

A new way of working with muscular armoring and its benefits for health and sexuality

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1. Introduction

1.1. What this study will address

*Love, work and knowledge are the springs of our lives.
Therefore, they should also govern it.
— Wilhelm Reich, Character Analysis*

There is a close relationship between physical and psychological health, which in turn directly influences sexual experience. For example, when energy levels are low or unhealthy lifestyle habits are maintained, consequences gradually emerge on both the physical and emotional levels, such as stress, insomnia, or various illnesses. These imbalances can negatively affect sexuality and reduce sexual desire. Within this interrelation between the somatic and the psychic, what are known as “muscular armors” emerge—understood as emotional defenses that have been formed at different stages of life in order to cope with emotional pain or difficult and/or traumatic experiences that affect the individual’s overall health. In this context, this study proposes to analyze different pathways of intervention aimed at exploring and releasing these armors through various psychotherapeutic approaches that contribute to improving health and fostering a more fulfilling sexual experience.

The present work investigates an innovative approach to the treatment of “muscular armoring” through the study of different authors and their respective methodologies, all oriented toward improving the individual’s health and sexual life. It begins with the psychocorporal approach of Wilhelm Reich, continues with the bioenergetic therapy of Alexander Lowen, and culminates in the inner space methodology developed by Samuel Sagan, addressing both their theoretical foundations and their practical applications. From this inner space perspective, a therapeutic modality is introduced that allows for addressing and resolving emotional and sexual issues in the human being. In addition, several practical case studies are included, in which this methodology is applied, demonstrating the progress achieved in relation to psychosomatic symptoms and sexual dysfunctions in patients.

The concept of muscular armor was coined by the psychoanalyst Wilhelm Reich in the 1920s in his work *The Function of the Orgasm*. In this text, Reich defines it as follows:

“This armor could be superficial or deep, soft like a sponge or hard like steel.

In every case its function was to protect against unpleasantness.

But the organism paid for such protection by losing a large part of its capacity for pleasure.

The conflicts of the past were the latent content of this armor.”

Through his research, Reich observed that muscular armoring obstructs the natural flow of vital energy in the organism and, consequently, reduces both sexual drive and the frequency of sexual experience. In response, he developed a method that integrated, in addition to psychological work, direct intervention on the body with the aim of dissolving these structures. One of his students, Alexander Lowen, later developed the bioenergetic approach with a similar purpose: the release of armoring to enable a fuller life, both on a personal and sexual level.

Subsequently, another key figure in this field, Samuel Sagan, developed a method known as the “interactive sourcing of the inner space,” with the same aim of dissolving muscular armoring, although from a broader perspective that introduces a new conceptual framework. This approach allows for identifying and working with the root of the problem, located at deeper levels of the psyche and reflected in the body, the energetic state, and the spiritual dimension. According to Sagan, the origin of these dynamics may be diverse: emotional, energetic, sexual, social, or spiritual. Through his methodology—based on meditation, relaxation, and an interactive process between patient and practitioner—the release of emotions and stagnant energy that have sustained muscular armoring over the years is facilitated. These dynamics have contributed to the formation of a “character” or “personality structure,” which, in Sagan’s terms, is referred to as a “character” (in line with Reich and Lowen), and which can progressively be transformed and dissolved, allowing a reconnection with the individual’s authenticity and essence.

Each of these approaches presents its own style, philosophical framework, and historical context, as well as a particular mode of clinical application. However, all three methods share a fundamental principle: the impossibility of separating the body from the mind, as both form an interconnected unity. It is noteworthy that all three authors come from medical backgrounds and developed extensive clinical practices throughout their professional lives. From this experience, they observed that processes originating in the psyche exert a direct influence on the body. As a result, they developed various techniques aimed at healing the

wounds that limit the individual's capacity to experience a fuller life and a more complete sexuality.

On the other hand, within certain Eastern traditions, numerous sources can be found that address sexuality and its relationship to health from a different perspective. These traditions are rooted in a worldview that has been deeply embedded in Eastern cultures for millennia, integrating the cultivation of physical, mental, and sexual health at both an individual and collective level. In this sense, the present thesis also incorporates this holistic perspective through the integration of principles from Taoist sexuality.

1.2. Why this topic matters

*Our sexual lives reflect our general health,
our relationships and our emotional well-being at a
deeper level. It's true that who we are and
what we have experienced has an effect on our sexuality.
Mantak Chia, The Multiorgasmic Woman*

These forms of muscular armoring can progressively give rise to symptoms and psychosomatic illnesses, neurotic behaviors, various addictions, stress, character patterns, and certain sexual dysfunctions. In order to experience a fulfilling life, it becomes essential to work with these armors. In my professional practice, working with many clients each week, I observe that these blockages hinder the natural flow of vital energy and the development of healthy energetic impulses within the individual. As a consequence, pain and blockages emerge—some of them chronic—which in turn generate a wide range of neurotic behaviors. Through the application of the inner space methodology, the client is able to experience directly when, how, and why these armors were formed, and how they have contributed to rigid patterns within their personality. Throughout the therapeutic process, emotional and/or energetic releases begin to occur, providing increased energy, vitality, and, above all, new qualities of being.

On the other hand, it is evident that in our highly competitive society, people are increasingly exhausted. One only needs to step onto a bus or take the subway in a large city such as Barcelona or Madrid and observe people closely: dark circles under the eyes, tightened

jaws, furrowed brows, rigid body posture, and hurried, stressed speech lacking inner calm—just to mention a few signs. This is one of the reasons why medication has become so widespread, as many seek quick solutions to their discomfort. However, an increasing number of individuals are choosing not to rely on medication and instead prefer to explore the root causes of their difficulties, which are often located at deeper levels of the human psyche. Mireia Darder develops this idea in her book *Born for Pleasure*, where she writes:

“Orgasm and desire vibrate at a higher intensity, and the body becomes vitalized; this stands in contrast to the decline associated with the medicalization our culture tends to propose for any uncomfortable condition. If we wish to move beyond rationalism and reach a new perception of reality, this process of ‘purification’ is essential.”

Similarly, numerous studies and statistics demonstrate the impact of stress on both health and sexual experience. Stress is understood as a psychological and physiological response to internal and external pressures. The World Health Organization has described work-related stress as a “global epidemic,” highlighting how this form of stress has become one of the defining health challenges of the 21st century. For this reason, it is essential to cultivate healthier lifestyle habits, take care of both body and mind, and seek professional support when self-regulation is not sufficient.

In summary, muscular armoring affects each individual in a unique way, giving rise to a wide range of pathological symptoms throughout life. Therefore, a holistic therapeutic approach is required—one that integrates all dimensions of the human being, including the spiritual. Working with these armors in an integral way allows for the possibility of living a fuller and more balanced life in all its aspects.

1.3. Methodological approach

*It is achieved by accepting pleasure as divine energy and changing the mindset. This can only be achieved after a process that has as a first step the connection with the body and instinct; followed by bodily, emotional work, and mental that can result in the precious union between sexuality and spirituality.
Mireia Darder, Born for Pleasure*

To begin, we will present the methodology of the sexologist, physician, and psychoanalyst Wilhelm Reich, introducing his extensive clinical knowledge and the development of his therapeutic methods as applied to his patients. His work originates within the psychoanalytic tradition—he was a disciple and collaborator of Sigmund Freud—but expands beyond it to include psychocorporal, energetic, and sexual dimensions of the human being.

Secondly, we will introduce another physician and psychiatrist, Alexander Lowen, who initially studied under Reich but later developed his own approach. We will examine his method, known as Bioenergetic Analysis, including its theoretical foundations, clinical applications, and its contribution to the understanding of muscular armoring, health, and sexuality.

We will then present the work of Samuel Sagan, his studies, his methodology, and his contributions in both the sexual and spiritual domains, particularly regarding the integration of body, mind, and spirit. His approach will be explored in greater depth, including the clinical application of his methodology through two specific case studies.

Furthermore, drawing on the contributions of these three authors, we will examine the interrelationship between certain psychosomatic symptoms, muscular armoring, and experiences of vital and sexual energy. From this perspective, we aim to understand the importance of addressing these dynamics appropriately in order to facilitate healing.

Finally, I will present the experiences of two clients from my own clinical practice, focusing on muscular armoring and its influence on their bodies, sexuality, health, and character patterns. Through this empirical work, a new pathway is proposed for working with muscular armoring—one that addresses its deeply rooted impact on health, sexual experience, and the overall development of the individual.

1.4. Purpose and rationale

*The life of an individual is the life of his organism.
As the living body includes the mind, the spirit
and the soul, to fully live the life
of the body is to be mental, spiritual and soulish.
Alexander Lowen, The Bioenergetics*

The objective of this research is to offer a new perspective for addressing emotional problems that are rooted in both the psyche and the body. This perspective, grounded in a holistic approach, focuses on the “inner space” that each individual carries within, as a gateway to accessing a broader and deeper form of knowledge. As inscribed at the Temple of Delphi—“Know thyself and you will know the universe”—each person can be understood as a universe shaped by their experiences, attitudes, and beliefs.

This dissertation seeks to explore the human potential to awaken this inner strength and the inherent qualities of being that reside within. The outcomes of this process are manifold: an improvement in emotional well-being, increased self-confidence, enhanced self-esteem, and the possibility of living a healthier and more fulfilling life. This includes not only personal development but also a more conscious and enriched experience of sexuality, both individually and within intimate relationships.

2. The different methods for treating muscular armours

2.1. Wilhelm Reich and the discovery of the muscular armours

*Reich shrank and died. And it is strange that after his death his work has remained where he left it. It has immense potentiality. It needs to be developed and it needs to be developed in collaboration with tantra. I call Wilhelm Reich a modern tantra master, although he was not aware of it. Perhaps in his past lives he may have known the secrets of tantra - because his work contained the secrets of tantra.
Osho, Life: A Song, a Dance*

2.1.1. His beginnings: Sigmund Freud and his relationship with Reich

Wilhelm Reich was a sexologist, physician, psychiatrist, and trained psychoanalyst. He lived in the early twentieth century in Vienna, at the same time as Sigmund Freud. At the age of 22, Reich met Freud, who was significantly older than him, and from this encounter a close relationship developed. Freud became a father figure for Reich, who initially was his disciple.

Both came from families of Jewish origin, which later influenced their life trajectories with the rise to power of Adolf Hitler. Reich was forced to emigrate—first to Denmark, then to Norway, and finally to the United States—just as Freud, in the final years of his life, had to leave Vienna and move to England.

