

Ep. #302 - Everyday Wins: The Tangible Side of Nervous System Magic



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With your host:
Susi Hatelly

[From Pain to Possibility](#) with Susi Hatelly

Introduction 00:00:01 You're listening to From Pain to Possibility with Susi Hately. You will hear Susi's best ideas on how to reduce or even eradicate your pain, and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hately.

Susi 00:00:23 Welcome and welcome back. I'm so glad that you're here, because today I'm starting a new series, and it's not going to be one of those consecutive back to back ones that I've done in the past, but rather throughout this year, approximately every month, I'm going to give you some exercises to really help you help your clients reduce and eradicate pain more effectively, more quickly and more simply. Some will be movement focused, others will be on how to help your clients progress from that "out of pain" place to adding more load without adding pain, while others will be focused on the healing relationship. I'm also going to share a little bit about packaging up the way that I'm teaching and what I have found really effective, and the pros and cons to certain program packages that really can support someone in the process of reducing and eradicating pain.

Susi 00:01:22 One that's coming up, for example, is going to be about why I do my private packages in three-month series. Overall, though, the reason I'm doing this is because I'm finding myself more motivated than ever to let them know, to let people know, that getting out of pain doesn't have to be complex. I mean, we hear it all the time: The body is complex, the human is complex. So it must mean that getting out of pain is complex. And the reality is that it's not my reality. That, yes it's true that the body is complex, the human is complex but it does not mean that getting out of pain is complex. And I'm truly proof of that, both as someone who has gotten out of pain myself: I was in chronic pain in my early 20s, which really got me into yoga, and then I was able to run a 10-K race within four months of practicing after being in pain for two years and not being able to do that; I also fell down my stairs the day after Christmas 2010, sprained my coccyx and I fully recovered from that fall.

Susi 00:02:21 And from what I know about sprained coccyx, that's not a common experience that someone can fully recover from that. I've had some awesome almost-wipeouts as a skier; My SI joint completely went haywire when I did a crazy whackadoodle thing when I was on my skis and I almost wiped out but didn't quite, but still it was like "waaa" in my body and I also fully recovered from that. And as a yoga therapist, my clients consistently reduce and eradicate their physical pain and more importantly, they have understanding of what is contributing to their patterns of pain. They learn to listen to their whispers, and they're getting back to the activities they want to do, all within three months. Nonetheless, despite my results, despite the results of my trainees, despite the results of my clients, I get pushback on this. And I also understand. I'm aware that when my clients, when my trainees, my grads use these tools, they get results just like I do. But I understand why I get the pushback nonetheless.

Susi 00:03:22 Because I remember back when I first started teaching based on what I was seeing, the real drumbeat in the medical world was "pain has to be managed." I had physios emailing me, telling me that I shouldn't be saying to my clients that you can get out of pain. They said I really should be telling people you have to manage it. I'm like, why? I've got like hundreds

of people in my group classes. I was teaching 13 group classes per week, ten people per group, and my clients were getting out of pain. Why would I tell them that they have to manage this thing? Now fast forward to today, 30 years later: I've seen what works and works consistently for decades now and I really, really, really want to help. Not only other therapists, but also just humans in general who are keen to really get into this place that healing pain does not have to be complex, and to help them into a place that things can be a lot simpler.

Susi 00:04:17 When you really understand this, and a key factor for really understanding this is not through intellectual mastication Mastication is what I said there, but rather an embodied practice that honours interoceptive and proprioceptive principles. And when you get really clear about how this is a whole-brain, whole-body process, then what I am saying really does become so bloody clear. And because of this, what I'm realizing is that this unique way of approaching pain and understanding, that reducing and eliminating pain truly is a stepwise process, that it comes in layers. And that's what people really have to get: that the learning of this as a client comes in layers. It's not a one off quick fix like, it's kind of a series of these quick fixes things. And as a therapist, as a as a physio, as a massage therapist, as an osteopath, as a yoga teacher, that to really understand how to help people through this process, it's a layered process. And the typical process, and while it isn't always the way, a typical process that one of my health professionals goes through is they first need to experience the movement and relief in their own body first, to have that "aha" awareness in their body and their mind settling.

