

The Future of Yoga Therapy: An Interview with Molly Kenny



Molly Kenny, MS-CCC, is a nationally recognized innovator, researcher, and educator in the field of Yoga therapy. She is a licensed speech-language pathologist and certified Yoga instructor, and is the co-founder and director of the Samarya Center for Integrated Movement Therapy and Ashtanga Yoga in Seattle, Washington.

Interview by Kelly McGonigal

YTIP talked to Molly about two of her projects, bringing individual Yoga therapy to hospice care, and Life after Loss, a Yoga class for individuals experiencing grief and loss.

You teach a class, Life after Loss, especially for people in bereavement.

Yes, and we also have pet loss, divorce, relationship ending, loss of vision. All in the same group. We all experience loss.

What does yoga have to offer people experiencing grief?

Yoga philosophy is what is helpful to people who are dying or grieving. The idea of acceptance, and that spaciousness comes before acceptance—we develop that through breath and *asana* and being open in our practice. Yoga teaches us to be spacious. Accept it all. Hopefully that's what we're cultivating on the mat. So that when grief happens, you don't feel like the rug is pulled out from under you.

I want everyone to understand that Yoga is a practice for hard times. A lot of times teachers aren't even taught that, and they don't know how to teach it. We just have to remember that the poses are nothing. You think scorpion is hard? Wait until your partner dies. That's hard. Practice how you'll handle the really hard times.

I often use the image of a rainforest that is able to accept everything under its lush green canopy. Acceptance of the absolute experience of grief is what allows us to recover from it. All I offer is a space and guidance—a safe space for whatever happens. And sometimes people are crying in class and sometimes they're not.

The last class I taught, the theme was "This really is happening." There is no parallel universe where something else is happening. Sometimes our respite is believing in a parallel universe—but you have to know this a retreat. That when you wake up in the morning, your child really is gone. Or you husband really has left you. You ask yourself, "How can I be the best possible me in this reality?" Sometimes that means you accept that the answer is "I can't get off the couch today." And sometimes you rally.

What is the practice itself like in this class?

I use talking and *asana* to help people dealing with grief and loss. In my grief classes for children, we use *asana* to describe various feelings and play with those to help deal with grief. In my Life After Loss classes, we do strong *asana*, to counteract the lethargy and out-of-body experience of grief. They need to feel strong, to feel their bodies at their strongest physical limits, in a healthy way, instead of just being tested by whatever they are going through. Instead of giving corrections and adjustments, I might just touch them, or ask them to imagine themselves as the warrior, encourage them to feel what they're feeling. The words and touch that I use are unique, but not the poses.

You also lead a four-week session called Topics in Yoga Therapy: Seriously Ill and Hospice, based on your own work providing Yoga therapy in hospice care. What is covered in this course?

I believe that for us to truly provide courageous and compassionate care, we must be in a constant process of self-inquiry. What are my feelings about death and dying? How do I feel about people who are seriously ill, and about illness itself?

We must first consider Yoga as a philosophy and spiritual path, when we consider what tools we might use to help someone who is living the challenge of serious illness and impending death. Our focus on the broader scope of Yoga, rather than on specific techniques, is what will be most helpful, and in my experience, most appreciated.

That being said, in the Topics In Yoga Therapy classes, we practice "being" rather than "doing", acting as the witness, and discussing how to respond to the tough questions we are inevitably asked, such as, "Do you think I'm dying?" and "Do you think a person can heal from AIDS?" We also practice how to gently stretch and massage the person with the illness.

How do you answer questions like, "Am I dying?" or "Can I be healed?"

Yoga is reframing the question and letting students answer the questions themselves. When we're helping people with the hard questions, providing our answers isn't as helpful as them providing their own answers.

We talk to people about what is healing and how they can heal. How to move to a spiritual model of healing, not a medical model. The model of the five *koshas* opens up the opportunity of hope. Can a person with AIDS heal at a physical level? I don't know. From my experience, it doesn't look that way. But can you let go of the fear, the anger? Absolutely. Can having AIDS be a catalyst for healing relationships with family, friends, and partners, and for forgiveness of self? Saying "You know what, I wasn't that bad." Maybe it can be a time of embracing self-love.

What Yoga has to offer people who are dying is acceptance, not just of death, but also of all the difficult feelings that come

with it. I do talk about death and dying, but not to everyone and not all the time. It is usually when someone asks me, or when someone is very near death. I simply witness their thoughts, without giving much input, except to reassure them. It will happen. To all of us. So it has to be ok, no matter how hard it is.

That perspective can be a relief, when everyone expects you to fight for life when you are very ill.

I worked with one person, Renee, who had refused all other services [in the hospice care]. We were the only one he allowed in. I think it was because we were the only ones who didn't want anything from him. I asked him, "Are you afraid?" He said, "No. You know that Michaelangelo painting, where Adam is touching God's hand? I feel like I've already touched God's hand."

