

APPRECIATING
LINEAGE WHILE
EMBRACING
change

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It is sometimes said that we stand on the shoulders of those who come before us. If that is true, hopefully we do it in a respectful and responsible way. In the case of Craniosacral Biodynamics, the shoulders who carried us to our current professional awareness are those of giants. Yet, at the same time, we are enough generations into the Biodynamic approach in craniosacral therapy that it is possible to lose sight of some of the history that led directly to what we now call Craniosacral Biodynamics.

My original study with Franklyn Sills in a foundation course that took place at a time before that term existed. During the time that I studied, Franklyn was bringing in more insights from Rollin Becker, DO. The course was organized around Dr. Sutherland's emphasis of primary respiration and Rollin Becker's energetic appreciation of the Breath of Life. At the time, we studied classical cranial osteopathic skills in the context of the emerging Biodynamic paradigm.

In recent dialogue with Sills, he spoke of his interest at the time toward shifting the work away from the biomechanical approach generally taught outside of osteopathy. He said, "When I did this, I added the term 'biodynamics' which I got from Becker's work."

The intention of this article is to appreciate the lineage that has contributed to Craniosacral Biodynamics. When Sills attended osteopathic college in the early 1980s, two of his instructors had studied with Rollin Becker in the USA. We may remember Dr. Becker's own studies with William Garner Sutherland, DO, and Dr. Sutherland's studies with A.T. Still, MD, DO. That summarizes the early generations of osteopathic evolution toward Craniosacral Biodynamics.

Summarizing that lineage, originally in the osteopathic discipline, we must acknowledge that Biodynamic Craniosacral Therapy (BCST) is a non-osteopathic field, even though the lineage outlined above is historically established. We do have some osteopaths who are members of BCTA, as well as medical doctors, and members of most allied health professions. Yet, the BCTA creates a community for primarily non-osteopathic craniosacral biodynamics practitioners.

So what is the importance of lineage? Especially during times of change, insecurity, and stress, appreciating lineage gives us a touchstone to the stability of our own history. As any profession evolves, each generation has greater distance from the original source of the teachings. This is true in any field, as original thinking dissipates over time. Potential pitfalls of growth over time include diminished impact of original teachings, reinterpretation of important concepts, and possible misunderstandings. Thus, maintaining connection with the evolution of our profession and the key principles at its foundation is the ground of the work.

Andrew Taylor Still, MD, DO founded the American School of Osteopathy in 1892. William G. Sutherland studied at the ASO a few years later, graduating in the class of 1900. Sutherland states that while a student he was viewing the cranial field, in particular, the sphenosquamous suture, when the thought struck him about primary respiration and the cranial concept in osteopathy. It would take Sutherland nearly 40 years researching and exploring before he started teaching his discoveries and osteopathic approaches.

Many different osteopaths studied with Sutherland between 1935 and 1954. During that period, different aspects of the work were expressed at different times. That might have led to somewhat different perspectives in the evolving specialty of cranial osteopathy. A general progression that one can notice is the change from a bony-membranous model to a fluid emphasis, to a later resonance with the potency of the fluids and the inherent power of the Breath of Life.

