



Title	Therapeutic contribution of body awareness in Dohsa-hou
Author(s)	藤野, 陽生
Citation	大阪大学, 2016, 博士論文
Version Type	
URL	https://hdl.handle.net/11094/56022
rights	
Note	やむを得ない事由があると学位審査研究科が承認したため、全文に代えてその内容の要約を公開しています。全文のご利用をご希望の場合は、大阪大学の博士論文についてをご参照ください。

The University of Osaka Institutional Knowledge Archive : OUKA

<https://ir.library.osaka-u.ac.jp/>

The University of Osaka

論文内容の要旨

氏 名 (藤 野 陽 生)

論文題名

Therapeutic contribution of body awareness in Dohsa-hou
(動作法における身体意識の治療的寄与)

論文内容の要旨

This thesis examines the critical role of body awareness in Dohsa-hou and body psychotherapy. In recent years, there has been increasing emphasis on the meaning of the mind-body connection and body awareness in clinical practice. Body awareness is a subjective, phenomenological aspect of proprioception and interoception. Within the research literature on body awareness, associations amongst body awareness, emotion, and brain activity have been reported. In experimental studies, the link between body awareness and internal (physical) sensation has been deemed a key component that affects regulation and a sense of self. The goals of this thesis are to investigate the therapeutic contribution of body awareness in Dohsa-hou. This thesis comprises five chapters.

Chapter 2 comprises a systematic review of objective studies using posturography. To integrate the findings from studies that assessed postural sway using posturography in patients with psychotic disorders, we conducted a systematic review. Following a database literature search, we identified nine eligible articles. Assessment conditions and indices of postural stability varied between studies. Postural control was associated with negative and general psychopathology in two studies. Two studies reported associations between posturographic variables and medication dose, whereas four studies reported no associations. This review identified the need to develop standards to assess postural sway in patients with psychiatric disorders. Further studies should focus on associations between postural sway and confounding factors.

Chapter 3 comprises empirical research (quantitative and qualitative). A self-report measure for the assessment of body awareness (Body Awareness Scale) was developed, and its psychometric characteristics and relations with other psychological constructs were examined. The effect of Dohsa-hou was investigated using the developed Body Awareness Scale. The results showed that the Body Awareness Scale had good internal consistency and test-retest reliability and that this scale was associated with related psychological constructs. Dohsa-hou sessions led to increased body awareness and decreased psychological distress. Reported experiences changed over the three sessions, with some participants reporting subjective changes in their daily lives. This study supported the notion that increased body awareness has an important role in Dohsa-hou.

Chapter 4 comprises a case study illustrating the process of Dohsa-hou with a patient who had a history of outpatient and inpatient treatment for depression-related psychiatric symptoms. When this patient began receiving treatment, she had difficulty releasing tension because of the harsh rigidity of her body; further, the patient did not know how to regulate tension. As the Dohsa-hou therapy progressed, the patient became aware of her tenseness and learned to self-regulate her bodily rigidity. This case study illustrates the process of the treatment and the contribution of body awareness to therapeutic progress. Although the findings must be replicated with other patients and in other settings, results indicate that improved body awareness could play an essential role in achieving substantial change in body psychotherapy.

The findings of this research demonstrated therapeutic contributions and the essential role of body awareness in achieving substantial improvement in Dohsa-hou for clients with psychological distress. Despite several limitations, these findings may provide a useful perspective for clinicians using Dohsa-hou and body-oriented psychotherapy in their clinical practices.

論文審査の結果の要旨及び担当者

氏 名 (藤 野 陽 生)			
論文審査担当者	(職)		氏 名
	主 査	教授	井村修
	副 査	教授	村上靖彦
	副 査	准教授	野村晴夫

論文審査の結果の要旨

本論文は動作法と身体的心理療法における身体的意識性の役割について論じたものである。近年、心理臨床の実践において、心身の関連性や身体性の意識の意味の重要性が増している。身体意識性とは、固有受容感覚や内受容感覚の主観的、現象学的側面である。身体意識性に関する文献の範囲では、身体意識、情動、脳の活動の関連性が報告されている。実験的研究では、身体意識性と内的感覚（身体感覚）との関連性は、感情の調整と自己の感覚の中核的構成要素と考えられている。本研究の目的は、動作法における身体意識性の治療的意義を検討することである。本論文は5章から構成されており、第1章では身体意識性と動作法の概説、第2章では精神病患者の重心動揺と臨床的特性の文献研究、第3章は身体意識性尺度の作成と動作法による身体意識性への効果の検討、第4章ではうつ病患者への動作法の適用事例研究、第5章では総合考察が行われている。本論文は英文で記載されており、論文の中核となる第2章から第4章の概要を以下に引用する。

Chapter 2 comprises a systematic review of objective studies using posturography. To integrate the findings from studies that assessed postural sway using posturography in patients with psychotic disorders, we conducted a systematic review. Following a database literature search, we identified nine eligible articles. Assessment conditions and indices of postural stability varied between studies. Postural control was associated with negative and general psychopathology in two studies. Two studies reported associations between posturographic variables and medication dose, whereas four studies reported no associations. This review identified the need to develop standards to assess postural sway in patients with psychiatric disorders. Further studies should focus on associations between postural sway and confounding factors.

Chapter 3 comprises empirical research (quantitative and qualitative). A self-report measure for the assessment of body awareness (Body Awareness Scale) was developed, and its psychometric characteristics and relations with other psychological constructs were examined. The effect of Dohsa-hou was investigated using the developed Body Awareness Scale. The results showed that the Body Awareness Scale had good internal consistency and test-retest reliability and that this scale was associated with related psychological constructs. Dohsa-hou sessions led to increased body awareness and decreased psychological distress. Reported experiences changed over the three sessions, with some participants reporting subjective changes in their daily lives. This study supported the notion that increased body awareness has an important role in Dohsa-hou.

Chapter 4 comprises a case study illustrating the process of Dohsa-hou with a patient who had a history of outpatient and inpatient treatment for depression-related psychiatric symptoms. When this patient began receiving treatment, she had difficulty releasing tension because of the harsh rigidity of her body; further, the patient did not know how to regulate tension. As the Dohsa-hou therapy progressed, the patient became aware of her tenseness and learned to self-regulate her bodily rigidity. This case study illustrates the process of the treatment and the contribution of body awareness to therapeutic progress. Although the findings must be replicated with other patients and in other settings, results indicate that improved body awareness could play an essential role in achieving substantial change in body psychotherapy.

本研究は、心身に苦痛や困難を有するクライアントにとって、動作法による身体意識性の改善は治療的に効果的であることを示している。また身体意識性の概念の導入は、動作法と既存の心理学の知見や医学的概念の橋渡しを可能とするもので、動作法の一般化に貢献する研究として評価される。英文での論文執筆は動作法の国際化に寄与するものである。以上の理由により、本論文は博士（人間科学）の学位に相当すると判断した。