

Seth Lyon (00:00:03):

All right. Hey. So here we are, another Q&A call. And we have another guest star today with Rebecca Roman helping out. If you want to unmute yourself and say hi.

Rebecca Roman (00:00:16):

Hi everyone.

Seth Lyon (00:00:19):

Rebecca is one of our lovely moderators and another one of our lovely moderators, Ms. Leah Murphy is also here in the chat. Hi, Leah. Awesome. And we will get started.

(00:00:37):

All right. So today there was just one common theme that many people were asking about, and that was the complexities of doing this work when we have some sort of chronic illness or what we call syndromes. This is very often the result of unresolved early trauma where both the gas and the brake have been on for a long time, resulting in these crossed wiring signals being sent, and that tends to show up over time as things like chronic fatigue, fibromyalgia, multiple chemical sensitivity, lupus, Crohn's, a host of things that we give different names to, that essentially have their root in this deep dysregulation that's just been hanging out in the system for a long time. When that's the case, it can be really tough to do this work and have a normal linear progression, as one might expect.

(00:01:41):

It's not uncommon to lose hope, to lose faith in the work entirely. A couple of the people who wrote in were like, I don't even know if I have faith in SBSM anymore. It doesn't seem to be working. And I just want to say first that that's totally normal. For one, it's normal for anyone doing this work to have periods of doubt and feeling like, I don't know if this is working, because it's not something that gives really fast direct results a lot of the time. Now, there can be big shifts. Say we do a piece of work and there's something that moves through that's pretty significant. There can be moments of big shifts and symptoms resolving. More of the time though, it's a long steady slog where we just have to keep on going. It's like Irene uses the analogy a lot of the time of learning a new language, and it's like, yeah, it'd be easy to lose hope.

(00:02:37):

And just like, I can't do this. This is too hard. My brain is too old to learn this stuff. Yeah, it takes immersion, it takes consistent practice over a long period of time. I want to just say first, for those who feel like you're losing hope in this work, and if it's going to work for you, totally understand that. It is totally possible that you may want to try other approaches. I'll just say that what we've found is that having a solid understanding of your nervous system and how to work with it really is the bedrock of making other modalities effective. That being said, sometimes yeah, we may want to focus on another modality, another vector of support, or at the same time bring in additional ways of supporting ourselves that might be like naturopathic support. Maybe our body is deficient in things that it's making our nervous system very hard to change.

(00:03:36):

Maybe we need to get more into the circadian health stuff and support our mitochondrial health. Irene's done quite a few videos on that, because it's so connected to overall well-being and the health of the nervous system. These deep layers of cellular health, nutritional health, mineral health, hormonal health, all of those may be different things that we do need to look at. So yeah, it's not like we're saying that this one thing will heal everything, it's just that without this one thing, it's very hard to get healing that sticks from anything else, because the nervous system is so fundamental. I'll just encourage you to please stick with the knowledge and the understanding and the practices at least a little bit if you do want to explore other things.

(00:04:27):

Some specific points. When we're living with a syndrome, when we're living with something complex, the work is more complex because we really can't go outside of our window of tolerance. One other person wrote in about how they had become bed bound for a year after just trying to work with the sympathetic activation and they went past their window of tolerance and then they were bed bound. And it's like, yeah, that's pretty extreme. When we push past our window of tolerance, it's pretty normal to have symptoms. Maybe you're knocked out for a week or you have flu-like symptoms or you feel disoriented or you're extra emotional. But being bed bound for a year is, yeah, that's pretty extreme. So I can understand how that could make someone feel like, oh my God, stay away. And I'll just say, I just want to

---

repeat that it's so important to learn our window of tolerance and to stay within it. And this is why. Because especially when there's complex issues and the system is really working through deep stuff, it's holding these charges for a very long time, it can have these big consequences when we really go past what we have capacity for. Yeah, it is really important to stay within our window of tolerance once we figure out what that is and just to slowly meet it. Now, this is very different than if we've got a relatively solid baseline and we're working with more sympathetic energy. It's just coming through when we're getting trembles or shakes or we're working with anger and we have that energy to do that. It's a totally different thing. This is why we started doing the early developmental trauma calls first off in the program, because we realized there's a large amount of people who aren't going to be served by a normal linear approach. With, okay, work with the activation and let it come out. It's like, no. Slowly, slowly, slowly, slowly build your foundations and that's needed in these cases.

(00:06:40):

Now, one person had said, I feel like some freeze lifted because tons of grief has been moving through. Okay, awesome. That could be, but that isn't going to necessarily lead to your capacity growing, because even if some freeze is lifted and tons of grief is moving through, that also might be too much for your system. This is why, again, we're highlighting resources early on, we're highlighting things like coming out of your inner experience. Believe it or not, when there's tons of grief or tons of anything surfacing, we may need to deliberately come out of it. It's not about just following it and we have to maybe sometimes deliberately, sort of, okay, that's enough, and turn off the valve, go to something external, go to something that's soothing, settle ourselves, especially if we've got syndromes, if we're living with these complex health issues.

(00:07:38):

Just checking my notes here. All right, someone else was confused because they had moved through a bunch of grief and anger, so more sympathetic-y things. And then now they're feeling depression, which they'd never felt before, and yep, that can happen. Very often people come in feeling more depressed, and then as that lifts, the sympathetic stuff comes out from underneath. But it's not always that way. These things can be packed up in layers. We may be presenting with a lot of anger, grief, big emotions, which are actually kind of a protective shell around this more collapsed, really vulnerable state. It can certainly go both ways. It's not unusual to move through a bunch of sympathetic stuff and then boom, you encounter this

layer of freeze that was deeper in the system. And when we're in freeze, that's what leads to this feeling of depression. The system is being dominated by freeze.

(00:08:39):

And when that's the case, again, it's about a lot of self-care. What is my environment? Am I nourishing myself in all the ways that I can? How are my relationships? Do I need to minimize stress in my life? All the ways in which you can focus on nourishing yourself. There's an article of mine that I referenced last call. It's, "How to come out of freeze and into flow," on my website. And that again, goes through all of this. The different kinds of understandings that we may need to take in when we are in a state of feeling a lot of freeze.

