



# BRINGING THE BODY INTO PRACTICE

## Somatic Attachment Psychotherapy

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**T**he heart of Somatic Attachment Psychotherapy (SAP) and SAP trainings is the reparation of early attachment injuries through a framework that weaves together attachment theory and application to clinical practice, trauma research and practice application, affect and autonomic nervous system (ANS) regulation, somatic psychotherapeutic principles and practices, and relational/interpersonal psychoanalytic psychotherapy.

SAP therapists are oriented to the reparation and regulation of the neurophysiological body and wounded psyche by facilitating shifts in affect management strategies, attachment patterning, re-organization of the body and psyche, and in supporting

the maturation and development of complex right brain functioning.

Broadly, SAP is an embodied, relational orientation to psychotherapy that considers attachment and affect regulation as foundational for healing trauma, with the goal of integration and re-organization of the Internal Working Models (IWM) and neurophysiological regulation capacity. The therapeutic relationship is paramount in offering dyadic regulation, completing absent or distorted affective communication cycles, and working psychodynamically with relational material.

### **WHAT CLIENT CONCERNS IS SAP ESPECIALLY EFFECTIVE FOR?**

This orientation leans into clinical application of multiple theories and principles, giving it wide application

to diverse practice populations, with SAP students and graduates creatively applying it across diverse settings and populations, including: private practice, clinical mental health, addictions, sexualized abuse and violence work with adults and children, work with neurodiverse folks, the 2SLGBTQQIA+ community, Indigenous communities, school and university counselling centres, cancer care, and group work, to name a few.

### **HOW DOES IT WORK?**

This orientation responds to clients wishing to heal injuries of the psyche and bodyself that inhibit how they imagine and live their lives. With a focus on disrupting and processing that which is distorted, dysregulated, or disavowed, SAP orientation seeks

to facilitate emerging, expanding, and flexible ways of relating to self, others, and the world.

For many folks with relational trauma, their integrative capacities have been significantly impacted by their early relational experiences (insecure attachment), about 42 per cent of the non-clinical population.<sup>1</sup> This inhibits clinical work, as the psyche unconsciously thwarts affective processing of trauma, both relational and incident. SAP orientation works to build integrative capacities over time by working with the distorted and fragmented IWM of insecure attachment; facilitating increased affect and ANS regulation; and attending to and bringing into awareness the recapitulation of early unconscious relational patterns that continue to reinforce (mal)adaptive relational strategies in current life.

While back and forth dialogue is essential, there is a bias towards working directly with the body and with right hemispheric (RH) processes, seeking to build congruence between the explicit (narrative) and implicit (body) systems. In this way, this work departs from traditional left hemispheric therapy by consistently returning to the bodyself and the RH, where trauma is held and needs to be processed.

### **WHAT DO YOU LIKE BEST ABOUT SAP?**

SAP orientation to clinical practice and psychotherapist training is the culmination of my evolution as a therapist, learner, and educator over the past 19 years and continues to evolve as I deepen my personal and clinical understandings of what it takes to sit with and deeply witness suffering — to traverse the abyss of trauma and return to the living. Essentially, this work seeks

to hold, witness, and help metabolize the unbearable within a collaborative, therapeutic relationship. In this process, I have had to reach beyond psychotherapeutic disciplines and find bigger and bigger canvases to practise this art we call psychotherapy. SAP is an orientation where heart and academic rigour meet. I have been offering the two-year Somatic Attachment Psychotherapy training program since 2016; we are currently registering for our ninth cohort.

SAP is a relational psychotherapeutic orientation and not intervention driven. As a clinician, I value the diversity, creativity, and depth of contact it supports in service of reparation of early attachment injuries as they present across the lifespan. I also rely on and appreciate the focus on embodied experience in terms of regulation and tracking my own internal responses. I find this sophisticated information invaluable to clinical practice, and it is essential in terms of preventing vicarious trauma. Because this is so important, we begin the process of embodying this on day one of the SAP two-year training.

### **WHICH OTHER MODALITIES DOES SAP PAIR WELL WITH?**

With such diversity and breadth in the theoretical underpinnings (attachment, relational/interpersonal psychoanalytic psychotherapy, affect and ANS regulation, and body-centred/somatic practice with RH processing), SAP pairs well with numerous modalities. It can often provide a framework to understand what is happening in the body and ANS, the attachment system, and the therapeutic dyad that can deepen the clinician's understanding and increase the traction and effectiveness of clinical work. I see many creative pairings where students apply SAP to

art and play therapy, family systems work, couple therapy, narrative therapy, EMDR, and analytic or psychodynamic-oriented work.

### **ARE THERE ANY CLIENT CONCERNS SAP SHOULD NOT BE USED WITH?**

What's more apt is that the way in which the work looks will differ with different populations, presentations, and clinicians. For example, understanding what is happening in the ANS (client and therapist) and how this impacts what is happening clinically is imperative no matter who we are sitting with. Having said this, the training is oriented to working with clients with relational and incident trauma. More severe presentations of mental health disorders are beyond the scope of the training, and additional specialization would be necessary for people working with these populations.

### **WHERE CAN WE LEARN MORE?**

Upcoming trainings and workshops can be found at [www.bringingthebody.ca](http://www.bringingthebody.ca), where you'll also find links to published articles about SAP, blogs, and a graduate referral list. ■

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#### **REFERENCES**

1 Bakermans-Kranenburg, M. J., & van IJzendoorn, M. H. (2009). The first 10,000 Adult Attachment Interviews: Distributions of adult attachment representations in clinical and non-clinical groups. *Attachment & human development*, 11(3), 223-263.