
Q&A Call #1 - Transcript

Welcome everyone. Good to see you. Got some familiar faces here and some new faces. Always exciting to do these calls. So I am Seth, of course, and this is the first Q&A call for the 12th round of SmartBody SmartMind. So normally the way we do these calls is we get tons and tons and tons of questions and we can't possibly answer all of them. So we curate a selection to represent the broad themes that people are asking about that kind of thing. However, and this is what usually happens also, the first call or two, there's often not that many questions because people are just getting into it. That's the case today. We've got about 17 questions, so I'm just going to answer them all individually. I will still keep all the names anonymous, but I will answer them as we got them. So we will get started. Now, I believe I have a lovely assistant here somewhere. Jen, are you here? Helping out with the chat, there she is. Let me just make her a co-host. Where'd you go?

One moment. I got a lot of people on this call today. That's awesome. Well, Jen, your picture keeps on moving. There you are. Make cohost. There you go. Now we'll get started and we are recording. Wonderful. So this first question is, "Your answer to my question last round made me realize deserving wasn't my issue." So this was talking about do we deserve to heal? Do we feel like we deserve to heal? "Strong survival strategies got me to my seventh decade." Congratulations. That's amazing for anybody living with unresolved trauma to make it that far and still be showing up and working, which is amazing. "With trauma of all kinds throughout so complete and abundant, wellbeing does not feel safe. The high values I've developed for endurance, stoicism and silent suffering where I mostly exist, assuming shock as the norm have merged with my identity. I do visit wellbeing briefly, but it's not the paradigm my body came to believe is life or normal. So how to feel safe in wellbeing?"

So such a great question. I can imagine after seven decades of learning to be strong and push through and resilient and stoic and deal with the stress and show up. That would be a very strongly ingrained pattern. So there's no quick trick of course, to this unfortunately, but I do have a few ideas that might help. One, to put it very simply, is practice. We need to practice these things that are new to us because when we've got these patterns that are part of our personality but are really fundamentally adaptations to trauma. Over time, we're trying to move the train to a different set of tracks and trains are heavy. So it takes a long time and lots of nudging and continuing to show up, which I know you're doing.

So specifically, some ideas to try. When you are in a place of wellbeing, try to really hone in on what is the felt sense of that specifically. What do you notice in your physiology about the sense of wellbeing? What is the nature of it? Is it expansive? Is it relaxed? Whatever it is. Really try to get specific on what it is you're feeling that lets you know, "In this moment I'm experiencing a sense of wellbeing." And then you're going to want to try to differentiate that from your reaction to it, if that makes sense. So you have a clarity about, "Okay, this is wellbeing, but now this is what I'm doing in reaction to it." What gets tense? What does the mind do? Does the mind have a pattern of thoughts it goes to as you start to drop into wellbeing? Is there something in your body, some symptom that calls your attention urgently as you start to be in this wellbeing state that wants to pull you out?

That's what I would really encourage you to inquire about within yourself. How can you differentiate between the felt sense of wellbeing and the reaction to it? If you can start to dial in on that, then you could perhaps be like, "Okay, wait, I'm in a little bit of wellbeing. Here's my mind doing this thing. My shoulder is tensing up." Whatever it is, I don't know." And then, "Okay, wait, I don't have to do that." So often our choice point begins with differentiation. How can we make a choice if we don't know what's happening? That is what I would encourage you to zone in on. And also in general, don't beat yourself up about it. Approach wellbeing as a

destination you'd like to arrive at, but not someplace you must get to. Because what you've been doing has worked for you, it's gotten you this far.

I know ideally, you'd like to be in a more state of ease and wellbeing. But also don't put pressure on yourself that you must get there. It's like, "Okay, that's a destination I'm curious about. I want to spend more time there. I'm going to try to really work on feeling what it's like, but I don't have to get there right away." So I hope that helps some.

"Do you have any advice for how to do this work with ADHD or troubles with focus?" So the first thing is, let's look at what we consider ADHD to be from a nervous system perspective, which is essentially it's this expression of hypervigilance. The system doesn't feel safe to focus on just one thing because then it might miss all these other potential threats that it assumes are in the environment. So if we grow up with chronic stress with lots of chaos, violence, unpredictability, it can make our system hypervigilant such that we're always kind of waiting for the next shoe to drop.

So why would we feel safe to focus on just one thing? Because then we could miss all these dangers that might be creeping up behind. So that's how we view ADHD and trouble focusing, concentration, that kind of stuff. Essentially the brain stem is very active and usually very tight, and we will get into some brain stem work later in the course, but that is sort of our center of hypervigilance. You can think of the brain stem like this little watchtower at the top of the spine that's sort of like scanning, scanning, scanning. I think of the Cylons from Battlestar Galactica with a little red eye going back and forth. Just this. So how can we invite that to start to soften and we will get into more specific practices with that. But maybe even just starting, for yourself, to think about this area when you notice you're in this state of not being able to focus, and how might you invite this area of your body to soften a little bit, drop, that kind of thing.