(00:09:21):

And there can also be representations of this that are oscillations. Maybe when we're up and about, we feel lots of anxiety. Someone said they felt confusion, like just an inability to focus. And then as soon as they laid down, it's more into boom, this freeze shutdown response. This is again, a representation of that deep dysregulation where it's just flipping back and forth between the two extremes. And again, same kind of case where it's really important to focus on that foundation building work. What are my resources? How can I soothe myself? How can I bring myself out of my inner experience a little bit? And then back in? How can I connect to the external and then the internal a little bit, and then back out? Little explorations. These are in all of these cases, you may want to do a few minutes of one of the neurosensory practices.

(00:10:28):

Say you're working with the cultivating the inhale or exhale lessons. Those start bringing expansion into the system. They're connecting to the breath, which is deeply connected to our autonomic processes. It's powerful stuff. So yeah, maybe you just do a few minutes of that. And again, this is why this can be frustrating. I want to just do a practice and have it have a result and feel better. And of course you do. I understand. It's just that that's very often not how it works. It's a slow accumulation that shows results over time, which is why I've said many times it took me seven years. Seven years of consistent work. Every couple weeks I'm going to do sessions because this wasn't around yet. And it's just in applying that work in my day-to-day life, meeting the challenges, when I get triggered remembering that it's not about just being in session, it's about applying it all the time.

(00:11:27):

And I had moments of feeling, "Wow, there's a shift, oh my gosh." But that was the minority. Usually what would happen is, "This just kind of sucks, but I'm keeping going. I can tell that it's doing something." And then, oh, one day I wake up and I realize I'm not triggered by Irene's footsteps above my head. I actually slept through that. Cool. Okay. That tends to be more how it goes. It's like this gradual unfolding of, "Oh, I just realized this thing's not bugging me anymore. Or I had a slightly different response to this triggering impulse, this triggering input that came." All right. I hope that all makes sense. Please keep going if you can. And again, there's nothing wrong with exploring other stuff. There may be other vectors of support that are needed for your system.

(00:12:18):

It may be that you need to leave this self-directed practice for a while and find a practitioner that feels okay to work with. Maybe the system is needing just that connection. There's other ways to consider working with this rather than just abandoning the work altogether. All right. So getting into our individual questions. I'll go ahead and go first with this first one. All right?

(00:12:47):

"Hi, Seth, fifth round alumni here. I've experienced some weird symptoms through each round that have always checked out medically, and things have been okay. I'm now experiencing a swollen lymph node. I'm wondering if you've ever heard of this as people are working through their traumatic material? Or how a response like this could make sense as we're doing our nervous system work? Any thoughts would be appreciated."

(00:13:09):

Yeah, all sorts of strange symptoms and sensations and feelings can arise doing this work. Totally normal. Getting checked out by whatever form of medical support you use, certainly not a bad idea if you're feeling worried about it. And yep, most often they'll say, "Oh, nothing's wrong." Because they can't detect this nervous system stuff yet. So yeah, it's not unusual to have that kind of experience. Now in response to the lymph node question. Yeah, that absolutely makes sense. And we see that a lot. And that's because the lymph system is part of our detoxification pathways. So the lymph filters our blood, filters out toxins. The lymphocytes fight pathogens, white blood cells. So as we are doing this work, releasing traumatic stress as

---

freeze is lifting away from the system, this often enables our immune system to work better. It allows the fat cells very often to have been holding onto toxins. Freeze can be very literal. It can be in the tissues. And as freeze lifts from the nervous system, those tissues themselves start to get more flow through them. Fat cells can release toxins that they've been holding sometimes for decades.

(00:14:35):

The fascia as well seems to hold stuff, and seems to hold toxicity sometimes in its layers. There's been times in my private practice where I'm working with someone and something shifts, a little bit of freeze lifts from their system, and we will smell something that's been held in their system. I was working with a client who had had this surgery when they were young and we were doing touch work and the freeze lifted and there was this flood of anesthesia in the room. This smell, it's literally coming out of the tissues. It makes sense that we might have an increased detoxification activity that's going on as part of this work, and that's why the lymph nodes can get swollen.

(00:15:27):

I've had this. Irene has had this. Many clients have had this. Not unusual. In terms of what you can do. Dry brushing is a really good practice for the lymph. That can be really helpful for just promoting that circulation. That's good practice in general even if you don't have swollen lymph nodes. It just is helpful for helping those lymph move stuff along. They can get kind of cloggy. But yeah, nothing really to be worried about. All right, so I will hand off this next question to Rebecca.

Rebecca Roman (00:16:04):

Okay. You guys hear me okay?

Seth Lyon (00:16:06):

Yeah.

Rebecca Roman (00:16:10):

Okay. "So, as I'm growing my capacity, each time I get an expansion, like a success in my business or an interest in my services, I feel a big wave of contraction, which makes it so hard

---

to move forward in my business and finish the projects that I've started. I feel paralyzed and afraid to show up and continue with the progress. How can I manage that to be able to move forward in my business and finish on all the projects that I've started? Thank you."

(00:16:40):

So I first just want to acknowledge that it's great that you are growing capacity. And in regards to, so as you're approaching your work, approaching your business, what that might be like to feel into that capacity. If it was like being in a container, how do you contain that sense of appreciation, because it sounds like there's interest in your services, there's an expansion. Can you touch into what that feels like to appreciate that? And that might be stimulating. That might be some sympathetic activity. If you can just see how it is to be with it in your body.

(00:17:24):

And then when you're approaching projects and if you notice the contraction coming up, to pause. To not necessarily do the project, but see if you can tune into the feeling of the contraction in your body. Where is it? And what might it need? Does it need to do something? Does it need to move? But as well then come back out. Come back out into the environment, go to a resource, find a place in your body that feels a little less contracted just to work with that state. Maybe even coming back to, oh yeah, the feeling of the success of my business, what that feels like. Because sometimes with dysregulation, the system is perceiving even things that are good or that we deem good or positive as a threat. And then that's why if that keeps going, you might end up feeling the tendency to shut down and the fear and the paralyzation as you mentioned.

