfully blend with (understand, feel, explore, etc.) without merging and losing his boundaries. Resistance arises when he is not adequately joining with the client's energy or perspective. From this perspective, resistance is a cue for the therapist to adjust in some way to the client's "energy."

Robert continued, "The more you practice, the more you can see that if you're not able to join [blend] with someone, it's because you don't want to. Joining is how much you're willing to let your energy go the way their energy is going, like it or not. If you are stuck in your transference, you resist." Resistance for Robert is not client reluctance to change as much as it represents the therapist's inability to connect and blend with the client. Robert continued by stating that this practice requires that he feel comfortable with the ambiguity of not knowing. He trusts that if he is present, a satisfactory resolution will result.

In Robert's view, resistance is totally bypassed when a complete blend is made. Bruce coined the term "comfort in shared space" to describe being comfortably present in close proximity with another person. Robert noted that in Aikido one develops this comfort level through repeated practice of increasing contact rather than trying to pull away or punch back:

If someone grabs your wrist, what you really want to do is increase the contact on your wrist and at the same time soften yourself so that there is a fuller contact between you and the attacker, and then subtly turn and arrange your body in such a way that you're able to be present, soft, relaxed, and connected with them . . . You don't have to do a whole lot, you simply join with whatever they're doing and something good will happen. (p. 143)

Resistance, from the perspective of Robert, only occurs if the therapist is trying to take the client somewhere he or she does not want to go. If nage (the one who is attacked) is doing everything right, uke (the attacker, the one who falls) doesn't think to resist. There is literally no opening to resist into, and this can also be true in therapy. Clients don't think or feel like resisting. The responsibility, in this perspective, is placed with the therapist to blend with and utilize what is usually termed "resistance" as a vehicle for growth and understanding.

Robert referred to this process as learning that you don't have to give up your center. It is possible to blend with a client and even agree you are an "asshole," without that admission affecting your confidence or competence. This is accomplished with genuine interest, not by disqualifying the client's point of view, but by attempting to

understand it. According to Robert, this results in “not having to spend lots of energy defending yourself from your clients’ energy or accusations.”

Mary recalled a time when she thought a client was gearing up to become physically assaultive during therapy. Mary firmly said to her, “I want to remind you, I am a black belt in Aikido.” The woman immediately calmed down. Mary interpreted this as meaning that her client needed a very clear and firm boundary. When she could feel that boundary she was able to relax.

Rick provided a case vignette of blending with, and supporting, a client who had come to see him for a weight problem.

It occurred to me at one point in time that this guy is never going to lose weight for two reasons: first, I’m apparently the only friend he has and he’s getting too much out of my listening to him and exchanging a sense of care for him. If he loses weight, he’s not going to have any reason to come and see me any more. So I addressed the first fact directly in the therapy by saying, “If you didn’t come and see me on a Wednesday night, where would you go? What would you be doing with the time, and who else do you have in your life that talks with you about this?” We talked about this dependence as it was related to his need to feel cared for and feel nurtured. Then I asked him to become more aware of how he was nurtured. I shifted the approach entirely. He was still trying to come for these behavioral types of changes and I said, “You know, I don’t want you to stop buying cupcakes, I want you to buy as many as you want, but what I really want you to do is, instead of telling me how, ‘gees you looked around in the car and there were six wrappers on the floor and you couldn’t even imagine how you ate 6 cupcakes in the ride between here and there.’ I want you to buy those cupcakes, notice opening that pack, and savor each one, really taste it, really fully understand what you’re eating. At some point, read the ingredients, and think about it, what it is that you are having here.

Gradually, Rick said, this client started gourmet cooking, made “great tasting” meals, and stopped overeating.

Theme #5: The Aikido strategy of extension unbalances one’s partner, allowing for successful redirection and completion of technique. Extension is utilized psychologically in therapy to depotentiate resistance and to allow clients to fully explore their internal or interpersonal reality.

