

Fantastic Voyage

Fantastic Voyagers

by Cynthia Price, M.A.

A story of
connecting inside
and using imagery
during bodywork

"Carol, could you bring your attention down here to your arm? It feels rather thick down here. Let me know when your mind is really focused on this space inside your body."

Carol lets me know she is there and then I say, "Seems like a good day for one of your workers. Who do you think we should call?"

Carol (a pseudonym) asks me to describe the tissue that I am touching. I say that her tissue feels thick and dense and that we could focus on opening the top through to the underneath side of her arm.

Carol says, "Okay, I'll call in a laser worker." And in he will come, as she envisions a person, or group of persons, using little lasers that open a passage towards the underneath portion of her arm.

Carol's face is calm, her concentration intact and relaxed. Within seconds I can tell that her imagery is working. The tissue in her arm loosens up, and the thick quality relaxes such that the tissue feels pliable and there is a sense of openness towards the deeper aspects of the tissue within her arm.

"Can you tell the difference?" I often ask. Occasionally, Carol nods yes with a slight smile. But typically, as she does today, she shakes her head and then says no.

Then I show her how her arm tension has changed. I press into the softened tissue of her arm so that she notices her response to this sensation. This gives her a physical, tangible place to focus her attention. She says, "Oh, that isn't so tender any more."

We both smile. We've been doing this kind of work together for years now.

Carol likens her workers to the little people in *Gulliver's Travels*. They are tiny little workers, always industrious, capable men, who come at her beck and call to accomplish the task at hand. Each worker has a trade, with a particular specialty in the body. The sailors help loosen the ropes that are in her neck or back, the quarrymen use jackhammers to loosen the hard contracted muscles in her jaw, and the gardeners work gently, moving the dirt to make more space in her scalp.

When I first started seeing Carol, she described herself as someone who had no body from the head down. She came to see me because she had chronic discomfort in her arm that felt like numbness and she'd used up her allotted physical therapy time at her HMO. One of her physical therapists referred her to me. She did not exercise, was not comfortable touching her own body or being touched by others, was not in any intimate relationships, and hadn't been during most of her adult life. She did not like to look at herself in the mirror or in photographs, or to pay attention to herself in her body in any way.

Early on in our work together, Carol thought I was a bit suspect. She would raise her eyebrows when I would say to an area of her body that was not budging in response to my touch, "Come on now, you don't have to hold on so hard." Or when I would say, "This feels pretty tender, doesn't it?" Or, "Are you aware of any feelings coming up here?" While working on her feet I would ask, "Do you feel pressure in your head now?" I believe she was amazed that I would consider her body a part of her, and that I could, at times, intuit how she was feeling, sometimes before she noticed herself. She thought I was a bit magical and she never dreamed that one day in the future she would be develop-

animated and light when she is in fantasy, or what I call "in her head." Her tone drops slightly, and her manner of speaking is slightly slower when she is connected to her body. As soon as I realized how to tell where her image was coming from, I was able to tell instantly whether or not she was connected to herself and her body.

I discussed the therapeutic significance of this work with Carol. She was displeased to have to give up fantasy images because they were so pleasurable for her, not unlike writing a make-believe story. Over time she learned to go more directly to her gut image(s) and stay there.

So how did we end up with these cool little workers helping out with tension release? Well, early on I suggested images she might want to try when thinking about softening her tissue. I do a softening exercise when an area is really tight and doesn't respond to massage work. I simply hold my fingers or palm over the tight area and put some pressure, enough so the client can easily register where to put her attention, and ask her to think about softening under my pressure. It typically works very well.

One day I asked Carol to do the softening exercise. She was having trouble focusing in on her body, and I could feel no tangible change in her tissue. It occurred to me that she might be able to harness her strong attraction to fantasy image in a useful, healthy way in this situation. I described to her what her tissue felt like to me and asked, "How could you imagine opening up in this area?" She said, "How 'bout some sailors working on the ropes? Does the tightness run up and down or across?" We were working on her neck and the tightness ran up and down. Carol went to work imagining that the sailors were unwinding the ropes, the lines of tense muscle in her neck, helping them to be less taut. Carol was excited by this use of fantasy image, and from then on developed groups of workers, whom she sees with great clarity coming in to do the job. Sometimes the workers are not the right ones for the job, and there will not be a quick, tangible change in the tight muscles. We will stop and consider again which of her workers might be the best ones to call in. One of us will make a suggestion and we'll try again.

Carol has a lot of fun with this exercise, imagining the details of their uniforms and enjoying how efficiently they do their jobs. I have fun too; there is nothing quite so rewarding as seeing a client use such creative imagery, use it appropriately, and have it work! The workers don't provide superficial results, either, but deep release of tension in her body, and relaxation that often goes beyond what I could achieve with massage. The power of the creative mind to affect tissue throughout the body is still a little-understood phenomenon. Carol demonstrates this power every time I see her. She now has a list of about twelve "workers" she can call up for any particular task. One day, for fun, she sat down at the computer and wrote up the job descriptions of the workers along with a list of the types of physical tensions they assist. At the top of the page she wrote, "No job is too tough! You're only limited by your imagination. If you can dream it, we can do it!! We go where the problem is—we treat from inside the body, the only non-invasive approach in the country!"