Reich wrote numerous articles, published more than twenty books, and developed a successful career as a lecturer. He possessed a strong charisma and was able to reach people in a simple and direct manner. The themes of his lectures ranged from sexual education and psychoanalytic theory to social and political issues. This broad vision—rooted in sexuality and integrating psychoanalytic methodology with Marxist philosophy—was not accepted either by Freud's psychoanalytic circle or by the Communist Party. Although Reich was a member of the Psychoanalytic Society for fifteen years (1920–1936), he was ultimately expelled from both movements.

Freud was the founder of psychoanalysis, a method aimed at the treatment of mental disorders and at understanding the human mind and behavior. He also developed the therapeutic technique known as free association, designed to access original trauma and unconscious material in order to facilitate healing. Freud is considered the father of psychoanalysis and, therefore, of psychotherapy.

He developed multiple theoretical frameworks: the unconscious, defense and resistance mechanisms, the relationship between neurosis and sexual repression, dream interpretation, and the concepts of transference and countertransference. In his theory of the unconscious, instinctual drives and desires are stored. According to Freud, certain events, memories, and desires produce such intense emotional pain that the individual represses or dissociates from them—effectively pushing them out of conscious awareness. Over time, these repressed contents contribute to the formation of neurotic patterns of behavior and negatively impact health.

At the moment of repressing trauma, various defense mechanisms emerge. These mechanisms, also central to Reich's understanding, allow the individual to function with a sense of "normality" in everyday life. However, depending on the intensity of the trauma, these defenses can lead to mental, physical, psychosomatic, and even sexual dysfunctions. Freud identified repression—particularly of sexual and instinctual impulses—as the primary defense mechanism underlying neurotic behavior.

According to Freud, libido, or sexual energy, plays a fundamental role in the development of the psyche. This energy is not confined to the genital region but can be experienced throughout the entire body. Throughout human development—from infancy through childhood and adolescence to adulthood—neuroses and defense mechanisms are formed, a principle with which Reich agreed.

Freud maintained that basic drives or needs originate internally—for example, hunger, thirst, and sexual desire. He emphasized that humans generally seek immediate gratification of these needs, with the exception of sexual impulses. When sexual desire cannot be satisfied, this energy may be redirected into various forms of behavior, including neurosis, impulsivity, or compulsivity.

Reich was deeply passionate about the study of sexuality, and it became a central element in the development of his body-oriented methodology. Today, he is considered the founder of psychocorporal therapy. Over time, significant theoretical and practical differences led to a growing distance between Reich and Freud.

One of the key points of divergence was Reich's use of physical contact and bodily interventions within the clinical setting. His aim was to break through rigid bodily structures—what he termed muscular armoring—in order to release blocked vital energy. According to Reich, the traditional psychoanalytic method of lying on a couch and engaging in extended verbal analysis was insufficient, as it did not address the deeply embodied nature of character structures manifested in posture and musculature.

2.1.2. Its discovery: Muscular armours and character formation

The idea that the heart is the seat of love is related to the question of orgasmic potency. In all neurotic individuals, we observe that the chest walls are very tense. In addition, they have the diaphragm contracted, the belly sucked inward and their shoulders are immovable.
Alexander Lowen, *Love and Orgasm*

This discovery of the existence of muscular armoring (Reich, 1927) and its interrelation with psychic defenses aroused a profound interest in Wilhelm Reich, who understood that when energy does not flow properly, it can progressively lead to psychosomatic illnesses, sexual dysfunctions, and neurotic behaviors. In the course of his research, he began to study the autonomic nervous system and its functioning, particularly the dynamic between the sympathetic and parasympathetic systems—that is, the search for a balance between these two systems, whose nature is antagonistic. Reich observed that prolonged activation of the sympathetic nervous system manifests in the human body through muscular contractions, whereas the parasympathetic system acts in the opposite direction, promoting relaxation and fostering a state of greater harmony. From his theoretical perspective, achieving a balance between these two systems—one associated with contraction and the other with relaxation—is essential for optimizing both psychological and physiological health. In the absence of such balance, particularly at the muscular level in processes of tension and release, chronic tensions develop that become structured as bodily armoring. In his view, these symptoms—both mental and physical—form part of the individual's overall energetic system.

Today, the sexual response model developed by William Masters and Virginia Johnson describes how the sympathetic nervous system is involved in the phase of sexual desire, while the parasympathetic system operates during the phase of sexual arousal, demonstrating that both systems actively participate in the sexual experience. Consequently, cultivating balance between them becomes essential. This raises the question of how such balance can best be achieved. Evidence suggests that one of the most effective ways to reduce sympathetic activation is by stimulating the parasympathetic system through practices such as relaxation, meditation, and conscious breathing. Conversely, to support parasympathetic balance, it is advisable to incorporate moderate physical exercise, stretching, and non-stress-inducing activities such as hatha yoga, which respects integrative pauses during practice. Additionally, horizontal relaxation during the day can be a particularly useful tool for adapting to the fast pace of Western society. The benefits of these practices are wide-ranging: they improve overall health and memory, enhance sexual arousal capacity, accelerate recovery from fatigue, and increase vitality. It is remarkable that nearly a century ago, Reich had already emphasized the importance of this balance, highlighting the innovative and forward-thinking nature of his work.

According to Reich, human beings experience three fundamental emotions: fear, sadness, and anger. Individuals tend to defend themselves against these emotions through the formation of muscular armoring, also referred to as character armoring. As is well known, the development of societies throughout history has involved the establishment of norms that limit the free expression of sexual and aggressive impulses inherent in human beings. Depending on the type of social structure—whether matriarchal or patriarchal—these norms may vary, although a common consequence is the repression of these natural impulses. In response to such constraints, individuals may either conform to social norms or transgress them through aggressive behaviors, whether physical or sexual.

The primary response to threat or fear typically manifests as contraction, flight, or attack, temporarily interrupting sexual impulses. When such traumatic experiences persist over time, vital or libidinal energy tends to contract, generating bodily rigidity, a decrease in available energy, and a reduction in both self-esteem and creativity.

“In a city the size of Berlin, there are millions of neurotic people, people whose psychic structure and capacity for work and pleasure have been severely impaired; every hour of every day fresh thousands of neuroses are produced by family education and social conditions.”

Wilhelm Reich

These defenses, when operating continuously, tend to consolidate into automatic and chronic attitudes, forming character traits that serve a protective function but simultaneously block the free flow of vital and sexual energy. From Reich's perspective, the defensive forces associated with repression establish patterns of rationalized behavior and a deeply rooted self-concept at both the bodily and psychological levels. This deep integration explains why these structures are difficult to dissolve, as they are intimately linked to the individual's way of thinking and behaving. Character can be defined as a rigid attitude that persists over time as a result of lived experiences. When such an attitude becomes chronic, it solidifies into character and manifests as both physical and mental fixation.

According to Reich, there is no single pure character type, but rather a variety of possible configurations. The Reichian clinical classification distinguishes between oral, anal, phallic, and genital types. The oral type is associated with a sad and depressive disposition; the anal type with obsessive-compulsive traits, passive-feminine behavior in men, active-masculine

behavior in women, or sadomasochistic tendencies; the phallic type with hysterical or narcissistic characteristics; and finally, the genital type corresponds to a mature attitude in which armoring and defenses have been integrated and resolved.

2.1.3. His method: Psycho-corporal work

They were, therefore, three discoveries of Reich's incalculable value that allow us to comprehend the human functioning: "The reality of libido (energy flux), the function of orgasm (regulator of the power flow), and the muscular shell (which prevents the regulation of energy)."
Elsworth Baker, M. D, 1969.

In the 1920s, Wilhelm Reich developed an intense clinical and research activity; his practice consistently received a high volume of patients. This experience allowed him to gain a broad understanding of neurosis, which he came to regard as an epidemic phenomenon. In 1923, he formulated his theory of orgasm, integrating social, experiential, and energetic dimensions into the concept of sexual potency, going beyond the previously limited view focused solely on erectile and ejaculatory function. Reich maintained that he had not observed neurotic individuals with satisfactory orgasmic potency and that the majority of people exhibited clear forms of character neurosis. His approach did not originate from a predefined theoretical model; rather, it gradually emerged from observation, listening, and direct clinical experience with his patients. This practice constituted a continuous form of "action research," integrating both empirical observation and the subjective dimension of the patient's lived experience.

From the 1930s onward, Reich focused his work on vegetotherapy, an approach aimed at understanding the repression of emotions during childhood and their persistence into adulthood through the musculature, which he termed muscular armoring. According to his model, this armoring is organized in different bodily segments where energy accumulates and becomes blocked: genitals, pelvis, solar plexus, chest, neck, mouth, and eyes. In the therapeutic setting, Reich intervened in these areas to facilitate the release of energy through bodily contact, using techniques such as pressure, massage, stretching, and guided movement. In certain cases, he induced intense physical responses, such as

vomiting—understood both physiologically and energetically—with the aim of producing deep emotional catharsis and activating the parasympathetic nervous system.

The clinical application of vegetotherapy promotes the emergence of the so-called “orgasm reflex,” a response experienced as a vibratory flow of energy in the body, sometimes global and at other times localized. This phenomenon contributes to the softening of muscular armoring, allowing the expression of previously inhibited vital and sexual impulses. As a result, the patient may experience greater satisfaction and a fuller sexual life.

“The vast majority of adults are incapable of a mature relationship in the institution of marriage. Clinical experience shows beyond any doubt that such individuals are unable to establish healthy object relations, being dominated by infantile fixations in their love relationships.” (Reich, 1930)

In the 1940s, Reich redefined vegetotherapy as “orgonomic therapy,” expanding its scope toward an integrated understanding of the organism’s total energy, including orgasmic energy. In this context, he introduced the concept of “orgone energy” to describe the vital energy underlying both bodily and psychological processes. This perspective shows parallels with various Eastern traditions: in the yogic tradition of India, this energy is referred to as “prana,” while in Chinese traditions it is known as “chi”—concepts that have existed for millennia and refer to a vital force that flows through the organism and, in its broader dimension, connects to a universal energy.

From Reich’s perspective, a psychologically healthy individual is characterized by a sexual life free from inhibition, guilt, or trauma, in contrast to the neurotic individual, whose sexuality often manifests dysfunctionally as a result of a “armored” character structure. An expansion of orgasmic capacity may, in some cases, lead to transpersonal experiences and altered states of consciousness. In this regard, the sexologist Valérie Tasso describes such an experience in her book *Diary of a Nymphomaniac*:

“Many times I have been asked what I feel when I make love. It is like a mixture of energy with the other person that makes me travel and merge with the cosmos. The energy of my orgasm is a small part of me that leaves and ends up blending with the universe. It is a cosmic journey that takes me into infinity.” (Tasso, 2013)

Likewise, various Eastern traditions, such as Taoist sexuality and neotantra, have explored the use of sexual energy as a pathway to expanded states of consciousness. In this same line, David Deida, in his work *Finding God Through Sex*, proposes practices and relational attitudes aimed at reaching these states.