Just bring attention to it. That's one thing that you could do. Also, when it comes to accomplishing things, do little bits at a time. Again, don't put pressure on yourself to push through and achieve and white knuckle it through these urgent signals that are telling you that it's not safe to focus. Focus as much as you can. Maybe push the edge a little bit, but also give yourself permission to stop and attend to the physiology. And so often we want to just work with our behavior like, "I can do it. I can do this strategy." We need to work with the physiology. So again, think about the brain stem softening, also the kidney adrenal system, which we'll get into in a couple labs. Thinking about the kidneys maybe relaxing, settling down a little bit. Do something else. Do something sympathetic. So something not related to trauma, but sympathetically driven.

So that system, that hypervigilance is a sympathetic system. It's wanting to go, it's wanting to run, scan for threat, fight, it's prepared. So maybe engage your sympathetic system in a healthy way. Go for a walk around the block, do 10 squats, do some jumping jacks. Break up what you're trying to accomplish with some kind of physical intervention, whether it be thinking about softening and relaxing or thinking about engaging the system that's so active, or both one and then the other. Those are all things that you can try doing. And finally, one thing you can start to look into, which may lead down a bit of a rabbit hole so I just want to put this in there.

We can eventually get to the sense of threat that is underlying this manifestation we're calling ADHD. And one way that you can do that is okay, what happens when you're getting to that place and it's really hard to focus and you want to focus, so you're trying but it's really hard. What is the emotional content there? What might be wanting to be expressed? It's possible that there is a lot of frustration or rage, but maybe that there's heartache and sadness and hopelessness. We don't know until we start turning our attention, they could be layered together. But that's another thing that you can try is really tap into what is the energy, the felt sense, the emotion, the sensations. What's going on when you're really trying to focus and

you're having a hard time? Can you tap into some of that emotion? Is there a way that it might want to be expressed? So all things that you can try when dealing with this kind of hypervigilant manifestation.

"What are ways to help myself come out of freeze, please? My body has a very strong tendency to freeze without trying to fight or flight first. I'm taking medication for 14 months and psychotherapy for 21 months, and still this pattern is in full swing. I dedicated the whole 13 months being on sick leave to work on my complex trauma. How much longer could this take? Of course, I know it's individual, but what are rough numbers from your experience?" So let me break this down into a few parts here. First of all, having a strong tendency to freeze without first going to fight/flight, that's a very common manifestation of early developmental trauma. Because the little system, it keeps on being stressed and eventually it learns, "You know what? Screw this whole fight/flight thing. That's using up way too much energy. I'm going directly to freeze and that's going to help me numb out and feel safe."

It's not a conscious decision. It's something that the physiology basically decides to do through conservation of energy. It's just the practical choice for the physiology to bypass, fight, flight, go directly to freeze. So when that gets set early on, yes, that can become a very strongly ingrained pattern. Then taking medication and psychotherapy. So medication, psychotherapy, these types of things, they can be helpful in some ways. Medication can be very useful for people to manage their symptoms. There are other types of medication that help people stay alive. Psychotherapy can be very useful for people understanding themselves, understanding what's happening with themselves. If they have a well attuned psychotherapist who knows how to really be present and show up in the field in an attuned way, that can also lead to some trauma resolution. But generally speaking, medication and psychotherapy, psychiatry are not going to help resolve trauma because the medication keeps a lid on the symptoms and manages them.

And actually with resolving trauma, we need to eventually experience those things. And again, no pressure, if you need some medication to help, that's totally fine. But eventually we're going to need to get at the fullness of our somatic experience in order to allow it to process. Psychotherapy generally doesn't have the lens of the nervous system and doesn't understand the fight, flight, freeze responses and how they're affecting the mind. So those are all good things to be doing. If you have good practitioners, that's great, but it's not going to resolve complex trauma. So it's important to know that, unless you get real lucky and you win the jackpot with a psychotherapist who's attuned and understands trauma. Which is possible, it's just rare. "I dedicated 13 months, how much longer could this take?" So hard to say. It depends on the age. It depends on what you've been through.

It depends on what your makeup is, that kind of thing. What your situation is, what your living situation is, what kind of support do you have, so there's so many factors. So when someone asks me how long, I can really only talk about myself. For me, I also had complex trauma, early developmental trauma, and it took me about seven years of consistent work to get to a place where I no longer had any of the established old patterns. I was regulated. I wasn't addicted to anything anymore. I was able to be in society, be in a relationship, show up, all that stuff. So for me, that's how long it took. That doesn't mean it's going to take that long for you. But for complex trauma, we're not looking at months, we're looking at years, and we have to have years of the right kind of work and the right kind of support.

That being said, it's not like things are really hard that whole time. And again, everyone's an individual, but it takes little steps all along the way. So you may have improvements and changes in health that happen all along the way of that process. So I hope that is not too discouraging to understand, that it does take quite a while. It takes years of work usually to truly resolve complex trauma because it's so deeply rooted in the system and it branches out in so many ways. In terms of some things you can do, as soon as you notice the system going freeze-y, again, stimulate something that is an opposing system. So the parasympathetic has

two branches of course, the dorsal is responsible for the freeze-y thing, and the ventral is responsible for social engagement and kind of feeling safe with others. So you could think about, "Well, I notice I'm going freeze-y. What can I do to stimulate the ventral vagal system?"

What can I do to stimulate the ventral vagal system? Which might mean listening to some music. Drums are great. If you get yourself like a frame drum, and just like a shaman's drum, do a little tapping of that. Feel the vibration right in front of your chest. Toning, making some sound, just having a conversation with somebody that you feel safe with. These are all ways that we can stimulate that ventral vagal system, and sort of help lift it out of that tendency to go to freeze, if we intervene as we notice that happening.

