Excerpt:  She had this dream where she was standing in front of a desk, and on the desk there was a broken statue of a dog, and it was all like being smashed, not just broken, it was all in tiny little pieces and she was trying to fit them back together so that she could glue them back together in the dream. And the task, you know, she would get too...you know, it's like a horrendously huge puzzle that she was trying to do. And she'd just get two pieces together, like to try and fit them together and then they'd fall apart, then she'd lose them in the pile again and just became overwhelmed with it. And in the dream, just kind of slumped over the desk, with her head in her hands and began to cry.

Introduction:  That was the voice of my guest, Nancy Hunter, describing the dream of a patient. Nancy Hunter is a psychotherapist and private practice in Toronto, Ontario Canada. Nancy's been working in the field of personal change since 1989, and she is a clinical member of the Ontario Society of Psychotherapists, a master practitioner of classic and advanced Ericksonian hypnosis, certified with the national guild of hypnotherapists, certified in advanced emotional freedom techniques, a master practitioner of Neurolinguistic Programming, and a registered Canadian art therapist. Nancy has experienced working with a wide variety of clients, life issues, from the simple to the more complex. She's worked with people having concerns such as smoking cessation, weight management, habit changes, phobias, anxieties, depression, child abuse, or trauma: sexual, physical and psychological, and disordered eating. She has worked with children as young as four and adults as old as seventy five and every group in between. Nancy graduated in 1989 from a two year graduate level course at the Toronto Art Therapy Institute. Since then, she's worked in hospitals, schools, and other community institutions. Now here's the interview.

Dr. Dave:  Nancy Hunter, welcome to Shrink Rap Radio.

Nancy Hunter:  Yes, thank you, David.

Dr. Dave:  I'm so glad...

Hunter:  I'm very pleased to be here.

Dr. Dave:  I'm so glad to have you. You know, every now and then I get an email from a listener who I realize would make a good guest for Shrink Rap Radio. And I think you wrote me not long ago, that you've been a listener for some time and in response to a conversation that I'd been having with my friend Jerry Trumbule on Shrink Rap Radio live about hypnogogic and hypnopompic imagery and I recall you saying that you had those sorts of experiences from a very early age.
Hunter: Yes.

Dr. Dave: Is that right?

Hunter: Yes, I don't know how early, but since I was much younger than I am now, certainly.

Dr. Dave: Yeah, yeah. Now I know, you know, as a result of the email that you sent me, I know that you have been doing therapeutic work for about twelve years. Is that right? About twelve years?

Hunter: Um, actually it's longer than that, since 1989, I graduated.

Dr. Dave: Oh, okay. So, however many years that is. (Laughs)

Hunter: Yeah.

Dr. Dave: My math is...

Hunter: Yeah, well it's....

Dr. Dave: My math isn't that.....

Hunter: Yeah, I can't figure it out. It's close to, it's getting...it's like eighteen or seventeen or eighteen.

Dr. Dave: All right. And you're up in Toronto; I should probably mention that as well.

Hunter: Yes, I am.

Dr. Dave: And so, for those years, you've worked in a variety of modalities, including art therapy, NLP (NeuroLinguistic Programming), EFT (Emotional Freedom Technique), and Hypnotic Dreamwork, or hypnosis generally. And also you mentioned Dreamworking, using hypnosis, which I was particularly interested in. So I'd like to touch in on each of these, during our conversation. But let's start off by going back to 1989 or somewhere thereabouts and let me ask you: what first drew you to this therapeutic work? To wanting to do this sort of work with people.

Hunter: Well, I guess it was my own process, you know. I'd gone through a lot of stuff myself, and needed a lot of therapy; getting through a lot of therapy, and um at some point during the course of that, said "I want to do this."

Dr. Dave: And I think that's often how people come into it. It's certainly one of the best ways to learn is if you've been in therapy yourself, particularly with, you know, one or more good therapists, then there's nothing like the modeling and the experiencing from the inside out to learn it.
Hunter: Yes, that's right. Actually, I think it's essential for anyone who wants to be a therapists or psychotherapists to have their own therapy and to have that experience, whether they think they needed it or not. (Laughs)

Dr. Dave: Yes.

Hunter: I mean, I definitely knew I needed it. But...

Dr. Dave: Uh-huh.

Hunter: Yeah.

Dr. Dave: Right, I did notice letters attached to various certificates after your name, but I didn't see any graduate degrees and so let me just ask you about that, and whether or not that creates any licensing problems for you up in Canada.

Hunter: Well, actually that's a big question because we're just starting here in Ontario, to regulate psychotherapy as a profession. It hasn't been regulated until now, pretty much anybody could put up a shingle calling themselves a psychotherapist whether they had training or not. So, I'm not sure exactly how that's going to go. But, I have a Bachelor of Arts from a college in Hamburg, Germany. I was living in Germany for quite some time. And that was enough to get me into the Toronto Art Therapy Institute, here in Toronto. Which is a graduate level diploma program, they weren't and still aren't, as far as I know, directly connected with a university. So, it didn't give a university degree, but was a graduate level program. And, so that was my sort of in-road to being a psychotherapist, was the art therapy training.