Extending is a continuation of blending. To extend or lead in Aikido is to continue moving in the direction of the attack. This movement unbalances the attacker, who can then be redirected. As O’Sensei stated, Aikido allows the “completion of everyone’s mission” (Ueshiba, 1985, p. 179). The participants reported looking at symptomatology as an interruption, or disconnection, blocking the “completion” of the client’s mission. Psychotherapy for the participants involves allowing energy to complete itself, by skillfully blending, extending, and redirecting it. Therapeutically, extension can mean honoring and assisting the client’s energetic direction. For example, Rick discovered that women who have been sexually abused respond very powerfully to *ushiro kubishimi* (rear choke hold). He will judiciously “attack”

clients with *ushiro kubishimi* to elicit their very real here-and-now feelings regarding being held and attacked. These feelings resonate with earlier traumatic experience. Rick stated that he then has “core, in-the-present feelings and experience to work with, and it increases the opportunity to become empowered because you are addressing the problem at its source and dealing with it in an active physical way.”

Theme #6: *Takemusu* (spontaneously dealing effectively, safely, and compassionately with conflict in Aikido) transfers directly into the ability to be relaxed, present, flexible, and spontaneous in therapy.

*Takemusu*, according to Mary, is “the ability to spontaneously allow the creation of technique or form to come through your body.” In Aikido, this refers to developing an awareness, a skill level, a sensitivity so embodied that techniques appropriate to the moment just seem to emerge spontaneously. The focus is not on executing technique, but rather on being so fully in the present, so open and receptive that whatever needs to occur in the moment will naturally occur due to the quality of his or her presence in the moment and connection to self, other, and the larger reality.

For Mary, one aspect of *takemusu* involves feeling that she is the center of the universe. At such times she experiences a kinesthetically felt energy flow including images and other intuitive knowledge. This feeling occurs on the mat, in working on her own life, and in therapy with her clients. She stated that is what she teaches in psychotherapy, only it is not in the form of martial technique.

Earl discussed the notion of ripeness: “To listen to when the situation is ripe is the essence of Aikido. You don’t do a technique until it’s ripe. It can’t be done until it’s ripe . . . The same is true of psychotherapy. . . . You can bang at the door forever until it’s ripe and when it’s ripe, people usually get it for themselves.

Bob noted that after learning the basic moves “the whole thing can go in many different directions” implying that there are many possible moves or interventions one can make if one is centered and present in the moment:

I was seeing this young guy and he comes in one day and said that what I had said to him last week had changed his life. His life would never be the same and I was thinking “Oh my, what did I say last week?” So he said, I was going on about my brother and father, blaming them for this and for that and you said, “Oh, give me a break.” I don’t remember saying that, it was pretty spontaneous. He was just rattling on. It was boring. As a quote, unquote, “intervention” it just wouldn’t have worked.

Mary recalled spontaneously yelling at a woman who was verbally abusing herself. “One time I let the impulse rip through me and I just yelled at her and said, ‘Stop that. I do not let that happen in here. I do not let people talk about themselves like that in my presence. Now knock it off,’ just like that, and it worked.” Mary described this as a “loving attack.” It interrupted the client’s unconscious pattern of self-abuse and shocked her into awareness. After such a strong statement, Mary was concerned that she had moved off center, so she immediately became receptive and re-centered herself.

The participants reported that Aikido develops an “intuitive” knowing which sensitizes them to intent, both in Aikido and therapy. This intuitive knowing helps them differentiate a real attack from something that is not an attack, but may look or feel like one. Aikido also develops a sense of trust in one’s physicality when confronted with aggression. The combination of the development of an intuitive sense, trust in their own physicality, and commensurate strategies for dealing with conflict has been a great help to their ability to be present, congruent, relaxed, and effective in intense, emotionally charged situations.

Bob stated that before practicing Aikido he had had a difficult time dealing with angry clients. Two weeks before our interview he had been working with a man who was,

raging and I could take it. I would meet him right there and I could steer that energy, not right back in his face, but I could take that energy. We could go with it. We could move with it and eventually it came around and back to him and he could own it. That was exciting. . . . That was freestyle . . . In my mind’s eye I was standing in an Aikido stance.

Bob went on to say that therapists are not taught how to handle anger, so “we avoid it, we deny it, we get cerebral about it, but I think generally speaking we are scared of it . . . But when you can decipher what the flames were, it is, ‘Ah, that is what you’re angry about. Now I know.’” The participants indicated that Aikido provides them with an embodied practice of learning how to safely remain centered and engaged in conflictual situations and the learning directly informs their ability to deal with angry clients in an authentic, win-win manner.