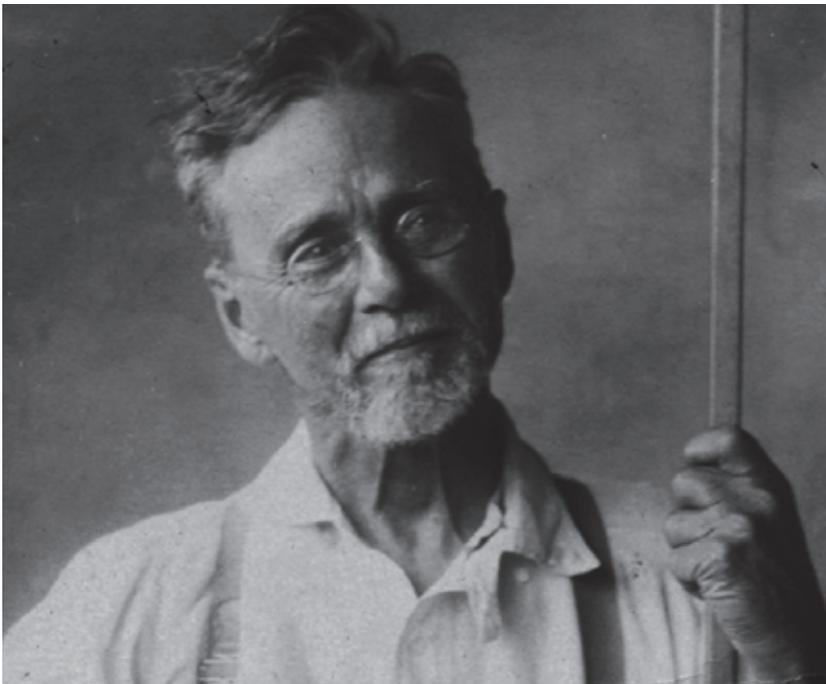


Photo: Dr. Andrew Taylor Still, MD, D.O.



Photo: Photo: Dr. William Garner Sutherland, D.O.

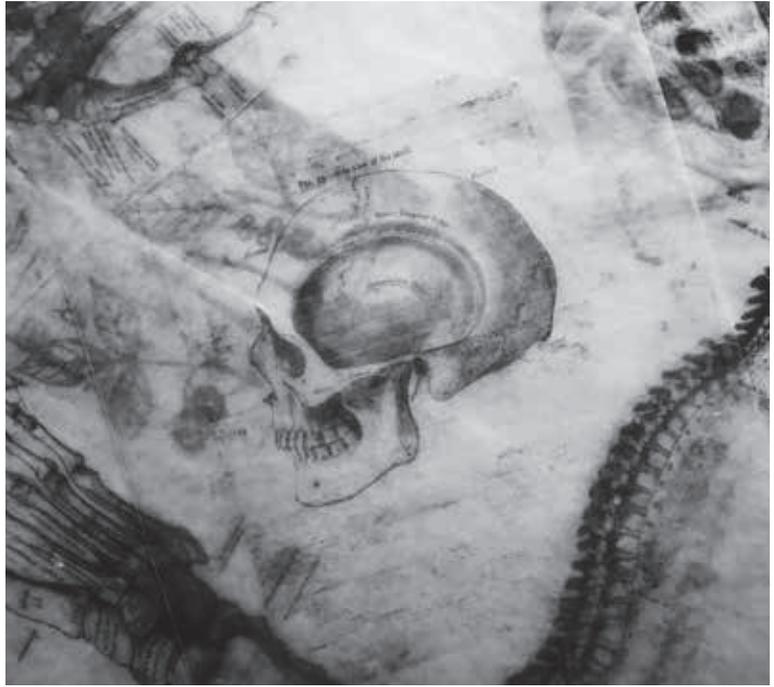
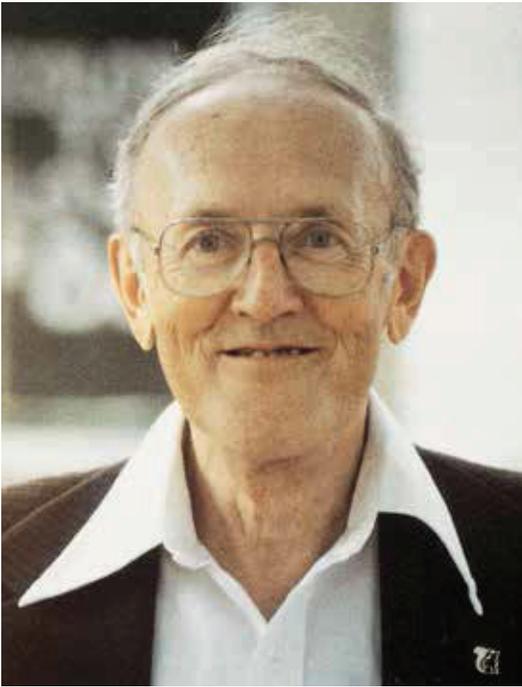


Photo: Dr. Rollin Becker, D.O. (1918-1994)

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ESPECIALLY DURING TIMES OF CHANGE, INSECURITY, AND STRESS, APPRECIATING LINEAGE GIVES US A TOUCHSTONE TO THE STABILITY OF OUR OWN HISTORY.