Dr. Dave: So you think you'd be able to get grandfathered in or grandmothered in, if...some kind of licensing...

Hunter: Um, quite possibly. That's what we're going for, I'm a member of the Ontario Society of Psychotherapists, and we as a association, or a society, just being involved in the process of building path and now, you know, being involved in the process of putting it into practice, and we are hoping that, that happens. Because the Ontario Society of Psychotherapists is one of the, I think, well, one of the main associations in Toronto that has served Ontario, that has tried to regulate the psychotherapy profession even before it was formally regulated.

Dr. Dave: Yes, it is a lot more regulated down here, as you're probably aware.

Hunter: Yes, yes.

Dr. Dave: And that was partly what stimulated my question, because I think here, if one were to call oneself a psychotherapist without the requisite graduate degree and licensing, then they could be up for some kind of legal action, and at the same time, you know and
I've got mixed feelings about all of that. I do think it's important for people to get, to be well trained, and to have a good sense of ethical boundaries and so on. And it seems like you have in fact sought out a considerable amount of training, plus as I've mentioned earlier, I think having been in psychotherapy, I see that as a kind of training as well.

Hunter: I do as well. Yes, definitely. It's a big part of that I think. Yeah.

Dr. Dave: Yes. So you started out in art therapy and so you went through a two year program. It sounds like that would have been reasonably vigorous. What's...

Hunter: It was. Yeah. There were papers to write, you know, survival along the way, throughout the program as well as a thesis to write at the end. And we had practical group as well as classroom things and you had to undergo your own therapy during the course as well.

Dr. Dave: Yes. And what drew you to art therapy in particular?

Hunter: Well, because I had already been an artist, so it seemed like a sort of natural thing to do, I guess. You know, sort of an extension of what I'd already been doing. Because I'd been involved in my own therapy and I was an artist.

Dr. Dave: Yes, and I think often, that's a path. I know of other artists who've made that transition and branched out into art therapy.

Hunter: Umhmm.

Dr. Dave: And, what have the challenges and the rewards been? Your involvement in art therapy?

Hunter: Well, I mean it was certainly challenging in the beginning. I remember starting in the program there; and they started you out with practical right off the bat. And I had no idea what I was doing and suddenly I was in a room with a young boy who was quadriplegic and I've never been involved with anybody with that kind of disability before. And...

Dr. Dave: Oh my goodness.

Hunter: (laughs)

Dr. Dave: How are you supposed to do art?

Hunter: We could barely talk.

Dr. Dave: How are you supposed to do art with someone who's quadriplegic?
Hunter: Well, he had some um, I had to do a lot for him in terms of preparation and that kind of thing. But he had some kind of movement with his hands and he loved it. He just so enjoyed that. He would use mostly, you know the finger-paints and he could move his hands to some degree but, you know, it was very uncontrolled and actually, I remember one of the things that he really loved doing was painting himself. (laughs) He'd get the paint all over his hands and then put it all over his face and would refuse to let me wash it off before he left the room and would go through the halls then with his face all green, or red or multicolored. (laughs)

Dr. Dave: Wow, that certainly must have communicated to you that he was taking some joy in this process.

Hunter: Oh, he really was. I could definitely see that, that he was really enjoying it. But it was so frustrating because I had such a hard time understanding him.

Dr. Dave: Yes, yes. And so I would think one of the challenges for somebody with, say after you newly get your degree in art therapy is: how do you find your clients? Because it's hard to imagine people out there saying to themselves "Hmnnnn, I think I need some art therapy."

Hunter: Well, you know, after I got into private practice, I found that pretty hard. I mean when you're in an institution where they're doing art therapy, your clients are there. You know?

Dr. Dave: Yes, that's it exactly.

Hunter: Whether it's a school or whatever it is, but in private practice I did find that a challenge because a lot of people say "Oh, I'm not an artist" and "I can't do this" and of course you tell them until you're blue in the face that you don't have to be an artist and it has nothing to do with making a good picture; you don't have to know how to draw. And people still have that kind of reluctance.

Dr. Dave: Yes.

Hunter: So that was certainly a challenge. But I found, actually, after I added hypnosis to the mix, that I got more clients because people seemed to be fascinated with hypnosis as I am. (laughs)

Dr. Dave: Yes.

Hunter: And was.

Dr. Dave: Yes.
Hunter: And that brings them in more. So, I actually end up doing more of that kind of thing now in private practice than art therapy. But I still get people wanting to use to the art and I still use it.

Dr. Dave: Okay, so that's moved into more of the supplementary position in your work.

Hunter: Yes.

Dr. Dave: Yeah.