An important aspect of Reich's trajectory—and a source of disagreement with other analysts—was his involvement in social and political issues. During his time in Berlin, he organized lectures and workshops on sexual education and group psychotherapy. In his own words:

“There has always been a conflict in me between the need for social engagement on the one hand and my scientific work on the other. In the social arena, you have to be everywhere; in scientific work, you must be alone with your office, your books, your patients, and your instruments.” (Reich, 1967)

With the rise of the Nazi regime, he was forced to emigrate, moving through Denmark and Norway before settling in the United States. Despite criticism, he received support from analysts such as Donald Winnicott, who emphasized the social responsibility of psychoanalysis as a means to foster emotional development in society. In this sense, Winnicott stated:

“If democracy is maturity, and maturity is health, and health is desirable, then we will do everything in our power [...] to achieve it.” (Winnicott, 1950)

Reich attracted numerous international students, including Spurgeon English, professor of psychiatry at Temple University and founder of the American Psychosomatic Society, as well as Fritz Perls, who later developed Gestalt therapy. Reich emphasized the importance of studying the autonomic nervous system and psychosomatic phenomena, anticipating the understanding that psychological processes can produce physical effects in the organism. When such conflicts persist over time, psychosomatic symptoms may consolidate into disease, regardless of their original emotional cause.

From another perspective, the anthropologist Bronisław Malinowski challenged the universality of Freud's Oedipus complex based on his studies across different cultures. In the Western society of the time—characterized by a patriarchal structure and strong sexual

repression—this model appeared dominant. However, Malinowski demonstrated that other social structures produced different character configurations. In his comparative research between patriarchal and matriarchal societies, he observed significant differences in character traits: greater aggression and mistrust in the former, compared to more open and cooperative attitudes in the latter. These findings reinforced the hypothesis, already proposed by Reich, that social structure influences character formation and the development of muscular armoring.

In 1955, Reich was imprisoned on charges of distributing an unlicensed medical device he had developed, known as the orgone accumulator, designed to concentrate cosmic energy for therapeutic use. Two years later, in 1957, he died in prison. That same year, his disciple Alexander Lowen published his first work, *The Language of the Body*, initiating the development of his own therapeutic approach: bioenergetics. After Reich's death, Lowen wrote:

“At both the individual and social levels, Reich’s contributions were of immense importance. His discovery of the nature of character structure and his demonstration of its functional identity with bodily attitude represented major advances in our understanding of human behavior. He introduced the concept of orgasmic potency as a criterion for emotional health and demonstrated that its physical basis lies in the orgasm reflex. He expanded our knowledge of organic processes by revealing the meaning and importance of involuntary bodily reactions and developed a relatively effective technique for treating emotional disorders. He clearly demonstrated how the structure of society is reflected in the character of its members, a concept that clarified the irrational aspects of politics. He envisioned the possibility of a human existence free from the inhibitions and repressions that suffocate the impulse to live. I believe that if this visionary perspective is ever achieved, it will be by following the direction that Reich set before us.”

2.2. Alexander Lowen Bioenergetics

Bioenergetic therapy brings us back to the past, but that was not a period of security and immunity, because if not, we would not have left him scarred by battles waged and sheathed in a self-defense armor. I would not recommend anyone to undertake this trip alone... The therapist acts as a guide or as a driver. He is trained and experienced in recognizing the dangers, and is a friend who will give the patient support and encourage him when the day is hard and difficult.
Alexander Lowen, *Bioenergetics*

2.2.1. His beginnings as a student of Reich and his estrangement

Bioenergetics is based on the work of Wilhelm Reich. He has been my teacher since 1940 to 1952, and also my psychoanalyst between 1942 and 1945.
Alexander Lowen, *Bioenergetics*

Alexander Lowen, a physician and psychotherapist, lived in the United States to the age of 97 (1910–2008). In the 1940s, he studied with Wilhelm Reich in the United States, although he later distanced himself from him in the 1950s. Lowen went on to found the Institute for Bioenergetic Analysis and published his first book, *The Language of the Body*.

It appears that Lowen's separation from Reich was largely due to Reich's discovery and application of "orgone," which involved capturing universal energy within a hermetically sealed box and using it in clinical settings to increase the patient's energy. Lowen, by contrast, was more interested in the clinical investigation of the organism's vital energy rather than in universal or cosmic energy.

At the beginning of their relationship, Lowen frequently attended Reich's lectures on character analysis and visited him in his laboratory, where they engaged in discussions on various aspects of mental health. At one point, Reich told him: "Lowen, if you are interested in this work, there is only one way to begin: you must undergo therapy yourself." Following this advice, Lowen began personal therapy with Reich in the spring of 1942.

During his first session, he experienced several emotional discharges and a profound realization that he never forgot. He became aware that deeply rooted emotions within his psyche needed to surface. In one session, Lowen re-experienced a childhood memory in which his father had beaten him. By expressing the repressed anger associated with that

event, he felt a surge of energy throughout his body. In another session, he revisited a traumatic experience from infancy involving his mother. He relived her anger toward him as a crying baby and directly experienced how his body contracted in fear. Through this process, Lowen came to understand that “only by bringing the past into the present can true growth and development occur.”

From 1945 to 1953, Lowen worked as a Reichian therapist. He later moved to Switzerland with his wife, where he spent four years at the Faculty of Medicine at the University of Geneva, earning his medical degree. During this period, he applied Reichian methods with colleagues and achieved significant therapeutic results.

Upon returning to the United States, Lowen perceived a shift in Reich’s work and in his inner circle. The most evident change was Reich’s increasing focus on orgone research. Reich gradually abandoned individual therapy and analytical vegetotherapy of character, dedicating himself almost exclusively to laboratory work exploring cosmic energy, including experiments with radioactive energy. At the same time, Reich faced growing criticism from the medical, social, and psychoanalytic communities.

These developments contributed to Lowen’s decision to separate from Reich and his circle in order to maintain his independence and continue Reich’s original work through a new approach—what would later be known as bioenergetics—placing renewed emphasis on the body and on grounding the individual.

Bioenergetics differs from Reichian methodology in that it explicitly incorporates physical exercises, including expressive, affective, and sensual movements, as well as meditation techniques. Lowen placed particular emphasis on grounding—that is, establishing a strong connection with the body and the earth—working from the feet upward. This contrasts with Reich’s approach, which typically began with the head and progressed through various segments (ocular, oral, cervical, thoracic, diaphragmatic, and abdominal) down toward the feet.

Lowen’s method prioritizes grounding and focuses first on the areas of the body where tension is most evident. Another key difference between the two approaches concerns the goal of therapy. For Reich, the attainment of full orgasmic potency and the development of a “genital character” represented the ultimate objective of successful therapy. In contrast,

Lowen—despite experiencing heightened vitality and sexual energy during his therapy with Reich—did not perceive these states as stable over time and therefore did not consider them the final aim of therapeutic work.

Furthermore, Lowen emphasized increasing energetic pulsation in specific regions of the body, such as the head, chest, and pelvis, whereas Reich focused more broadly on dissolving muscular armoring throughout the entire organism. Finally, Lowen's work lacks the strong social and political critique that characterized Reich's perspective. Instead, Lowen directed his efforts toward the importance of personal transformation, promoting a healthy, vibrant, and fulfilling life at the individual level.

2.2.2. His new method: Bioenergetics

Although I successfully completed Reichian therapy, I knew I still had a lot of chronic muscle tensions in the body, which prevented me from enjoying the joy I yearned for. I felt this restrictive influence in my personality. I wanted to have a richer and fuller sexual experience and I was sure it was possible.
Alexander Lowen, Bioenergetics

Throughout his career, Alexander Lowen published fourteen books, trained hundreds of therapists, and founded an institution dedicated to bioenergetic analysis. This therapeutic methodology, developed from the work of Wilhelm Reich as well as Lowen's own research, focuses on the relationship between body and mind. On the one hand, Lowen drew from his personal experience as an athletics coach at various universities; on the other, he conducted in-depth studies on progressive relaxation and harmonious bodily movement. According to Lowen, these physical practices significantly contributed to the development of a positive mental state.

From his perspective, any therapeutic methodology should include a thorough analysis of the patient's life history in order to understand their personality and behavior. While many traditional psychotherapies primarily focus on cognitive and verbal content, bioenergetics adopts a holistic approach that integrates bodily behavior, emotional processes, and cognition. Bioenergetic analysis encompasses both physiological and psychological dimensions, aiming to enable the patient to experience and understand the underlying

causes of their distress, including the identification of chronic muscular tensions or muscular armoring. One of its central principles lies in listening to the body—what it expresses and the locations where life traumas are inscribed—forming these armoring patterns that restrict the flow of vital energy within the organism.

The bioenergetic therapist, like the Reichian practitioner, uses manual contact to help the patient become aware of bodily tensions, blockages, or armoring, thereby facilitating the emergence of repressed emotions. Breathing techniques are also employed, with attention given to depth, rhythm, and the specific areas of the body involved. For example, predominantly thoracic breathing tends to be more superficial, whereas diaphragmatic breathing allows for greater depth. Both therapeutic approaches also make use of different forms of massage: a gentler form aimed at inducing relaxation and allowing the patient to surrender and access deeper layers of inner experience, and a more intense form in which the therapist applies pressure or mobilizes different parts of the body in order to release tensions and emotions.

Through this work, the therapist not only analyzes muscular armoring but also the various character structures that have developed throughout the individual's life. Each character structure manifests through specific bodily postures, behavioral patterns, beliefs, and attitudes. However, it is important to avoid reductionism and not confine individuals within rigid categories or simplistic labels. As Lowen himself states in *Bioenergetics*: “*No two people are alike, either in their intrinsic vitality or in the types of defenses created by their life experience.*”

Another relevant author in this field is Lise Bourbeau, who in her work *The Five Wounds That Prevent Being Oneself* introduces the concept of “masks” to describe character structures that parallel the frameworks proposed by Reich and Lowen. Although she uses different terminology, the conceptual foundation is similar: these structures originate in past emotional wounds and give rise to beliefs, attitudes, and particular ways of perceiving reality. In her own words:

*“An inner wound can be compared to a physical wound
you have had on your hand for a long time but ignore,
whose healing you have neglected;
you prefer to cover it so you do not see it.
That covering is the mask” (Bourbeau, 2011).*

Despite their theoretical differences, both Lowen and Reich agree that the human organism is permeated by a vital energy that can increase or decrease. Lowen expands this concept by not limiting it exclusively to sexual energy, but by considering vital energy in a broader sense, encompassing motor, sensory, and affective dimensions. According to his approach, this energy should be experienced particularly between two fundamental poles: the head and the genital area, flowing freely and harmoniously between them. When this flow is disrupted, energetic blockages arise, potentially leading to a limited sexual experience. In this regard, Lowen states:

“Bioenergetics is a therapeutic technique whose aim is to help the individual regain and enjoy, to the fullest possible extent, the life of the body.

