



Judith Hendin

Relational Implicit September 2009

Judith Hendin, Ph.D., directs the *Conscious Body & Voice Dialogue Institute* of Easton, PA, and New York City. A beloved teacher and Voice Dialogue facilitator for 20 years (working with the many selves within us), she has taught in the U.S., Canada, and Europe, and presented at the U.S. Association for Body Psychotherapy. Drawing on her discoveries of healing the body through inner selves, Judith wrote the book, *The Self Behind the Symptom: How Shadow Voices Heal Us*. Her work is enriched by her background in psychological energetics, deep bodywork, and sacred choreography. Author and visionary Shakti Gawain calls Hendin, “a wonderful healer whose work I highly recommend.”

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: I'm with Judith Hendin. Hi Judith. How are you?

Judith Hendin: Hello, Serge. I'm well. And you?

S P: Good... So, Judith what is your work about?

J H: Well, this work, which is called Conscious Body, is about following body symptoms to what may be going on inside a person that may be connected to that symptom. Now, that in and of itself, doesn't sound like anything new. I'm aware of that. The slant of this work is that it's based on the existence of inner selves.

S P: I want to just slow you down a little bit because, of course, in lots of ways, it's not new, and many people are familiar with psychosomatic processes. But it's really a way to say, your work is really about taking something that, to the outside, to the lay person, is... totally has nothing to do with the inside, like a headache, like a backache, and relating it to inside, and processing it, and working on it and...

J H: Exactly right, that's exactly right. Yes. And the foundation for the work is Jungian in origin. There is a work out in the world called Voice Dialogue and the Psychology of Selves, which was developed by Drs. Hal and Sidra Stone, clinical psychologists based now in California. And Hal Stone was a Jungian and developed work that allows us to get in touch with these different parts inside. They get to come out. It's a little different from the Jungian work called active imagination that many people are familiar with. In Voice Dialogue, you move over and a part actually comes out and speaks, and has its own energy and point of view, and is very clearly a person in the psyche. These selves occur as opposites within us. There may be a part of us that we are identified with. We call it, in Voice Dialogue, a “primary self.” Jung called it the “persona,” or the “mask.” And there is an opposite, or more buried, part which we called “disowned.” Jung called it “shadow.” And when we are working with body symptoms, usually a disowned self, a buried self, is trying to come up. When we are

familiar with selves, how they sound, what their energies are like, as we work with body symptoms, we can recognize selves that are appearing – a disowned self that is trying to come through, and a primary self that is trying to keep it down because it just has not felt safe to be that way in life.

S P: So there is a theory, a working hypothesis, that there is a primary self, what Jung called the persona, and a disowned self, which Jung called the shadow? And that with the symptom, the psychosomatic symptom, the difficulty actually may be resulting from a conflict where that disowned part, that shadow, does not have the room it needs to express itself.

J H: True. The interesting thing is that each of these selves have energetic qualities. If I can give you an example...

S P: Great.

J H: Let's say there is a part of a person that takes care of other people. I'll let that energy through my voice a little bit. If I let that caretaking part speak, it might sound like this: "Whenever I'm around someone. I'm looking for what they need. It's like I have radar up. Whether it's a family member, or a friend, or just somebody on the bus, I want to help them. I always put them before myself." Now that's a self that comes up sometimes behind a symptom. And let's hear what the opposite self sounds like, and how its energy is different.

"You know what? I'm so tired of that. I want! I don't care about these people! I want to focus on myself! I want someone to take care of me. I'm tired of washing the dishes. I'm tired of doing the grocery shopping. I'm tired of visiting the parents when some other sibling won't do it. I'm really done!" And this energy, if you can feel it, is strong, and would do things very differently.

S P: Yeah. So as you embody these two parts, they come across, not just as parts, but as full people.