Again, also, you can think about the sympathetic system. That also is sort of the opposite of that parasympathetic system, right? In terms of it's about being more active, mobilizing. So yeah, what might it be like to, "I notice I'm going... I notice I'm spacing out. Maybe I'll just squeeze my fists a little bit, or press with my feet. Maybe I'll squeeze my arms and feel my edges. Maybe I'll do, again, just like a walk or a few squats, something that gets the blood moving just a little bit," so little interventions, physiologically, as you notice that you're being drawn into that freeze state. Okay.

All right, "My question is about following your impulse. I totally understand the idea behind it, but I also know that in meditation, like Vipassana for instance, it is being said to sit and let the sensations come up and dissolve, instead of acting on them. For instance, an urge to move your leg, that will finally go away. I know you practice Vipassana as well, so how do you relate to this? What to do in a Vipassana retreat, follow my impulse or not?" Great question.

I did do a lot of Vipassana when I was in my 20s, long before I discovered trauma work. And I wouldn't say that I practice Vipassana anymore. The tool that it gave me, or it awakened in me, of paying attention to the physiology at a minute level of detail, has certainly stuck with me, and is something that is just part of my daily life. So in that sense, I do practice Vipassana, in

that I always relate to myself physiologically, really, rather than mentally. I relate to the felt sense. I am aware of scanning my system. To me, that is what the tools of Vipassana are for, not necessarily to spend the rest of your life sitting in contemplation. You can do that if you want, but I prefer to be active in the world and do things. But those tools are certainly online.

So, yes, in Vipassana, traditional approach, when you feel sensations coming up, you are encouraged to simply remain still, and observe them, and wait, and watch as they pass. Now, here's the problem, is they don't understand trauma, and that's not going to work with the sensations of trauma, because they are too urgent, and there are specific things that often want to happen with the sensations associated with unresolved trauma. And if we just sit and observe them, what that will do is tend to either reinforce the freeze response, and okay, yeah, they'll go away, because we're going into freeze, because our system is probably already predisposed to that.

And then we're sitting there reinforcing the freeze response, and essentially telling these sensations that are coming to our attention to go away, which is kind of like telling a hurt little kid to go away, because that's what those sensations represent. These sensations of trauma are like... You can think of them as our aspects of our younger experience, our younger self, coming to us for help. And if we just sit and silently observe, that isn't too friendly. That's one way to think about it.

Another thing that often happens is people will not be able to contain the experience, and they'll have to leave the retreat. At both retreats that I was... I did two 10-day sits. There were a couple people that essentially kind of had a big blow-up, and had to storm out of the hall, and left the retreat, because yeah... And that's actually better, because they weren't reinforcing that freeze response. They actually went with the activation, and at least allowed themselves to flee, right?

So when it comes to these practices and their intersection with trauma, it can be problematic in a retreat setting, because what you want to do is... I mean, sure, you can start by just observing the sensation, but then you may need to follow your impulse. It may be that there were words that were never spoken, that need to be spoken. There may be sounds that need to be made. There may be actions that need to be taken. This is called incomplete procedural memory.

For example, a Frisbee... This is a very innocuous example, but I'm walking along through the park, and a Frisbee hits me in the head and knocks me out. Well, in that case, there can be a split-second where the system noticed the Frisbee coming, and it wanted to do this, but there wasn't time to do that before I got knocked out, but those instructions are still playing in the nervous system, saying, "Raise your arms," and then that can lead to things like frozen shoulder, because you have these instructions constantly saying, "Move, move, move," which creates chronic tension.

So in things like that, say there's a procedural memory, like we didn't get to stop that person from hitting us, or we weren't able to get out of the way of the bicycle, these sensations will often lead to specific movements that want to happen, and they want to usually happen slowly. It's not about big, cathartic movement. When we feel an impulse to go into some kind of movement, we usually want to let that happen very slowly, mindfully, attentively. Follow the impulse. That will often lead to an emotion on its heels, or a different kind of sensation or experience.

So yeah, all of that is kind of problematic in a Vipassana setting, because if you allow yourself to do those things, depending on the center, they may ask you to leave. Like, you're not allowed to make sounds, right? You're not allowed. So that's why I generally discourage people from doing Vipassana until they've had a fair amount of trauma healing experience under their belt, people who have unresolved trauma, that is, which is most people, to some degree or another anyways.

All of that being said now, once we've done a lot of work, once we've allowed a lot of these big things to express and move through, there can be a time where we get to, where the sensations can just arise and pass away, and they don't require anything of us other than to be felt. That does happen the further you get into this work. But it's like you don't want to try to do that at the beginning. You really want to have the freedom to emote or move as you need to, so hope that all makes sense for you.

Okay, "I have some pretty significant preverbal shock trauma. When I have built enough capacity to release this, what might it look like? Can it come on without warning? Might it bring me to my knees? Since it's preverbal, knowing what I know from my experience with psychedelics, will it be messy, and childish, and confusing? I guess I'm just curious if it might come out of nowhere and resemble having to, like, go to the bathroom really badly and not being able to hold it." Yeah, very interesting. With psychedelics, that can unpack this stuff in a way that is messy, for sure. Because what they tend to do is rip the lid off all at once, and then you're overwhelmed with all these early experiences, preverbal experiences that may have been in the subconscious or unconscious.