Hunter: Yes, actually, yes.

Dr. Dave: Yeah, and just before we leave that... You say a person doesn't have to be an artist to...

Hunter: Absolutely not. No.

Dr. Dave: Say some more about that. Of course, I sort of know something about that. But maybe all of our listeners don't. So, talk a little bit about what the, you know, what's the rationale for doing it and why is it that a person wouldn't have to be an artist to get value from it.

Hunter: Because it's really just about letting yourself draw, or paint or use whatever materials you want to use, in whatever way comes naturally to you. It's not about making a pretty picture, it's about drawing about, around, sort of the things that are issues in your life and it's a method of communication and expression and it really does help to get to those underline issues and uh talk about the memories also.

Dr. Dave: So, do you see it more as a way of communicating what the issues are or do you see it as healing in and of itself?

Hunter: Both.

Dr. Dave: Both.

Hunter: Yes, because it definitely helps to get to the issues because sometimes you know, you draw things then you recognize later that "Wow, that looks like such and such" or "Oh my god, that reminds me of" and it just sort of leads to the real issues that are sort of under the thing you were thinking about. But it also helps into healing, it's just, in expressing it, first of all, it's in the body, as everything is. (laughs) And it comes out through that and that process in and of itself is healing. And plus, it's things that are coming out of your unconscious mind through the body and you can work with them on the page and change them in your picture and that helps to begin a process of change within you.
Dr. Dave: Umhmmm, umhmmm. So in other words, you can express something that is painful and difficult. But...

Hunter: Sometimes much more easily with art materials than you can with, um by talking.

Dr. Dave: Yes.

Hunter: Sometimes you just, you just can't talk about it and some of the experiences you might have had might have even been pre-verbal. And they will still come out in the art.

Dr. Dave: And then you're suggesting that by transforming it on paper, I should begin to maybe express it in a, in a more healed way, or in trying to, maybe encourage people, well, you know, now paint a picture of what it would look like if you felt better or if this problem were resolved.

Hunter: Sometimes, yes, sometimes I suggest that. And sometimes it just happens naturally too. Because it brings in, the unconscious mind, it just brings in all of its resources.

Dr. Dave: Yes, and I think it's a lot like dreaming, you know, that it taps into that same unconscious level and that over a period of time, ideally, and maybe you've seen this, I mean I haven't really. I've done this sort of thing in the context of teaching and not in the context of long term work with, you know, with a therapy client. But, my understanding is, is that as the process, as the healing unfolds, that would be reflected in the artistic productions that the person would make. Just as seems to happen with dreams, that as the therapy process goes on; at first the dreams are very troubling, but as the person gets better the dreams seem to signal that as well.

Hunter: Yes, definitely. Yes.

Dr. Dave: It's like...

Hunter: Yes...That's why it seems to me sort of a natural extension to work with images, not always on the paper but also just in the mind.

Dr. Dave: Yes. So that sort of segues us into your work in hypnosis. So tell us how you got involved in that.

Hunter: Well, I'd done a lot of reading about it before I was formally trained in it. And, of course, the main person I was reading about was Milton Erickson, who was this amazing hypnotherapist.

Dr. Dave: Right.

Hunter: And, um, just transformed the way hypnosis was seen and used, and was so creative with it. Just amazing. And a lot of reading off about just guided imagery and
that kind of thing and I was doing guided imagery with some of my clients before I was formally trained. Actually I remember one client who had been using art actually and was feeling several things in her life and said at one point "You know, isn't there something like that you can" because she had been working in computers and was learning it and so on "isn't there something like a disk that you can, you know like I have this disk I can put into my computer and it just cleans everything up." (laughs)

Dr. Dave: (laughs)

Hunter: And you know, normally in psychotherapy, that sort of warning signal and you got to go "Oh no, it's a process" and you know, and I was just about to start to say that and then because of the reading and the thinking that I had been doing around this, I said "Well, because if this is her own image, you know"

Dr. Dave: Yes.

Hunter: And I'd been reading also a lot about, and I'm not sure if I can remember the woman's name now. She did a lot of work with imagery, in healing from cancer and that kind of thing.

Dr. Dave: Yes, yes, there have been a number of people who've written about that.

Hunter: Yes, yeah. I'd been reading about that, and the main, the most powerful images for that kind of thing are the images that come from the person when they arise spontaneously. It's something positive and significant in their lives and they use that as a metaphor for how the body can do the healing. Well, this woman came up with this, and I thought "Well it's her image, so who am I to say that "no, you can't do that," you know? (laughs) So I said "well, let's explore that." And uh, if you can think of how you would have a disk and you would have something plugged into your body somewhere where a disk like that could go in. So, in the next session we did that and before we actually got started she said "you know, but the disk for my computer, if it comes up with something it can't handle, it can't handle it, you know, if it's not programmed for it." And I said "yes, of course but your disk is not so limited." (laughs)

Dr. Dave: (laughs)

Hunter: Because it's your disk, you know.