Within this field of interest, sexuality is included as one of its basic functions” (Lowen, 2011).

Today, there are various training centers worldwide, including in Spain, that offer education in bioenergetic analysis. These programs typically last around five years and include both theoretical training and clinical practice. Over this period, participants acquire in-depth knowledge and direct experience in bodily and energetic work—elements that are essential for rigorous therapeutic practice and that are not always sufficiently developed in some contemporary therapeutic approaches. However, as with any process of deep learning, training does not end with the completion of a program; rather, it requires ongoing study, practice, and integration over many years, sometimes decades, in order to reach a truly profound understanding of the method.

3. A new way of working muscular and subtle armours: the integration of body-energy-mind-spirit

3.1. Samuel Sagan and his beginnings: medicine and meditation

The soul of man is like water, it comes from heaven,
it rises to the sky and then returns to Earth,
in an eternal cycle.
Goethe

Samuel Sagan was born in Paris in 1957. His education spans a wide range of disciplines, integrating multiple fields of knowledge. He studied medicine and Sanskrit at the University of Paris and also obtained several qualifications in acupuncture and homeopathy. His doctoral thesis focused on the study of chakras and subtle bodies within the Hindu tradition, for which he was awarded a Doctorate in Medicine with a silver medal—the second-highest distinction in France for a thesis in this field. He also completed a Master's degree in Sacred Science and a Doctorate in Divinity from the International Gnostic Church.

Between 1983 and 1987, Sagan withdrew from his professional activities to dedicate himself entirely to meditative practice. Following this period of intensive contemplation, he moved to Australia, where he founded the Clairvision School and developed the Inner Space methodology, grounded in meditation, relaxation, and various techniques of inner exploration. The aim of this approach is to access, experience, and understand the depth of the human being, facilitating a process of awakening consciousness. His framework integrates, on the one hand, third-eye meditation techniques that prioritize direct experience over belief or dogma, and on the other, the interactive sourcing of the inner space, conceived as a transpersonal therapeutic process designed to identify the root of emotional and energetic blockages, as well as conditioned behavioral patterns, in order to support their transformation.

Samuel Sagan passed away in 2016 in San Francisco. In addition to the transcripts of his lectures, he authored fifteen books. Throughout his life, he trained hundreds of Inner Space Practitioners and transmitted his meditation techniques aimed at awakening consciousness to thousands of individuals. He also developed practices in the field of sexuality that integrate pleasure with meditation and relaxation. His work in this domain focuses on the cultivation of the energetic orgasm, understood as an experience in which pleasure expands throughout the entire body and is perceived at a cellular level. This perspective points toward a deeper dimension of sexual experience, in alignment with what Alexander Lowen expresses in his work *Pleasure*:

“Pleasure is not within man’s power to command or control. It is God’s gift to those who are identified with life and rejoice in its splendor and beauty. In turn, life endows them with love and grace.”

3.2. His methodology: Inner Space Interactive Sourcing

*The common eye sees nothing but the outer part of things,
and judge through that, but the "All-Seeing-Eye".
It penetrates completely, and reads the heart and soul, finding
the ability that the outside does not indicate or promise,
and that otherwise it could not detect.
Mark Twain, 1899*

Through his studies and practices, both in the spiritual and therapeutic fields, Samuel Sagan developed various techniques aimed at awakening human consciousness. The principal of these is third-eye meditation. This practice is generally performed in a seated position, with the legs crossed, the spine upright, the eyes closed, and the attention directed toward the space between the eyebrows. As awareness is focused on this point, lights, colors, mist-like sensations, and even the perception of a dark space with a certain depth progressively begin to appear. With regular practice, this inner space becomes more tangible and expands, giving rise to what is also referred to as "inner vision."

Through this process, it becomes possible to access expanded states of consciousness in which new qualities of being emerge. This practice allows for deeper exploration of dimensions that facilitate the development of abilities such as present-moment awareness, body consciousness, and the perception of inner space. These experiences contribute to greater clarity in daily life, a reduction of stress, an increase in mental stillness and concentration, and a greater adaptability to one's environment.

This inner space, or inner vision, is conceptualized within this methodology as the space of the third eye, understood as a gateway to deeper states of being. In this sense, direct experience constitutes the central element for its understanding. In the words of Samuel Sagan in his work: *Awakening of the Third Eye*:

*"The third eye is, fundamentally, the door that leads to the inner worlds.
Therefore, this eye allows one to come to know oneself
with a depth that surpasses all conventional methods of psychotherapy
or any method based on analysis through the discursive mind."*

This idea also resonates with philosophical perspectives such as those of Plotinus, who stated:

*“Close your eyes, change and awaken to a new way of seeing
that is available to everyone, but used by few.”*

The third eye is associated with self-knowledge, the awakening of consciousness, and the spiritual dimension of the individual. Its presence is recognized in various traditions, including Hinduism, Buddhism, Christianity, and Taoism. In the Hindu tradition, it is referred to as the “eye of wisdom,” considered an inner teacher that each person carries within, linked to intuition, vision, and unity.

Within the context of Taoist sexuality, there are practices that relate the activation of vital energy to the opening of the third eye. For example, Mantak Chia mentions in his work on Taoist sexuality that gentle massage of the chest and nipples can activate vital energy and support the opening of this center. In this sense, sexual practice carried out consciously, subtly, and with attention directed toward the brow point can generate states of deep pleasure and meditation. Likewise, in the Gospel of Matthew (6:22), the following reference appears:

*“The light of the body is the eye: if therefore thine eye be single,
thy whole body shall be full of light.”*

At present, numerous scientific studies have investigated the effects of meditation, demonstrating improvements in concentration, memory, and the functioning of the immune and nervous systems. Research conducted at various universities around the world has shown, through magnetic resonance imaging techniques, the activation of specific brain areas during meditative practice, associated with the development of new neural connections and a heightened awareness of the present moment and of oneself.

In addition to third-eye meditation, another fundamental tool developed by Samuel Sagan is the therapeutic methodology of inner space, aimed at identifying and transforming traumatic imprints within the individual. This approach integrates multiple psychotherapeutic dimensions within a single process: bodily, energetic, cognitive, and metaphysical.

The bodily dimension is expressed through the direct perception of tensions, blockages, pain, and emotions within the body, as well as through physical interaction with the Inner

Space Practitioner. The energetic dimension manifests through discharges that combine emotional intensity and vitality, fostering an increase in the individual's overall energy. The cognitive dimension involves becoming aware of the origin of armoring, the structure of character—referred to as “sub-personalities” or “characters” by Sagan—and the associated thought patterns. Finally, the metaphysical dimension relates to the opening toward spiritual experiences that emerge through inner space.

In his work *Regression*, Sagan states that the awakening process involves a deep immersion into the psyche, where different levels of consciousness are accessed, supporting the integral maturation of the human being. In his words:

“We have shifted into a different quality of being, and in this new condition the problems of yesterday can simply no longer be found.”

In therapeutic practice, the patient adopts a horizontal position on a mat, with eyes closed, facilitating a state of deep relaxation. Through guided breathing, the patient is led into their inner space, where images, memories, and sensations of a bodily, emotional, energetic, or spiritual nature begin to emerge. This setup allows for the progressive opening of inner vision, facilitating the exploration of different states of consciousness.

Within this process, the client can directly experience the presence of emotional and energetic blockages, as well as the muscular armoring manifested within. Over time, a greater awareness develops regarding one's own behavioral patterns, attitudes, and beliefs that condition present-day life.

This work allows access to deeply rooted memories within both the subconscious and the unconscious. In some cases, the client may relive experiences from early childhood or even experiences that do not appear to be directly related to their current biography. This perspective is addressed by Sagan in *Regression*, where he proposes the possibility of experiences linked to other times or lives, without requiring prior belief in such phenomena. According to his approach, any content that emerges holds relevance for the individual's present life in terms of behavior, thought, and experience. In this regard, he states:

“Each person must decide for themselves the true nature of these visions of the past.”

The primary objective of this approach is to facilitate emotional freedom in the present, self-knowledge, and the process of deconditioning. The Inner Space Practitioner trained in

this discipline guides the patient through questions aimed at exploring emerging states of consciousness and identifying the root of blockages and emotional imprints associated with conditioned patterns. In this interactive process, the Practitioner accompanies the client in the release of repressed emotions, fostering a reconnection with their inner resources. To do so, the professional may consciously use voice, physical contact, or embodied presence, facilitating a deeper connection between the patient and their internal experience.

Furthermore, the therapeutic dialogue allows for the exploration of a wide range of content, from childhood experiences to current relational dynamics, promoting a deeper and more integrated understanding of the therapeutic process.

3.3. The theory of the Samskaras

Samskara is one of the most important terms of Hindu philosophy. In Yoga, the union with the Superior being it is said to be reached as soon as the last Samskara has been eliminated.
Sagan, *Regression*

Samskaras are impressions that have been imprinted in the mind and that shape the personality of the human being, that is, their attitudes, beliefs, and character traits. The term originates from Sanskrit and can be translated as “scars in the mind,” referring to emotional imprints from the past that remain as memory, generally at the subconscious or unconscious level of the individual. These samskaras possess considerable force, although in most cases individuals are not aware of their existence or their influence. According to Samuel Sagan, it is essential to clearly understand the mechanism of samskaras and their dynamism. In his work *Regression*, he analyzes various practical cases that illustrate this process.

In a first example, if an individual experiences a strong argument in a shop with one of its employees, regardless of the cause, this event will generate an emotional imprint in their psyche. Each time the person subsequently passes by the same place, they may feel discomfort or even choose to avoid it altogether. In such situations, emotions such as fear, anger, or other negative responses may be activated. These are referred to as emotional reactions. Such reactions, regardless of the context that triggers them, constitute what is known as the dynamism of the samskara and also involve a physical component: the body responds through changes such as altered breathing or muscular contractions. This bodily response is directly related to the observations made by Wilhelm Reich regarding the

formation of muscular armoring as a result of traumatic experiences. The imprint that remains in the individual's memory following such experiences is precisely what is referred to as a samskara. In this first case, there is a greater awareness of the emotional reaction, since the event that caused it—the argument in the shop—is consciously remembered.