Bob notes that the immediacy, the in-the-moment, here-and-now quality of Aikido requires a “particular kind of honesty. You come out to the mat and you are who you are. There is a kind of almost transparent nudity to the thing, an honesty. You meet people as they are; it’s just you and the movements.” If an attack is coming, one needs to be very alert to the intensity, speed, and focus of the attack in order to respond effectively and safely. This has led participants to appreciate being present, aware, and congruent to whatever “truth” is manifest in the moment and trust that they will then be able to “move”/interact appropriately to whatever emerges. Of course, they all acknowledge that *takemusu* does not always occur but, at times, it does.

Theme #7: Aikido and psychotherapy stem from the same source: love. Aikido is a synthesis of a martial art and a spiritual practice advocating love and peaceful resolution of conflict, and their psychotherapy practice is deeply affected by this view.

Rick said it most directly, although all the participants seemed to agree that both psychotherapy and Aikido stem from the same source—love. Rick mentioned that in Bettelheim’s (1982) book, *Freud and Man’s Soul*, Freud is quoted as saying in a letter to Jung that “Psychotherapy is a cure through love.” Similarly O’Sensei said that, “As *ai* (harmony) is common with *ai* (love), I decided to name my unique budo Aikido. . . . True budo is a work of love,” and added that Aikido “is the loving

protection of all beings with a spirit of reconciliation” (Ueshiba, 1985, pp. 177–79). Ueshiba equated aiki with “the purest manifestation of love” (Stevens, 1993, p. 30).

Bob said that in psychotherapy, “It’s the relationship that heals, not the intervention . . . it’s the love that heals. Ultimately [psychotherapy] is a spiritual relationship.”

All the participants indicated that Aikido was, in some way, a spiritual practice for them. While Tom, Bruce, and Rick voiced interest in Aikido as a spiritual practice, they did not elaborate on that aspect of their practice. Bob, Robert, Earl, Sally, and Mary all discussed Aikido and spirituality more fully. The participants’ experience with Aikido as a spiritual as well as a martial practice is an important finding of this study.

Rather than being a quiet, reflective meditative practice, Aikido is seen as being an active, engaged practice which connects everyday reality with spirituality. Bruce noted that while Aikido has a lot in common with other disciplines like yoga or meditation, Aikido is good at teaching how to keep your center when you are in conflict. “Aikido runs on the supposition that you are dealing in the world.”

Bob stated that Aikido “takes you into the spiritual dimension from a down-to-earth, pragmatic way.” He continued,

So often spirituality is in a chapel, an out-of-the-body experiencing, an ungrounded experience. I think why I was drawn so much to the East was this sort of here-now Zen approach. Being able to see the magic, the mystery in the very ordinary. And not having to be in some blissful out-of-the body state.

Mary said,

I think of Aikido on the whole as being a spiritual practice, a spiritual path, a lifestyle. I also believe, as O’Sensei said, that it’s not a religion. It’s a lifestyle or a practice that can embrace whatever religion or practice someone would like to pursue. For me it’s been a very total spiritual practice. I tend to class it in my mind as being a tantric practice. As I understand the concept of tantra it means the type of spiritual path where one dives into experience, and learns how to consciously witness the experience without forgetting oneself. Aikido is a diving into experience. Most people have only heard of tantra in relation to sexual practice, but I think the other side of our passion is conflict.

Several of the therapists in this study also reported that Aikido has provided an embodied, practical, and spiritually-based practice for them to contextualize and understand their own experience.

The participants did not view Aikido solely as a spiritual practice, however. When asked the question, “Some people view Aikido as a martial art, a movement practice, a spiritual practice, and an awareness practice. How do you view Aikido?” the clear consensus was that Aikido includes all of the above practices. Rick stated it most clearly when he said Aikido is

All of those simultaneously. If you just practice any one of those as a part, you don't have it. You have an approximation, or a segment of it. To me it would be the same as, if I go play catch, I'm doing a physical activity and it is related to baseball but it is not baseball. So, if I do it as an awareness activity, then that's only catch. If I do it as a martial art, then that's only batting. If I do it only as a spiritual practice, then it's only play-making, it's not the whole thing.