(00:18:27):

As you work with the sympathetic energy and move it in a titrated way and get comfortable with it, that can help support not getting into paralyzation. Just checking my notes. And then when you feel like, okay, I've got capacity, I'm going to do a project, like maybe one piece of it. Maybe a piece of it that seems a little easier than something else. I know when I do my taxes, I really don't like doing my taxes. And so this year I titrated towards it. I did a little bit of it and then went back to it and gave myself time, so that you can apply that felt sense of capacity towards how you go about working with pieces of the projects rather than just going into that shutdown. Yeah. Anything to add, Seth?

Seth Lyon (00:19:30):

No, I think that's it. So often we get confronted with these issues in a behavioral sense and it can be just a bit of a lens shift like you're saying to be like, "Oh wait, I don't need to try to figure out how to write this email or make this booking." It's like I need to actually work in the body with that sense of constriction, which can then actually lead to the resolution by itself. Yeah.

Seth Lyon (00:20:03):

The other thing I'll add is that perhaps it might be helpful to get the blood moving. Maybe the sympathetic system needs to be gently innervated a bit. So it's like, okay, I got that. Oh, someone's come in with a new booking, yay. Here comes that feeling of constriction. Okay, step away from the computer, get up, go for a walk around the block, feel your breath, feel your arms swinging, mobilize in some way. That can sometimes be helpful.

(00:20:28):

All right. A question about joint work.

(00:20:31):

"I had a major surgery in my left knee at age 19, a meniscal transplant. Yes, I have someone else's meniscus. Do you have any extra advice on working with joints that have surgical trauma as compared to other joints? I know I have a lot of fear and immobility, et cetera, that's stored from this. So engaging, it gets very scary."

(00:20:53):

Yep. That makes sense. The joints are big containers of feeling. They tend to hold emotion for whatever reason, and especially if we've had some kind of surgery directly, yeah, totally. Irene certainly has had... most of you probably know her story about it... something like four or five knee surgeries. So yeah, she certainly could relate to this one as well.

(00:21:21):

Yeah, of course, there's going to be fear there. I would advise in this case, that maybe you want to approach it even in a distant manner. Before you go to actually holding the joint physically,



what might it be like to just think about it? And again, even that, in a titrated way, like, okay, I'm sitting, and I'm just placing my awareness on that joint. That's enough. Now what's out here? Okay, all right. Yep, here's the outside. Okay, now I'm thinking about my joint again. Okay, yep, starting to feel something coming. What's out here? Coming out again. Okay. What's my other joints feel like? Maybe I'm going to pay attention to this joint here. Nothing going on much here. Okay. Yep, okay, I'm just going to think about that other one.

(00:22:17):

So very sort of in and out, in and out, dipping in and out in that way, with the awareness, but not even using touch. And then, eventually, understanding that we're going to feel fear. That's one of the things in this work. We're bound to feel the stuff that got locked up in the first place. So understanding that fear itself when there is actually nothing wrong in the moment is safe to feel. And maybe just wrapping your head around that intellectually first, like it's safe to feel fear. That sounds weird, even to say. It's safe to feel fear as long as there's actually nothing happening.

(00:23:10):

What that usually comes down to, from a practical sense, is learning to really pay attention to the sensations themselves. Very often, with fear, we can go into our thoughts or our memories of the fearful thing, and that can then sort of perpetuate that experience of fear, because the body does respond to the mind. So understanding that fear is also just ultimately a cluster of sensations. It's perhaps an elevated heart rate, a constriction in the throat or the chest, a tension maybe across the shoulders or in the arms, constriction in the diaphragm. How can you find the somatic signals of fear and just try to be a little objective with them?

(00:23:58):

For example, I noticed that for me, fear is, I'm really sucking in my gut, and I feel kind of frozen there. How can I just work with that? What might it be like to apply the principles of tense and relax in that case? Very often, when there's constriction, we may want to increase that constriction deliberately and then think about letting it go, rather than just immediately trying to relax. So bringing in some of your tools that you're learning to work directly with the sensations of fear once they come.

(00:24:35):

But that's down the road. I would start by just very gently, like I said, coming near the joint with your awareness, going away from it, coming near, going away from it in, in and out, finding other ways. Pendulation essentially is what I'm talking about, this idea of swinging between a charged area and a less charged area. And that less charged area can be in the body, or it can be in the environment, either way.

(00:25:03):

Anything you feel you want to add to that, Rebecca?

Rebecca Roman (00:25:08):

Not too much. Just where you were saying of another joint, but if you even felt that you could start to approach that knee, even just going somewhere on the thigh or somewhere on the shin, just how you notice getting closer to it, as well as when you felt available, specifically working with layers, which is coming up.

Seth Lyon (00:25:34):

Yeah, that's right. The layers lesson. Yeah. Great. Awesome.

(00:25:41):

All right, I think this next one's for you.

Rebecca Roman (00:25:42):

Okay. I have a question about the release of movement patterns.

(00:25:50):

"Is it best to always complete these until the end? While I was executing a movement pattern, I had the impulse to soothe and hold my younger self and tell her that she wasn't alone anymore. That stopped the movements and brought an automatic smile to my face. It felt really good to do this, and also afterward I felt great. But just to be sure, is it necessary for the body to finish these movements to have a full release?"

(00:26:20):

---

So first, I just want to highlight that it's great following your impulse to soothe. That's the work in action. And no, it's not always necessary to complete the pattern. I think it's worth exploring though what that might mean to be complete. Maybe it was complete. How did you notice that it wasn't versus being complete, can be something to look at. It sounded like the movement was happening and then it shifted. It's like the movement shifted into this impulse to want to hold your younger self.

(00:27:03):

So there was that different behavior that happened to hold yourself, the image of your younger self, the behavior, the thought, to say something that was reassuring to your younger self. So in a way, it's almost like maybe that's how it moved. I'm assuming there was some effect. So it could have been completed that way. Also, because you said that you felt really good afterward, that's a good indicator, that you felt good. The way I hear that is there is some completion there and some integration.

(00:27:44):

If this happened all the time, if it seemed like that always happened, that could be something to look at and look into that pattern, as well as allowing it to happen even if you were to hold yourself. It makes me think of a child who maybe is upset, and maybe you're not holding them in a way that they couldn't cry and move, but you're just there with them in some way while they're still experiencing that mobilization. So yeah.