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Both Rollin and Alan Becker studied the cranial concept in osteopathy with its founder, W.G. Sutherland. Their father, Arthur Becker, was on the faculty with A.T. Still, and later served as dean for two osteopathic colleges. Rollin became more widely known of the two brothers due, in part, to the fact that he was president of the Sutherland Cranial Teaching Foundation for 17 years (1962-1979). Another contribution to wider professional awareness of Rollin Becker is the posthumous publication of transcripts from classes, private papers, letters, and musings about the cranial concept in two books, *Life in Motion* and *Stillness of Life*. Many reading this article have these books in their libraries.

Perhaps more important than the books—which are composed of mostly personal reflections on the work—are the series of articles that Rollin Becker published, titled “Diagnostic Touch: Its Principles and Applications.” This was really one long article, with different sections in four issues of the Academy of Applied Osteopathy yearbook (1963-1965). These articles could be considered Rollin Becker’s published statement about the direction in cranial osteopathy, early in his presidency of the SCTF.

A condensed version of the articles is republished in *Life in Motion*. The version in the book, however, is edited for both length and content. It does not represent Becker’s full thinking the way the original articles do.

In these articles, Dr. Becker discusses energy dynamics in the life process in ways that the previous generations did not have words for. Dr. Still's "CSF (as a) highest known element in the body... irrigating the fields (leading to a) harvest of health," and Dr. Sutherland's "liquid light" in the CSF point toward this awareness. Dr. Becker defines it.

Becker called the Breath of Life "the bioenergy of wellness or health." Some of Becker's statements in the articles include the following:

"Through the years, I have learned that there are bioenergy fields of activity within body physiological functioning and that it is possible to learn to feel these energy fields."

"Biologic systems have had a "spark" and "bioenergy" system built into their mechanisms for eons. This is not an esoteric or religious fantasy; it is a simple, bioenergetic, physiological fact."

"There are bioenergy fields of activity within the body throughout life."

"Within these bioenergy fields is a potency, a focus or fulcrum point around which these fields operate. I define potency as a functioning point of stillness, a fulcrum point, within the bioenergy field... through which these patterns of activity are manifesting themselves."

"The following factors have been demonstrated to me... 1) there is a bioenergy field of wellness or health within human physiology, 2) there are added force factors to the basic bioenergy of health in trauma, 3) there are stress factors, and, finally 4) a formula can be written to express health and the addition of these force factors in trauma and stress."

In these articles, Dr. Becker describes the general trajectory of the healing process based on his observations across 40,000 sessions. In the common parlance of many BCST training programs this has become known as the "three stage process." This has sometimes been called "Dr. Becker's 3-step process"; but it is important to understand that Becker's view was not of steps taken by a practitioner, but rather, observable stages in a natural process. Franklyn Sills writes, "Becker observed... three basic stages of healing process and the three-phase awareness described below is derived from his insights." (2011, page 224)

When understanding Becker in his original discussion, it is important to note these stages are not something the practitioner facilitates (except possibly the process of reaching a state of balance), but rather, the stages are the observation of the natural trajectory of the healing process. Becker said these general stages occur in most healing processes, no matter what the injury or condition.

I will summarize the three stages of healing in my own words, while endeavoring to not stray from Dr. Becker's original discussion. First, the client's system shows how it is organizing around some conditional pattern (injury history, acute illness, neuro-affective stress, etc.).

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**BECKER CALLED THE BREATH OF LIFE
“THE BIOENERGY OF WELLNESS OR HEALTH.”**

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In his discussion of method, Becker discusses the practitioner following this pattern enough with one’s mind to become aware of its dynamics. Allowing the conditional pattern time and space to express itself reveals numerous features, all of which are dynamics of the inertial pattern. These features include in which phase of the Tide the pattern increases or decreases, or whether it is independent of the Tide, the boundary from which the pattern turns back, the brief pause between phases of motion, and the still fulcrum around which the pattern is organized. In classical osteopathic approaches, each of these features has significance and may be utilized in the treatment process.