Dr. Dave: Yeah, yeah.

Hunter: It can handle anything that needs handling.

Dr. Dave: So you took her through some kind of imaginative process.

Hunter: Yes, yes, just relax and sit and imagine, you know, that you have this plugged into you and you're inserting the disk, and I just let her do it. And as I watched, I saw a
transformation come over her, it was amazing really, because I'd saw the expression on her face changed, her posture shifted, and it was quite wonderful really. And afterwards she said "I imagined the disk going in and then all these words kind of circled around me, peace and love and confidence, all these different words were just circling through me, and passing through me." It was such a transformation, it was amazing.

Dr. Dave: Yes, interesting.

Hunter: And she dealt with; she got what she needed in that one session. (laughs)

Dr. Dave: Wow, wow, that's a good story. Now in the email that you sent me, you mentioned that you have a way of working with dreams in hypnosis. Why don't you tell us about that?

Hunter: That sort of came out of um, having heard about the Senoi Indian tribes at, I believe you mentioned in one of your conversations.

Dr. Dave: Yes.

Hunter: In one of your live shows.

Dr. Dave: Right.

Hunter: And in that, they, the whole society is focused around dreams and they're encouraged, from the time that they're children; the first thing they do in the morning is get up and tell each other their dreams and if they have scary dreams, they're encouraged, next time they have a dream like that, to instead of running from the thing that's scaring them, which is what we normally tend to do in dreams, to turn and face that thing and say it's a tiger. Well, you want to become one with the tiger in some way, so either you let the tiger eat you, or you eat the tiger or conquer the tiger, or you engage in it with it, in some way, befriend it perhaps, so that you get from that figure or whatever it is that's frightening you, what it's come to give you. And that's just, I thought that was just so neat. You know?

Dr. Dave: Yeah, I know, we all did when we read that article. It just seemed to, that these people had, you know, without ever having any exposure to Carl Jung for example, had worked out their own way for taking symbols seriously and working with them, integrating them into their lives.

Hunter: Yes, yes. And I thought, you know, they're so fortunate because it starts from the time they're children and it becomes so part of their, the fabric of their lives that, when they do have dreams like that, their natural tendencies is to turn around and face this thing. And I think, because we don't have that kind of thing built into our lives, it's very difficult for us to then, in a dream turn around and face the thing that's frightening us. We still tend to follow our natural instincts and I thought well "If you could be lucid in
your dream, then you can do it." Perhaps, but that's a difficult thing to achieve as well, and most people can't or won't at least.

**Dr. Dave:** Yeah, I know, I've worked at it and you know, some people that I've talked to become very lucid very easily, like other human traits, you know, probably some kind of bell shaped curve and there are some people out there who are on the extreme end of being dream athletes who can easily become lucid, unfortunately I'm not one of them. And maybe...

**Hunter:** I'm not either, unfortunately.

**Dr. Dave:** Maybe, maybe among the Senoi; maybe if you're sort of taught that from an early age then maybe it is a skill that you can learn, and can stick with you through life, you know, if you were born into a culture that had that idea and really supported. But most of us aren't born into that.

**Hunter:** Right. I think in that culture, even if you weren't, even if you didn't become lucid in your dreams, but the principle of turning to face the thing that's frightening you would become more ingrained and you would become more likely to do that.

**Dr. Dave:** Yeah, and the other good lucid idea I want to put out there for listeners while we're talking about this is if you're having a falling dream, which I think most of us have had at one time or another, to try to become lucid enough to turn it into a flying dream.

**Hunter:** Yes, yes. And see that's the basic principle really of the way I work with dreams and hypnosis because see from thinking about the dreams, the way the Senoi dreamt and that kind of thing and thinking, you know, wish we could do that. (laughs)

**Dr. Dave:** (laughs) Right.

**Hunter:** And then, when I've learned hypnosis, I thought well with hypnosis you can do anything, you know, you could go back into a dream if you remembered a dream. You could go back into the dream during hypnosis and guide a person through that dream and change it, and dream it different.

**Dr. Dave:** Yes.

**Hunter:** And resolve it in some way. Like your example with if someone was falling, um, encourage them to fly, or hit the ground. I mean, it's not like in the movies where you die if you hit the ground. You don't. (laughs)

**Dr. Dave:** Yeah, right. (laughs)

**Hunter:** Um.

**Dr. Dave:** Maybe you could teach them to bounce. (laughs)
Hunter: Yes, exactly. (laughs)

Dr. Dave: (laughs) I never thought of that before. (laughs)

Hunter: So that was my thinking with it. And I started doing it with clients and just, it's an amazing thing really because when the person goes back into the dream in hypnosis, it begins to unravel, it begins to, it just continues sort of in a natural way, that the images change and shift in the same way that they would in a dream. It just, it goes on in a very natural way. And if I'm there to guide them through the process and to look to doing things in different ways, then they can do that.