Seth Lyon (00:28:18):

Great. Yeah, we'll get into this more in another question later on. But yeah, these things sometimes aren't linear and don't necessarily go like you may expect. There may be a thought that, oh, this is related to this thing that I didn't get to do with my arm and I need to completely do the thing with my arm, but that may not be the case. It may be exactly as Rebecca's talking about where actually the completion was I started this, and then I need connection. So yeah, let it be unknown. A big part of this work is letting go of expectations because it can be surprising. One of the things that Kathy Kane says a lot is that survival stress physiology has an unpredictable response. It doesn't always make sense. So having that sort of openness and intuitive listening, following the impulses, is so important.

(00:29:20):

All right.

(00:29:20):

"Last week when talking about exercise, you mentioned that if you get emotional, like a big expression of anger, tears, et cetera, it meant that you were using survival physiology while exercising. Can you explain this more? I'm thinking about how I coped most of my life with stress and releasing emotion through vigorous exercise. How is this not okay for the system?"

(00:29:43):

I need to differentiate here. There's a difference between feeling some stress and doing a good workout, and then you feel better. That's not what I'm talking about. I'm talking about, I go into some sort of exercise, and I just get totally agro, and I get really aggressive, and I feel like I want to fight someone in the gym. That is what I'm talking about, like where your fight-flight is part of the exercise, which is very different from feeling stressed, using the sympathetic in a healthy way, and then feeling better.

(00:30:25):

Now, part of that feeling better could involve some emotional release. Maybe it's like, oh God, I needed that. And there's a little bit of relief and maybe some tears of happiness or relief, or maybe a little grief is allowed to move because the system was able to get itself flowing. That's different from what I'm talking about. I'm talking about that total agro mode. You do a big workout, and then you just collapse in a heap afterward, and you're overcome with grief and despair. That is more what I'm talking about, these big survival-associated responses.

(00:31:08):

I hope that makes sense. I just wanted to clarify that.

(00:31:13):

Also, there's other ways to work with stress. I just want to mention. It's good if we're feeling stress. Yeah, sure have a workout, but we don't maybe not want to necessarily always have to do that. The whole point of this work is that there's actually other ways to work with stress that are quieter, that are more internal, that are about interoception. Ultimately, this work is in the service of regulation. What that means is when we're regulated, stress enters, and we feel

it, and then it leaves, and we don't have to do anything. The system just processes it. There's no neurosensory practice, no exercise, no need to do anything. There's just up and down, and that's just it.

(00:32:07):

I just wanted to highlight that. Because if we feel that anytime I feel stressed, I have to go out for a run and process it, it may prevent us from learning to work in these more internal ways as well. It's really good to have options when we're talking about stress and working with it, especially when that's old stuff. Exercise is very often intense, and a lot of these stressors that are from the past are not so much. They're quiet at first. They're deep in the system. And it can require a lot of gentle listening, that in exercise and all that mobilization, you won't be able to find it.

(00:32:55):

All right, before we move on to the next one, Rebecca, I'd like to just take a moment to pause. We're about at the half-hour mark here, so just give yourself a moment to step away if you like, and get some water, move a little bit, come away from the screen. Just take a moment.

(00:33:14):

All right. Before we move on, I just saw something in the chat I wanted to address briefly. Someone had asked, in response to what I was saying about the lymph glands, about histamine reactions. Can those increase? Absolutely. Anything that's governed by the autonomic nervous system can fluctuate in weird ways, unexpected ways. So yeah, your histamine response is part of your immune system response. All of that stuff can shift and change, and we can have weird rashes and flu-like symptoms, and just all sorts of weird stuff.

(00:35:09):

Survival energy wasn't meant to be packed up in the first place. And so, as we unpack it, it can be weird, and there can be all sorts of different symptoms and expressions. Irene certainly had lots and lots and lots of rashes for years. I hope it's not lasting that long for you. More often, it's not like that. She had a very extreme case of lots of toxic chemical exposure.

(00:35:38):

But yeah, a little period of a rash or feeling more sensitive to pollens or something like that, totally normal. Very often, when our immune system comes online more, we actually feel worse because, again, it's processing stuff that before it was just shut down. It's not uncommon when someone's living in freeze for them to never get sick, because the system just is holding on to everything and packing it away rather than processing it.

(00:36:08):

All right, I think this next one was for you, Rebecca.

Rebecca Roman (00:36:15):

All right.

(00:36:15):

"Hi. I'm in my third round of SBSM. I definitely notice healing, less defensiveness, and capacity building. Orienting is still challenging. The exercises make orienting easier, but I still feel tense and anxious when doing it. I have hypervigilance around my eyes, neck, and shoulders from shock trauma as a child. I water the brainstem, and it helps a lot, but should I try to titrate orienting in tinier bits? I avoided daily practice, but I know this is foundational and must be integrated. Any suggestions?"

Glad to hear that you're noticing healing, less defensiveness, and capacity. Yes, definitely orienting in smaller bits, smaller periods of time. As well as different ranges, like playing if you haven't already with orienting closer to you, farther away, seeing what you notice in your system of that being different and specifically different around the eyes, neck, shoulders. Also, bringing in your other senses. So sound, touch, smell even. Even when we're eating and drinking or making sound or communicating that way that we're orienting and playing with the environment.

(00:37:50):

The extra resources in Lab 1, have some really great orienting practices that incorporate more of what I just mentioned as far as the distance and other senses.

(00:38:03):

Also, really, when visual, to look at something somewhere that feels really easy, how you can tune into what just feels really easy for your system. Touching things. Imagine if you see something, and you were to touch it. Just another way to bring in another sense. You can also try orienting when doing something like an activity, like a daily thing you do; washing dishes, doing laundry, moving through your day while orienting and see if that is helpful and just integrating the whole process of orienting.

(00:38:50):

And then you can work with the hypervigilance around the head and the neck and shoulders by connecting with the sensations and coming away from them. That pendulation, like Seth was talking about in an earlier question. What does it feel like? What does it look like? Really work with that. So if you're doing a lesson, maybe pause and actually work with that as that's coming up.

