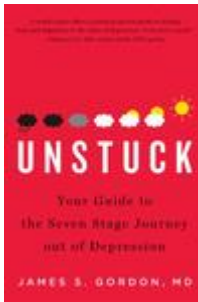


How Can Mind/Body Medicine Help Cope With Depression?

A review of



Unstuck: Your Guide to the Seven-Stage Journey Out of Depression

by James S. Gordon

New York: Penguin Press, 2008. 448 pp. ISBN 978-1-5942-0166-0. \$25.95



Reviewed by

[Ilene A. Serlin](#)

I was going to write the usual kind of review, recommending *Unstuck: Your Guide to the Seven-Stage Journey Out of Depression* as a welcome education for psychologists and summarizing key ideas, research, and recommendations. However, I found myself talking to myself about the book all week, and thought that sharing this more personal response to the book might promote an authentic dialogue about it.

My disclaimer is that I have already read one of Gordon's books (*Manifesto for a New Medicine*, 1996) and attended one of his workshops, and he has reviewed one of my books. I have also been involved in the alternative and complementary medicine movement since the 1970s. However, I think this history gives me a historical perspective about the development of mind/body approaches with which to reflect on the significance of this one particular new book. I asked to review it because I have long admired Jim Gordon's pioneering and

effective success at bringing mind/body health care to real-world problems. Through his Center for Mind–Body Medicine, he trains health care professionals worldwide to be cancer guides and group leaders. Gordon has done this work in difficult trouble spots like Gaza and Kosovo. He does a masterful job at making natural resources available through recommended readings in nutrition, meditation, and imagery.

Unstuck is less scholarly than *Manifesto for a New Medicine*. It is written as though it were addressed directly to the reader instead of to other health care professionals. Gordon begins by offering a holistic rather than medical-model definition of depression. Depression, according to Gordon, is not a problem with neurotransmitters, or an illness listed in the *DSM*, or a disease like diabetes that can be cured with drugs, even though there is most likely a genetic predisposition to it. Depression is more like the Dark Night of the Soul, he says, which can be lifted with meditation, imagery, movement, support, and insight. Its description has historical roots in Hippocrates's theory of “black bile,” the early Greek description of melancholia, and Freud's ideas of loss and mourning. Supported by new information about the neuroplasticity of the brain, however, mind/body methods can help human beings learn new and more constructive patterns to become unstuck.

Instead of using an illness model, Gordon frames his model of seven stages of growth and healing on the basis of the archetypal quest for healing and accordingly titles his chapters “The Call: Finding the Right Way,” “Guides on the Journey,” “Surrender to Change,” “Dealing With Demons,” “The Dark Night of the Soul,” “Spirituality: The Blessing,” and “The Return.” Underlying this stage theory are the assumptions that a breakdown can be a breakthrough and that the goal of healing is wholeness.

After defining the seven-stage model, Gordon goes on to consider the use of specific modalities such as meditation, imagery, and movement. It is this part with which I have reservations. Each section has a case study to exemplify that method and instructions in a shaded box to follow at home. Within sections on keeping a journal, the shaded boxes contain sample lined sheets that suggest categories for writing each day.

Why Does This Format Remind Me of Weight Watchers?

It reminds me of a menu, a cut-and-paste approach to assembled, branded techniques of psychospiritual healing practices. It reminds me of hospital programs with which I am familiar that use techniques that have been reified, or made into “things” or commodities. Taken out of context, they become increasingly fragmented; note, for example, the growing use of acronyms to identify new cognitive-behavioral techniques.

However, ancient peoples were practicing combinations of imagery and active healing methods long before they became commodified. They understood illness and healing as a process that drew from drama, substances, and active participation of the patient and the

community. The modern medical model has fragmented healing practices or assigned them as a one-size-fits-all. Thus art, for example, the most flowing of all practices, gets put into a manualized format with boxes of instructions. What is wrong with this picture?

If boxes and a linear step approach to healing are prose, if psychology is about healing the soul as well as the mind, and if poetry is the language of the soul, then where is the poetry in this book? What is the language to describe healing? What research methods—narrative, grounded theory, evidence based, and empirically supported—assess authentic outcome? How is outcome understood?

Also, in my most powerful experiences of healing, both personal and in my clinical work, the most potent images arise spontaneously from a relationship of trust. In other words, it is usually the relationship that does the healing.

Modern brain research teaches us that stress results in loss of brain connectivity and that reattachment can buffer the effects of stress. Outcome research in psychotherapy shows over and over again that the relationship and nonspecific factors such as the personality of the therapist are the most significant, primary to technique or school of thought.

For example, if I give a patient a “homework assignment” to meditate 10 minutes daily, the actual content of the practice is only half the healing momentum. The other half comes from the meaning of this exchange in the patient–therapist relationship. Who am I to this person—a mother figure? Father figure? Authority figure? What is the benefit of the assignment—adding structure to the day to someone who needs structure, assuring commitment from someone who needs to commit? What are the consequences of assigning concrete tasks—could it be a setup for more failure? Will it lead to experiences of success? Will it empower or create dependency? What is the timing of this moment? The prescription, therefore, needs to be understood on many levels: concrete, symbolic, and relational.

Where Are the Relationships in *Unstuck*? Where Are the Psychologists?

In the 1970s, when I went to many conferences on alternative and complementary healing, I was even then struck by the lack of psychologists in the room with thousands of health care professionals. They had, instead, other health care professionals leading the support groups. I noticed that mine was a lovely young doctor who himself battled cancer and was very sensitive, but he was nevertheless not skillful as a group leader.

Nor was the use of drawings or shaking/dancing skillful. As a dance therapist, I know that a session flows, surprises, and is artful. The best movements take shape over time, are mindful and emotional, and use improvisation. Each person has his or her own style of moving and coping, as well as expressing confidence and fears. The ability to hold the

tension until truly authentic images emerge is an artful skill that is based on years of experience and supervision.

Where Are the Arts Therapists?


I dream of a healed health care system in which all health care professionals can collaborate in a less medical hierarchy—doctors, nurses, psychologists, social workers, counselors, and arts therapists together. In my book *Whole Person Healthcare* (Serlin, 2007b), chaplains, psychiatrists, doctors, nurses, poetry therapists, medical anthropologists, and Qigong teachers all work and write together. Each discipline has its standards of care and professionalism, and the collaboration cross-fertilizes the integrated care given to the patient. What is an authentic integration? Is integration a series of picks off a list—a little bit of imagery, a little bit of mindfulness meditation? What is missing in this process is the experience of the person, the one who is the suffering and self-transcending center of the healing story (Serlin, 2007a).

Relevance to Psychology

It is interesting that this book comes out at a time when psychology is fighting for prescription privileges. Yet if psychologists are able to wean patients off psychotropic medications and help them take better care of themselves, natural mind/body methods can be very helpful. They may be as effective and are certainly less expensive. What if all psychologists had the opportunity to learn mind/body methods?

Mind/body medicine is also congruent with the relatively new psychological theory of posttraumatic growth (Calhoun & Tedeschi, 2006), which emphasizes the empowered patient and opportunities for transcendence that accompany trauma. Some patients, when faced with serious illness or loss, can make radical changes in their lifestyles, belief systems, and sense of self. This book, *Unstuck*, can provide valuable help for their journey.

References

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