



Marti Glenn

Relational Implicit July 2015



Marti Glenn, PhD, Co-Director, Quest Institute, offering intensive retreats for healing early trauma. She is founding President of Santa Barbara Graduate Institute with graduate degrees in somatic psychology, prenatal-perinatal psychology and clinical psychology. A pioneering psychotherapist and trainer for three decades, she was also professor of clinical psychology, integrating body psychotherapy with affective neuroscience, attachment, and trauma. Dr. Glenn serves on several non-profit boards and has chaired numerous professional conferences, including APPPAH and *Neurons to Neighborhoods: Preventing and Healing Trauma*. She co-produced the broadcast quality documentary, *Trauma, Brain, and Relationship* and has appeared in such documentary films as *What Babies Want; What Babies Know; Reducing Infant Mortality and Improving the Health of Babies*. She continues to train mental health professionals with a focus on relationship and the experienced body, weaving neuroscience, polyvagal theory, epigenetics, trauma and attachment into clinical practices. She is a frequent speaker at conferences world-wide.

Serge Prengel, LMHC is the editor the *Relational Implicit* project (<http://relationalimplicit.com>).

For better or worse, this transcript retains the spontaneous, spoken-language quality of the podcast conversation.

Serge Prengel: This is a conversation with Marti Glenn. Hi Marti.

Marti Glenn: Hi Serge. I'm so excited to be here, I just want to thank you for asking me.

Serge: You're very welcome, it's really nice to have you here. And...maybe we can start with a bit about your background; you've been involved in somatic psychotherapy for a long time.

Marti: Yes, I have. It's been the bedrock of my work for a long time. My foundational training was in very body-oriented Gestalt therapy and brought this into the pre- and perinatal, and moved the pre- and perinatal into the work that we were doing with the whole person, including bodies. All—very, very exciting—so I found myself, not only in private practice but also very early on, training other therapists. Training therapists both as a professor in graduate school—several different graduate schools—and in professional training seminars.

Serge: Mhm.

Marti: And my husband and I started Santa Barbara Graduate Institute, which was the first doctoral degree offered in somatic psychology. It was a very exciting time for about a decade. And we're able to bring that forward, so I'm very passionate about mentoring and helping the younger professionals gain confidence and new skills, and help them find new opportunities.

Serge: Yeah, yeah. So there's...so there's a sense of pioneering the field—

Marti: Yes.

Serge: —because until relatively recently, training in somatic psychotherapy was something that was done by individual modalities. And not something that had...that went beyond specific modalities. So do you want to talk a little bit about what it was like to create the field, if you want?

Marti: Well, —now, I have to say, there were three other schools, Naropa, JFK and CIIS, who had already had masters degrees and had really led the field in that way—but to bring it in to a doctoral level, with research and—and doing research in the field of somatic psychology, we focused more on...—the experienced body—rather than a technique or a particular modality. Judith Weaver was our first chair and really helped us craft the curriculum. I know you've interviewed her, and my hat's off to her amazing expertise, and so our foundation had to do with awareness in the present moment, in the relationship, in the body: a lot of “what are you noticing right now?” And her training, as you may know, was with Charlotte Selver—

Serge: Mhm.

Marti: —and the wonderful, amazing mindfulness, I mean, the neuroscience has just now gotten us into this—and— certainly for three thousand years we've had mindfulness—on another planet, it seems like—but now we're bringing it all together. And it's very, very exciting to think that we're bringing mindfulness and body awareness as well as all these wonderful techniques. We don't want to throw the techniques away, but we want to bring them together now with the research from science in a way that is very nurturing and healing. And I think weaving these together now is our challenge and our opportunity and our excitement in moving this field forward.

Serge: Yeah, yeah. So that sense of weaving all these approaches and techniques into a broader vision of dealing with the experienced body.

Marti: Yes. Yes. And now, as we all know, started in—probably—it's hard to say where it started, but with the advent of attachment theory coming into counseling psychology, affective neuroscience, now polyvagal theory, epigenetics, certainly trauma, and prenatal and perinatal psychology.

Serge: Mhm, mhm.