Susi 00:05:31 And this is what happens in my Power of Pure Movement series, where people can choose from, like usually a part of their own body that's kind of bugging them. And they can start to gain strong and supple feet or a happy and grounded QL or a grounded in light psoas. Or it may be the mechanics of breathing where they really settle through their nervous system, improve their breathing when they're sleeping, and reduce the impacts of sleep apnea or other sleep disordered type of breathing that happens in the evening or night. Then after this "felt" experience, they want to know more. And then we get more into the biomechanics, which is what we do in the therapeutic yoga intensive. And then after that realization, because that is like full of "aha's" and major truth insights and like "wow" moments, then they want more and we can dig in deeply, deeply into the magic of the healing relationship. And I combine all of the fundamentals so far that they've learned in biomechanics with healing relationship, and they become someone who can really see the whole matrix.

Susi 00:06:32 Thank you, Keanu Reeves Where someone can kind of zoom in to see joint function and zoom out and see the whole body moving, zoom in and see the layers of what it is to be human: breath, mental and emotional, all the spiritual aspects. You know, zooming in, zooming out, seeing that whole matrix and knowing where to work. Like it's my view of how I see the biopsychosocial model. But we're doing this between me and a client and recognizing what to say, how to say it based off of who this person is. Where to begin, where to continue based off how we see their movement. Where are they at with their compelling reason? Do they believe healing is possible? Do they need help with coping first? Do they need to begin with body awareness, or do they need something more downregulating through their system? When

you understand these layers, you become really masterful of how you interact with an individual, your client, but also with your own body. It's a step by step process.

Susi 00:07:33 You don't get all of this up front. You need to do it in steps. And as the therapist, the teacher, as you grow your skill, you've got to feel it in your own body. You've got to eat your own cooking without throwing up. And as you do as you learn this and you gain this understanding, you're able to plug in this skill, this matrix, this process really, into any condition whether it's an orthopedic situation, autoimmune recovery from cancer or other surgery like hip or knee; these are all situations I've worked with, with really, really great results. You can see the way a person is moving, how they're healing, where they are and where they want to be. The steps to get there, maybe where they are limited in their progress, and you start to recognize what's contributing to that. And now here's something I need to say that's really important: One of the reasons I'm so, so good at this is because I've seen the power of this in my own life.

Susi 00:08:35 Most of my learning has come not from taking classes or courses, but from my own life and my work with clients. I have deepened my capacity to be able to be with clients, to grow my presence, and to ultimately communicate and to simplify the process. And as a result, my results get better and better and better. Said another way, I eat my own cooking and I'm not throwing up. Because of this, my own experience, this experience of my own, I have a very, very strong belief that pain can not only be reduced but also eradicated. Autoimmune flares can reduce and even go away. The diagnosis remains there. I could think about my husband's psoriasis and a number of my clients diagnoses of rheumatoid arthritis as a great example. They still have the diagnoses, but the way they experience the flares have totally shifted. They have such freedom in their body. They're not imprisoned by it. They have clarity about what contributes to why the flares arise and they have so few of them, if any.

Susi 00:09:43 They will say that their body does not feel so foreign to them anymore, not so complicated anymore. They recognize that there are layers, and they see this simplicity with how to support themselves. Resignation goes away and empowerment enters into the space, as does freedom and independence. They see that change is possible, that tissue can change, beliefs can change, they can change. So here is what I want to ask you, as a teacher, as a physio, as an OT, as a physician, chiropractor: how often are you, every day, reaffirming the value of better movement, better biomechanics, a better healing relationship of being able to tune into yourself both in a zoomed in and zoomed out way? Because when you see this in your own life, it oozes out of you. Your results become you. The belief you have, that lived experience, can be felt by you, your potential clients, your clients. The authenticity is palpable. You become someone who naturally inspires others. Your stories of what is possible inspires others that they can have it too, that they can go out and have the same results as you do.