In a second case described by Samuel Sagan, awareness of the samskara and its dynamism is reduced, as the trauma occurred during childhood. For example, a three-year-old girl who experiences abuse from her father may completely forget the event, removing it from conscious awareness. However, the emotional charge and energetic intensity of the trauma remain stored in the unconscious, generating muscular armoring and influencing her later development. During adolescence, these unconscious imprints may manifest as difficulties in relationships with men or in seemingly irrational behaviors. Through the methodology of inner space, Sagan proposes exploring and resolving the root of such traumas—in this case, childhood abuse. His approach, in alignment with that of Sigmund Freud, emphasizes the need to relive the trauma in order to release the energy, emotion, or impulse that was repressed in the past.

The concept of samskaras is already present in Sanskrit texts, both in terms of their influence and the ways of working with them, thousands of years before Freud developed the theory of the unconscious and emphasized the importance of accessing the root cause of psychic conflicts—that is, the dynamism of the samskara—through the re-experiencing of the traumatic event. Sagan expands this perspective by considering that images, traumatic experiences, and memories may not be limited solely to the present biography, but could also originate from other temporal dimensions or past lives. However, he insists that it is not necessary to adopt any particular belief regarding this, but rather to maintain an attitude of direct exploration. In his own words:

“See for yourself, experience for yourself.”

He further emphasizes that the nature of these experiences cannot be objectively verified, and that what truly matters is their impact on the individual's present life.

In a similar vein, Brian Weiss, an American physician and psychiatrist, works with a comparable approach through hypnosis. In his work *Many Lives, Many Masters*, he describes the case of a patient named Catherine who, over the course of multiple therapeutic sessions, accessed memories of supposed past lives which, according to the

author, were linked to the origin of her symptoms in her present life. However, the integration of such perspectives into conventional therapeutic models and into society's broader understanding of life and death remains complex. In this regard, Weiss states:

*"Throughout history, humanity has always resisted change
and the acceptance of new ideas."*

Through this therapeutic process, the patient was able to release her emotions, experiencing a progressive improvement in her symptoms, as well as in her overall health and quality of life.

3.4. The theory of the characters

*Beware of your thoughts because they will become words.
Be careful with your words because they will transform into actions.
Beware of your actions because they will become your thoughts.
Anonymous*

In the work of Alexander Lowen and Wilhelm Reich, the elements referred to here as "sub-personalities" or "characters" are conceptualized as character structures. Both authors developed, within their methodologies, an in-depth analysis of these structures in order to help patients become aware of their patterns of action, thought, and behavior, as well as the ways in which these patterns influence their lives and their environment. Throughout their research, Reich and Lowen identified and defined different character typologies. In parallel, within the methodology of inner space, these multiple "sub-personalities" are also studied, understood as configurations that emerge at different stages of life under the influence of socio-economic, cultural, and family contexts.

Within this framework, each sub-personality is defined by a specific set of behaviors, objectives, habits, beliefs, and ways of perceiving reality. Some examples described by Samuel Sagan include the savior, the victim or submissive, the rebel, the persecutor, the perfectionist, the professional, the hippie, the spiritual seeker, the manipulator, the caregiver, the protector, or the authoritarian, among others. From this perspective, these sub-personalities are not inherently positive or negative; rather, they serve an adaptive function, facilitating the individual's interaction with their environment. For this reason, it

becomes essential to develop awareness of which sub-personalities predominate in a person's life and how they influence their process of personal development.

During the therapeutic process, moments may arise in which the patient directly accesses the origin of a particular sub-personality, reliving the circumstances in which that attitude was formed, as well as the subsequent consolidation of its associated beliefs and behaviors. The work within inner space allows these sub-personalities to be observed from a broader perspective, integrating both the dimension of consciousness and the bodily experience. One of the central objectives of this approach is to increase the individual's capacity to recognize these sub-personalities—identifying when they emerge and how they influence life through learned automatic mechanisms. Inner vision progressively facilitates the development of a more global awareness, from which the individual can observe the activity of their different sub-personalities and, in doing so, transcend these automatic patterns in order to reconnect with the essential qualities of their being.

This process leads to transformations in attitude, behavior, and consequently in the individual's system of beliefs. However, personal maturation does not occur immediately; it requires perseverance, patience, and the support of a therapist who has undergone similar processes. The methodology of inner space is thus established as a holistic approach that integrates body, mind, energy, and the spiritual dimension. The opening of inner vision allows these dimensions to unfold simultaneously, enabling each individual to directly experience the contents that emerge from within. In this regard, Samuel Sagan emphasizes the importance of human will in the process of transformation and growth, understood as a capacity that resides within the individual themselves.

Up to this point, three of the principal authors who have investigated muscular armoring have been presented, along with their trajectories, theoretical contributions, and commitment to human development. The following section will present two clinical cases in which inner space therapy is applied, illustrating a new way of approaching the work with muscular armoring.

4. Field work: Two practical examples

*From a therapeutic point of view, professional experience
has showed me that a lot of patients felt better
when they connected with the third eye,
regardless of the nature of their problems.
Samuel Sagan, Awakening the Third Eye*

It is important to note that, during inner space sessions, clients remain lying on a comfortable mattress with their eyes closed. This position facilitates a deeper state of relaxation and a more profound connection with both the body and the inner space, supporting the gradual perception of the opening of the third eye or inner vision. It should be emphasized that the Inner Space Practitioner may intervene at any moment, either through questions aimed at exploring specific psychological aspects or through physical contact, using the hands to support emotional release.

Unlike hypnosis, the client remains fully conscious at all times, with the ability to open their eyes or interrupt the process whenever they wish, or at the end of the session. In certain interventions, the professional places a hand or fingers on specific areas of the client's body to facilitate awareness and deepen the experience in those regions. However, there are situations in which physical contact is not used, such as with pregnant women or individuals with certain conditions, including phobias or depression.

Subsequently, guided by the Practitioner, a systematic process of exploration begins through specific questions aimed at investigating the various symptoms that may arise, such as pain, tension, muscular armoring, attitudes, emotional reactions, or sexual dysfunctions. The opening of inner vision offers the patient a new way of perceiving, feeling, and experiencing deeper states of consciousness, including possible spiritual experiences.

This psychotherapeutic approach enables a holistic development of the individual, integrating bodily, mental, energetic, and spiritual dimensions simultaneously, without the need to address them separately in different therapeutic processes. In addition, this methodology fosters the development of a form of expression distinct from conventional language, rooted in a deep cognitive experience that translates into a more symbolic language. Over time, the patient develops the ability to communicate these states of consciousness, which often appear in symbolic form.

This conception is related to the symbolic approach developed by Carl Gustav Jung, who integrated the spiritual dimension into his therapeutic work and stated:

“Who looks outside, dreams; who looks inside, awakens.”

Similarly, Erich Fromm, in his work *The Forgotten Language*, analyzes the nature of symbolic language, noting that it “has its roots in the experience of the affinity that exists between an emotion or a thought, on the one hand, and a sensory experience, on the other. It may be called ‘universal’ because it is shared by all human beings” (Fromm, 2012).

Sessions generally last approximately one and a half hours, allowing the patient to reach a deep state of relaxation in which the gradual opening of inner space can occur. At the end of the session, the patient opens their eyes and gradually returns to a seated position, at which point a reflection and synthesis of the experience takes place.

4.1. First clinical example applying the Inner Space Interactive Sourcing Methodology

*A person can not be divided into a mind and a body.
Despite this truth, all studies of personality have concentrated
on the mind to the relative neglect of the body.
Alexander Lowen, Pleasure*

Certain identifying details of the individuals have been modified in order to preserve their privacy and confidentiality. The transcriptions presented in the two practical cases below are faithful to the experiences reported during the sessions, and no content has been added beyond what was expressed by the patients.

Reason for consultation

The patient sought therapy with the aim of deepening her self-knowledge through a therapeutic process that integrates cognitive, bodily, and spiritual dimensions. Although her initial motivation was centered on this objective, during the first sessions of information gathering, various symptoms related to the body and sexuality emerged. The patient had a prior interest in the work of Samuel Sagan and his therapeutic approach.

Previously, she had undergone a three-year therapeutic process with a psychoanalyst, attending weekly sessions, which she eventually discontinued due to a perceived lack of significant progress in her personal development.

Social and sexual history of the client

The patient, aged 30, is Spanish, single, and the mother of a ten-year-old daughter. She left her family home at the age of 20 to move to Madrid. She reports having experienced a sense of rejection within her family environment, as well as a strong influence from a context marked by restrictive religious beliefs.

Within her family, sexuality was not a topic that could be openly addressed and was associated with feelings of guilt. She describes her father as having a melancholic character and being uncomfortable with physical contact, while her mother was emotionally unavailable. This resulted in emotional deficiencies and a persistent fear of rejection and not being loved.

At the age of nine, she experienced sexual abuse by an adolescent neighbor. When her mother became aware of the incident, she reacted aggressively, blaming the patient for having provoked the situation.

The patient reports that she has never felt free in her relationships with men. She experiences difficulty integrating romantic partnership into her life project and expresses no desire to form a family in the future. Nevertheless, she has engaged in sporadic relationships.

Prior to the birth of her daughter, she underwent a voluntary abortion within the context of a relationship characterized by abusive behavior, including control, jealousy, and isolation. She describes this partner as violent and aggressive. The abortion process was accompanied by intense feelings of sadness and loneliness.

She later met the father of her daughter, whom she describes as a cosmopolitan, well-traveled, attractive, and affectionate person, with a relational philosophy based on individual freedom. They mutually agreed to maintain a relationship without renouncing personal autonomy. The pregnancy was unplanned, but they decided to continue with it. After the birth of their daughter, the relationship ended, which was experienced as painful by the patient, particularly due to his decision not to continue the relationship.

During the interview, the patient shared the following reflection regarding her connection with her body:

*“Until the age of 25, I was very intellectual and did not know my body.
During childbirth, I became aware of my body. Through this experience,*

I began to reconnect with my body through dance and sport until I found yoga.

In the first class, I understood what I was looking for: yoga.”

First session of the Inner Space

In this first session of the inner space approach, the client establishes an initial connection both with the space of the third eye and with her own body. The therapeutic work initially focuses on a sensation of a “layer” or armor that the patient describes as a generalized heaviness. Additionally, various points of tension and pain emerge in different areas of the body, capturing her attention.

These focal points of tension do not strictly correspond to the sequential model proposed by Wilhelm Reich, whose approach follows a segmental progression from head to feet. Instead, the client’s experience aligns more closely with the model of Alexander Lowen, based on the concept of grounding, which involves both an increased bodily awareness and direct work on areas where tension appears, such as the tongue, arms, or legs, among others.