(00:39:16):

And if it feels like too much, just again, resourcing, resting, and bringing in... you mentioned watering the brainstem. Doing that lesson, even just some of it that you remember. And so, with the watering of the brainstem and that watery soothing feeling of the eyes down to the brainstem, what that might be like to engage with that as you orient, like you're kind of bringing them together. Yeah, that's what I've got.

Seth Lyon (00:39:48):

Yep, great. And just FYI. For all the new members here, watering the brainstem is an exercise that comes in the additional resources later on. I think week six, I believe, around there, or maybe week seven, but yeah, it's a practice that we'll get into as we get further into the program, as in the additional resources section.

Okay. "My parents died in 2012, and I felt nothing. I do have early developmental trauma, not touched, no emotional connection, no ability to express, is it normal to feel this way, or is it more likely a total repression of feelings that are too big for the moment? I feel strange when people talk about having loving parents."

Yeah, I hear you. Man, wouldn't that be great to have loving, wise parents who were there for us, and we can go to for advice? Yeah, wow, that'd be cool. Doesn't happen very often. So,

---

yeah, when you say is it normal to feel this way, or is it more likely a total repression of feelings that are too big for the moment? I would say, probably, yes and yes. Both of those things are probably true. It's certainly normal. And I know when my mother died, I really didn't grieve in any way that was commonly recognized as grief. I had a sense, because I'm in a similar camp, where it's like, my mom was a source of stress and dysregulation. And some goodness too, thank God, she did her best, and she was a kind person, and loving, but nevertheless, I had to work for a long time to recover from her and my dad. So, when she died, I really didn't feel that much, it was more like there was a deep shifting in the ground under me. It was like this destabilizing feeling, but not a lot of overt grief. So, for one, we don't always know how grief will show up, and it's okay if you're not feeling lots of tears and sadness.

(00:42:03):

Yeah, don't worry about it. Also, though, when this happened for me, I had already worked through that real, real, real deep grief that may be hanging out in your system still. Which is, it's not so much about the parents themselves, it's about what we didn't get. So, there may be a very deep grief in there that is about this very early sense of I'm not being attuned to, I'm not being met, I'm not being touched, I'm not getting what I need to survive and thrive, and that's carried out throughout childhood. It may be not specifically about your mom so much, but rather what you didn't get. And so, it's possible that that, yes, is in there, and it will come when it's ready. And just have patience, keep doing the work, don't feel like you need to feel any certain way. It's okay to be unknown.

(00:43:08):

Okay. "I want to ask about healthy aggression. When I get the physical sensation of, I stand up for myself, it lasts a second, and then switches into helplessness and rage. Or combined, and then fear. I get scared of my own energy and power because it was a threat to me as it was seen as crazy. I hope I get across that this is mixed together. Do you have ideas on how to work with this in that moment that it arises, when it's hard to just feel the ground and reorient because it gets me into freeze?" Yeah. So, what's happening here is it sounds like your system doesn't yet have the capacity to handle the voltage of that authenticity, that aggression, that ability to stand up for yourself.

(00:43:59):



---

So, there's a couple of things I have in mind. One is to start innervating those wirings when you're not feeling this. So, it's a going through the motions kind of thing. The potent posture lesson is a really good way to do this, really working with the ability to feel your potency, your connection to the earth, just whenever. Not when you're necessarily feeling this sense of agency arising, but just when you're feeling neutral, or when you're feeling depressed, or sad. Starting to build these pathways of more potency, more agency in other times. In the moment that this happens, I had a few thoughts.

(00:44:55):

Maybe as soon as you sense that little bit of, like you say, it's a sensation of, I stand up for myself, what would it be like to stand up? Literally stand up, as soon as you feel that. And that's all you do, but it's like you're, again, standing up is a little sympathetic act. You can use the big muscles of the leg, which needs the sympathetic nervous system. But would that be like? What would it be like to verbalize, just to speak it? When you feel that sense, you don't need to try to think about, like, okay, I've got to hold onto this, or it's just, I am feeling this right now, and you just acknowledge it.

(00:45:40):

Or maybe it's about as soon as you feel that, really connecting to yourself in a soothing way. Appreciation that you had a glimpse of that energy, and then thinking about containment, finding your edges, holding yourself, just breathing a little bit. And finally, well, if it does switch into a feeling of helplessness or fear, understanding again, well, it's okay to come out of that, teach your system that it doesn't have to stay stuck in that, you can pay attention to something else. It doesn't mean that the feeling's going to go away right away, that's an important thing to note. When we're talking about the usefulness of orienting, and coming out of your inner experience, just because you do that doesn't mean the inner experience is going to shift right away. It may still be there, but you're not paying attention to it, you're paying attention to something else. Which is, believe it or not, really okay to do.

(00:46:46):

It teaches your system that I have the ability to not be overwhelmed. I can come out and acknowledge it's happening, but I don't have to zoom in on it. And the nature, the habit that we have as human beings tends to be that when we feel some signal of threat, we zoom in on it with our awareness, and we focus all our attention on it, and we try to figure it out. It's a

normal reaction, but that's one of the things we're trying to uncouple, is that when some signal of urgency or survival comes up, we don't have to zoom in on it, we can notice it and come away from it and notice something else, which actually grows our capacity. Okay. Rebecca, want to get that next one? Unless you have anything to add to that one?

Rebecca Roman (00:47:44):

Yeah, it just made me think of just differentiation, and how important it is. Like what you were saying there at the end, that it's not always about just focusing in on what the threat is, and what to do with it, and how to move it, but can we move away from it? Just the art of differentiating is so important, and it relates to everything we're talking about.

Seth Lyon (00:48:10):

Absolutely. Absolutely.

Rebecca Roman (00:48:13):

Okay. "When doing any of the neurosensory exercises, I find myself immediately wanting to change the playback speed, getting bored, impatient, slightly irritable, et cetera. I also noticed as I'm becoming more aware that I'm generally uncomfortable feeling sensations, and I have a tendency to disassociate. What is the best strategy to further develop my tolerance or capacity? Just do less in terms of dose, just notice and observe the uncomfortable feelings?"

