

EARLY TRAUMA AND SMARTBODY SMARTMIND: TIPS FOR SUCCESS

A 12-WEEK Nervous System REWIRE



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INTRODUCTION

When you have a history that includes early trauma (which stems from early adversity), it can often feel like the approaches you turn to for growth and healing don't work, or at least not to the extent you hoped they would.

Somehow you found your way here, to SmartBody SmartMind, where you DO have access to a program and a Team that can teach you to transform the experience of early trauma and grow nervous system regulation and capacity – and in doing so, create many of the shifts you've been seeking.

When early trauma is in the picture, there can be important differences in how you approach SBSM.

These Early Trauma Tips are designed to help you learn what early trauma is, how to know if it applies to you, and if it does, to offer you practical tips for tailoring your SBSM experience to support your unique nervous system – and ultimately equip you to grow regulation, heal trauma, and create changes in your health and in your life.

WHAT IS EARLY TRAUMA?

Early trauma (also known as developmental trauma) happens when we experience adversity early in life and didn't receive the attuned, regulated support we needed at the time. When this happens, we lack the ingredients required to support optimal development, including the growth of solid nervous system regulation.

Generally speaking, early trauma is considered to happen between conception and 3 years of age. Developmental trauma can include the teenage years and, acccording to some experts, even into the early 20's.

One of the key ingredients in growing regulation is the ability to feel safe. We now know that we aren't necessarily born with this ability. This, and other abilities like the ability to feel connected to others and to sense oneself from the inside out, grow over time when we have access to "good enough" attunement and care.

THIS LADY DESERVES A GOLD STAR! WATCH MY LONG FORM INTERVIEW WITH KATHY KAIN. irenelyon.com/this-lady-deserves-a-gold-star

WHAT CAUSES EARLY TRAUMA?

Early trauma can happen for a wide variety of reasons, the common factor being adversity early in life. This adversity can involve a difficult birth or early medical procedure, it can stem from early abuse and loss, and it can include any experience that is too much for the young child with a developing nervous system to effectively navigate.

Sometimes things might look good on the face of things – someone may have come from a "good" home, been fed organic food, have gone to well-respected schools – yet their caregivers weren't able to attune to their biological needs, to really be present, perhaps due to their own history.

In many cases people experience both forms of adversity: they experienced difficult events early in life and they lacked access to an attuned, regulated caregiver. Sometimes too the little one may experience adversity at the same time as the caregiver, which makes it even more challenging for the caregiver to support the young one.



LEARN MORE: HOW TO COME OUT OF FREEZE AND INTO FLOW. sethlyon.com/come-freeze-flow/

HOW DOES THIS IMPACT THE NERVOUS SYSTEM?

As mammals, we're designed to turn on survival physiology only when we need to do so to stay alive and protect oneself. We're also designed to turn off this survival physiology once the threat has passed, and shift into states that support rest, repair and regeneration (remember, little ones rely on coregulation to turn off survival physiology).

When we don't have optimal access to these restful and regenerative states, we instead rely on survival physiology to get us through daily life. On a day-to-day basis, this can show up in many ways... anxiety, depression, hypervigilance, feeling numb, deep feelings of isolation and chronic pain, to name a few.

Over time, living in survival physiology takes a toll and can impact health, relationships, our sense of belonging and purpose and much more (you'll learn more about this in the Biology of Stress video 2: What Animals in the Wild Do that We Don't Do in Lab 2).



LEARN MORE: THE LINK BETWEEN EARLY CHILDHOOD STRESS AND CHRONIC ILLNESS youtube.com/watch?v=SAiVSGyJhO8

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TROUBLE LOSING WEIGHT? GOT AN ADDICTION? (ORIGINS OF *THE ACE STUDY*) irenelyon.com/2015/10/14/origins-of-ace-study/

HOW DO I KNOW IF I HAVE EARLY TRAUMA?

Most people who find their way to this work have early trauma to some extent, and it impacts some of us to a much greater degree than others. You might think of early trauma as existing along a spectrum.

If someone had more access to attuned care when they were young, or experienced less severe early adversity, the symptoms of early trauma may be mild. For example, they may notice that they feel a little uncomfortable being part of a group or speaking in public.