So yes, that can be messy with psychedelics, which is again why I don't generally recommend psychedelics in conjunction with trauma healing unless it's in a very specific setting, with the right kind of support, the right kind of dosage, in the right situation, the right time of life, all of that stuff. Psychedelics are kind of being thrown at trauma right now, hamfistedly, and I'm not really a fan of that. I think they can be super useful, but it has to be very specific to the person and the right kind of support.

So no, it generally isn't like that from my experience, when done in a sober way, with the right support, somatic tools. Preverbal, early trauma tends to be the last thing, or some of the last stuff that appears. It's kind of like you can think about it like digging down through the layers of an onion. It's not always a linear process, but there tends to be an association, very often, with

sort of going backwards through time. We tend to sort of encounter things that may be in our adult life or teenage years first. Not always, but very often, that happens.

Generally speaking, the preverbal stuff only comes after we've done a fair amount of work, and our system senses that we have the capacity to handle it. Again, that's not always the case. There can be triggers. It can be a psychedelic, or it could be a big acute stressor, or it could be an illness, or a relationship rupture, right? There could be a big thing that happens, that does unpack that stuff more rapidly, but generally speaking, it happens later, and from my experience, it's often not big, and loud, and messy. It's actually often quite quiet. These preverbal layers are quite subtle.

So again, everyone's different, but I wouldn't be worried about it. I wouldn't worry that all of a sudden, "Oh my gosh. All of a sudden, I'm hit with this thing, and I'm going to have to run to the bathroom or something." I haven't had that experience, and I haven't seen that experience in sessions with people. I suppose it could happen, but I wouldn't worry about it. Okay.

"My kidneys feel stress and pain whenever I have deep feelings like anger and grief. Can you explain this? I tried to do the kidney adrenal exercise, but it doesn't seem to help much. Any comment?" This must be from an alumni, just so everyone knows, because we haven't gotten to the kidney adrenal stuff yet. That starts in lab four. So, yes, this is of course normal. If you're stressed, angry, lots of grief, the adrenaline will pump, and the fascia will tend to constrict around the kidneys, and that is often what leads to this aching, this pain in the kidneys. So, very common to feel pain in the kidneys when you're stressed in any kind of way, anger, grief, sure. That's a normal reaction.

If you're already working with the kidney adrenal exercises, and you're not having much success, or it doesn't seem to be working for you, I would ask are there other things you can add to that? Hot water bottle, or two hot water bottles, is actually the best. If you fill two hot water bottles about halfway full with hot water, and put them, like wedge them under your

kidneys, so you have like this cradling support, that can be super helpful for helping, like, you have a feedback then, to drop into. You have this warmth and this pressure, and it's kind of simulating what we do in a touch session, which is to simply hold the kidney with our hand, and we're just telling it, "Hey, I'm here. I'm here. It's all right. Everything's cool." And the kidney tends to sense that and drop, and soften.

So you can simulate that, yes, with hot water bottles. You can use a heating pad. You can even just use, like, a folded up washcloth under each kidney. Give yourself something to have a point of feedback, to tune into, so it's not just sort of a flat space. That can be harder to get that sense of something to go towards with your attention. You could also of course seek out some touch work if that's something that's possible for you. And also, I should point out that we are actually releasing new versions of two of the kidney adrenal lessons, based off of feedback we've gotten over the years with the existing one. Irene actually went in and refined some of those, so when we get to them this round, they will be new versions, which maybe will be more helpful, so let's see what happens. Let us know.

Okay. "When you've been in some phase of freeze to a degree for your entire life, and start to come out of it a little bit, how do you resist the temptation to use all the energy and become an empty tank again? I accidentally did this after my first round. Both you and Irene had warned us, but I didn't realize I was doing it, and now I'm running on empty again. I felt alive and awake for the first time in a decade, and it was so exhilarating to use my newfound energy." Yep.

So again, this is something that will happen. It's not a... Don't beat yourself up about it. This is totally normal. When someone's been in freeze for a long time, and they do a lot of good work, and they get their energy back, it can be so easy to like, "All right, I'm going to go shopping, and I'm going to go on a trip, and I'm going to do this," right? And it's like of course you want to do that. Of course you do. And it usually will lead to this, this crash that happens.

So what I encourage people to do, when they're feeling their energy return, they've been doing this work, they're feeling their life energy come back. Think of it as something that you need to put into savings, not into checking, okay? It's not something to spend. It's something to save. You can even envision it like... Like, visualize the energy moving through your body, repairing little wires, or repairing the cells, bringing new life into the organs. Visualize different ways in which it can move through you internally, because that's what it needs to do. We don't want to use all that energy with behavior and action. We want it to return to us as life energy, that assists us in repairing, which is exactly what it will do if we let it, okay?

And don't beat yourself up, please. This happens. Just, "Okay." Usually, actually very often, it requires an oops. Like, we have to do a bit of an oops like this, and like, "Oh, okay. Yep, I did that thing." Okay, don't worry. Your energy will come back. Just return to the practices and remember what happened. And then just yep, put it into savings. Eventually, you will be able to use it, and be active, and do a lot more. You just, there's usually a period... Like I don't know exactly how long, again, but at least a month or so, where you just want to really let that energy cycle through the system and do its thing.