Susi 00:11:08 So I'm going to tell a couple of stories here to really highlight this. But before I do, I want to take a pause and just make a statement here about a big reason I think the current drumbeat of medicine is that pain and healing are complex: I think because there is a very binary way of thinking, a very logical, a very important logic and I'm not knocking medicine by any stretch, so please don't interpret me saying this as knocking medicine; I'm not but because

they tend to think in a very logical way, a very tangible way medicine's not great with the intangible, when they see the quantity of layers of what it is to be human, they see that as complex. And it's not untrue. It is. But I would say that my experience is there is a very simple thread that moves through those layers, and it's this intangible thread. Notice I didn't say intuitive. I don't think it is. Although intuition does play a part, I'm not talking about intuitive in this particular situation. But because medicine is so left-brain and logical, there tends to be a focus on a binary answer.

Susi 00:12:16 The problem with "a" muscle or "a" pain communication pathway. It can zoom in and look for the molecule or the active ingredient, and kind of miss out on the bigger picture. The view can get very narrow. It makes me think of a recent announcement, in January 2025 is when the announcement came out this podcast is being recorded February 2025, and there was a new medication that's come out, which is super cool. First new pain medication in 25 years and I will do an episode on it in the future. But for now, what I will say is, since science now knows that the brain interprets the pain signal, research has followed this, this knowing, and has created a drug that blocks the signal from the tissue getting to the brain, which on one hand is awesome for pain relief but in my perspective, it kind of misses part of the point, which is: the pain is a signal that's trying to get our attention, that it's asking us to explore something in our body.

Susi 00:13:14 So while on one hand, particularly for people with persistent pain that needs some kind of relief, it's awesome. But then are we sidestepping the actual opportunity to explore what's correlated or enabling the signal to emerge in the first place? I've worked with so many clientele who have had some sort of pain blocker, like something as straightforward as cortisone, for example, and someone feels so amazing. But I'm reminding them that while that's so amazing, we still need to improve their movement patterns and let's use this time to become aware of the movement patterns that were contributing or correlated to that pain expression. So as that starts to wear off, you actually have a better relationship with your body and understanding correlated factors. And that's really important. So I love it when I've got clients who are like, yeah, let's take this pain medication, let's give relief, let's settle my nervous system a bit. But now let's actually get into exploring the very objective nature of movement pattern and then start to explore subjectively what we're feeling, improve interoceptive and proprioception so we can actually get some headway and some gains on how our body functions, what we are subjectively experiencing, start to map out some of this body sensing.

Susi 00:14:32 So that's where we actually make the headway. Okay, so let's bring this into a real life experience. I'm going to share a story about my daughter. A little while ago, a few months ago she's almost eight so this is well, when she was still seven we thought she had a UTI and we went for medical care. What we realized is that she was having a Candida response, not a UTI. And knowing full well the conditions that Candida thrives in, I let my daughter know that we'd be changing up what she was eating at meal and snack time because there was food she was eating that was clearly contributing to the Candida response, and we needed to clear it out. If we didn't nip this in the bud as a seven year old, it would only get worse and create an environment for bigger issues because we know that Candida as it thrives more

and more and more, it can lead to other things. So my daughter was okay with it. She knew it because she didn't like the way she was feeling.

Susi 00:15:26 She could feel the itchiness and other factors that were going on. Until the moment she saw what she wouldn't be eating at mealtime. For example, one of the things that she absolutely loves is my homemade oatmeal bread, and she was truly devastated. This is something that she had loved. Her fiery personality came out on full as she resisted the change, and I could totally understand it. She hadn't had a single issue over the years that she had been alive and in this world, other than some colds and a stomach bug. And now she's being asked to give up some of her favourite foods. So it made total sense that she was responding in this way. I didn't have to get mad. I didn't have to reason with her because I understood. I understood the physiology of Candida. I understood its relationship to digestion and to diet. I understood its emotional and mental layers that she was struggling with. I also knew we needed to move through this rough stage in order for her young body to heal.

Susi 00:16:27 I didn't I didn't have to like, reason with her. I just needed to love her to bits because boy oh boy, this was her life. And so I was prepared and my daughter had shown this part of her personality. I mean, she's a fiery, fiery character. It's beautiful. And so I expected it. And I got to really be with it, both literally and proverbially holding her hand, helping her process the grief of not eating what she wanted, allowing the sadness. And the big, big, big tears when she expressed how that food made her happy. And so she and I worked together to find other ways and other foods because we were nipping in this bud, we didn't have to, like, do some colossal shift. We could find things that she could work that were within yummy tasting realm. Right? It wasn't just cardboard that she had to eat. And then she started to feel the change and I could see it in her. I could see her brightening up.