The second stage in the general healing process observed by Dr. Becker is when the inertial pattern becomes oriented to its own fulcrum. This is the state of balance. All of the forces that participate in that pattern become dynamically equipoised around this fulcrum. There are a number of dynamic forces participating in the state of balance, hence the original term: a state of balanced tension. The perception of the client’s system is that these forces attain a temporary neutral in the state of balance. It is the balance of inertial forces around their fulcrum that is the pivotal factor in the healing process. Once the inertial forces become neutral around their fulcrum, according to Becker, “Something happens.”

Reorganization is the hallmark of the third stage of the healing process. Because of the neutral attained in the state of balance, the client’s system is free to release inertial energies, try out new options, and ultimately it will present the best expression of health, given the conditions.

It can be noted that states of balance are a gateway for healing at CRI and middle Tide levels. Both, the Long Tide and the Embodiment Tide (referred to as the groundswell in Sills’ writing) often manifest different expressions of healing in their own levels of action. For example, Dr. Becker describes the Long Tide as hundreds of fluid fingers permeating the connective tissue matrix.

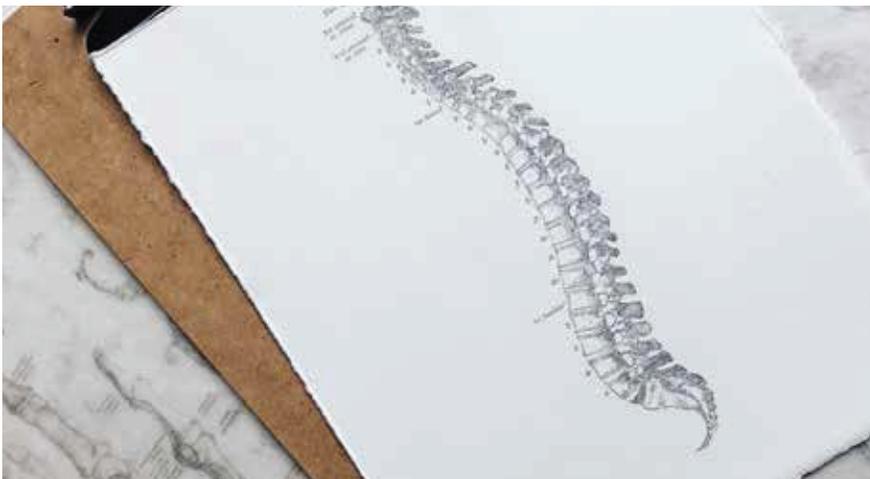
This series of articles by Dr. Becker contains other gems of wisdom like the statement, “The treatment plan is inherent in the disturbance.” There is discussion of the purpose of the inertial pattern being that of “centering the disturbance” until the appropriate conditions are in place for reorganization to occur. And finally, “Matter and energy are interchangeable in body physiology-biosphere interrelationships.”

Rollin Becker presented a view in osteopathic work that understood energy principles and how life organizes itself. His teaching includes discussions of the biodynamic energy, the keynote importance of the fulcrum, observable stages of the healing process, and descriptions of how the interruptive energy of injury, illness, shock and trauma create inertial patterns. His writing is rich with discussions of forces interacting and how the osteopath may be present to those therapeutically.

In some ways, it is natural that Dr. Becker's orientation in osteopathic work had deep resonance for Sills. Before moving to England and entering osteopathic school, Sills had studied Polarity Therapy in the USA. This experience gave him an understanding of the guiding principles in the human energy system. Polarity Therapy was developed by the American osteopath Randolph Stone. A primary difference between Stone's and Becker's discussions is that Stone's work provides the map of the human energy system, whereas Becker's work mostly focuses on the processes of clinical work, including energetic aspects of those processes.

Franklyn Sills is generally acknowledged as a primary developer of the Biodynamic view in craniosacral therapy. Certainly many others made contributions to the emerging discipline, and it was largely through collaborative effort in the early days that the profession found its voice. Sills described how over a long period the faculty at Karuna Institute worked to reorient the curriculum to an intrinsically biodynamic model. Other collegial contributions to the expression of Craniosacral Biodynamics arose in teaching team meetings when I assisted Sills with the foundation training he taught in Boulder. I remember us knotting out vocabulary and endeavoring to find the clearest expression of things. It was sometime during that period that the name Craniosacral Biodynamics took root.