J H: Exactly right. That's the gift of Voice Dialogue – that these parts come across as full people. They are full people within us. Now, the interesting thing is, when you're working with a body symptom and you go inside. (And I can tell you a little more of how we do this, if you like, in a moment.) But these selves start to come up. And what usually comes up is a disowned self. And as you heard, it comes up with its own energy. And that energy shifts the energy of the body. Just as when I was demonstrating that for you, my body felt very differently in those two places. You could probably experience that in your own body. Or anyone listening could experience that in their own body. So as these parts come up they fill our body with a different energy, and that's gives us two things, two gifts: We begin to incorporate that disowned self – this shadow self – into our life. And we allow that energy to permeate the body. When we allow that energy to permeate the body, sometimes the body symptom actually goes away. So a lot of people have found that in their work.

S P: Yeah, yeah. So in a way you are talking about something, the symptom is actually a symptom of that energy not flowing? Of not being able to...that disowned self, not being able to express itself.

J H: Exactly right. Now, as we agreed earlier, this is nothing new. We know about blocked energy that can be the cause of illness. What we are doing with Conscious Body is finding the specific self and its particular energy. Shall I describe how we do that?

S P: That would be great, you know.

J H: Okay. The first thing we do is sit with the client, and we ask for all their ideas about what could be going on here. We also ask for all the information about the history of the symptom, medical treatments that have been attempted, etc., ...the results of those treatments. And we take notes, and we allow everything that is known rationally about that symptom to be expressed. There is a self that we work with in Voice Dialogue called the rational mind. You're familiar with the mind. And this is allowing the rational mind to speak.

S P: Yeah. So in other words, it's not something where you just push aside the rational mind in favor of going toward something more emotional or more hidden. But it has room, and it has a purpose and a function and a process.

J H: Exactly right. It took me ten years to discover the different elements in this process. And for example, in this case, if I didn't speak to the rational mind in the beginning, it would always come up in the middle of the session. The person might already be very relaxed, and the rational mind would come up and say, you need some information I haven't told you yet.

So that's when I learned to ask for it in the beginning.

The next thing we do is we speak to the part – again talking in terms of parts – we speak to the part that doesn't want to do this work. That again grew organically from the explorations, over a decade. Because when we are going into the body in this way, sometimes the things that come up are not too dangerous, like the example I just gave you. I worked with this woman with arthritis that discovered this part that wanted to take care of her, versus this huge caretaker. That kind of thing can come up, but other things come up that are really deep and difficult. We are diving into the psyche, and we need to get permission. If we don't, the road is very often blocked. Again this is learning through experience. I'll tell you a very short story about it.

I was working with a woman who was coming for quite a while. She was herself a therapist. She was coming to work on a body symptom. And every time she would get here, we would talk about many things, but would never get to the body symptom, even though I would bring it up now and then. Long story short, one day I finally said, "I wonder if there is a part of you that doesn't want to do this work with the body." She said, "No, not at all. I drive 45 minutes each way. I'm giving my time and money. I want to do this." I said, "Would you just humor me, and see if there's anybody around?" And so she knew the way we work in Voice Dialogue. She moved over, and we met the part of her that didn't want to be there. It crossed its arms, it crossed its legs, and sort of snuggled back to the corner of the sofa, and said, "Well, you found me, and I do not want to be here. I have no idea what's going to come up, and I do not want to do this work with the body." And I spoke with it and said, "I'm so glad to meet you." And it said, "You are? You must be kidding. I thought you wanted to get rid of me." I said, "Oh, no. We want to meet you. Talk to us. Tell us your concerns. Tell us what you'd like us to do." And we talked for about half an hour. Then I said, "Could you describe yourself?" And it said, "I'm a knight, in full armor, on a horse, with a ten foot lance. And I will not let anything endanger her."

S P: Wow.

J H: And I said, "Thank you so much." I spoke to the woman again, and she moved back to her original seated position. I said Wow and she said Wow. She was, in fact, an artist, and I asked if she'd be willing to draw this knight. And she said, Let's see. And the next time she came in, she brought in an oil painting she'd done. It was about 3 feet by a foot and a half, or something – of a knight, in full armor, on a horse, with a lance. We put it up on a tall stool in the office, so that its presence was

there, and we spoke to it again, of course. And we had its presence there. And the work proceed from then on.