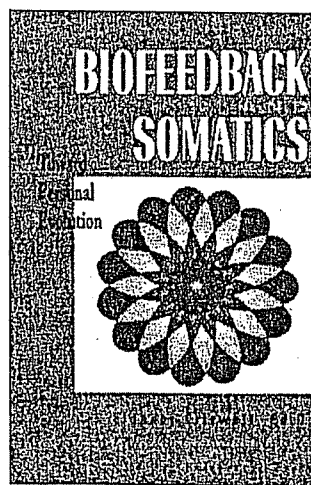
After years of psychotherapy and bodywork, Carol continues to be her basic self. She is not a physical person. Although she now walks short distances many times a week, and does self-care massage and breathing exercises for her body tension, she continues to hold significant tension in



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her body and to struggle with anxiety and, at times, depression. She has learned to use two very different imagery techniques when working with her body. With creative, "fantasy" image she opens her body on a physical tissue level. With "gut" image she accesses her inner self and her emotional being. Together, we find ways to help her either take the voyage, or use her voyagers. ☸

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ing her own "magical" way of relating to her body to release emotional holding and physical tension.

I teach those with whom I work to bring their attention down into the inside of their bodies if they don't know how to do so already. In this way, Carol learned how to connect to herself in her body. This was not an easy thing for Carol to learn. She found herself feeling blocked from moving out of her head. She might begin to feel anxious, or she might be distracted by other sensations that would suddenly arise, like the feeling that her head was getting huge, or her left eye was twitching, or that she had a physical barrier inside her throat that made it impossible to sink her awareness into her body. Carol was quite nervous about the idea of going inside of herself. She spent much of her energy during a typical day trying *not* to notice what was going on inside of herself. What I was asking her to do, she found terrifying.

Carol did learn to connect to herself in her body. Sometimes we would spend most of the session working with her anxiety so that she could move inward, even if only for a minute. Sometimes she would get down inside her body and not be able to stay there. Sometimes she would get down inside her body and find that by staying inside, she could get in touch not only with what caused her pain or sadness, but also the love she had in her heart. She would feel peace, and she could take this peace home with her. She started to shift from someone who ran away from her insides to someone who could pay a bit of attention to how she was doing on the inside.

Because Carol is a very visual person, we used vision as her primary tool when connecting to her inner body/her inner self. I would ask her to focus on the way things looked inside an internal space. One of the ways Carol eventually learned to do this was by traveling down inside her body and using her inner vision to "see." Her inner seeing gave her information about how she was feeling on the inside. It also gave her pictures that could capture her imagination.

Carol loves stories. She loves to read, and she writes. She can walk into image like I can slide into water—with ease, with joy. But we ran into some problems with her attraction to story when combined with imagery. She would slip out of connection to her body and into her thinking mind. She would start to make up stories based on the initial image, or, when she was having trouble traveling down into her body, she would fabricate the initial image as well. I went along for the ride a couple of times, since I recognized that she was staying safe (and sometimes having fun with the story-telling). I needed to figure out how to help her learn to tell the difference between a "fantasy" image (an image that comes from her thinking mind) and a "gut" image (an image that comes from her physical inside space). To help her tell the difference between fantasy and gut images, I began to ask Carol to make sure that she was connected to her inside bodily space. If not, I asked to her go there. Once she said that she was connected, I simply asked her again to use her inner vision and tell me about the space inside. She would have a different image, a "gut" image. The thinking/fantasy images were never accurate.

I noticed that the fantasy images were most common when she was experiencing significant emotional turmoil accompanied by anxiety. Her patterned coping mechanism for this situation was to shut down. She would not allow herself to experience her emotions, but she would be very

upset. She could reach a state of frozen panic. When she came in for a session she would be completely cut off from her body: her throat constricted, her chest protected with rigid tension, her back hard, sometimes with muscle spasms. She would relax a little with massage but would still be very protected in her body. I would put my hands lightly on her upper chest, where she held in so much emotion, and suggest that she travel down to the inside of her chest. She would not be able to go there. Even when she was not so upset, she would avoid going in.

She says, "I see a little girl riding on a purple wave." I ask her what she notices about the space, and she begins to tell me a story about the little girl. As though all were well. I interrupt her and ask her to check inside to see if she is connected to the space in her chest. There is a long pause. She has to make quite an effort to make the connection. When inside, she is thoughtful in her words, as though seeing or realizing something for the first time. She says almost haltingly, "It is dark gray." There is a deep quiet. I ask her if she has a sense of the space. She says after a moment, "It is small. Really small. Almost so small that there is no room." A tear comes to her eye. She is allowing herself to be inside and with herself. We continue the journey from here.

As her therapist, it is important for me to know when Carol is in a fantasy image, or her thinking mind, rather than connected to her body. I want to help Carol to learn to stay connected to her body. Using fantasy image is one more way for her to stay out of touch. My primary cue is her voice. Carol's voice changes when she goes from fantasy into a connected internal place. Her voice sounds more

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