Marti: All of this is coming together with somatic psychology, body psychotherapy, and actually helping us to create a much more effective healing practice than we have before.

Serge: Mhm, mhm. So the key word...the key word in what you said is “create a more effective practice.” So maybe talk—maybe that's something we can talk a little bit about it, including your approach within the context of academic institutions on research. You know, so we're not talking about pre-conceived ideas, we're not talking about ideology, but we're talking about being more effective.

Marti: Yes. Absolutely. What we've learned just absolutely blows my mind. What's coming out of all of these fields and they are beginning to recognize that body psychotherapy is vital to the healing process. And one of the things that we've added, the thing that...I'll just back up for just a second and say my husband Ken and I are co-directors of the STAR Foundation. And we offer ten day

healing retreats—we offer four ten day healing retreats each year—and then we offer professional training to train people to be facilitators. And one of the things that I think body psychotherapy has been very forward-thinking in is that we need more time, we need blocks of time within a session. The fifty-minute hour is great if you're just thinking about things or you're solving a problem. But if you're going deeply within the body, in the relationship, you need time for that to deepen and explore. And so I actually came up with a little anachronism that I call "TECI", which is the very opposite of what you'd think it would be, but the T stands for Time. Allow a block of time. Many of our therapists now are going into ninety minute sessions, some two hours, some will do two or three hours maybe every other week, and certainly a retreat—as we do at the STAR Foundation—helps people go very deeply and very intensely with a ton of support into their very early woundings or early experiences that really create the foundation, the mental model it's called, for how our body expresses itself and keeps us...you know, keeps us going in directions that really are not very effective.

Serge: Mhm, mhm.

Marti: So the T of TECI stands for Time, allow more time in the session, and the E, which everybody in body psychotherapy knows, that we have to have an Experience. It's not about understanding, it's not about knowing, particularly—although that's helpful—but it's in the present moment, in the body, we slow the pace, we use our mindfulness, our tracking, our focusing. We allow the storytelling to bring us right into an experience where there are fewer words.

Serge: Mhm.

Marti: And, you know, now that that's accessing a whole different part of the brain, and this mindfulness, awareness, and just simply asking, "And what are you experiencing right now?" or "What is that like for you right now?" Slowing the pace. And then the C of TECI is Connection. We allow more Time, we focus on the Experience, and then we bring it into the Connection. So it's here and now, I and thou. You know, Martin Buber said it so beautifully, that it is—the healing is about the connection. So that brings in the attachment theory, it brings in the polyvagal theory, that in this present moment, we're creating safety; we are, hopefully through the experiences we have, healing some of the old wounds and helping people to really recreate their mental model—what Dan Siegel calls a "mental model"—we all have—and we get to it through our early experience in the body—we all have things that we believe about ourselves, or have believed, that really aren't true, but we came to them long before we have language, long before our forebrain was developed. And so it is very much in our experienced body, the part of us that feels like "I'm not okay."

Serge: Mhm.

Marti: "I shouldn't be here." "Somehow, something is my fault," or, and/or, "The world is not safe."

Serge: Mhm, mhm.

Marti: And we also decide how I have to be in the world. I mean, for me, I was raised in a pretty crazy family, and I decided that I had to take care of everybody, and I did a really good job of it, you know?

Serge: Mhm.

Marti: But it was at a cost, because I didn't grow a Self. And so through this experience in the body and through connection with another, we can have these—what Stern calls—“moments of meeting.” Moments of “I'm here with you, and you get it, and you're here with me, and that being here together affects me as much as it does you.” I mean, those moments, as you know, are so precious.

Serge: Yeah.

Marti: And so then the other part of TECI is the Integration. After we've had the Experience, we've really deepened the Connection, and at a certain point, the body, the Experience tells us, “Okay, we've done what we needed to do here,” and we're ready to Integrate it, bring it back into the left brain knowing, and take it home. And so all of this, as we now know, reprograms our brain by creating new mental models.

Serge: Mhm.

Marti: “Maybe I'm not so dumb. Maybe it is okay for me to be here. Maybe I'm lovable.”

Serge: Mhm.