Partial transcript of her words and experiences during the first session

“I feel my chest open; tension in my tongue; I feel curious; I am going up to the sky, now coming down to the earth; I feel very relaxed, like I’m in Wonderland, I can fly; I feel a lot of heat and energy in my thighs and chest; the space of the third eye is opening; my hands relax; now there is an armor over my body that makes me uneasy; images come of myself at five years old, shrinking from the fear I felt in my family environment; my tongue tightens, I feel cold in my hands, tension in my arms, legs, groin; I am tired and my body feels heavier; sadness, disappointment.”

(She cries.)

“The tensions and the layer on top loosen. I feel calmer, more relaxed.”

In this first session, it can be observed how access to the inner space opens the possibility of experiencing sensations of expansion, such as the experience of “flying,” a phenomenon frequently reported by patients and, in this case, associated with a sense of freedom. It should be noted that within the framework of the inner space—also referred to by some authors as a profound and authentic vision—a wide range of subjective experiences may emerge.

On the other hand, the patient undergoes a significant emotional discharge, accompanied by a reduction in the previously perceived tension or armor, resulting in a state of increased calm and relaxation. This transition, described by Wilhelm Reich, Alexander Lowen, and

Samuel Sagan in their respective approaches, can be considered a first step in the process of maturation and internal reorganization of the individual.

Second session of the Inner Space

At the beginning of the second session, the patient reports that during the previous week she experienced a lighter emotional state, describing herself as “more childlike,” happier, and with a greater presence in the here and now. She also expresses a desire to increase the frequency of her therapeutic sessions.

Partial transcript of her words and experiences during the second session

“I go up to the sky, I come down to the earth, I can fly, I feel free; now I sink more into my body, the right side of my body and my pelvis feel deeper, the left side of my body tightens; I feel as if I have a crooked, uncomfortable body; now my legs vibrate with more energy; tension in my neck, my body feels heavy, my shoulders and legs tense, my chest is closed, my shoulders come together to close my rib cage; my groin also tightens more; all this pain creates a lot of anguish, I feel like crying, it’s as if I have an armor that doesn’t let me breathe.”

(She cries.)

“Now a force inside me is pushing my heart; images of childbirth come to me: I see my baby, the same force I felt during childbirth; I feel more openness in my chest, it is wider; more lightness and more calm; my heart wants to open more, I feel more fulfilled with more energy in my chest; it gives me more security.”

In this second session, a significant evolution can be observed compared to the previous one, moving from a state of contraction to an experience of greater openness and fullness. This shift appears to be related to an energetic activation in the chest area, providing the patient with an increased sense of safety and confidence.

This case clearly illustrates the convergence between the bioenergetic approach of Alexander Lowen and the inner space methodology developed by Samuel Sagan. According to Lowen, one of the fundamental objectives of bioenergetics is for the individual to achieve a state of greater vitality and energetic fullness, which is reflected in this patient’s experience. In this sense, inner space work facilitates the activation of vital energy—and in some cases sexual energy—contributing to a sense of expansion and well-being, particularly

in the thoracic area. Similarly, within Taoist sexuality, there are practices aimed at awakening and mobilizing this vital and sexual energy.

Third session of the Inner Space

Before the third session, the patient reports having experienced a greater sense of inner centeredness during the week, which translates into a stronger sense of self-confidence. She also notes a deeper connection with her body and the emergence of increased sexual desire in her daily life. In this regard, it becomes evident that greater bodily awareness facilitates the perception and circulation of vital and sexual energy.

Partial transcript of her words and experiences during the third session

“There is a strong energetic pulsation throughout my body, especially in my head and chest; I feel more light, my body has more volume; I feel more confident, stronger, more secure, more grounded; I become aware of my power, I can heal my spiritual part; I am flowing more, I allow myself to do nothing, I feel more joy, more light as a source of love, I feel more loved, more fulfilled; I see myself as a child, I am six or seven years old, I am playing a lot, I used to sing and transform ugly things into beautiful ones, I had enormous creativity, I was a girl with great strength and self-esteem; how beautiful it is to feel the child and recover her. I am filling myself with her energy, her creativity, her strength.”

During this session, an increase in energetic pulsation is evident, allowing the patient to reach a deeper state of relaxation and surrender to the therapeutic process. Although bioenergetic methodology has not been directly applied, a convergent effect can be observed with the principles described by Alexander Lowen, particularly regarding the relationship between energetic expansion and personal maturation.

Throughout the session, the patient accesses a significant childhood experience, reconnecting with aspects of what is referred to as her “inner child.” This process once again highlights the relevance of Eastern conceptions of individual energy and its potential for cultivation through various practices—in this case, through the inner space methodology developed by Samuel Sagan.

Fourth session of the Inner Space

During the week prior to this session, the patient reports having experienced a significant increase in joy and inner strength in her daily life. She also notes a greater ability to set boundaries with others, particularly in situations where she previously felt unable to do so. She describes this state as a deeper connection with her own center, which translates into a sense of personal empowerment.

Partial transcript of her words and experiences during the fourth session

"I feel a lot of softness in my abdomen, very relaxed; I feel protected, I can relax and trust; in my chest I feel safety and confidence; I feel an energetic connection between my heart and my abdomen; the sexual energy I had as a child is repressed, as a child I was very sexual; later, with the Church, there was something wrong about sexuality, I felt dirty and guilty; currently I do not have orgasms, I feel an armor of pain in my abdomen, anger, frustration; I feel trapped, I feel violence; an image comes of a relationship with a man who treated me badly, he locked me in his house, he was very jealous; the frustration and anger are related to him, I need to kick."

An emotional discharge emerges through intense bodily movements.

"I feel more relaxed, more energy throughout my body, more expansion of my being, bigger, stronger; the sexual energy is awakening, it is sensual, it is joyful, it gives me more freedom, it embraces my whole body."

In this fourth session, a significant cathartic discharge takes place. At a certain point in the therapeutic process, the expression of repressed emotion is facilitated through intense bodily movements, including kicking and physical discharge onto cushions. During this process, the client screams and expresses her emotional content directly, which is followed by a state of calm.

This episode corresponds to the re-experiencing of a traumatic event from the past, in which previously repressed emotion and energy manifest as muscular armoring and localized pain in the abdominal area. At the moment of discharge, the patient accesses this material from a subconscious level, managing to express and release it. This leads to a shift in her attitude and a reconnection with aspects of her vital and sexual energy. From this session onward, a partial release of the energetic charge associated with this episode can be observed, contributing to an increased sense of inner strength.

During the week following the session, the patient reports an improvement in sleep quality, experiencing deeper and more restful sleep. She also mentions the emergence of erotic dreams and greater clarity in her relationship with men. She expresses a reduction in her

sense of emotional lack and notes that, through the energy and strength emerging within her, she is beginning to take a more active and conscious role in managing her relational life, moving toward healthier connections.

Observation and Diagnosis

The therapeutic process unfolded over 19 sessions across a six-month period, with a weekly frequency. Subsequently, the patient relocated to London for work-related reasons and was therefore referred to another practitioner specialized in the inner space methodology in that city.

The initial objective of the transpersonal therapy—focused on deepening self-knowledge—progressively led to the activation of previously stagnant energies, the release of repressed emotions, and a greater reconnection with the body, vital energy, and sexuality. Through this process, the patient was able to reactivate her sexual desire from a more mature and integrated perspective.

A synthesis of the remaining fifteen sessions is presented below. In the two subsequent sessions, the patient experienced further emotional discharges related to repressed anger. One of these was linked to the relationship with a former partner who exhibited controlling behaviors, and another was associated with her father and unresolved childhood conflicts. During these discharges, high-intensity emotions emerged, which the patient was able to sustain with stability and inner strength, allowing for their expression and integration. Following these processes, an increase in vital and sexual energy was observed, which began to circulate more freely throughout the body, in a pattern similar to that described in the initial sessions. At the same time, a progressive shift in her attitude toward herself—and particularly toward men—became evident, moving from a position marked by emotional lack to a more autonomous and mature experience of desire.

In other sessions, the patient experienced states of deep calm and tranquility, without the presence of emotional discharge. In these moments, there was an approach toward essential qualities of her being, characterized by greater vitality, positivity, and a deeper connection with her bodily and sensual dimension. These qualities can be understood as

aspects that were present in her childhood but had been repressed or inhibited due to factors such as religious upbringing, family environment, and traumatic experiences.

This clinical case was characterized by a fluid development of the therapeutic process. On the one hand, the patient demonstrated from the outset a collaborative attitude, a strong capacity to connect with her emotions, and an adequate level of body awareness. She also had prior experience with practices such as hatha yoga, which facilitated the integration of the bodily and spiritual dimensions inherent in the inner space methodology developed by Samuel Sagan. On the other hand, her motivation to deepen her self-knowledge and her willingness to explore deeper layers of her psyche—integrating mind, body, energy, and spiritual dimensions—were particularly noteworthy.

From a therapeutic perspective, this process represented a meaningful experience of accompanying the patient on her path of self-discovery. Despite the emotional intensity of certain moments, she demonstrated both the capacity and the determination required to engage with and transform her inner experiences.

4.2. Second clinical example applying the Inner Space

The first and most important of all the principles: see for yourself, know for yourself. Revelations must come from the inside. What you read or hear is not enough. Knowledge means first-hand knowledge. The knowledge of second hand is not knowledge, it is opinion. Opinions will not be what will transform you. Samuel Sagan, Knowledge Track Portal 1, 3.2.1

Reason for consultation

The client sought consultation after being referred by a pediatrician who was personally familiar with the inner space therapeutic approach, having previously undergone this type of treatment herself. The primary reason for consultation centered on a profound sense of orphanhood and abandonment by her parents. This pattern had recurrently manifested in her interpersonal and romantic relationships, characterized by fear of abandonment and dynamics of emotional dependency.

Additionally, she presented with low mood states and frequent episodes of migraines. Throughout the sessions, the patient became aware of having confused love with sexuality in her relational history. Recurrent feelings of low self-esteem also emerged.

Sexual and social history of the client

The client is a 35-year-old Spanish woman, currently single and the mother of a 14-year-old daughter. Her family history is marked by highly complex experiences. Her biological mother married at the age of 15 and suffered abuse—both physical and sexual—at the hands of her husband. Despite multiple pregnancies, she also carried the financial responsibility of the household due to her partner's alcoholism.

The mother left the patient in the care of her grandparents at five months old, in another city in Spain. This event was experienced as abandonment and continues to impact her present life. Her father also abandoned the family during her childhood, and she did not reestablish contact with him until approximately seven years ago.