Dr. Dave: Well, can you make this more concrete for us by maybe telling us about a, you know, a case you worked with, one or more cases where that happened?

Hunter: Yes, um, I had a client who had lost a dog, at least not lost it, it had died. It had become very old, she had it for a very long time, and it'd been very sick for a long time and died. And there was a whole grieving process with that. And it had, mostly it didn't, I'm not exactly sure how long it was, close to a year perhaps, or half a year at least at this point and the grief had faded to a great degree. And she had this dream where she was standing in front of a desk and on the desk there was a broken statue of a dog and um it was all in like, it being smashed, not just broken. It was all in tiny little pieces and she was trying to fit them back together to, so that she could glue them back together in the dream. And the task, you know, she would just get too, it was like a, this horrendously huge puzzle that she was trying to do. And she'd just get two pieces together, like to try and fit them together, and then they'd fall apart and she'd lose them in the pile again and just, she became overwhelmed with it, and in her dream just kind of slumped over the desk with her head in her hands and began to cry. And so she told me this dream, and there's more to it too, there was like, there were parts of it before that, see in the dream I usually tend to focus in on the point where there's a higher degree of emotion or that seems to be sort of the center of focus of the dream.

Dr. Dave: Sure, that makes sense.

Hunter: ...important. So I'd focus in on this part and took her back into the dream and as she was sitting there in front I said "So, you know it's impossible to fix this so you're not even going to try now. What would your mother do?" And she said "I just want to take my arm and like sweep it all off the desk." And I said "Well go ahead and do that then." And she did, and, and I said "How is that?" And she said "Ah, it's like I'm becoming this huge monster now, like I'm growing, and I've got big claws, and I'm this huge monster." And that was not pleasant for her, and I brought her then back again to, "Okay, so now you're back sitting in front of the desk again, with it's all on the desk, anyway it was in the dream and this time you're not going to sweep it off the desk, and you're not going to try and fix him. What would you rather do now?" And she just sat with it for a moment and she said "Oh, it's reassembled itself and it's become this very pretty statue of a dog." And the certain pose that she sort of described and uh that was just wonderful for her.
And we had also been talking before the dream about, because she had been trying to clean up her place, too. She's gotten into quite a huge degree of disorganization and we were talking about not forcing yourself to do it, but just, because forcing yourself to do it usually gets you overwhelmed, and then nothing gets done.

**Dr. Dave:** So, as so often happens with dreams that, dreams seem to be expressing at least two different problems, conflicts at the same time.

**Hunter:** Yes, yes and um we talked about it afterwards and I said "So you see what happens when you didn't try to force yourself in the dream to do something." And she said "Oh yes, it just, it just reassembled itself, it just did itself." So like, as soon as she took the pressure off, it reassembled itself and that's kind of, it works with the principle that chaos in her life, that also when she grief over the dog, because with the dog, she said "I was hopeless to do anything for the dog too, it was sick for a long time, it was in pain for awhile." She said "I couldn't even comfort him."

**Dr. Dave:** Did this session seem to help to resolve this continuing grief that she had been going through?

**Hunter:** Yes, yes, because I think also, um, we did talk about this afterwards too. It seems like it gave her a way of keeping the memories and keeping the memories whole without that need to constantly think about how she could have helped the dog better.

**Dr. Dave:** That's interesting, keeping the memories whole.

**Hunter:** For twenty years.

**Dr. Dave:** Umhmm, and that really speaks to me. That the way that the statue got brought back together again.

**Hunter:** Yes, yes.

**Dr. Dave:** Into a whole form.

**Hunter:** It just happened spontaneously within the dream.

**Dr. Dave:** Umhmmm.

**Hunter:** And that's the way it continues. The dream just, the images come. Like to give you another example...

**Dr. Dave:** Yes.

**Hunter:** ...as well of a woman that was going through a lot of changes in her life. She had a very dysfunctional family and she's had a lot of bad relationships in the past. And she was with a man who she said now was really good and kind and generous and very
different from her previous attempts at relationships and but, she was still having a hard
time making a commitment to the relationship. But they were even talking about wanting
to have children and that kind of thing. And so she had this dream where she was in the
swimming pool with this man and they were just beginning to kiss and then there was all
these fishes swimming around them and kind of nipping at her and dragging her attention
away from him. And so I took her back into that dream, and as soon as she got into that
part of that, it changed immediately. It just like, the fish weren't circling around her, but
then it became a tornado and she was in this tornado that's lifted her off the ground and
she said "Oh my god, it's like all the things from my life are in the tornado around me and
just like whirling around," and she's up in the air. And I encouraged her to bring it down
to the ground, and needed to get her back on the ground again. (laughs) And she was
doing that and said, and that's funny because you said bounce, you know, you could teach
them to bounce, well she was bouncing at first. (laughs)