So that's just one interesting story of this part I call the gatekeeper. It's known as "resistance." And we work with it. But it's very useful and productive, with it, and talk with it, particularly if you're going deeply into the body.

S P: Yeah, so they're very very welcoming. But also very much, as you're describing her position, you're describing the crossing the arms, crossing the legs, so that it's a sense that her whole self becomes that.

J H: Exactly right, exactly right, yep.

Okay. So, following the trail of how we find the self behind the symptom... Once we've done that, if we've gotten the green light from the gatekeeper – and sometimes, by the way, we don't, and we honor that –if there's been buried trauma a gatekeeper can be very strong, and we work with that, for weeks or months. We can also track it in dreams as it may arise, as images of a path in the woods that peters out, or a person walking in a hallway, and the hallway gets smaller and smaller till there can be no more forward motion. Images like that show us how strong the gatekeeper is, and we honor that. When we do, we are allowed in, when it's safe.

Let's assume we've got a green light. The client lies down, either on a body table, or the sofa, or the floor, or wherever they are most comfortable. I talk them through a brief relaxation, a very common one just to relax the whole body, emphasizing the relaxation of the rational mind, so that the body psyche can take over. And then the client focuses their attention on the energy of the physical symptom. Let me clarify, it's not on the body part. So, if there's cancer, we are not talking to a breast. It's also not focusing on the physiology of the symptom. If there's cancer, we are not talking to a tumor. We're just acknowledging there's an energy there. We don't know what it is. But there's an energy.

S P: So, just to backtrack a little bit, when the person is relaxing, is the person in the specific self? The persona? The disowned self? Or is just the person relaxing without being in any particular self at that moment?

J H: The person is relaxing without being in any particular self. We are on the journey to discover the self. So they are just themselves. No particular self. If it's Harry, it's Harry.

Okay. When they've relaxed, they let their attention float into the energy of the symptom, and wait for any images or messages that may arise in any form. It can be visual, or kinesthetic, like a body feeling, or it can be movement. It can be auditory, etc. And they just wait for anything that may arise, particularly if it makes no sense.

And as this arises, we follow it. So, let's take, for example, a young woman that had not had her period ever, without, except for, a couple of years when she was on the pill. She was in her twenties at the time. And so she, after we had gone through the steps I already mentioned, she relaxed and allowed an image to arise. And the image at first was "brown." "Stay with the brown," I said.

"Brown, the brown is moving" (she said). "Stay with the moving brown. What's happening now?" I said, or asked. And she said, "Well, it's looking like an animal." "Stay with it. What kind of animal?" "It's a squirrel." Ah ha! "And the squirrel, what's it doing?" (I asked). "It's looking around." "What's it looking for?" (I asked). "It's looking to be sure no one's going to hurt it."

Now, if you follow that, you'll notice I have to put my rational mind completely out of the picture. Because there's a part of me that would love to guess what it is. But I just put that aside continually, so I'm almost in a Zen kind of state, just being open to whatever is arising. I have to be very "not

smart" at this point. When she says, this squirrel is looking around, looking to see if someone's going to hurt it, can you hear that has the feeling, the energy of, a self? We found someone we can talk to. There's someone inside that is concerned that someone may hurt it. So we found the self. It's not a particular, familiar self, like the "cares for self," like the "cares for one's self," I mentioned earlier. It's a very particular self, a very particular energy. And we talked to that one for quite a while. And I asked it if it were around in this woman's life. "Oh yes," (it said), "I was always having to look around to see if I was going to be hurt."

I'm sure you can hear, Serge, what's starting to arise?

S P: Yes.

J H: And I asked if it could give me some examples. I was taking notes. It was one example after another after another, of physical abuse in the family, in the extended family, in the neighborhood. "Have you ever spoken about this?" (I asked). "Never." So that was what was calling from behind that particular symptom. By the way, she did get her period immediately. She's been fine. She had the work to do of dealing with that issue.

S P: Yeah.