Okay. "In my first few weeks of life, my mother did not produce enough milk, and I frequently passed out from starvation." That's intense, so yeah. Anybody, if you may notice something in your own system responding to that, just be aware, and think about your seat, and your feet, and your environment. "Now after finishing SBSM 11 last week, I realized that this may be why I've been a sugar addict and a binge eater for five decades." Yes. I would say you are 100% right. "I pay attention to when the urge to binge arises and any emotional and physiological sensations as early as possible, but there's been no shift. Are there specific neurosensory exercises I should focus on to release this unhealthy external resource?" Wow.

So I mean, you're already doing so well. I just have to say. I mean, you're making these connections, you're paying attention to the early sensations that are coming on, all the stuff we would suggest. So bravo, keep doing that. Remember that... I mean, you say five decades.

So yeah, again, this is a big entrenched behavior. It's going to take a while in order to change it. Have patience with yourself. In terms of other things to explore, I guess you could think about things that involve that part of the body, the mouth, and other ways that it might bring in nourishment.

So, for example, the breathing exercises. Cultivating your inhale, cultivating your exhale. Those are a little bit later, I believe, in the... Should be coming up soon. I can't remember which lab exactly. Those could be very interesting to explore because it's about really paying attention to how you're taking in and expelling oxygen, which is another form of nourishment. Perhaps really zoning into feeling how you can be nourished by the air, cultivating the inhale and the exhale in those ways, perhaps could be useful. Also, there's going to be, I think something about aggression that's really important here.

If we think about a little one who's not getting the nourishment it needs, yes, there would be pretty quickly a default to freeze in that situation. But before that, there's going to be some serious frustration. The organism sensing, "Hey, I'm not getting what I need here to survive and develop." There's going to be some rage and frustration in there. So the VUA practice, which again, since you're alumni you can do now, it's later on; that VUA practice of working with the jaw, working with the sense of aggression, the healthy aggression work. All of that might be relevant as well. And again, kind of like the earlier question with the ADHD, what arises when you feel the need to binge eat and you don't let yourself? That could very well trigger that rage because the binge eating is to soothe something, right?

That's the reason we do these things, is we're wanting to soothe something. And what you're trying to soothe, I'm going to guess, is going to have an association with aggression and rage. There could also be grief, of course, and helplessness, but if we can find that energy, the energy of the aggression in there, and help it move through, that could be very helpful in shifting this as well. So maybe instead of going to eat, you don't let yourself and you feel what happens? Does something build? Does something start to feel like, "Ah, it needs to come out?"

I would really be interested in exploring that. Okay. I hope that helps. That's a... Yeah, it's a deep pattern. Have patience with yourself.

Okay. "Functional freeze and disconnection from the body makes so much sense. Chronic pain and illness result in a hyper focus on the body and symptoms. How do these two apparently conflicting states happen together?" Well, that's very common, actually. That's what we often see is a... Remember whenever there's freeze, there's sympathetic underneath, because of the order in which the survival responses come on, if we're living with some degree of a freeze in our system, guaranteed there's a big sympathetic charge underneath that lid. So, once freeze is in the picture, both are in the picture, always. Some people are just in a chronic sympathetic state and they don't have the freezy thing. That's a little less common in our culture, but that certainly does happen where it's just chronically sympathetically activated, just anxious all the time, or angry all the time, chronically tense. That's one manifestation.

But more commonly it's both, and when you have that, then you can have both at the same time. So yeah, you might feel disconnected from the body and sort of checked out, but because you're disconnected from the body, things start to go awry and you start to have illnesses which produce symptoms, which then trigger the sympathetic hypervigilance and you focus on the symptoms and you get worried about those and you get more into a sympathetic state until it gets too much, and then maybe you check out again and go to freeze. So these things can flip flop back and forth in the system; ping pong. Yeah, sometimes one is more dominant, sometimes the other is more dominant, but it's very common to have both at once and to experience that in some kind of way.

Okay. I saw someone ask if we could turn on subtitles. Unfortunately we can't do that in real time, I'm sorry. The video replay will have subtitles, but that will be within a couple days. We post the replay usually the same day on the site and then usually within a or two there'll be subtitles on that video, and then maybe within two or three days there'll be a transcript, because it takes time to process those things. Just FYI.

"My lower turbinates of the nose were removed during a surgery. This sometimes leads to what is called empty nose syndrome years later where the nerves of the nose get damaged so the person can't feel the sensation of breathing anymore. People who have ENS are always stressed and tense as they feel they are suffocating, even though the air is coming in normally. Any tips or advice on how to protect the nerves and the nerve endings of the nose from such a condition?" So, I mean, this is a tiny bit out of our wheelhouse in some ways because there was a surgery that physically altered the structure. But that being said, I think there's some things we can do.

One, don't assume it will happen. Don't assume that this is going to happen to you. Now that's a big important thing. The mind is powerful. So if there's something that has set you up to a certain predisposition, if you worry about it and fixate on it and assume it, it's more likely to happen. So I would err on assuming it's not going to happen and you're going to be fine. And there's some practices you can do to reinforce that, that I'm thinking of. Practice using those nerves, essentially. What we use, we tend to cultivate. What we ignore we maybe lose function with. So, really focus on using those nerves.