Dr. Dave:  (laughs)

Hunter: When she first came down, why bounced up again and back down and keep
bringing it down, and each time she would bounce a little less, and then she's finally on
the ground; which was a good thing. (laughs) You know, just that concept of grounding
oneself seemed to be necessary in that dream. And she said, now there's all this stuff
around her, and it's just like, it's all a huge, strewn over the whole landscape and I said
"What do you want to do with it?" And she said "I just want to be rid of it. I want to be
rid of it all." And I said "Is there nothing of value there that you want to save?" "No, no.
I want to be rid of it all. Really just like to bury it." And I said "Well, okay do that."
See, I often, if someone says they want to do something. I let them go ahead and do it, and if it turns out not to be the way they thought it might, like with the woman in the
other dream. She just wanted to sweep it off the desk and she did that and she felt like
she was turning into a monster by having done that. And that wasn't a good thing for her,
so, see in a dream it's not irrevocable. You just go back to the point where you began
again and do it differently.

Dr. Dave: In a hypnotic dream?

Hunter: In a hypnotic dream, yes.

Dr. Dave: Yes.

Hunter: But also it allows her to express her anger, but it was without having the
consequences of it, in the dream. So in this dream I said "Well, so go ahead and do that
and let's see what happens." I said "There'll be a ready made hole somewhere you can
put it in." So she did that, she put it all in and began to cover it over with earth and she
says "It keeps coming up, it keeps, you know, coming back up again." And I said "Well
look around, there'll be help for you there somewhere." And um, there were a whole
bunch of garbage men. (laughs) This is what came up for her. There were garbage men
who then helped her to get it all into the hole and bury it and she said "It's still coming up
again." And I said "Well, there'll be something else to help you if you still want to keep,
if you still want to do this." And I said "Are you sure there's nothing there that is of value for you that you want to keep." And she was absolutely certain of that. So she looked around and there were fairies with steam rollers. (laughs)

**Dr. Dave:** (laughs)

**Hunter:** And they came and, you know, rolled over it and made it absolutely smooth and it wasn't coming up again. And then the fairies kind of lifted her up.

**Dr. Dave:** Now this was her spontaneous image? The fairies with steam rollers?

**Hunter:** Yes, yes, yes.

**Dr. Dave:** That's good. I seem to recall that the Senoi, that one of the things that they taught their children was to call upon allies or assistance if they needed to.

**Hunter:** Yes, and that's exactly what I do with them. That's what I said with her. I said "Look around; there'll be help for you there."

**Dr. Dave:** Mmmhmm.

**Hunter:** And this was what there was. At first, there were garbage men and then there were the fairies. And the fairies, um, the fairies first of with steam rollers, which help to bury this stuff. And then they picked her up and carried her. And she was, she just enjoyed that so much. And she said, it was afterwards "It was so wonderful to have help and not to be alone with it and to be carried afterwards, to, you know, to just let herself go and be carried in a very soft and gentle way." And she said afterwards, in the session following that, the following week that she felt that something really had shifted within her.

**Dr. Dave:** I think one of the things that we would want to underscore here in these two accounts is that, a lot of dream workers from other perspectives might get involved in interpreting the dreams and interpreting the symbols. You don't do that right?

**Hunter:** No, I don't do that. I let the symbols speak for themselves. And because for just working directly within the dream and I don't really talk about the symbols before or afterwards, unless the person really wants to but usually they're satisfied because they've come to some resolution within their dream.

**Dr. Dave:** So instead of analyzing the symbols, you take them back into the dream through hypnosis and then sort of encourage a transformative process to unfold.

**Hunter:** Yes, yes, and to encourage the person to bring in and look for whatever help might be there, whether it's an inner healer or whatever it is. And like with this woman I didn't specify any further than to say that she could look around and there would be someone or something there to help her.
Dr. Dave: Umhmm.

Hunter: And her own psyche came up with it.

Dr. Dave: Yes, now before we run out of time here, and we may actually. We have two other approaches that I wanted to touch base on. You also use NLP and EFT.

Hunter: Yes.

Dr. Dave: I wanted to make sure that we talked about each of those. So how did you come to bring NLP into your work and, you know, where and how might you use that?

Hunter: Well, um, the NLP, I had also read about a long time ago when the book first came out by Bandler, uh (laughs)

Dr. Dave: Bandler and Grinder

Hunter: God it sounded fascinating. But didn't know where or how to learn it. Um, but so much later it was actually through learning hypnosis, I found the Ericksonian Hypnosis course, it was offered through NLP Canada, which is here in Toronto.

Dr. Dave: Umhmm.

Hunter: And of course they also teach NLP, so after I'd done the hypnosis course with them, I decided to do the NLP course as well, and went on to do the master course and continued to attend the courses for a long time afterwards and was even helping to assist with the trainings after awhile. So the NLP, it's always difficult to explain what it is because it's so many things.