J H: So, what that shows us is that the body is such a gold mine for a therapist to use. When someone walks in with a body symptom, to me that is a gold mine – just as much as a dream – to lead to inner process, what needs to come up. And we have a way of finding out what the issue, or issues, are that may be, that are trying, to arise.

S P: Yeah, definitely. So that example shows very much that sense of what you call a self behind a symptom, that process of letting the self emerge.

J H: Yes, exactly.

S P: And how it started from just relaxing and sensing the energy of the symptom. Not its manifestation, not its location, not the story that we tell ourselves about it, and what it means, but just getting relaxed enough to be able to sense the energy, and getting some kind of felt sense of it.

J H: Well, to relax enough to allow symbols to arise that you follow – and eventually energy, because you're following the energy, and the self has energy. You're following it to the energy of the selves.

S P: Let's talk a little bit about energy, and energetics. You talk a little bit about energy. Can you say a little bit more about that?

J H: Great. It's a word I'm so glad I can use freely. I used to shy away from it myself. I didn't know about this energy stuff, and I worked for a while in a town, I couldn't even speak (about it) in. Once I saw its validity, now one is free to speak about it openly, which is a good thing.

Each of the selves within us has its own energy. If we think about the hard working part of us, that makes the lists, that keeps us going – it's 3 o'clock in the morning, and that part of us says, "You'll feel so much better if you just finish up this last thing." There's energy like that.

There's, let's take a very different energy, of a playful child that just wants to go out and have fun at the end of the day. Or there can be an inner critic that tells us how wrong we are, on every single thing we're doing or saying. I'm just giving you a few examples on the energy of selves. And as we become

conversant in the language of selves and their energies, we can work with them in the body. As we tap into the energy of the self behind the symptom, whatever that particular energy is that emerged, that energy can permeate the body and help the body to shift and often to heal.

S P: So yes, let's talk to continue this. As you have that energy, in some cases you mentioned, in the case of this client, after connecting with herself, had her period. But I assume a healing is not always a result of sudden insight, but more of a question incorporating some of that energy into life. So can you address this?

J H: Absolutely. You're completely right. And first of all, let me say that, and forgive me, I don't mean to correct you, it's just fine... The reason her body shifted, I believe, after working with folks now for almost 20 years in this work, was, yes... Insight is good. But as she spoke, the energy of that frightened child was present. Her fear was allowed to be present for the first time. And it was the allowance of that energy, that fear of the child, the frightened child. Just think about a frightened child for a moment. That's a particular kind of energy. All right. The allowance of that energy, not just the insight, that there had been abuse around her, but the allowance of the energy of the frightened child, to be actually embodied, as she was actually speaking.

S P: That's a major point we're talking about – that energy, that in a way was frozen in the body, that she had been unable to feel, that she hadn't been able to feel before.

J H: Exactly, that's exactly it.

See, it's so different. I've had a client that got to something. She had a body symptom for decades, and she through a Conscious Body session. She went to a place...ah , I'm pausing because I wish I could give you the details, but I can't on this particular person. But she got to a place of childhood, and the insight was there about what had happened to her in childhood. But it wasn't yet safe for her to experience it, as the child she was then. And the symptom did not go away. So you see what I mean?

S P: Absolutely.

J H: So she had the insight, but she didn't have the energetic experience as that actual child.

S P: Yeah, and that's again, that's the part where all the work goes on, is about, 1) that relaxation, and 2) is about having had the contact with the part that is the gatekeeper part giving more room to that disowned self. And all of this process is actually a way to make it more possible to get the actual experience.

J H: Yes, very true. So I can tell you, there are 4 different kinds of things that come up in an overall view. 1) One is a pair of opposites, a very straightforward pair. Like the caretaker and cares for self; a very hardworking pusher versus one that wants to relax; a part that wants to be special all the time versus one that carries ordinary energy; responsibility versus carefree energy. 2) The second thing that comes up, and in my experience 30% of the time, is some form of the inner child. 3) The third that comes up is some kind of emotion that's been buried that needs to be expressed. 4) The fourth is some kind of trauma that needs to be remembered and processed. Those are the 4 overall kinds of selves that come up.