She was raised by her grandfather and another female figure she describes as a second mother. However, the grandfather was physically abusive, creating an environment marked by fear and emotional deprivation. During this period, she did not receive a structured religious education, although she reports having had a strong spiritual inclination from an

early age. Throughout her childhood and adolescence, she lived in different homes with various parental figures, reinforcing her subjective experience of “orphanhood and abandonment.”

During adolescence, one of the male caregivers adopted a critical attitude toward her body, highlighting perceived physical flaws and negatively impacting her self-esteem and self-image. This contributed to the development of body-related insecurities that took years to process. Currently, she reports a more positive relationship with her body and nudity, although she acknowledges a persistent tendency toward self-demand.

After the birth of her daughter, she underwent a three-year therapeutic process with a psychologist, during which her abandonment-related experiences surfaced intensely. Later, she engaged in one year of Gestalt therapy focused on her romantic relationship. She evaluates both processes as meaningful and beneficial.

In her relational trajectory, the patient has had relationships with both men and women. She reports that in same-sex relationships she adopted a dominant role, whereas in heterosexual relationships she tended to assume a more submissive position toward dominant partners. She is currently single. Although she initially described having a healthy relationship with her body and sexuality, during therapy she recognized that she had long confused love with sexuality, which significantly influenced her relationships. Over the course of treatment, she began to develop greater inner support, progressively reducing the dependency associated with feelings of abandonment and loneliness.

The therapeutic process began in January of the current year, with weekly sessions lasting approximately one and a half hours. The patient demonstrated strong commitment, actively engaging in the sessions. After each meeting, she recorded her experiences in a personal journal, allowing for deeper awareness and reflection on emerging material. This practice reflects a high level of involvement and contributes positively to her therapeutic progress.

The following section presents the first four sessions, including direct transcriptions of the patient’s words and experiences, accompanied by clinical observations. A preliminary diagnosis and overall evaluation of the treatment—still ongoing—will follow.

First session of the Inner Space

In this first session, the patient demonstrated a significant initial capacity to perceive her inner space, facilitating the exploration of various blockages at both the bodily and mental levels. During the session, sensations of pain emerged in different areas of the body. It is

important to note that, within this approach, certain muscular armors may manifest as pain, tension, or blockage.

The intensity of the pain led the patient back to childhood memories, where the origin of these tensions appeared to reside, structured as bodily armors. The emotional discharge was expressed through an intense scream, allowing for significant release. As a result, the pain localized in the uterus and sacral area diminished, facilitating the release of energy and promoting a freer energetic flow throughout the organism.

From the perspective of Wilhelm Reich, this phenomenon could be interpreted as an expression of the so-called “orgasm reflex,” understood as part of a maturation process. Similarly, within the framework of Taoist sexuality, this restoration of the flow of vital and sexual energy is associated with movement toward a more balanced and healthy state of being.

The inner space methodology not only supports these processes of release and maturation but also facilitates awareness of the origin of the pain—that is, the moment and circumstances in which the armor was formed—thereby promoting its integration and resolution.

Partial transcription of the client’s words and experiences of the first session

“I feel my heart and my uterus; there is pain, loneliness; the uterus is activating energetically.” SHE CRIES.

“I lost life; I feel very small, I am a baby; helplessness; I feel rejected by my mother; my sacrum and uterus hurt; something is stuck.” SHE SCREAMS.

“There is a discharge of energy in the uterus and sacrum; more energy and light are entering through the anus; the uterus feels more luminous; my sexual energy is awakening; it is an enormous force—now it is easier to take care of my inner child.”

Second session of the Inner Space

The patient reports that during the previous week she experienced a noticeable increase in energy, improved mood, and a stronger sense of inner strength.

In this second session, the patient reconnects with a core layer of pain that manifests as a form of armor, closely linked to the experience of maternal abandonment. The emotional expression of this content leads to a discharge that connects her with early childhood experiences, followed by a state of relaxation. This sequence—activation of tension,

discharge, and subsequent relaxation—is also described in the body-oriented work of Wilhelm Reich.

Subsequently, there is an expansion of the inner space in which the patient accesses experiences of love, containment, and unity, which she describes as the presence of a “great mother.” This experience is accompanied by a sense of inner healing. The opening of the third eye, understood as a form of inner or spiritual vision, allows for a reconnection with essential aspects of the self. These qualities are not introduced externally but emerge from within the individual through meditative practices integrated into the therapeutic process.

The experiences described contribute to an increased presence in the present moment, improved self-esteem, and strengthened willpower. In this sense, the inner space methodology developed by Samuel Sagan emphasizes direct experience as the primary path to knowledge. As Sagan states:

“See for yourself, experience for yourself.”

Lived experience thus becomes the central axis for recognizing and integrating these qualities, as well as for developing a deeper form of cognition inherent to each individual.

Partial transcription of her words and experiences of the second session

“I feel abandoned by my mother; I am a baby; I feel sad, disconnected from my mother; tension in my kidneys.” SHE CRIES.

“Now I feel more relaxed, I see a lot of light, I feel my higher self; it is an enormous energy that embraces me, my heart is opening; this light takes care of me, gives me love, it is a heart-to-heart connection; gratitude; I feel care from a masculine part in my heart; I cannot distinguish between heart and sex, they merge.” SHE CRIES.

“It is the love of the great mother of light; my uterus and my heart are being healed by this energy and light; thank you.”

Third session of the Inner Space

In this session, the patient experiences an awakening of her sexual energy, which translates into increased creativity, self-love, and a stronger desire for self-care. At the same time, she becomes aware of several mechanisms and patterns that have influenced her relational and personal life.

Among these, she identifies difficulty allowing freedom in her relationships, the sense of having lived dynamics that were not aligned with her true self, the need for reconciliation with

her mother, and the absence of orgasms—associated both with a lack of listening to her own body and insufficient stimulation in relationships.

These elements begin to emerge as recurring patterns throughout subsequent sessions. Through inner exploration and access to deeper layers of her psyche, the patient gradually recognizes how these roles and dynamics significantly influence her behavior. In this regard, the concept of “characters” developed by Samuel Sagan highlights the importance of identifying these acquired patterns as a fundamental part of the therapeutic process.

During the session, two emotional discharges occur, allowing the patient to release accumulated content, which she describes as “letting go of weight.” This experience is lived as a renewal process, close to a sense of a new beginning, characterized by a deeper connection with her body: “feeling and inhabiting my own body more.” She also becomes aware of a previous dissociation between her sexuality and her emotional dimension.

Partial transcription of her words and experiences of the third session

“I feel my sexual energy, it is sensual, strong; I think of my last partner, I didn’t have orgasms with him, I love him deeply.” SHE CRIES.

“I didn’t feel recognized, he didn’t touch me but at the same time it was magic because of the second attention: the ‘mystery’; it was compulsive, I projected everything onto him and now it frustrates me; I didn’t know how to love him, I didn’t let him be free.” SHE CRIES.

“Now I feel my enormous capacity for creativity; I feel a lot of sexual energy, my chest is expanding with this energy; thank you; I want to open myself to life and love, I want to socialize more, I feel and love freedom.” SHE CRIES AND SCREAMS.

“I don’t let others be free, I always need too much; I need to let go, let go of expectations; I feel my heart opening more and more; before it was sexuality, mind, and expectations, now it is more about caring for myself and my heart; I feel my whole body more; this therapy will help me a lot, I have lived a life that was not mine, I need to reconcile with my mother.”

Fourth session of the Inner Space

During the previous week, the patient reports migraines, nausea with a sensation of vomiting, as well as significant physical and emotional fatigue. She also describes a persistent tendency to cry.

In this session, the patient re-experiences a significant childhood episode, accessing the emotional impact it left within her. The inability to express her emotional needs toward her

mother appears to have led to the formation of various armors or defense mechanisms. During the session, she expresses pain, blockage, and anger, which have manifested over time in her body as migraines and chronic tension in the neck and shoulders.

This symptomatology can be understood as the expression of a persistent muscular armor, in line with Wilhelm Reich's observations that chronic bodily tensions are often linked to repressed emotional content in the subconscious. Over time, these patterns may manifest as psychosomatic symptoms.

Although no direct sexual content emerges in this session, the psychosomatic dimension is clearly documented.

Partial transcription of her words and experiences of the forth session

"Lack of peace; I need more rest, I feel the migraine in my forehead, I want to vomit things I swallow; I need to leave my job, it doesn't feel good." SHE CRIES.

"I am in the air and I see my inner child, she is hurt, she is wounded, invisible all her life; pain in the forehead, throat, and lower back; I have kept quiet for too many years, I haven't expressed it, it hurts me." SHE SCREAMS.

"Anger toward my mother, the anger wants to come out." SHE SCREAMS.

"My mother is a victim and manipulative, I will not allow her to abuse me anymore; I feel more relaxed, the tensions in my neck and shoulders have released. The migraine is gone."

In the client's view, the therapeutic work is significantly helping her release old patterns internalized through her relationship with her mother. She reports a progressive increase in awareness, allowing her to open more deeply to life and experience a sense of renewal, which she describes as a "rebirth" of her being.

Observation and Diagnosis

Throughout subsequent sessions, the patient continued to re-experience complex emotional content, primarily linked to her relationship with her mother and experiences of physical abuse. This process involved multiple intense emotional discharges which, despite their painful nature, facilitated personal maturation.

The progressive dissolution of muscular armors allowed the release of previously repressed emotions and energies, contributing to an increase in willpower and vital and sexual energy. As previously noted, the patient already displayed strong sensitivity to sexual energy from

childhood; during therapy, this energy intensified, manifesting at times as sensuality and at others as a force of joy, vitality, and will.

The patient also became aware of a long-standing confusion between love and sexuality, which had shaped her relational patterns, leading her to engage in sexual relationships to compensate for emotional deprivation. Additionally, she identified a persistent need for protection, initially projected onto the maternal figure and later onto romantic partners.

Migraine episodes served as entry points to repressed anger, particularly toward her mother. Expressing this anger enabled her to establish clearer boundaries in her interpersonal environment. From an energetic perspective, the release of anger facilitated a freer flow of vital energy throughout her body, deepening her self-experience and authenticity in relationships.

A significant pattern also emerged: the association between personal power and fear of judgment. The patient tended to inhibit her strength to avoid criticism, leading to self-sabotaging behaviors and a victim stance. Awareness of this mechanism became a key factor in her evolution.

After eight months of treatment, the patient remains committed and motivated, despite emotional challenges. Although she would like to attend sessions more frequently, financial limitations prevent this.

Her sexuality is evolving toward a more integrated experience between affection and desire, reducing emotional dependency and fostering more mature relational attitudes. At the same time, notable external changes have occurred: a new job, a new home, healthier relationships, and improved self-esteem.