Dr. Dave: Yes, I think I found that a challenge in interviews; I've talked to a couple of people in this series about NLP and it never gets all that concrete, I think, for somebody who's not studied it to know exactly what we're talking about. So...

Hunter: Yeah.

Dr. Dave: Yeah.

Hunter: The thing is, it's hard to say exactly what it is because you could describe it in so many different ways because it is so many different things and it's being used in so many different ways. It started out, definitely as a therapeutic modality but it's being used in business, in marketing, and sales, but also in teaching and education, learning, as well as in therapy.

Dr. Dave: Well let's talk about how you use it in your work.
**Hunter:** Okay, well so once the main thing's that, um, as a tool, like as a concrete tool, that we use called personal edit, and see what I learned was the new code of NLP as opposed to the classic code, which was after Bandler and Grinder kind of split over a number of different things. But I won't get into that. So the new code is actually, goes back to the roots of NLP as Grinder saw them and what came out of that, or what's called personal edit, and they allow you to edit parts of your personal history that have sort of emotional impact and impact on your life that you would rather they didn't. In other words, negative emotions or what we might call negative emotions. And to edit that so that you have more choice about how to feel about things.

**Dr. Dave:** Okay, this sounds in some ways like it might be somewhat similar to the process that you just described with the Dreamwork.

**Hunter:** Well, I suppose, although it's done much more, sort of in your, well it uses trance too but in your waking life. (laughs) Some of the techniques that they use as personal edit are you're up and moving around. There's one called *Walk With Grace And Power*, you know, you walk back and forth while you're thinking through your difficulty. And usually that will begin bringing you back into feelings, you know if the sound is angered, grief, whatever it is. Well the coach is coaching you to change your posture and your walk and so on, and you keep going through this process and afterwards you go back and think about the original thing and it's changed. It's different. I sort of see EFT as being, um, as working at least. It's got a whole different theoretical underpinning to it. But it works in much the same way as one of the NLP personal edits might.

**Dr. Dave:** Mmmhhmm.

**Hunter:** And it will just remove the negative feelings or give you a choice about how to feel about a particular thing and usually once you have a real choice, and it's not just kind of overcoming you, you don't go back to the negative emotions and it helps you to change your perspective on things.

**Dr. Dave:** Yeah.

**Hunter:** Within.

**Dr. Dave:** It seems like we're going to get into alphabet soup here. But uh...

**Hunter:** Yes, I know. (laughs)

**Dr. Dave:** Because also I'm thinking of EMDR, uh...

**Hunter:** Mmmhhmm

**Dr. Dave:** ....Eye Movement...

**Hunter:** Yes.
Dr. Dave: ...Desensitization and Reprocessing and that seems to me to be very similar to...

Hunter: Yes.

Dr. Dave: ...EFT.

Hunter: Yes, and I'm not trained in the EMDR, but I have experienced it once. There was a man at one of the courses that I took that had been trained in it and he took me through the process of it and so that I could just experience it for myself. And the fact is, it's very similar to the EFT and it just, it removes the feelings, only I, from myself, and my clients, I find, I think that the EFT is more useful because they can learn it, and they do learn it just through me taking them through it because it's a very simple tapping procedure and they can use it in between sessions to help the process along.

Dr. Dave: Well let's just give a little more explanation about EFT. It stands for Emotional Freedom Technique and it involves tapping on points. Are they considered to be acupuncture points?

Hunter: Yes, it does actually come from acupuncture points, yes.

Dr. Dave: Okay, so you're tapping various acupuncture points on your, mostly on your face and also...

Hunter: On your face and on your body and on your hands and/or arms. There is points now, new points on the legs, like up in the ankle.

Dr. Dave: Okay, now I'm a little bit skeptical about this one, I have to tell you. (laughs)

Hunter: Okay.

Dr. Dave: And sometimes I've been skeptical about some of the claims for NLP at times too.

Hunter: Yes.

Dr. Dave: So what's the theoretical understanding of this? First of all, where did it come from? Who invented it? And, and

Hunter: Okay.

Dr. Dave: ...You know? How is it supposed to work?

Hunter: It came first of all from a man called Roger Callahan who, and this is the story of how he began to discover, actually what was called TFT, which stood for Thought Field Therapy. He had a client called Mary who had a phobia of water, which she couldn't sort
of get very near any water without uncomfortable feelings and certain larger bodies of water. And the story goes that he was working, she'd been working with therapists and hadn't made any headway. Been working with Dr. Callahan for two years and they'd made some headway into understanding things but really hadn't changed the phobia at all. And in this one session, see Dr. Callahan at the time had been learning acupuncture, learning to use acupuncture.