All right. So, in regards to building more tolerance and capacity, as you said, with the practices, I'd say keep doing them, but also do less. And also is taking breaks. Stepping away from the work is totally okay and really necessary at times. And just orienting towards something that's pleasurable, that you enjoy, even if it's simple. And when doing the lessons, to pause more, even more than you might be invited to in the practices. You mentioned becoming aware, which is great, becoming more aware. So, in the lessons and in your life, being aware, can you become aware of anything that's interesting? Which could be like a resource, but just anything interesting. Anything in the lesson that seems even slightly interesting. And maybe get curious about it, which is different from boredom. And then you might notice boredom, and then, oh, okay, can I just notice what it's like to be somewhat interested in something? Something about yourself, something about the environment. And that tolerance thing, it's like, to tolerate it, but could tolerance become choice? Could tolerance... Sorry, if you guys hear my dog. Could tolerance become interest? And again, all this in a very titrated way. So that then as you meet

maybe some uncomfortable feelings, again, pause. Notice, is it a sensation? How you're arriving at that, it's uncomfortable.

(00:50:41):

So then what might be comfortable. Which might be like, well, what is tolerable? What is something interesting? If you feel the dissociation, the freeze coming on, the same resource, just the same thing. Can you resource to something that's less boring, something interesting, soothing? Because overall the impatience, the irritability is sympathetic energy, so it's like working with it but not bulldozing through it, continuing to build the capacity. And you might find if you haven't already, that Elia's movement lessons might help bridge this, and provide a little bit more movement, a little more that he brings in within the fundamentals of SBSM.

Seth Lyon (00:51:34):

Yeah, that's a great resource, Elia's lessons are a bit more active, and yeah, it can be a really, really normal response to feel what you're describing when we're engaging in these very slow awareness based practices, that are more typical in the neurosensory exercises. Again, that's the sympathetic stuff bubbling up. And as Rebecca said, what's the flavor of our attention? It's a really important point. Are we just tolerating something, or can we be curious about it? Can we investigate it? Like ooh. Can we appreciate it? Like, thanks body for showing me something here. That takes a while, especially when stuff feels uncomfortable. But it's so important to understand that we benefit a lot from welcoming these uncomfortable experiences as they come. Because it's the past popping up to say hello. All right, memories.

(00:52:31):

"I remember that when I was a kid, I was sitting on a chair, and I brought my arms up to my head because my father was slapping me on the head. My mother was behind saying, 'Not on the head, on the butt.' How to work with this memory somatically, the memory isn't cognitive. What kind of somatic work can I do? I have a shoulder with tightness. And I also remember that my husband didn't like it when I hugged and kissed men when greeting, so I remembered I had to keep my arms down. Arms, shoulders, again, like in the previous question, but an opposite position. How to work with these memories. One was protective physically in the previous question, the other one was defensive, preventing a normal movement. I'm European, and usually we kiss and hug when greeting. So, I prevented this to avoid the anger of my husband." All right, so there are, yeah, there's different memories, different ways in

---

which your impulses were blocked. It may be that this is a case where it's not really important to try to work directly with the memories.

(00:53:35):

It sounds like what's going on is that there maybe is a coupling here, where things that I wanted to do with my arms I couldn't do. And trying to really nitpick, and how should I have responded in this case, and how should I have responded in this case, especially if the memory isn't cognitive in the earlier one, that may not be useful. Rather, it may be important to inquire in general, what do my arms want to do? And maybe you just say in the context, you feel into the general sense, the general flavor of these memories. In both cases there is a threat. In one case there was this overt threat of being hit, and you couldn't protect yourself, in the other case, there was a threat of suppression, where you were fearful to do what you wanted to do with your arms. But that's kind of similar, in both cases you couldn't do what you wanted to do. And this is where it really gets into the importance of letting things be unknown.

(00:54:44):

We can't always work in such a logical fashion, especially when things get coupled together. So, it may be much more important to just see if you can tune into the general sense of these memories. What's the general felt sense of this material in your body? And then, simply ask your arms, what do you want to do? And let it be unknown, it doesn't have to make sense at all. Or maybe you ask your whole body, what do you want to do? Maybe it's actually not the arms, maybe something else wants to happen first. Maybe there's a shrinking away that wants to happen. I don't know. This is why following your impulses is so key, because your impulses are unique to you, and we can get in the way of them sometimes if we try to be overly logical, or think that we have to problem solve specific memories.

(00:55:48):

So, I'll encourage you to really tune into your intuition in the context of this general vibe of oppression, threat, I'm not being able to do what I want with my arms, and see if you can discover what might want to happen without having to know. It does require trust, for sure, and the ability to be an explorer of your experience.

Okay, second one here. "Hi Seth, thanks for your answer last time on burps, showing that the low tone dorsal is coming online a bit. My other question is, I'm feeling like I want to express

some kind of energy, just force, but though I can feel it, I can't access it. When I want to, I lose the strength, I feel weak again without the force. What's going on? And what type of exercise would you focus on? At the beginning of the program, I concentrated on building capacity."

(00:56:50):

So, that is, I say, still what you want to focus on. This is like the previous question where, yeah, the life energy is starting to come up, but it's the beginning. It's starting to percolate. Now, you're not collapsing, you're not having a big reaction to that, it sounds like, you just can't feel it. You feel it, but you don't know what it wants to do. You feel it, but it can't express. And that just means just wait, just wait, just keep doing what you're doing. As you keep on building capacity, it will naturally come more. And what I would really do, encourage you to do, is just focus on the felt sense of that aliveness itself. Let go of the need to do anything at all, and just, oh, I feel this energy. Oh, hi energy. I feel this sense of force. Cool, all right, and I don't need to do anything.

(00:57:52):

It's just, oh, yay, I feel that. Maybe you could notice where you feel it. Is it in the chest? Is it in the belly? Is it coming up the spine? Is it in your eyes? Where are you feeling that? And just don't worry about it, don't feel like you have to know what to do with it. It's just energy coming back to you. And that's a really good thing. Okay, we're close to the hour mark here, and so I just want to acknowledge that. We've got four questions left, so we won't be going way too much longer over an hour. But of course, if any of you need to leave, or want to get off the call, of course, you can always take in the rest of the recording later. So, it looks like there's one here for you, Rebecca, about functional freeze.