On the other end of the spectrum, if someone has a history of more severe or consistent early adversity, any or all areas of life may feel overwhelming. They may also experience a lot of vigilance, remember feeling anxious as a kid, and have few childhood memories. People with this history may also be prone to chronic illness. What you know about your early history can give you clues for sure. Sometimes people know that they needed a medical procedure early in life, or that a parent was depressed, or absent.

And other times you may not have any knowledge that you experienced early adversity. Instead, you might find that certain areas of your life feel sticky and hard to shift, despite the work you do to change them.

Fortunately we now know that we can heal early trauma later in life, and grow access to physiology that supports connection, belonging, repair and regeneration. And you're in the right place to learn how to do this!



LEARN MORE: HEALING OUR RESISTANCE TO MAKING MONEY, EXERCISING, AND LIVING IN THE MATRIX irenelyon.com/2023/02/08/healing-in-a-toxic-culture-with-seth-lyon/

DO I NEED TO KNOW IF I HAVE EARLY TRAUMA?

In one sense, no, you don't. In this work, we don't need a specific diagnosis, and we don't need to know exactly what happened when (or why) in order to heal.

At the same time, learning to recognize the signs that early trauma may be in the picture can help to grow awareness, understanding and self-compassion and shed some light on how to engage in SBSM in a way that supports you and your unique nervous system.

It can also help to grow the awareness that lifelong challenges and stuckness are often byproducts of your physiology working to protect you and keep you alive - and not evidence of personal failure or not trying hard enough.



WHAT DO I DO IF I FEEL OVERWHELMED?

If you feel overwhelmed, many of the tips above may be supportive. You might also work through Irene's 4 *Simple Steps to Calm Overwhelm*. Remember, you may notice a shift and you may not. Having the awareness to take a step in itself supports growth and change.

4 SIMPLE STEPS TO CALM OVERWHELM.

irenelyon.com/wp-content/uploads/2020/08/4-Steps-to-Calm-Overwhelm.pdf

WHAT DOES THIS ALL MEAN FOR MY SBSM EXPERIENCE?

Learning to listen to and support your unique nervous system is the #1 foundational principle of SBSM.

So as with any learning or practice in the program, the key involves taking a step and discovering what works for you.

With this in mind, there are a few principles that may be supportive to remember when working with early trauma:

Grow The Pool

In the swimming pool and beach ball metaphor, it may initially be supportive to focus on growing the swimming pool (and knowing that it exists!) while you allow the balls to be there in the background as capacity and regulation grow. This isn't always the case, and it may be worth keeping in mind.

Less is often more

With early trauma, the nervous system works hard to help us survive. Safety is often what's familiar – even when pain is what's familiar – and change can read as threat. For these reasons and more, less is very often more. And when we say less, we mean less! Many of us learned along the way that more is somehow better, and the opposite can be true in this work. This can take some getting used to.

Less is very often more when working with early trauma.

Sometimes doing a practice for a moment or two, noticing a drop of a sensation, or just starting to think about an experience (an event, a thought, a sensation, etc.) can be plenty. This can also look like taking a pause periodically during the day, or taking breaks from engaging with SBSM.

This relates to a concept coined by Peter Levine on the topic of titration which has to do with how much of something we work with or pay attention to. Irene has a related video you can <u>watch here</u>.

Practice connection.

With early trauma, an important part of healing happens when we experience moments of consistent, attuned, caring. When we didn't have much of this early in life, feelings of care and connection may feel foreign, unfamiliar and even scary. Remember that this is to be expected, and does usually change with time and practice. Those micro moments add up.

There are many ways you can explore connection and feelings of care, and the SBSM practices, calls and program sites are great ways to do so. For example, as you practice, you might notice what happens as you tune into Irene, Elia, or Seth's voice, the feel of your own touch, look at a face or faces on a Training or Q&A call, read a post from another SBSMer or a Team Lyon member, and more.

You can also create experiences of connection in other ways. Irene made a video about <u>ways to spark</u> <u>up social connection without</u> <u>socializing you can check out too.</u>

As you practice, learn and explore, remember that change takes time.