Maybe sit for 15 minutes a day, just breathing in and out through the nose, feeling that sensation. Cultivate that as a practice. You can also pay attention to other areas. It's possible to notice, for example, the touch of breath on the upper lip as you're breathing. That's another way to notice the breath, is how it touches the upper lip as it goes in and out. Focus on those areas as sort of a practice. And my hunch is, if you do that and you don't assume it's going to happen, your chances are better that it won't happen. So, that's the best I can think of for that. Anything else? Yeah, no, that's all I was able to think of for that one.

Then the next one was, "I suffer chemical trauma resulting in chronic rhinitis having grown up in a war zone. I heard Irene talking about it in a Q&A, so I already ordered some Zeolite Body Detox Extra. I try to get sunlight as much as I can, and I'm looking into body dowsing. Is there any other guidance for this mysterious type of trauma?" So yeah, it sounds like you're already

on the page with many good things, many good practices. That's great. The only other piece that I can add would be what we call fluid work. Now this is a very esoteric branch of touch work that Kathy Kane teaches in one of her classes. Finding a practitioner who's going to know how to do this would be like a needle in a haystack.

If you can find a Kathy Kane touch practitioner who knows how to do fluid work, great. Otherwise, there's ways you can support yourself in doing that, which I'll describe. So, fluid work, the essence of that is when we've been chemically traumatized or also electrically... So the same thing applies to electric shock. It greatly disrupts the fluid structures in the body. They become disorganized and what we call non-coherent. They're not flowing in rhythm with each other. There's many, many fluids within the human system and they all want to be coherent and organized with each other. And the way that we support that with the fluid work is by tapping into the rhythm of the tides or... So think about a wave and how it rolls up the sand and it crests and it rolls back to the ocean. Like this kind of tempo, this slow tempo.

If you think about that wave flowing through your body. So maybe you start with the feet and this rolls up to the top of the head and it crests and it rolls down through the feet. And you think about this sort of organizing rhythm moving through the system and just that it's affecting all the fluids, it's organizing all the fluids. They're all sort of becoming coherent and organized in this rhythm that they can all share. Now, the rhythm of the tides is very significant because it's the ocean and we are very largely salt water, so that's why I believe Kathy tapped into this. It can be very effective. It can also be especially effective in a bath. So to do this in a body of water, if you can be comfortable in a warm bathtub, that's what I would suggest, is start thinking about what we call fluid work and helping move this organized rhythm through the body.

The way I think of it, because you may be asking, "Well, how do I do that?" Imagine a disc at the bottom of your feet that's the same size as the circumference of your body, and you're just visualizing this disc slowly moving up the body to the top of the head and then back down

again. Give that a shot, let us know if that helps at all. And definitely, yeah, all the other stuff that you mentioned, very good. Yeah, very good to do.

Okay. This is a general question, "Can you please talk about working with resistance? I've read and watched Irene's articles and videos on resistance several times, but it would help to hear more about it. For example, I had a breakthrough where for about a week I finally could feel the ground under me with my body. And not just from the perspective of noticing it with my mind, but now my system is totally resisting doing more of that. How do I feel into the resistance?" So yeah, this can be a bit of a hard thing to grasp. The first thing to ask is, how can you tell your system is resisting? What is giving you that signal that you are experiencing resistance?

Again, we can't change it until we know what we're doing. So, what is the signal? Is it something that's tightening and clenching up? Is it a pattern of thoughts that come into the mind? Is it an emotion that comes over you that makes you want to stop? What is the manifestation of the resistance? How do you know you are experiencing resistance? And then, I guess, if you can find that, that can then lead to a direct sort of expression of the resistance. That's what it means to feel into the resistance. How do I know I'm resisting? What is that? And is there some way in which that wants to have some kind of expression or movement through the body?

Another way to frame that, if you can't find anything that way is, how do you feel about the fact that you're experiencing resistance? You could ask yourself that question. What does it feel like to you to have this experience of resistance? Is it sad? Does it make you angry? Right? Again, that can create a doorway into harnessing the energy of the resistance itself. Essentially resistance, yeah, it's a form of survival response. It's something that's saying, "No, you don't. That's not safe." So for your example, being able to have a felt sense of the body in connection to the environment, really feeling that physically, that means that you are becoming very present in connection to your environment in an embodied way.

And that's for many of us, what was so freaking scary in the first place was being in a body, in the environment, in connection to the environment. So why would you want to do that? So that's why the resistance... Yeah, that's why the resistance comes on. So, it is a form of survival response, it's a form of protection. And again, we can sometimes, if none of that's working, you can try pushing on the system a little bit. Again, this is the same kind of thing. Like, "Okay, I'm feeling resistance, but I'm going to make myself do it anyway." Does that create something? So those are all different ways that you can try getting into that fuel, the energy of the resistance that's happening, and what really is going on. Often it will be fear. It'll be, fear needs to come through the system, fear needs to come through the body. This is one of the hardest things in this work, it can totally be done, but learning to feel the sensations of fear without fearing them, that is a big one.