S P: So, in the course of working with a client, you have that as a road map to check, in a way, how the process is going along?

J H: Yes, it gives you... it's nice to have kind of roadmap, so as material emerges, you can go, okay, I know where I am. Because you're in the psyche, and anything can come up. I'll give you another example, shall I?

S P: Sure.

J H: Okay, it's a graphic one. A woman came with a very advanced form of cancer. I will tell you, this woman did die. For various reasons, she did not continue her work with this, and who knows if it could have helped or not. But what came up for her was dramatic. It was a clear cut pair of opposites. As we began to work, she relaxed. She got the image of a knife. I said, "Just stay with that knife, please." She said, "Okay. That knife wants to kill somebody." I said, "Who would that knife would like to kill?" (She said,) "That knife would like to kill my husband and my daughter." "Okay," (I said), "Can I talk to the part of you that would like to kill your husband or your daughter?" (That part answered,) "Ugh, I can't stand the way they treat me! They don't listen to what I say." Etc., etc. And I was delighted this part was here. I could feel this was the disowned self trying to come up. But in the blink of an eye, she switched energy, and started to cry, "But I'm a kind person. I would never do that. I'm spiritual. I'm loving." So where is that coming from? Do you see the interplay of opposites?

S P: Yeah, Yeah.

J H: So, as you are familiar with the roadmap of what may come up, and the energies of selves and their opposites often at play, then you can field what's emerging, and deal with it appropriately.

S P: So, what's the, in a case...what's the inner child? Is that something that has a relation to that pair of opposites, or is that a totally different self?

J H: It's a self that often comes up on its own. It's buried. The inner child can come up from a body symptom in several forms. One is, as I mentioned a little earlier, it can come up as a playful child that needs to come out in one form or another. Another example would be a woman I worked with who had advanced cancer – again, a woman who wasn't able to follow up, and did pass on. But she came for a session, and out of her cancer emerged a child that said, "I'd love to explore." I said, "Would you now, would you like to explore this office?" And I work in a space that is amenable to that. So she said, "Oh, can I?" I said, "Sure, go ahead. So this child became embodied, it was walking around. There are lots of plants, and some of them really big. And she said, "It feels like I'm in a jungle, and I really like this." I said, "Oh, do you get to this much in her life?" She said, "No, I keep wishing we could go out to the woods, and stuff, but we never get to do that." That's one example of a child that wants to come out and play, or be adventurous, or something like that. Another example is a sad child, a child that has tears to cry and has never been able to do it. Maybe they grew up in an environment where there was strict parent that said, "you'd better not cry, or I'll give you something to cry about." I hear about that in this country, and in other countries where I've taught. That can be very common. And the tears of that child are buried and need to be cried.

S P: Yeah.

J H: Another child that comes up is a frightened child – like, as I mentioned earlier, with the squirrel. Where there's fear, deep deep fear from something that happened from childhood. And it needn't have been horribly abusive. It can be some kind of fear that needs to emerge, but from that child. It's not our adult remembering it. That can be a step in the right direction. But it's the child inside remembering.

There's another one, that child that comes up that says, "I exist!" It was so ignored, it's says, "I'm here. Somebody see me!" So that's another one.

S P: Yeah, so we are coming the end of the conversation. I want to just say, is there something you want to say to wrap this up? Or something that might be missing to give a sense to people about this work?

J H: Okay, is it all right if I'm practical?

S P: By all means.

J H: Okay, well. As I say, I think, first of all, this work can be integrated with any kind of psychotherapeutic work. It's not hard to learn. It takes some time to get to understand and recognize and experience one's own selves. It's very straightforward work to do. I encourage people to learn. They can, of course, visit my website for trainings and things. I have an article that may be coming out in the journal, of some research that was done over a ten-year period, with some healing results with clients with this work. And there's a book about it. And there are ways to follow up if they're interested.

S P: Wonderful.

 This conversation was transcribed by Lauren Booker.

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