Marti: Of course I have lots and lots of stories, but in a nutshell, I think bringing all of those together is what changes our epigenetics, changes our DNA—our DNA is not our destiny, which we know now—and it's through these experience with a connected Other that we are able to change our mental model, change our DNA, and help people heal and live the life that they really need and want and deserve having.

Serge: Yeah, yeah. So you're talking about these four pillars of Time, Experience, Connection, and Integration. And maybe let's go back to the first one, Time, because in a way, without Time it's harder to have the others.

Marti: That's right.

Serge: And so maybe it might be interesting to talk about what you notice happens when you have a ninety-minute session, or two hour session, that...of course we don't know what would have had happened if it had only been an hour for sure, but just your sense of example of what happens there.

Marti: Sure. Well, just to back up and say in the seventies, I think all of us who were around then, did these very long intensive weekends and we went a little overboard, we pushed a little more—at least I did, I don't know about you—than was able to be integrated. But now we know that having that extra time and sitting with it and saying things like “Let your body do what it knows how to do.” And we might be right there supporting the body, supporting the hand that goes out, and you just put your hand under it. Or the body that moves forward, and very often—this is going to sound really silly—but very often if someone is sitting in my office and they lean over and I put my hand right on their forehead and they almost give me the weight of their head.

Serge: Mhm.

Marti: Sometimes they will go right into a birth memory, or a birth sequence, or a very early memory. Just that piece.

Serge: Mhm, mhm.

Marti: And so, having that kind of time is important—and now, in working with people I often schedule at least an hour and a half. And I will say I have more time if we need it. So I will give myself more time, and then I simply charge them for whatever time we use and I'm very careful about that. And you get to know your client. You know, and it's very interesting, you get to know how much time they need. But most of them, if you're working in the relationship, in the body, in the felt experience, they're just getting to where they need to go at about thirty minutes. And so we need to give them that time to explore and investigate what their body is telling us and to support that.

Serge: Yeah, yeah. So maybe some of the things that happen with more time, you know, that you notice, say, at the third half-hour or the fourth half-hour that might not have happened before.

Marti: Well, I was just thinking about a...a young man that I worked with who came in and...he had just flown in for a meeting, and he was in a big hurry, his cab was waiting out front, he had all this luggage, and he had a cart, and he was going out the door, and a toddler ran in front of him and he stopped the cart but he almost wedged this toddler—I don't know if it was either the wall or the door. And he kept playing it over in his mind, he could have killed this kid, I mean, over and over and over and over. And so we sat with that, and "What happens right now as you tell me that story?" And he would say, "My heart's racing, my stomach's tight, and I think, I just shouldn't have been there. I shouldn't have been there." And so we sat with that a little bit. And I ask him, "Is this familiar? Have you ever felt this before? This pounding of your heart, the tightness in your stomach, this feeling of..."—he was feeling anxious, although I don't like to label those, but—

Serge: Mhm.

Marti: —because that takes us away from the sensation, but just describing those sensations, and he said, "Well, I feel this all the time." He said, "I'm in sales, and I'm always afraid I'll lose a big account, and I keep having this pounding of my heart, my gut gets really tight, and I keep hearing, 'I'm not good at this. I shouldn't be doing this. I can't trust anybody.'"

Serge: Mhm, mhm.

Marti: And so we sat with that awhile, and kind of worked with that. And then I ask him, I said, "Was there ever an earlier time where you might've felt this kind of sensation?" And he just allowed that to float to his head, he went, "Well, when I was in junior high I was skateboarding down a hill, and I couldn't stop, and I ran into a fence. And I knew I was going to be in big trouble, I tore my shirt, and it just...it was...and I cut myself, but the worst part was I kept saying to myself, 'I'm not supposed to be here. I'm no good at this.'" And I remembered from his early history that he had been—after he was born—he was in the neo-natal intensive care unit. And so very quietly just leaned over and ask him, I said, "I wonder about this tiny baby who was in the NICU all alone." Because we had worked on that.

Serge: Mhm, mhm.