Bruce and Sally probably anchor the opposite poles among the participants with regard to coming to Aikido from a physical versus spiritual perspective. In Bruce's opinion, the cognitive-behavioral approach is very similar to the Japanese view of training and life. If "you change your behaviors, how you act, how you do, then you get into how you be. The idea is 'Don't worry so much about thinking about it, just do this, do the right way and trust.'" Aikido practice, according to Bruce, is grounded in the physical doing of the practice, which contains the potential for personal transformation. In contrast, Sally became involved in the physical practice through the energetic and spiritual dimension, and learned to appreciate the physicality of practice. This may be a matter of personal style and preference, and related to the philosophy and style of one's teacher. O'Sensei certainly embodied both ends of the physical-spiritual continuum. Aikido, then, is viewed by the participants as being a composite of spiritual, martial, movement, and awareness practice.

While all of the participants viewed Ueshiba as a "distant mentor" and were very appreciative of his spirituality and reported "supernatural" experiences, they were not expecting to have similar transformational experiences themselves. They practiced Aikido for their own self development and continued to practice because they found the practice to be profoundly healing and helpful in living their lives.

Theme #8: There is a metaphorical and isomorphic relationship between Aikido and psychotherapy on a feeling and a process level.

Rick stated that if he examines the philosophy behind the physical aspect of an Aikido technique, he will have a metaphor that will be immediately applicable to a therapeutic situation. He moves between aikido practice and real life problems using metaphors as a connecting bridge. The participants shared a common theme of opening up space for their clients to completely express their energy. This is a direct metaphorical translation, a transfer of a kinesthetically learned physical process into a therapeutic application.

Another example of this process of transferring learning in one arena to another occurs on a feeling level. Tom stated that when he walks into his therapy office, he feels the same way he does when he is in the dojo, which is "waking up to the truth, whatever that truth might be, and [I try] to carry that as much as I can in my life, but particularly in here [the therapy office]." This truth is a truth of the moment or the essence of what he believes at a particular time, knowing that truth and perception are fluid, so that "every moment is as true as it can be with flexibility."

Bruce stated that Aikido has helped him to be grounded in his own body. This grounding allows him to blend and empathize with his clients, and to have the balance and extension to throw his partner. He referred to this process as "putting yourself in



the other's shoes, but having your own socks on." Without being "grounded in his own body," Bruce stated it is not possible to blend and throw his partner. The feeling he gets in his body when he is making a good throw is similar to the feeling when a good interaction is occurring in therapy. The implication is that "being in one's body in Aikido" is isomorphic to "being in one's body in therapy." The body is the same, the environment is different, but if one is centered, with one's "own socks on," the processes of "being" in Aikido and "being" in therapy are closely connected.

Earl stated that countertransference is like "hitting a wall," or being "hooked," and he has to work with his countertransference the same way as he practices Aikido:

If I get hooked, the first thing I want to do is settle down, get into my center. How is it, you know somebody's got me and I can't move. How can I blend into that space? That empty space that works ultimately with them, that's not separate from them. How can I do that?

Earl connected Aikido and countertransference by transferring a learning from *kokyū doza*, a specific technique in which one has to move a person who is firmly rooted using one's breath primarily. Someone can hold you he said, and "you can stand for an hour without figuring out how to move, but the practice is doing that and then when you find the opening, 'Oh, there it is, no problem.' It's the same practice in psychotherapy, but sometimes it's not so easy."

Learning about Aikido, one's center, one's own balance, and how and where others are unbalanced can lead to an understanding of the effectiveness of the slightest move, and fine-tuning this awareness of center and balance are seen as a lifelong endeavor.

## DISCUSSION

Among these participants, Aikido practice has had an enormous influence on how they conceive of and practice psychotherapy. The participants described the human being as being comprised of intellectual, emotional, kinesthetic, and spiritual components, and any method of dealing with human beings needs to address all four components. Aikido practice provides a context and theoretical orientation toward what constitutes full human relationships.

In addition, Aikido provides strategies (centering, off the line, blending, extending) which enable them to be safe in conflictful relationship. These strategies also provide them with a method for exploring their own emotional and psychological issues within the framework of Aikido. That is, the very same strategies which work in Aikido work interpersonally in therapy. These same strategies also work metaphorically, so that they work intrapsychically as well as interpersonally. Aikido then provides these participants with a harmonious and effective "aiki" way of being in and viewing therapy.