And that means you've really got to get into the body and be in the present environment, oriented, like knowing, "Okay, yes, I cognitively know I am safe so I can feel terrified." That takes some time, but it can totally be done. It often involves shortness of breath, tightness, the eyes getting wide, various presentations that we would experience when feeling terrified. Allowing those things to move through the body without fearing them is a big part of what may need to happen here, if there's this fear about connecting to the environment. Okay?

Okay. "What if one has no bodily impulses in real time, like no thirst until one gets a headache?" Oh, thirst, I think you mean no *thirst* until one gets a headache. "No hunger until the stomach hurts. No desire to urinate until the bladder nearly bursts. No desire for a bowel movement unless I sit on the toilet and wait and wait until it's happening. Is that a sign of a dysregulated autonomic nervous system?" Yes. More specifically, I would say that's a sign of being disconnected from the body. And being disconnected from the body is a sign of a dysregulated nervous system. Not everybody who has a dysregulated nervous system is disconnected from their body. It shows up in all sorts of different ways and presentations. But

yes, that's a very common one, is to be disconnected from the body and not hearing its signals. Yeah, absolutely.

And now you didn't ask me about things to try, but I've got some suggestions. One, so what would happen if you set your day with the intention of noticing one thing? Just pick one. I'm going to hold the intention that today I am really going to try to notice when I'm thirsty. Don't worry about anything else. Just pick one thing and then see if you can start to just hold that intention throughout the day. Check in with yourself. Am I thirsty? Am I thirsty? Err on the side of caution. Err on the side of, like, well, I can't really tell if I'm thirsty, but it's been a while since I've had a drink. I'm going to go have a drink of water. What does it feel like to have that drink of water? What's the felt sense of that? So just pick one thing to hold in your intention and try to zone in on those somatic signals.

I mean, also it's just like, do this work in general. Just keep doing the neurosensory exercises. Stick with the program at your own pace, because every single neurosensory exercise in here is about connecting to the body in some way. So that's what needs to be cultivated, is that connection to the self, that connection to the physiology, and the felt sense. So just keep doing the work. Let's see. Anything else? Yeah. And yeah, just pick one thing and maybe switch the next day. Today, I'm going to really focus on when am I hungry? And again, maybe you check in and even though you don't really feel it, you experiment with having a couple chips. What does that feel like? Is there some signal that I can tap into of satiation? So curiosity and intention can carry you a long way with this.

Okay. "From the nervous system perspective, when do you know you are above your capacity? In other words, what are the signs that you're overwhelmed?" So there can be many. You can be checked out, you can notice that you're spacey, you can't really pay attention anymore. Or maybe you feel numb. You just realize, I'm not really feeling anything, and I feel kind of weird. These are all kinds of freezy manifestations of overwhelm. Or you're agitated, you're angry, you can't sit still, your leg starts popping a million miles an hour, you can't focus anymore. These

are kind of sympathetic signs that you're overwhelmed. It could be a combination of those. All of a sudden like, oh my God, you can't stop going... That could be a sign that you're overwhelmed. Or say you're easily triggered. You find yourself lashing out at other people.

You feel grumpy, you feel tense. All of these are indications that your system is overwhelmed and it needs a break. You need to just... If this is in reference to doing a neurosensory exercise, you need to stop. In relation to this work, as you're going through one of the exercises, if any of these things should happen, we'll say again and again, don't push through. Stop. You can always come back later. This will be here for all time. At least as long as there's an internet that we'll have this stuff here. So it'll be there. Just take a break, do something else, have a glass of water, have a cup of tea, go for a walk. Come back to it later. Right? Listen to those signals that you're getting overwhelmed. And again, it can be any of those. Checked out, spacey, numb, irritated, angry, tense, grumpy, any of that stuff.

Okay. "I am a perfectionist, a high achiever, and I'm currently going through a burnout. I'm disciplined and I'm used to making myself do things that I don't want to. When Irene says we shouldn't really give into resistance, what I hear her say is that we should do something even if we don't want to. Is this correct? And if so, how does this fit in with following your impulse framework? I feel like not listening to my internal voices is what got me to this unhealthy state in the first place. Yeah, I just need some clarity here. When I hear her say we should do something even if we don't want to, is that what she means about resistance?" No, not really. So the first thing, there's two kinds of impulses. There's authentic biological based impulses, and we really want to learn to listen to those.

That's what a lot of this work is about, is finding and listening, tuning into, honoring, following those biological impulses. Then there are impulses that are manifestations of our trauma, and these are not so much things that we want to follow and listen to. So the first thing is discerning that difference. That's a big part of the early part of this work, is telling this is a biological impulse that my body wants. This is an impulse that is rooted in my need to survive.

And one cue is the survival ones are usually much louder, and they're usually associated with some kind of addiction, addictive behavior, such as being a perfectionist, needing to push through, achieve, even though you don't want to. These are all survival based impulses. So that's not what we're talking about. We're talking about tuning into the biological impulses that are coming from your physiology.

So I hope that that helps clarify what we're talking about. So in terms of resistance, if we're going into a practice, that you need to be signed up for this program, or feeling drawn to do it, hopefully that was out of an impulse of self care. I want to get better. I want to take care of myself, I want to do this work. And then we go to do a neurosensory exercise because yes, our body is telling us we need to do this stuff and understand ourselves. And then we start to drop into the practice and our mind says, "Ah, no, no, no. Resistance. Resistance." Okay, that's a survival response. So do we want to listen to that? And the answer is sometimes, maybe not. Maybe so, right? It's a negotiation. We don't want to just steamroll over it. We also don't want to totally give into it.