Susi 00:17:27 She could feel the candida symptoms go away, the itchiness start to shift, the wetness start to shift. I could see she wasn't itching at herself. She wasn't using half of a roll of toilet paper. Her skin colour started to change. Her humour started to return, and as I mentioned, that brightness started to emerge. She started talking about the newer foods that she was eating as being tasty. So her taste buds, the way she was bringing food into her mouth was starting to shift. And as symptoms totally went away and we started to reintroduce food, those ones that she talked about made her feel happy? Well guess what: She actually said that they weren't landing on her tongue as well and her tummy didn't like them as much anymore. She was starting to feel the "whispers" of the Candida healing. So when I was asking her and we do use this word, the word "vulva", when I asked her about her vulva, if it felt itchy and she would say no. And I'd say, okay, well then what does it feel like? And she's like, well, you know, when it's not itchy, I think the feel before it is "wet."

Susi 00:18:28 And then as she got better, I asked her if "wet" was still there. And she's like, no, it's not really wet, it's kind of drippy. And then she continued to get better and then she's like, actually, this feels kind of regular now. And then as she kind of kept going along, I'm like, is there anything better that feels better than regular? And she's like, Mom, it feels magical. I'm like, cool. Now I really want to make sure, like, I want to be really clear here she was mapping

out her subjective experience of symptoms. She was naming her yellow lights. Her orange lights, her whispers I'm mixing my metaphors just to show you that we can use different metaphors to describe these things. I didn't have to know what she meant by itchy, wet, drippy, regular, magical. I didn't have to know that. But it was clear that her "subjective" experience and what I was seeing "objectively" were matching. And so as we started to reintroduce more food back to her regular eating, she ultimately realized that some of the most offending foods just weren't worth eating anymore because of how they made her feel.

Susi 00:19:36 She could feel it in her tongue, on her tongue. She could feel it in her tummy well before she could feel the change in her vulva. And if she had been away for a weekend and she was having a lot of fun eating a variety of foods that she knew would probably lead to the Candida symptoms, she would feel the change but she was like, I want to eat them anyway. I'm like, all right, eat them and notice what you feel. Giving her lots of freedom to explore her body. So the key here is that she doesn't have to be off of the offending foods, some of which are favourites, some of which have left the favourite category, but rather she chooses based on how she feels in her body. And she does like a "magical" feeling or a "regular" feeling more than a "wet" feeling. But she rarely, rarely, rarely gets to that place and we both can see differences in her. I can see the skin tone change. I can see her humour starting to shift.

Susi 00:20:32 I can see like these behavioral, emotional things start to bubble up, and I can catch them early enough, early enough to say, hey, you know, how are you feeling in your vulva? It is just a dialogue. Some days when there's an opportunity to have oatmeal bread, she's like, you know what, Mom? I don't think I'm going to have that today. I think I'm going to do this other thing today. Pretty darn cool. So this is a great example of, shown like in an everyday example where I'm eating my own cooking, I'm not throwing up. Where I am teaching what I'm teaching. Where are you demonstrating that you're eating your own cooking and not throwing up? Another situation here is with my husband. I've been sharing quite a bit of his story on my email list. He's been in recovery, recovering from and retraining his response around PTSD and hypervigilance, which arose out of his time being a firefighter. Now, this following story does start off a bit dark, but we'll get to something a little bit easier and a bit lighter in just a few sentences.

Susi 00:21:37 So sorry if I start the story at our darkest, which did include me calling 911. There was some very, very dark, dark times with him, for both of us, and for very, very different reasons. And it could have been very simple for either of us to go really, really deep into a hole of despair or resignation. To allow for PTSD and hypervigilance to take hold in our family. But for me, I knew the husband that I knew who was inside and I wanted somehow, somehow to bring him out again. I wanted him to come through this state that I don't really know I have a name for, but I knew he was in there. And while I have had a lot of experience of seeing The Matrix, and I explained it a bit with my daughter, the layers here with my husband was super, super challenging, partly because this was more than just movement. There was a whole lot of meanness, and he was also quite resistant to me seeing something in him other than the PTSD or hypervigilance.