At times, Aikido can be directly applied in clinical situations. Richard Strozzi-Heckler (1985) described using Aikido in his work with children diagnosed as

emotionally disturbed. He worked with their issues somatically—teaching the children how to move and experience their bodies differently. He began by teaching them to stand in an Aikido way to find a position that is balanced, solid and relaxed. The Aikido movements themselves were used to create change.

As they learn Aikido, the fundamental thing that begins to happen to these young people is that their ability to feel and sense is awakened . . . I believe this work is as valuable, if not more valuable than traditional talking therapy . . . Through the Aikido training these children deal with issues of competition, aggression, intimacy and contact while they learn to unify their minds and bodies. (Strozzi-Heckler, p. 138)

Strozzi-Heckler's book *Aikido and the New Warrior* (1985) contains other examples of Aikido techniques used with people in a coma, in family therapy, and in other therapeutic contexts.

Transpersonal psychology asserts that a full understanding of human nature requires a spiritual perspective. Recently, mainstream psychology has begun to accept spirituality as an important component of cultural competence for mental health professionals (Lukoff & Lu, 2005), but this is also an area that mental health training programs have difficulty incorporating.

Aikido can be described as “moving meditation”; it requires stilling of the mind even as the body is in action. As with meditation, the practices in Aikido induce states of harmony (*ai*) and spirit (*ki*) that can also be described as flow, higher states of consciousness, and peak experiences. Thus, Aikido can provide therapists, including those in training, with an experiential grounding in spirituality. As Wendy Palmer (2002) points out, “I have found the body to be the most revealing and rewarding focal point for exploring the ecumenical nature of the spiritual path, for it is through the body that an individual manifests the ideas or inspirations of this path” (p. 5). The therapists in this study also reported that Aikido has provided them with an embodied, practical, and spiritually-based practice that aids them in conducting and understanding psychotherapy.

Our study suggests that Aikido circulates well with psychotherapy in a number of respects. Both deal with personal development and connection to a larger reality, be it family, society, or spiritual concerns. Practicing Aikido has been an important component of some psychotherapy training programs and these results suggest that this use shows promise. Other therapist training programs have reported similar findings with meditation, qigong, and yoga (Christopher, Christopher, Dunnagan, & Schure, 2006). The whole person of the therapist, not just their intellect, needs to be trained so that the therapist will be comfortable and competent dealing with a broad range of human experience. As a mind-body-spirit discipline, Aikido cultivates many of the core attributes of a somatically based therapy. Mind and body must be coordinated in Aikido. This trains the attention and brings about other changes in consciousness that are central to creating the healing presence so important in therapy. A therapist who can maintain a calm state of mind, free from fears and illusions of the past or of an imagined future, can relate to others empathically. The ability to relax and blend in the face of conflict, and to enhance sensitivity to self and

clients, are attributes the psychotherapist cannot simply adopt as a philosophy. One must also train the body. As William Shakespeare (1914, Act III. Scene II) wrote, “By my body’s action teach my mind.”