Rebecca Roman (00:58:43):

Okay. So, "When my functional freeze lifts, I'm flooded with constant intense emotions I cannot regulate, social anxiety, but deep craving for connection. And freeze, my usual state, I'm numb to my intense needs, so I perpetuate the abandonment plus stay stuck in life, leading to me burning out. I feel like a helpless infant trying to navigate the adult world, but having no tools. How can I facilitate this with SBSM? Would you recommend additional help for the attachment issues?"

---

So, the overarching theme intention of SBM supports attachment issues, that's obviously not directly talking about attachment theory or whatnot. But it supports it because this is about developing the capacity to attach with ourselves, and therefore that's the healing of the attachment that was disrupted, that we didn't get usually early on, with the early developmental trauma, and this can cultivate that inner felt sense of, I'm okay, I'm here, inner felt sense of safety, which then would allow for healthy attachment with others. So, if you haven't already, you might want to check out a special topic that Seth and Jen did about early developmental trauma in the beginning of the program, or revisit it even as well as the extra resources, the early developmental tips. And when you are being social and in social engagements, maybe have them be smaller, less periods of time there, and really orienting and resourcing before you do those things. When you're there, and maybe even having something with you, whether it's another person or a little totem in your pocket or some kind of resource, like a cozy sweater or something that you have with you that can be supportive and soothing. And help you stay connected to yourself when you're in those scenarios. And then see about tie trading towards even just noticing people, what that might be like to attune to that desire to want to connect. But while staying connected to yourself and your environment, of course.

(01:01:09):

You could consider working with someone. It could be an SE practitioner and just having that one-on-one and the co-regulation. Or some sort of therapist that might work with attachment issues, but that also inverses just knowing about your attachment issues. So, I think that's it. My internet says...it was kind of weird. Can you hear me okay?

Seth Lyon (01:01:41):

Yeah. It slowed down for a second, but it's fine. Yeah. Yeah, just a little blip. Yeah, absolutely. It really is building that foundation with yourself. And again, this is sort of a normal representation of early developmental trauma. It's like, "I feel kind of frozen and then I feel overstimulated." It's that flip-flop. Yeah.

(01:02:08):

"I'm an SBSM alumni. My partner has early developmental trauma. He was diagnosed with a brain tumor 14 years ago. In November, he had a second surgery, taking seizure meds, and had many concussions before getting the meds right. And he's currently on chemo. He goes through periods of lethargy, he's physically collapsed and eager to heal. How do I support him

---

as an adult, since I activate him? And Seth, how did Irene support you to start healing your nervous system?"

(01:02:37):

So these are two very different questions because one, it sounds like your husband is going through so much already. He's really probably not in a place to really be doing this nervous system work right now. And when there's already lots of intense bombardment on the system, chemo is really, really intense. It may be that he really needs to get a little bit more stable first. This work is tough to do if your system is extremely compromised or already processing a lot.

(01:03:14):

So that being said, how do I support him as an adult since I activate him? Well, right now, I really think it's probably more about supporting him in practical ways. If he is kind of disabled or under a lot of strain, with a lot of chemicals in his system, what can you do just to help provide good nourishment, safe connection, etc? The longer answer is if you activate him and he's eager to heal, well, eventually he's going to have to take responsibility for that and do the work. He'll have to decide to get into this work at some point, once he has a bit more health as a baseline.

(01:04:06):

The way that Irene supported me was basically by not allowing me to get away with anything. So I mean, anytime I would start to go into one of my old survival-based responses, she'd be like, "Uh-uh." She was there to call me out on it and then I had to do my own work. So, it's not like she supported me by being all cuddly. I mean that was there too, but she supported me by challenging me, by one, just encouraging me to come into the world and do all this stuff. "What, I got to make a living, I got to engage with people. I got to live in a city. Are you crazy?" And then, "Yeah, you have to do these things." "What? You want me to exercise? You want me to be physically active? That's crazy. I don't do that." "Oh, well, you got to do that." "Okay." And it's because I wanted to.

This could be a fine line, there can be a pattern where lots of times a partner views someone as a project that they want to fix. And that often does not go well. It went well in my case because she wasn't trying to fix me, she was supporting me in fixing myself. And I wanted to do that. So, it only works if your partner wants to do that. They have to want to do the work

themselves. They have to be willing to be met with your challenge. They have to be willing to realize, "Oh, if I'm being activated by my partner, that's something for me to look at, not to try and change my partner's behavior." So I mean, granted, we're talking about something innocent, right? Yeah. I hope that makes sense. Okay. Rebecca, you want to get that next to last one?

Rebecca Roman (01:06:02):

Yes. Okay. "Currently, I'm experiencing emotional numbness, a lack of energy and other symptoms probably related to freeze. The way I try to work with it is connecting to my body, its sensations, even if I don't feel much emotionally, and the environment. Additionally, I engage in physical exercise like going for walks and bike rides. When I do that, I orient while I feel my feet, arms, shoulders, etc. How can I ensure that I'm not reinforcing my freeze state? Any additional suggestions, how to work with it?"

(01:06:36):

So when your system is habituated to go into freeze, I mean that's going to be part of this work, is that can happen, getting to know it, coming out of it, all the stuff we've been talking about. So, it's not like the end of the world if that is happening to some degree. But in order to not reinforce it, it sounds like that's what you're doing, by sensing your body, moving, being with the environment when you're doing that. That's already ensuring it.

(01:07:09):

But then it's like, "Well, how do you feel after?" So after you take a bike ride or a walk, do you feel spacey, shut down? Do you feel freezy or do you just feel connected, maybe that kind of settling or coming down after doing physical activity? So, that can be a really helpful indicator. It's okay if you don't feel much emotion. I mean that's part of this coming out of the layers of freezes, unpacking this as the system's ready. And emotions are just collections of sensation, so just to kind of notice sensation, even if it's a subtle sensation. Or the feeling of that sympathetic sensation of moving. When you're on a bike ride or a walk, do you feel heat? Do you feel more circulation? Has your heart rate picked up? Are you sweaty? And how you could be present through that orienting and connecting to the environment. And can that be okay? That sympathetic, that healthy sympathetic, that doesn't have to be the stressy thing that then might bring you into that freeze.