Susi 00:22:42 So not surprising, this just inspired me more because I knew who was in there. As we worked together and he was kind of coming through, there was an opportunity for us to buy him an Aura ring and measure more of his physiological metrics and together over a period of time which wasn't that long, it was probably several weeks, we could see how his physiology was interweaving with his psychology, how the quality of his thoughts and the content of his thoughts were clearly shifting according to how he was using his energy, his level of fatigue, the sort of sleep he had, how he paced himself during his day. I could start to see his movement patterns in his day-to-day moving around the house, I could see his general state, and I started to be able to predict an episode about two days out. One day I asked him, would you give me permission to tell you when I saw the signs of a two-day-outness space? And he said yes. Now, not surprisingly, when I saw those signals, it was about two days out.

Susi 00:23:48 I could tell that he was not in a state for me to share with him. So I drove away from the house and I texted him. And over text, I asked him: Do you mind if I share what I see? I think you're two days out. And he said yes. And so I said: I see changes in your breathing. I'm noticing a quickness to irritation. I'm seeing a certain quality to the complaints that you're having. And he said: You know, you're right, I can notice that too and here is what I think I need for support. Now, we explained a lot of this on the email that I sent a number of weeks ago and he, just to let everyone know he's given me permission to share this, because I think it's really important, because so often with PTSD and hypervigilance, this state really takes a grip on a marriage and in a family. And this is a totally different experience. As he took care of himself physiologically, his psychology changed. And as a result, in this particular instance, he didn't have an episode and hasn't had one since.

Susi 00:24:56 He can now feel the whispers and the yellow lights a lot earlier. Here's what makes this particularly extraordinary, I think: My husband has worked with quite a few psychologists, and one, one of them who specializes in working with first responders, did suggest, you know, paying attention to some of the whispers, but not one other psychologist did. Now, I'm not knocking psychologists. I've worked with them. They've got all sorts of different ways of helping their clientele. And my husband will acknowledge that it was my patient persistence and keeping at it that enabled him to be really willing to listen and act upon what he heard. He called me his most important influencer. Now, is there a study or formal evidence to suggest that this is the way to do it? Frankly, I have no idea. I have not dug into the research on PTSD or hypervigilance or any of that... well, a little bit on hypervigilance, that's not true, I have dug into some of hypervigilance research, but my focus really is on my husband.

Susi 00:26:03 My focus really is to help people to retrain, reconnect, and to show them that tissue at so many levels can change and that healing is possible. It's powerful work. And when you, as a health professional or a yoga teacher or therapist can share stories like these, people will gravitate to what you are saying and what you are about. They will hear the tangible in the intangible and see the possibility for themselves. Like what if you had people around you, with PTSD and hypervigilance, who at their core, in their soul know that there is a possibility for shift? That someone who has Candida symptoms, at their core, who knows that something can change? Someone with persistent pain that, at their core, knows? And there's someone out

there who believes that they can shift too, who won't just throw up their arms as I get very passionate about this and say it's complex. It's so easy. Yes, for goodness sakes! The human is complex! There are multiple layers to us being human, but there is also a simple thread.

Susi 00:27:11 And step by step you will learn, if you work with me, to see the whole frickin matrix and know how to zoom in and zoom out. Recognize who this person is that you're working with. Beginning with the Power of Pure Movement or Mechanics of Breathing, then into the Therapeutic Yoga Intensive and the last step, when it all comes together, diving in deep with me for a year, is the Certification Program. If you want to help people truly reduce and eliminate physical pain, I can help you. If you want a full time or a part time retirement business, or even a part time business and you're not even retired, helping people to reduce or eliminate pain, I would love to help you build your dream. I have been doing this for 30 years. I've been training teachers since 2004... actually earlier than that, 2001. But inside of the Certification Program, the steps toward that since 2004. I had a certification program in 2008, it was accredited in 2014. The trainees and the grads who follow what I teach, they have similar results as I do, and I'm more than happy to share their stories on this podcast so you can see it too.

Susi 00:28:19 The Therapeutic Yoga Intensive is open for registration right now for our April 26th, 2025 start, and you can learn all about it at functionalsynergy.com/intensive. I would love to share with you what I know and what I know is true. Looking forward to working with you. See you next time.