Marti: And he burst into tears and just cried and cried, which he had not been able to do, and he said, "I'm not safe. I'm not supposed to be here." And I said, "Wow," and he just felt it in this body, and "There's something wrong with me. I have to do it on my own," you know? And he just said all these things. Well that was his mental model. And that's how he was going through the world, believing that he's not supposed to be here, something's wrong with me, I can't trust other people, and if I'm gonna do it, I'm going to have to do it on my own. And so the first thing when he almost had an accident with this child that was so terrifying, the first thing he thought of was, "I'm not supposed to be here."

Serge: Mhm.

Marti: And that was a metaphor, in a way, for his whole mental model of the way he sees the world, the way he takes in the world. So this is just one example of bringing the experience together in the body, and coming out with, "I wonder what's true about that tiny baby."

Serge: Yeah, yeah. And so, in that case, it's very clear that this kind of mental model was not created by the cognitive mind.

Marti: No.

Serge: It is really that body experience that unfiltered—that experience unfiltered by language—that created something over which the language was superimposed.

Marti: Yes, yes. Thank you for saying that. That's really true. We don't have that language when we're little, but as we mature, we place that language on it and then we project it out into the world and our bodies walk around in the world as though that were true.

Serge: Yeah.

Marti: And so the body, with time, the body is able to give us those clues, and just being connected and sitting with it we begin to have an experience of whatever the trauma was, whatever needs to be expressed, and for him it was the tears—the sadness, the feeling unsafe and alone, and he got to experience and express it in a way that he may never have done before.

Serge: Mhm, and maybe we can put in terms of completing—

Marti: Thank you. Yeah.

Serge: —something that he was not able to do at the time.

Marti: Yes. Right. Right. So he brought that to completion in a really beautiful way. And the integrating part is coming back and looking at the cognitive part of that and shifting it and knowing that this feeling in his heart and his gut is a clue for him about that early mental model and then he can work with it in a very different way.

Serge: Yeah. And so, again, at the risk of belaboring the obvious, I just want to point out that, say, somebody might be going at it in a cognitive way and talking about these judgments and these mental models. Somebody might be talking about what happened in early childhood. But very clearly, in what you're describing, the connection was about the present moment experience.

Marti: That's right.

Serge: Because the client was brought into the intensity of the present moment experience and the bridge was about recognizing the quality of experience independent of content. And then going back to the past and...in a way that simply talking about it would have never been able to do.

Marti: Yeah, that's right. And I was right there with him every step of the way with my voice and my facial expression. I was there with him so that he could feel safe enough to allow his body to go into that experience. And then we can come out and explain it and talk about the mental model and all that, but none of that has much value at all unless you have an experience of the safety in the relationship to express that peace and know that I'm safe and I'm okay and all that. But it's not the words—you're absolutely right.

Serge: And I want to jump on something you just said about your own—Marti, you as a person—

Marti: Yes, yes.

Serge: —presence, your own rhythm, the quality of your voice, that sense of interest you have, and maybe talk a little bit about what the experience is for you. To be the kind of therapist you are.

Marti: Yes, yes. It is my greatest pleasure, I have to say, to be able to sit with someone and slow everything down and just be there. And I've had to learn to do it, it wasn't natural for me; I mean, I learned to take care of other people but I wasn't very present. And certainly the mindfulness practices have helped me, meditation, that kind of thing, and being aware of what's happening in my body right now with you, and hearing the tone of voice, as you say. And part of it comes out of the polyvagal theory where we know that when we're tiny, when we're just newly born, we can't crawl to our food. And so we have to use our eyes and our—turning our head—and our voice to reach out. And yet—and crying. But if our mother didn't have that herself, then she's not going to recognize our cry.

Serge: Mhm.

Marti: And so the vagus nerve, which innervates the heart and the gut, is not going to develop as much and as strongly as if we had a mother or parent who was really present and available. And so I had to learn that myself, I didn't have it. I had to go back and learn to receive, learn to receive eye contact, allow somebody to look deeply into my eyes, and notice what that felt like in my heart and my gut. And the sweetness of that—instead of the terror of it.

Serge: So maybe I want to stay a little more there because right now you're talking about the sweetness of it, and earlier when we started talking about this, you talked about the great pleasure that you have in being the kind of listener that you are.

Marti: Yes.