(01:08:29):

And titrating exercise. I think some exercises come up a bit in this call, on the last one. But sometimes when we exercise, we tend to be more habitual 'cause we've learned to exercise a certain way or maybe we take a class or there's this activity. But can you play with it? Change the pace of it, go a different route, notice how your body's moving in different ways. Try things in a different way that will just help cultivate more awareness and more differentiation and capacity building. And again, the big indicator is how you feel afterward. But even if you did feel like you were in some freeze, how you can just start to come away from that, come back into the environment resource, do something soothing.

Seth Lyon (01:09:23):

Yeah. And sometimes in this case where it's like you're just feeling a little numb, you're feeling like, "Yeah, there's some freeze in the system," it's like, "Okay." It's kind of deescalating it a little bit. Like, "Oh yeah, okay, I'm still feeling that. What else is happening?" It's not the end of the world, it's part of the process. It'll change. Being a little cavalier, I guess, in your attitude can kind of deescalate that on its own. So, not going into survival about our survival state.

(01:10:03):

So, I just wanted to acknowledge something I saw in the chat before I move to the last question. There was a request that when we talk about lessons that aren't yet available, that we provide a brief explanation. And I can understand how, yeah, if you're hearing, "Watering the brainstem," what the heck's that? There could be a sense of maybe feeling triggered a bit. So yeah, no problem.

(01:10:29):

Watering the brainstem, I'll just talk about the two things that were referenced and we'll try to do this going forward. Watering the brainstem is an additional resource that I recorded. It was something I did for my clients, and then we thought it'd be good for the program. And it's just about working with softening the structures back here. The brainstem is our area of hypervigilance, a little reptilian brain. And it tends to, when we've been through trauma, sort of get real sort of tight and sucked up, kind of tense into the brain. And so working with that structure in a way that invites it to soften, consider chilling out a bit, can be a helpful part of this work. And that's what that's about.

(01:11:17):

The layers lesson is literally what it sounds like. It's guiding you through working with different layers of the body. So skin, muscle, fascia, bone are the four ones that we work with. And yeah, it's a great approach. Someone else had asked, "What do you mean by use layers work with the joints work?" as Rebecca was talking about. It means that in your joint, there are layers, right? It's not just the bone. So maybe you're working with a joint, but you're really just focusing on the skin, and you're not going in. It may be that going into the joint is too triggering because of the surgery or whatever. So you're just feeling the skin, and you're just staying there, for example.

(01:12:00):

So, I hope that all makes sense. I'm sorry for any confusion that may have come from, yeah, not explaining. So we'll make a note of that going forward. All right. This is one of the things that comes from the way we have the website set up with alumni being able to access everything and new people can only access some things. And it's the best setup we've found, but yeah, totally understand the confusion.

(01:12:23):

All right, so the last question. "Hi, Seth, is this Mother Hunger? I have pretty extreme activation and fear worsened by feeling so alone. I have company and groups, but nobody close I could be held by or cry with. There aren't SEPs or touch therapists near me. Am I re-experiencing early on safety, early developmental trauma, or grieving the lack of loving involvement and contact here and now? I do orient and resource, et cetera, but I'm still feeling and fearing the fear. And it feels like only a close other person would enable safety. I want to feel able to help myself."

(01:13:11):

Yeah, it is tough. And yes, it sounds like this is, yes, early attachment wounds going on here, for sure. And I understand I want to be able to help myself and that is what we're teaching, and that is a very important focus. And we need other people, we do. We're social beings. And it sounds like what you're feeling is that you need that other person that's safe in order to let the emotions come.

(01:13:46):

March 21, 2024

---

So, a couple possibilities. A practitioner can serve as that, even if they're not in person. There's many, many practitioners who do work online, and if you have a good one, they can still convey that attuned, caring attention, even through this format in a very effective way. So maybe see... Like I said, there's periods where you may want to bring in other support, which can include one-on-one work. There are many of our people on our team who are available for one-on-one work. There's a page on the site of the members of our team who are available for consultations or sessions. So, you could check that out. You could check out the SEPs, the SE directory. That might be something to investigate, and see if you can find a good online practitioner. Because yeah, it may be that in this particular chapter, you just need another human.

(01:14:49):

Of course, there's many other ways that you can explore finding connections. We've talked about in the past, how powerful nature can be. I mean, really literally go and hug a tree, find some place where you know that you have privacy and really just get your heart right on that tree trunk and put your arms around it. That can really be powerful and have some of the same effects in the nervous system and in the endocrine system, and what gets released as hugging a human. Pets, a dog, a loyal, loving doggy can be really, really helpful sometimes, for many people. They can also be a source of stress, if you have a wild puppy. So, that's certainly something to consider. But there are certainly emotional support dogs.

(01:15:46):

So, anything else? Other than that, just keep doing that work. Like we've said, this is about building that connection with yourself, and in terms of processing, ultimately that can be enough. Once we really have developed that secure attachment and container and we know ourselves and we know how we maybe pack stuff up and how stuff comes out and we have experience feeling and big stuff and all that, we really can be our own safe person. It just takes time to build. And it may be that you need some additional support as part of that journey. So, totally okay.

(01:16:34):

Someone had asked, just before we sign off, "What happens to questions that were not answered. I asked a question, which wasn't brought up." Yeah, we can't answer all the questions we get. Once we get into the program, I think we got 40 for this call, so there's just

no way. You should have gotten an email from support saying, "Please ask your question in the general questions thread." If you didn't get that email for some reason, it's also a possibility that you submitted your question after the deadline. The cutoff is 48 hours before the call, so that's a possibility too. But yeah, you can always submit your question to the general questions thread on the site and you'll get an answer there as well.

(01:17:19):

Okay, everybody, thanks very much, as always, for being here. Thank you for my guest rock stars, Rebecca Roman and Leah Murphy. And yeah, appreciate y'all. Keep going. We've got a break week next week, so I'll encourage you as my trainer Burns once said, "Orient to pleasure." See what happens to take a week and orient yourself to things that are easy, as much as possible. What might that be like? Avoid that stressful person. It's okay. You don't have to expose yourself. Give yourself a nice, cozy, safe container as much as possible, and orient to what that feels like. All right, thanks. Bye, everyone.