And that's where this process comes in. Okay, I hear you, resistance. What might it be like to express the feeling of the resistance? And then that becomes your work, like we were talking about earlier. It's like, okay, I guess I'm going to let go of this neurosensory exercise for now, and I'm just going to work with this resistance that's flooding me and all these emotions and reactions, because that is now what's present. And sometimes it may be that then that allows you to drop into the practice. So I think... Let's see, anything else here? We sometimes do need to push a little bit against our edges in a titrated way. If the mind just keeps on saying over and over again, "No, don't do it. No, don't do it." But it's clear that the body is saying we need to do this, then we may have to push. You may then get to use some of your skills to sort of push a little bit, but in a titrated way. So maybe that means doing five minutes and then stopping.

So it's a negotiation. So much of this work early on especially is about learning to differentiate where am I coming from a place of survival? And when am I coming from a place of physiology, biology, authentic impulse?

Okay. "Will improved nervous system regulation help alleviate social anxiety and naturally make it easier to socially engage with people?" Yes. Very simple to answer that one. Yeah, that's what it's all about, man. You start getting that regulation on board. That means the different parts of the nervous system get to do their thing, how they're supposed to. The ventral vagal system supports us in feeling safe in connection with people, and we feel nourished by that. And the sympathetic system is keeping us active and with energy, rather than in survival mode. The dorsal vagal branch of the system is online and helping us do that rest, digest, repair thing, right? That's what regulation means, is the branches of the nervous system do what they're supposed to do rather than being at cross purposes with each other. Absolutely. And this is, again, for me, I can answer this from my personal experience, and of course I've also heard many testimonials and worked with many clients for whom this has shifted.

But yeah, I mean, most of you probably know my story at this point. But yeah, I lived in the woods for 13 years essentially, apart from society, because I couldn't deal with the world. If I went into town, I could handle it for a couple hours and then I'd be flooded. I had to get the hell out of there. So yeah, I could not deal with people or social situations hardly at all when I started into this work. And yeah, it's not something that I trained myself to do through force of will or behavior. It's as my system became regulated, things started to feel safer. People started to feel safer.

Now another thing is it will also make you more tuned in to the kinds of people in situations that you really want to be with. That's another thing. I mean, sometimes we don't feel safe around people, because those people ain't safe. It's not always our stuff. Sometimes there's dangerous people and jerks. There's people who aren't nice. So being in tune with our system

and regulated will help us have a much keener radar for, these are my people, these are my situations, these are the things that nourish me. And then, yeah, you can really get the benefit of that.

Okay, last question. "How can I tell the difference between a regression and healing and having stuff arise? I did SBSM in March and will still find myself in days of dysregulation that I would call manic or anxiety states. Most recently because of a potential new relationship starting. Is it normal to have lows stay as low as they have been with longer times of better regulation in between? When low, I worry that I've undone all my healing work, or I'm guilty of not having done enough. Do you have any advice?" So again, shifting the train tracks takes time. Yes, this is normal, totally normal. Our system has our survival responses as kind of defaults. Like it knows, okay, when this happens, I can do this. And that's going to manage the experience because that's what I've learned to do. That's very deeply ingrained the longer we live with it and shifting that takes a lot of time.

So what you want to look at is exactly what you're pointing out here. Oh, there's more time of regulation in between these defaults to the old survival pattern. Yes, that's exactly right. Eventually those defaults will also start to shift. They will start to lose their urgency and their strength, the associated thoughts, the emotions, the survival states that go along with these sort of survival days, dysregulated days. All of that will start to attenuate and get a little less. But it does take time.

You're not losing progress. You're not undoing anything. It's just how it goes. When we've had a well-established survival pattern, it just takes time. Another thing you want to look at are what's happening with the other processes in your body associated with the autonomic system? How's your energy overall? Has that gotten a little bit better overall as you've done this work through time? Has your digestion gotten a little bit better? How's your sleep? Right? We want to look at these sort of big picture things as well, to sort of get a sense of, okay, yeah, I have a little bit more energy in general than I used to and I'm sleeping a bit better and I can

digest my food a bit better and a little bit more regular. We want to sort of look at those big picture indications as well.

And yeah, the last thing is when we are doing this work, we're getting more regulated and then we encounter an acute stressor. That is when we can expect this to happen. So yeah, you've got a potential new relationship, which can be very exciting, but for anyone who's been through trauma can also be like, oh my god, I don't know. So that makes sense. That's a big sort of stimulus to the system. So yeah, it makes sense that then you would have a couple days of going to this old dysregulated pattern. So don't worry about it. Just keep doing the work, keep showing up, and keep taking care of yourself the way that you've learned how.

Okay? All right. Well, we did it. 17 questions in an hour. That's not bad. Well, thank you all so much for being here. Really happy to see you all and be doing these calls again. The next time I see you, next week, I will be in California with a much different backdrop as I'm going on a road trip immediately after this call down there. So I will see you all from sunny Palm Springs. And until then, take really good care and just keep showing up. Thanks for being here. Okay, bye everybody.