Above, we have considered the direct osteopathic contributions to Craniosacral Biodynamics as part of our lineage. Of course, we must acknowledge that our scope of practice is narrower than that of osteopathy, and it is differently defined. In addition to the historic contributions to the unique expression of Craniosacral Biodynamics, the profession has since diversified following the early generation of teachers trained by Sills.



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**THE TREATMENT
PLAN IS INHERENT IN
THE DISTURBANCE.**

DR. BECKER

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Photo: Dr. Andrew Taylor Still, courtesy of the Museum of Osteopathic Medicine at A. T. Still University in Kirksville, MO.

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**TO FIND HEALTH SHOULD BE THE
 OBJECT OF THE DOCTOR — ANYONE
 CAN FIND DISEASE!**

DR. A.T. STILL

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This diversification is natural as any profession grows. Indeed, my own teaching in Craniosacral Biodynamics has led me to teach foundation courses and advanced seminars in the USA, Australia, and Europe. As professions grow and subsequent generations evolve, we could ask, “How close are they to their source?” How much do new generations of expression embody the wisdom of the original principles? To use a quote from Dr. Sutherland, do we “stay close to our maker”?

How much does the modern BCST practitioner know of the Old Doctor, A.T. Still? I strongly recommend reading his autobiography to start. The principles of osteopathy are life principles. When we understand them, we understand the healing process. To quote Still, “To find health should be the object of the doctor—anyone can find disease!”

Sutherland insisted that the cranial concept in osteopathy was an extension of Still’s principles of osteopathy. Becker, and those who followed him, were dedicated to practicing the osteopathic art.

In like fashion, we are dedicated to practicing the art of Craniosacral Biodynamics. We study the history in an effort to understand the present. Also, recognizing that there are intrinsic principles that organize the work is valuable. When we understand our art in relation to principles, we have an organic perception of the clinical process.

For me, when I have had the privilege to study with osteopaths who are willing to teach outside of their immediate profession, these studies have augmented everything I learned from Sills. When I have the honor to teach osteopaths in courses, our experience confirms that we share much of the same knowledge base. Regarding Craniosacral Biodynamics, I asked one of them who has become a good friend, “You took courses with Viola Frymann, DO, and numerous SCTF courses over the years; why take all the time to attend a foundation course in Craniosacral Biodynamics?” He said humbly, “Because, there is a wisdom and insight to a deeper principle here.”

The deeper principle, essentially, is a therapeutic art based on the Breath of Life. Primary respiration as a field dynamic maintains the original form. The Tide expresses it as physiologic function. The embodiment of the Breath of Life includes the form and the process. It also includes something else—the ineffable, and the capacity to witness the experience of life as it arises. In its purity, this is mindfulness. In its practice, this is compassion. In its effect, this is holism.



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Roger Gilchrist leads BCST trainings internationally as the director of Wellness Institute. He originally studied with Franklyn Sills and later with various osteopaths. Roger is the author of the book *Craniosacral Therapy and the Energetic Body* and numerous professional articles on BCST. Following the traditions of Sills and Robert Fulford, DO, Roger is a deep believer in cultivating precision to enhance skillfulness in our work. Learn more about Roger at wellnessinstitute.net.

In summary, I hope we all appreciate the profound lineage from which we have grown. In addition to historic osteopathic contributions to BCST, there are influences from Taoism, Vajrayana awareness practices, Focusing, psychology, energy medicine, and the pre- and perinatal sciences. This integrative approach is some of the strength of Craniosacral Biodynamics.

Each person, each view, each approach to practice, each insight is valuable. Some will resonate with us more than others. Within our lineage we have access to amazing expertise. This expertise includes views of life, incredible levels of precision available in therapeutic practice, personal practices that stabilize or expand our perception, the capacity for adaptiveness, and presence to the embodied experience of life. It is my hope we all continue to share with each other in an open field of support. In that way, we perpetuate the evolution of our lineage in a respectful and sacred way. 🌱

Roger Gilchrist has based his clinical practice on Craniosacral Biodynamics for over 25 years. Previously, he was a medical psychotherapist working on multidisciplinary teams in mainstream healthcare. As the director of Wellness Institute, he leads BCST trainings internationally (WellnessInstitute.net).

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