Serge: So these are really positive emotional experiences. And very different from a sense of “I’m a technician, I apply methods”—and you have obviously learned skills and you talk about it. But there is a dimension of pleasure and sweetness in doing that. So maybe let’s stay a little bit more with that if it’s okay with you.

Marti: Absolutely. We know that our nervous system produces oxytocin, which is the love hormone, and that’s what helps us feel so good when we’re connected. And I very often leave a session feeling like my heart is so big I’m not sure I can get out the door! I feel so good—and it’s not that I have done something, it’s that together, we created, we danced, together. And we both were gifted with the presence of each other in this moment. And you know, it doesn’t get much better than that. In life. To be able to have that sweetness and to know that over time, our clients—and you can watch them gradually, gradually learning to trust us a little more, having eye contact—and part of that is us, me being vulnerable, or finding things to apologize for, or having my own foibles. And a lot of it is just slowing down and being curious and being present.

Serge: Mhm, mhm. And I want to relate this to the C in TECI about Connection.

Marti: Yes, yes.

Serge: And what we’re talking about is not connection in an abstract level.

Marti: No.

Serge: But we’re talking about that kind of deep personal connection where you are emotionally present, including the difficulty—you’re talking about the terror—of connection, and also the pleasure of connection. And maybe...to stay a little bit more with that dance between the terror and the pleasure of the connection.

Marti: Yes, and part of that is we have to learn to read facial cues. Some of us do that already, if we had that kind of upbringing and we had someone who read our facial cues. Otherwise, we have to learn and...just to be present and be curious. So we’re reading the eyes shifting, or the face, the tiny muscles—particularly the tiny muscles around the eyes—and noticing when the client kind of drops in. You can feel it.

Serge: Mhm.

Marti: And they take a breath, and you go, “Ah. Right there.” And I feel it in my body, I feel it in my gut, I feel it in my heart, I feel it in my seat muscles. I feel myself sitting back a little bit and slowing down. And so that connection happens between the two of us; I don’t really do it. I provide a connection. I provide myself in an authentic way so that in my authenticity—and that’s just me hanging out, being me; I’m not dancing around, I’m not, like you say, I’m not doing any technique, I’m just being curious, tracking myself as I’m tracking the other person.

Serge: Mhm, mhm. And as you’re describing this, I have a sense of how it’s connected to Time, to slowing down time, because you’re describing paying attention to these ever-so-slight movements in the client and in yourself. So that is something—these micro-movements are going to be essentially slowing the pace of how you function as opposed to trying to figure out a cognitive story.

Marti: Yes, yes. It is never about the story. And we know that. The story is important, and the story is kind of the pathway in, but it's—that's not the point. The point is the experience of the story, and a lot of times to ask, "What was that like for you to share that with me just now?"

Serge: Mhm.

Marti: Well, for me to share what it was like for me to hear it and to say, "When you said that, it touched my heart and I noticed my heart got really warm when you said that. And I'm wondering what happened for you." Because partly we're modeling but we're also connecting and being vulnerable with them at the same time.

Serge: Yeah. So maybe as we're coming to the end I want to see if there is something else you might want to say or if we leave it at this.

Marti: Well, I appreciate having the opportunity to talk about this, and to know that all of us work in very different ways—there's not a wrong way or a right way. In the retreats that we do we find that having ten days is pretty remarkable to have people dip in, integrate, dip in, and continue to deepen for about the first five or six days. And having a very special one-on-one, we have a very large staff—for, let's say, twenty participants we'll have fourteen staff members, which is unheard of—so just like in individual therapy, you have the time and you have the space and the person feels like, "I'm not being rushed, you're here with me, and whatever needs to happen happens." And so I encourage all of us out there doing this work to look at that and—and a lot of people have, I mean, many people have, many of us have been doing it for many years. And sometimes we're constrained by insurance companies and things like that, but sometimes there're ways around that. Just something to consider.

Serge: Yeah, great. Thank you Marti.

Marti: Thank you.

 *This conversation was transcribed by Helen Hu.*

© 2015. All rights reserved. *Relational Implicit* and its web address (relationalimplicit.com) should be properly cited when these contents are used in any form.