Another example is Ebrahim, whom we have been seeing since we started the program over a year ago. We were told a couple weeks ago that his meds weren't working, that they had run through all the "cocktails," and that there was nothing left for them to do with him. When I went yesterday, I was told that in fact, he had been throwing away his meds for the past five months! He had fired most other services. So when I went to see him, we talked about it. He talked about how doctors just want to give you things to keep you going, but that the meds made him feel sick and he didn't want to take them anymore, that he felt much better without them. I assured him that I had no judgment and that we would support him in his decisions.

What is the Yoga therapy that you do in hospice care like?

It's not about what *asana* to do. There's very little *asana*. Of the 50 or so people we've seen in a hospice setting, maybe 4 have gotten out of bed, and then we might do half sun salutations or some simple stretches. For the vast majority of what we do, people are lying in their beds. We use passive Yoga stretches, Thai massage, Reiki, talking, breathing techniques, and listening.

I trained in Reiki and I really believe in its power. I encourage Yoga teachers to embrace and realize the power they have in their own hands. It doesn't matter whether you have Reiki training or not. Just the intention, the laying on of hands. We do a lot of role playing, learning how to hold someone's hand as you talk to them, providing intentional loving touch. People want to be touched.

Recently, I began to work with a 26-year-old man with AIDS and bone cancer. The first time I saw him, he was dressed like a little hipster, his room was all done up in lava lamps, and he was really upbeat. I just jumped up on his bed and we did a lot of really cool Thai Yoga stuff. He loved it, even joked "I'm yearning for the burn." The very next time I saw him one week later, he was completely gray, in his pajamas, tubes coming out of everywhere, morphine drip, IV tubes, covered with bruises. He looked like a completely different person.

At first he said, "I can't see you today, I can't do Yoga today." I said, "Yes you can, I'm just going to put my hands on you." I put my hands over his heart and my partner put her hands on his head and he began to weep. We just sat with him for a while. His friend was in the room, and I went over and provided Reiki to him, too. You have to ask, "Who are you providing care to in this setting?" You are caring for the people who love this person, too.

How do you find the courage to do this kind of work, when our culture tends to avoid any confrontation with dying and the seriously ill?

This work doesn't need courage. It needs self-inquiry and a constant reminder of the infinite well of love that is our natural state. People project that it would be so hard, because they think, "I could never do that work," and they put the person who does it on a pedestal. But we are all innately able to sit with death, to have courage and spaciousness around that. In our culture, we're given no messages about death, we deny it until it's happening. If we weren't denying it, we would see that it isn't so hard.


It must take courage to show up in the first place.

When you first walk into the hospital, you're going to see things you haven't seen before, particularly with AIDS, because of all the bizarre opportunistic infections, and that can be scary. The hospital setting is scary, but the only fear is your own self-doubt. That you're not going to be able to do something, or that you're going to say the wrong thing. I tell people: I don't have anything to say—I'm not some kind of an expert on this.

What is it like to lose individuals you have worked with in a hospice setting?

It is always sad to lose someone you care about, but I am happy

interview continued on next page



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to have given what I could. Let me tell you a story. One student, I noticed had on bright nail polish, and I complimented him on it. He said, "The only thing I don't like is that it doesn't look right, because my hands shake and it needs another coat." I offered to paint his nails. He said, "Well that wouldn't be Yoga, would it?"

We have to not get caught up in the idea that *utkanasana* is more important. This person is dying. Painting someone's toenails is an intimate experience. I was giving him an experience of Yoga as much as anything else I could do. We ask the question, "How can I help you have the most possible joy in this moment?" If it's putting the second coat of nail polish on, than that's what it is. The last time I saw him, he said, "Will you just hold my hand?" And I knew I would never see him again, and in fact, I didn't.

How is that not hard? That seems really hard.

It seems hard because people think they don't have it in them. We have to acknowledge that we all have an infinite well of love. You can't always find it—but it's there. If in our practice we can continually remind ourselves that we have this infinite capacity for loving, we know that this work can never deplete it.

When people think, "I don't have it," I tell them, "I'm no different from you." When people meet me, they're surprised. I'm not a person who wears Yoga clothes. I play in a punk rock band. I don't have anything different than what they have. I don't have some extra amount of courage or love. We all have it. The more you tap into it and understand you have it, there is nothing to be afraid of. It's something you can continue to give.

Do I feel sad sometimes? Yes. It's not about total stoicism. I do feel sad. I do feel the inequity of it—Why is someone 26 dying of AIDS? It's not fair. What's important is knowing I can call up this bottomless well. The most important thing is your own Yoga practice. It helps you understand what being loving is.

What would surprise us about the work that you do?

That it is uplifting! And that I usually *don't* leave a hospice class feeling sad. ☐

For more information, visit: www.samaryacenter.org

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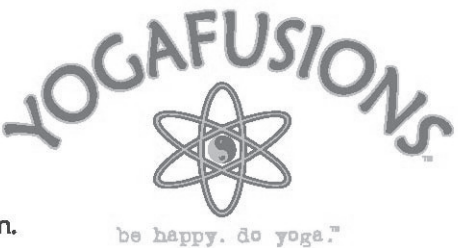
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