Growing nervous system capacity and regulation is a gradual process. At first, you may not notice much happening at all, or you may feel too much. When you don't notice much, keep on practicing and know that it makes a difference. Change is likely happening! It often helps to pay attention to small or subtle shifts and differences. Maybe you notice a teensy bit less activation one day, and then notice more the next day (or next hour). This reflects the nonlinear process of healing trauma it's not a sign of failure. Change usually takes more time when you have early trauma, and we've seen it happen time and again.

66 I will admit: this is NOT a quick fix, it IS an essential lifestyle choice.

— (rene Lyon

TOP 5 EARLY TRAUMA PRACTICE TIPS

Remember that everyone is different, so allow these ideas to be a starting point and feel free to ignore them if you already have a sense of what works for your nervous system.

1. Orient

Orienting is one of the most foundational practices in SBSM. Mammals are designed to orient consistently as they move throughout the day.

When you have early trauma, it may be helpful to orient through senses other than vision – and to the sense of touch in particular (the way a baby might orient). In addition, it can sometimes be helpful to orient more to your external experience and focus less on the body (or vice versa) for a time while capacity grows.

You might also explore orienting specifically to safety, to things that are pleasant, nourishing, neutral, or that provide less discomfort and are less stimulating.

2. Use your Resources

Know, grow, and use your resources to help grow capacity. If you have early trauma, you may sometimes (or often) feel a LOT.

Making a practice of turning towards your resources can be supportive. Sometimes you'll notice a shift in your experience as you do, sometimes you won't, and that's okay. As we start to explore this work, it's common not to have many resources (and internal resources in particular). These will grow with time.

Sound can be a powerful resource, both listening to sounds and learning that we can generate our own vibrations. Seth made a video on Using Sound to Explore the Chambers of the Body. You'll find it Lab 5 Extra Resources once Lab 5 is up on the site.

3. Follow Your Impulse

Start to notice and follow your biological impulse as a way to attune to yourself and cultivate the experience of someone being there, someone listening and responding. With early trauma, it's not uncommon to be disconnected from your biological impulses. If this is the case, start small. See if you can notice when you need to go to the bathroom or start to feel thirsty.

4. Practice Containment

Practice containment to help you find and grow your felt sense your body (a.k.a.the swimming pool). You'll learn more about Containment in Lab 6, and in the meantime here's a link to Irene's DIY: Ancient Anxiety Medicine practice.

You can also play with simply feeling your edges. Elia offers some lovely related practices in his lessons. You'll find these under *Movement Lessons* on the SBSM site.

5. Kidney-Adrenal (K/A) Awareness

The Kidney-Adrenal practices work directly with the kidney adrenal interface, a part of the physiology that plays a major role in signaling threat to the body.

As you work with the K/A area, and related areas over time, this signaling tends to quiet and you generally start to grow access to the quieter, more regenerative parasympathetic states. You'll learn to work with the Kidney-Adrenal interface in Labs 4 and 5. The K/A practices are one of a number of touch practices that can be especially important when you have a history of early trauma.

Everyone responds differently, so see which practices you're drawn to and notice what happens in your system as you do.

WANT TO LEARN MORE?

You'll learn much more about many of the topics covered in these Tips as you progress through SBSM in your way, at your pace. If you want to learn more about early trauma specifically, here are a few resources in addition to those above:

- Nurturing Resilience: Helping Clients Move Forward from Developmental <u>Trauma-An Integrative Somatic Approach</u>, a book by Kathy L. Kain and Stephen J. Terrell
- How to Help Anxious Kids Who are Behaving "Badly", an interview with Stephen Terrell and Irene Lyon
- Healing Trauma with Seth Lyon, a podcast interview
- Cultivating internal safety, a blog post by Seth Lyon

THE BOTTOM LINE

The process of healing trauma and restoring regulation to the nervous system is rarely straightforward, and involves a process of discovery for most everyone. If you have early trauma, you may need to go a little more slowly, a little more carefully than others, and that's ok!

Often the FIRST thing we learn in this work is how much is enough, and how much is too much, and this may be especially important for you. Know that this can take some time to learn, so if that's the case for you remember this isn't uncommon and stick with it.

If you keep the principles outlined in this guide in mind, apply yourself (imperfection fully encouraged), and honor the needs of your unique system, you'll likely be on your way to growing regulation, healing trauma, and learning to thrive!