Overall, the patient is progressing at her own pace, demonstrating increased ability to not be driven by emotional wounds, greater organization in her life, and improved capacity to set boundaries and express herself. In her own words: "I am being reborn session after session."

From the perspective of Eric Berne's transactional analysis, the patient has predominantly operated from the "child" ego state and is progressively transitioning toward the "adult" ego state. Developing this state requires integrating childhood experiences, recognizing repressed emotions, and expressing previously unprocessed content.

From the therapeutic standpoint, the process involved providing a safe and containing space through a holistic approach integrating body, emotion, energy, and spirit. In this case, the fact that the therapist is male facilitated a positive transference toward the masculine, contributing to the healing of relational wounds.

Professionally, this case reflects a deeply empathic engagement, supported by the therapist's own personal work with abandonment dynamics. Cases like this offer profound insight into the complexity of the human psyche and the processes required to transform pain into growth, maturity, and—in this context—a fuller experience of sexuality and being.

5. Understand how various muscular shields prevent a satisfactory sexual life

*“One can become a teacher very easily.
Becoming a student takes a lifetime.”*

— Swami Vishnu Devananda, *The Complete Illustrated Book of Yoga*

Up to this point, different methodological approaches have been presented, represented by three relevant figures, together with two clinical cases illustrating a new way of approaching muscular armoring through inner space therapy. In both cases, the patients experienced, during the therapeutic process, an awakening of their vital and sexual energy within the field of consciousness, which contributed both to the healing of emotional and/or energetic wounds and to the emergence of positive qualities and values in their individual development and in their relationships.

These values have also been addressed by Erick Lenderman in his work *Principle of Practical Psychology*, where he introduces the concept of the “state of consciousness” to describe the broad spectrum of subjective experience, ranging from diverse emotions to positive qualities such as love, compassion, justice, freedom, willpower, vital energy, and sexual energy. These qualities, which emerge from within the individual, constitute essential factors in processes of human transformation.

In Taoist philosophy, sexual energy is conceived as a fundamental force that contributes to the formation of personality and is closely related to health, longevity, and lifestyle. This conception shows affinities with the theories of Wilhelm Reich, among other authors. From this perspective, the emphasis is placed on the cultivation and preservation of sexual energy as a path toward balanced emotional and spiritual development. To this end, practices are encouraged that promote relaxation, openness, bodily awareness, and the connection between body and mind. In this context, disciplines such as tai chi and chi kung integrate

meditation, breathing, and movement exercises in which consciousness may be focused on the third eye. These practices show significant resonance with the therapeutic approaches analyzed here.

Within this tradition, Mantak Chia stands out as the author of more than twenty works dedicated to Taoist sexuality. In them, he describes various techniques for cultivating vital energy (*chi*) and sexual energy (*jing chi*), as well as their benefits for the individual's overall health. His approach is not limited to sexual satisfaction, but encompasses an integral vision of the human being, oriented toward a more balanced and fulfilling life in its physical, emotional, and spiritual dimensions.

Throughout the sessions carried out through the inner space methodology in the clinical cases presented, the patients became aware of their vital and sexual energy, experiencing an increase in this energy in different areas of the body, such as the hands, abdomen, chest, or genitals. In his work *The Multi-Orgasmic Woman*, Mantak Chia states:

“Sometimes the energy moves like a river flowing freely, and other times it is only a small trickle,” underlining the variability in the perception of energy according to each individual’s degree of bodily connection. He also adds that “along these rivers there are energy centers where energy accumulates and can multiply, and it can also get stuck when a center is not open.”

These energy centers find parallels in the approaches of Alexander Lowen, who gives particular importance to areas such as the chest, abdomen, and genitals, emphasizing the need to activate energy in these regions in order to promote greater vitality and a more balanced personal development.

Taoist practices include exercises of energetic circulation that move through the body along specific channels, from the genitals up the spine and descending through the front of the body. These dynamics resemble certain exercises used in the inner space methodology, both in individual work and in work with couples, aimed at increasing bodily sensitivity and presence in the here and now. Such practices foster a deeper integration of body, mind, and spirit, positively influencing the experience of sexuality. In this regard, Marion Woodman states:

“Sexual and spiritual energy weave together during sexual union and create a third [...] it is within this third that man and woman come to know the ‘I am.’”

The inner space interactive sourcing makes it possible to integrate energetic and cognitive aspects, facilitating a deeper understanding of the psyche. On the one hand, the patient directly experiences in their body the different levels of energy described in the Taoist tradition. On the other hand, through therapeutic accompaniment, the patient can identify muscular armoring and behavioral patterns acquired throughout their personal and social history, which influence both sexuality and interpersonal relationships.

Similarly, in Hindu philosophy, the importance of cultivating sexuality as an integral part of human development is also recognized. Alka Pande, in her work *The Art of the Kamasutra*, points out that in ancient India, the sexual act was considered a natural dimension of life, free of taboos and integrated into a global vision of the human being.

Likewise, hatha yoga proposes an integration between body and mind as the basis of personal development. Swami Vishnu Devananda played a key role in the spread of this practice in the West, highlighting the importance of cultivating both physical health and mental clarity. This approach reflects the connection between Eastern traditions and certain principles of Western philosophy, such as the concept of *mens sana in corpore sano*.

In contrast, contemporary Western culture frequently shows a dissociation between body and mind. Nevertheless, various current approaches seek to restore this integration. In this regard, Mireia Darder underscores the need to reconnect with bodily sensations as the basis for recovering desire and vitality.

For her part, Fina Sanz proposes the concept of “body awareness” or “bodily sensitization” as a way of recovering connection with one’s own body. In her work *Female and Male Psychoeroticism*, she presents an integrative vision that encompasses bodily, emotional, mental, sexual, and social dimensions. This approach shows similarities with the inner space methodology, in which the patient becomes aware of sensations, emotions, and images throughout the session, facilitating work in the here and now that allows the therapist to intervene with greater precision.

The common aim of these methodologies is to foster greater presence in the body, increase vitality, and support a fuller sexual experience. In this same line, Sylvia de Béjar states:

*“If you do not feel comfortable in your body,
it will be difficult to live your sexuality well,”*

emphasizing the importance of bodily well-being as the foundation of sexual experience.

Finally, it is important to consider the influence of gender roles on the relationship with the body and on emotional expression. In many contexts, men have been socialized to repress their emotions, which can result in bodily tension and the formation of muscular armoring. However, these dynamics are not universal, and both men and women may be affected by restrictive educational patterns that hinder connection with the body and the full experience of sexuality.

Taken together, the approaches presented here converge in the need to recover an integrated vision of the human being, in which body, mind, energy, and sexuality form a dynamic unity oriented toward health, personal development, and vital fulfillment.

5.1. Understanding how certain psychosomatic illnesses affect sexuality

“When the individual understands the difference between illness and symptom, their basic attitude and relationship to illness changes rapidly. They no longer see the symptom as their great enemy [...] but discover in it an ally [...] a teacher that helps them attend to their development and knowledge.”
— Rüdiger Dahlke, *The Healing Power of Illness*

In a similar way, the theory of psychosomatic illness proposes that when an individual loses harmony and balance in their mental state, this imbalance may, over time, manifest as a physical symptom or disease. This loss of harmony fosters the formation of muscular armoring, particularly during childhood, as a result of social norms and adaptation processes within the family and cultural environment, which may generate internal conflicts within the individual.

In this context, babies and children are especially vulnerable, as they absorb their environment intensely without yet having the resources to protect themselves or to discern between healthy and harmful experiences. For this reason, it is essential to pay close attention to upbringing and education, considering their impact on the formation of character, both physically and mentally. A lack of such awareness may lead to the consolidation of unconscious imprints in the form of emotional wounds, deficiencies, dysfunctional behaviors,

and psychosomatic symptoms, which can hinder personal maturity and also affect the experience of sexuality.

An example of this can be observed in the second clinical case presented, in which the patient's recurrent migraines can be understood as a psychosomatic manifestation. Through therapeutic work in the inner space, the patient accessed moments from her past in which she was unable to express anger toward her mother, repressing this emotional impulse and generating tensions that, over time, consolidated into muscular armoring and later manifested as headaches.

In this regard, Rüdiger Dahlke states that *"the symptom can tell us what is missing, but to understand it we must learn its language."* Similarly, the inner space method proposes learning a new form of expression that gives voice to experiences emerging from deeper levels of the psyche. In the clinical cases presented, the patients communicate their pain, symptoms, and armoring through this experiential language.

To understand this, it is useful to draw on the concept of "symbolic language" developed by Erich Fromm in *The Forgotten Language*:

"Symbolic language is a language in which inner experiences, feelings, and thoughts are expressed as if they were sensory experiences, events in the external world [...] a logic where intensity and association, rather than time and space, dominate [...] Its understanding connects us with [...] the deepest layer of our own personality."

Within the field of psychosomatics, the work of Adriana Schnake is also oriented toward restoring authentic communication between the body and the cognitive dimension of the individual, in order to listen to the message contained within the symptom. From this perspective, the symptom can be understood as an expression of an "inner teacher" seeking to restore unity between body and mind. In her work *Enfermedad, Síntoma y Carácter*, Schnake describes the contemporary human condition as one of deep fragmentation, in which the person perceives themselves as an object to be repaired, losing connection with their inner experience.

This new way of approaching muscular armoring can be metaphorically related to the Allegory of the Cave by Plato. In this allegory, the shadows projected on the cave wall

represent unresolved experiences from the past that manifest as symptoms, armoring, and conditioned beliefs. The inner space proposes an opening of perception that allows the individual to access new forms of reality.

The “light” that, in Platonic philosophy, symbolizes the world of ideas can here be understood as an inner potential for clarity and understanding. However, as in the allegory, access to this light may initially be unsettling before becoming a source of illumination.

Through this therapeutic approach, patients often describe experiences that reflect this transition toward deeper inner awareness. One patient expressed:

“Immense, overwhelming [...] I began to feel a generosity
and detachment toward the world of such intensity and purity
that it felt magical [...] it was not mental, but sensory [...]
as if I were about to be born.”

This experience illustrates the possibility of accessing dimensions of experience that transcend the purely rational, integrating sensory, emotional, and spiritual levels.

From a philosophical perspective, this can be understood as an articulation between the sensible world—accessible through inner perception—and the intelligible world—linked to thought and reason. The inner space methodology provides experiential access to this deeper dimension, facilitating processes of healing and transformation. Many clients describe this transition as a movement beyond the purely tangible into a more meaningful and expanded experience of themselves.

For all these reasons, this therapeutic approach can be understood as an invitation to explore the inner dimension of the human being, where a powerful potential for transformation resides—one that, when activated, supports the development of a more fulfilling life across vital, emotional, and sexual dimensions.

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