**Dr. Dave:** Oh, okay.

**Hunter:** So he, you know, knew the points and so on. He was becoming familiarized with the points and in this session, Mary was talking about some of her problems. She had nightmares and headaches and so on which all seemed to be associated with the phobia of water and she was talking about some of her difficulties with the fear and happened to mention that her stomach was upset and because Dr. Callahan knew, or was working with acupuncture. He asked her to tap on her cheek, like just below the, on the bone of the cheek just below the eye. And just because he was, he thought, accepts the, it's associated with the meridian for the stomach and he thought it might help her upset stomach. So she did that while she continued to talk about her difficulties and after awhile of doing this she jumps up and says "I don't have the phobia anymore, I'm not afraid of water anymore," and he was incredulous and she, there was, apparently there was either a fountain or, I've heard two versions of the story, one was a fountain, one's a swimming pool in the basement of the building. At any rate she runs down to it, the pool and splashes water in her face from it and was fine with it. And Dr. Callahan is astounded and could see the only difference, the only thing that was different in that session than in others was that she'd been tapping in that one spot. So he did more experimentation and so on and out of that came to the discovery statement which holds for EFT as well, that all negative emotions are caused by an energy imbalance in the body. And he developed this whole system called TFT or Thought Field Therapy where, which involved muscle testing to, just to help determine which spots needed to be tapped and in which order for a specific difficulty. And it was a fairly long and involved procedure. And he began teaching this to other people and Gary Craig was one of them. Gary Craig learned this process and at some point said "You know, it's such a long and involved process, people can't do it for themselves. And so on. Can we not simply simplify this by working out a tapping sequence that would include all the major points and then you could just use it for anything. Some of those points might not be necessary but it certainly doesn't hurt to tap on them and the whole sequence, you know even if you're taking your time with it would take, you know two minutes, or five if you're really going slow." So that's what he did with just developed that tapping sequence that uses all of the points and they're kind of doing an overhaul and some of those points may not be necessary and in fact there are shortcuts that are useful for most things. And also there's also since then there's been other points that have been added to it and so on. But it's a very simple procedure that you can use and we often do have those kinds of one minute miracles where you tap on and the thing's just gone.

**Dr. Dave:** Have you personally in your work have clients who've had even one minute and I'll even grant you fifty minute miracles? (laughs)
Hunter: Yes, for people who don't have a lot of trauma and that kind of long history of
dysfunction in their family, and trauma and that kind of thing in their backgrounds. So
that they're...

Dr. Dave: Are there such people out there? (laughs)

Hunter: Well, (laughs) there are some. I, you know, not very many. (laughs)

Dr. Dave: Right. (laughs)

Hunter: Certainly not in my work anyways. But there are some; I have, you know weight
loss is a big thing for many women. And I have used it for women, and with weight loss
and for people who don't seem to have a lot of background problems like that, it works
very quickly. For other people, and say weight loss or weight management, it can be a
huge thing. And you think it's a simple thing and it's really not because there's so many
different things that impinge on eating behaviors, there's so many different emotional
reasons for....

Dr. Dave: Right.

Hunter: ...Why we eat the way we do. And when we do and how much we do and so on.
And it's very often not a very simple thing but I have experienced it being a simple thing
with some women who have had four sessions with me and we've addressed a few issues
in their lives. I remember one woman, she had some interpersonal difficulties with her
sister and she'd get so upset. We tapped on that and she's fine with her sister now, she
has no problem with her at all. And we only did one session of tapping on that, probably
several different rounds but it was only in one session and only part of one session. And
she doesn't have any problems with her sister anymore. And we tapped on individual
food cravings and specific situations where she's likely to have food cravings and she
doesn't have that problem anymore. And then she'd come in the next session and say
"Well, it's starting to come up again." And we'll just do some more tapping on it, usually
a different aspect of the same thing and then she's good with it. Like I said though, for
people who have multiple difficulties it's not that easy. But we still make progress, it's
still, it helps things along. What we do is narrow things down as far as we can to a
specific issue and a specific incident of that issue, like a concrete example of that issue.
And we'll tap on that and that one thing will be resolved. It's gone.

Dr. Dave: Okay. Well.

Hunter: I've actually seen people in my office and we've talked about these huge problems
that have been bothering them for a long long time. We'd do, we'd sit and we'd tap on it
like in, will be, like it'll be like a fifteen minute, an hour, we'll talk about different aspects
of it. And tap on those, and then this and then the other thing. And at the end of that I'll
ask them to go back to the original thing and think about it, imagine it as intensely as you
can, like actually try and get the feelings back and they can't.
Dr. Dave: Try to get the anxiety feelings back.

Hunter: The anxiety or the grief, or the angry or whatever it is. Yeah.

Dr. Dave: Yes, boy there's so much more that we could discuss about this but I'm afraid we've run out of time. I will, after this session, I'll be sure to mention your website so that people can contact you for additional information. And I want to thank you Nancy Hunter for being my guest today on Shrink Rap Radio and for being a listener.

Hunter: Well, thank you David. I think your show's great and I'm really pleased to be on it myself now.