## REFERENCES

- BETTELHEIM, B. (1982). *Freud and man’s soul*. New York: Knopf.
- BUGENTAL, J. (1978). *Psychotherapy and process*. Menlo Park, CA: Addison-Wesley.
- CHRISTOPHER, J.C., CHRISTOPHER, S.E., & DUNNAGAN, T., & SCHURE, M. (2006). Teaching self-care through mindfulness practices: The application of yoga, meditation, and qigong to counselor training. *Journal of Humanistic Psychology*, 46, 494–508.
- FAGGIANELLI, P. (1995). *Aikido and psychotherapy: A study of psychotherapists who are Aikido practitioners*. Unpublished doctoral dissertation. Saybrook Graduate School, San Francisco, CA.
- FRIEDMAN, H. (2005). Problems of romanticism in transpersonal psychology: A case study of Aikido. *Humanistic Psychologist* 33(1), 3–24.
- GIORGI, A. (Ed.) (1985). *Phenomenology and psychological research*. Pittsburgh, PA: Duquesne University Press.
- KVALE, S. (1988). *InterViews: An introduction to qualitative research interviewing*. Thousand Oaks, CA: Sage Publications.
- LUKOFF, D., & LU, F. (2005). A transpersonal-integrative approach to spiritually-oriented psychotherapy. In L. Sperry & E.P. Shafranske (Eds.), *Spiritually oriented psychotherapy* (pp. 177–206). Washington, D.C.: American Psychological Association Press.
- PALMER, W. (2002). *The practice of freedom: Aikido principles as a spiritual guide*. Berkeley, CA: Rodwell Press
- POLKINGHORNE, D. (1988). *Narrative knowing and the human sciences*. Albany, NY: State University of New York Press.
- REED, W. (1986) *Ki, a practical guide for westerners*. Tokyo: Japan Publications.
- SHAKESPEARE, W. (1914). *The tragedy of Coriolanus*. London: Oxford University Press.
- STEVENS, J. (1993). *The philosophy of Aikido*. New York: Kodansha
- STROZZI-HECKLER, R. (Ed.). (1985). *Aikido and the new warrior*. Berkeley, CA: North Atlantic Books.
- TART, C. (1987, Fall). Aikido and the concept of ki. *Psychological Perspectives*, 18, 332–337.
- UESHIBA, K. (1984). *The spirit of Aikido*. Tokyo, Kodansha International.
- UESHIBA, K. (1985). *Aikido*. Tokyo: Aikido Hozansha Publishing.
- VAN MANEN, M. (1990). *Researching lived experience*. Albany, NY: State University of New York Press.
- VARELA, F. (1989). Reflection of the circulation of concepts between a biology of cognition and systemic family therapy. *Family Process*, 28, 15–24.
- WESTBROOK A., & RATTI, O. (1970). *Aikido and the dynamic sphere*. Rutland, VT: Charles E. Tuttle.

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Note: This article is an outgrowth of research by the first author entitled *Aikido and psychotherapy: A study of psychotherapists who are Aikido practitioners* (Faggianelli, 1995), guided by the second author.

In this case, a psychotherapist who is also a physician may prescribe such medication directly. If the psychotherapist is not a physician, then the patient might be required to seek the support of a psychiatrist or other physician for full coverage. Many psychotherapists adopt an integrated approach whereby techniques from various psychotherapeutic approaches are used. It may be said that psychologists and psychotherapists would tend to adopt a more holistic approach, simultaneously taking into consideration various aspects of the life of an individual and avoiding solely focusing on a particular disorder itself. Psychotherapy, or talk therapy, is a way to help people with a broad variety of mental illnesses and emotional difficulties. Psychotherapy can help eliminate or control troubling symptoms so a person can function better and can increase well-being and healing. Problems helped by psychotherapy include difficulties in coping with daily life; the impact of trauma, medical illness or loss, like the death of a loved one; and specific mental disorders, like depression or anxiety. There are several different types of psychotherapy and some types may work better with certain problems or issues. Psycho... Aikido and psychotherapy: a study of psychotherapists who are aikido practitioners. There is a lack of scientific research in aikido and the influence of aikido practice on the human body is not known. This is the first study that presents anthropometric characteristics and body composition data in aikido practitioners. 33 adult male aikido athletes (age [Show full abstract]  $36.5 \pm 9.6$  years, height  $178 \pm 8$  cm, weight  $81.2 \pm 10.1$  kg) were measured. All subjects were divided from beginner to intermediate and advanced group, and were recruited from the Czech Aikido Federation which is officially recognised by the centre of aikido in Japan. As main methods, bio impedance and skin

Aikido and psychotherapy: a study of. Psychotherapists who are aikido. Practitioners. Patrick Faggianelli, Ph.D. Davis, CA.Â transfer into therapy practice; Aikido was described as a synthesis of a martial art and spiritual practice, both of which inform their psychotherapy practice; Aikido was viewed to be metaphorically and isomorphically related to psychotherapy. Implications for utilizing Aikido practice in training psychotherapists are discussed. The moon does not think to be reflected. nor does the water think to reflect in the Hirowasa Pond -Tesshu. This study of psychotherapists who were also highly skilled Aikidoists. investigated how their practice of Aikido, a nonviolent Japanese martial art, informed the