



April 30, 2024

Everyone, welcome. We are on training call number seven, but before we get into today's topic... So just I'll name it. Today we're getting into what I'm calling for training call number seven, Other Primal Emotions and Healing the Somatic Imprint of Toxic Shame. That's a mouthful. So in essence, we're just going to keep talking about emotions and sensations, and today I'm going to get a little bit more into the differences between toxic and healthy shame. We'll even cover a little bit about what guilt is. I'll read a passage, if you want to go and look on page... Orient the page three, a bit of a longer paragraph there from specialist John Bradshaw, who really specialized back in the day on shame and child psychology. He's passed since. So we'll get into that. But before we start, what I would love to do is just go through this first little bit here on page one. And as we do that, as I always say, before we get into things, be sure to connect to your system. So maybe take a second to do that first.

And as a reminder, I forgot to mention before I hit recording, just remembering that the chat, we just use that for little prompts. So if I have a curiosity, a question, and that will come up soon when we get to page one, pop a word into the chat. But otherwise we really like to keep it quiet. It's not for back and forth amongst peers. If there is a question that's related to something that I'm mentioning and you're a little unsure or you're wondering, and it's a short one, Leah is here to answer that in the chat. And if it's a longer question, as you know the drill, pop it into the general question thread. So as we get going, just connect to the pieces, the places in your body, or maybe it's your environment.

So we're deep into SBSM, we've covered a lot. For some of you, you might be still in the beginning labs, and that is a hundred percent A-okay. And as I say that, there might be some of you that don't believe me, but it's true, right? It is this ability to realize that the only person you are working, or if you want to say competing against, is yourself. So your pace is super important. And if you're on lab one or lab two, or you've only attended the training calls and you haven't gotten into the exercises, or maybe you've only done the exercises and you haven't gotten into the theory deeply, that's cool. As you know, you can come back and repeat and repeat, and everything on the site remains live and there for you to take in and learn from. So this work, we fold, we fold in layers and layers and layers. So before we get into page one here, just sense the first thing that your system wants to pay attention to. Is it something under you? Is it a sensation? Is it maybe the environment?

Where I'm sitting, I could hear the birds outside, so they're capturing my focus a little bit. I can also sense my feet are a little cooler. So what's one of the first things that you focus on or draw your attention to? And then see what the next thing is, and then the next thing, and the next



thing. So if I pop into the first question here, it's just a reflection. So we're going to move through some self-assessment. We want to call it that. So at the start of the program... And for some of you, this can be years ago when you started, or for some of the alumni, you can consider where you were at the beginning of this year. For those who are new, same kind of thing, consider where were you at in February and where are you now in terms of your resources. So that's the first thing there.

So what were they? And so at this point, if you want to pop into the chat, what were some of the resources that maybe you didn't realize were resources, but now that you're learning, you're like, "Oh, that was a resource?" So what were they at the start? Art. Someone said, "Painting, art." "Singing, weighted blanket, exercise, soft blankets, cooking, being in nature, warmth, water, birds at the local lake, stress ball, hot water bottle, looking at the sky, water, nature, playing with my kitten, stuffed animals, bare feet in the ocean, surfing." The first time I surfed, it definitely wasn't a resource. That's giving me a bit of a chuckle. So for those who can surf well, kudos to you. It is a hard sport. "Puppets, cat cuddling, funny animal videos." Yes. I think there's a reason why we like watching little animals do funny things. It's just very fun to watch those. "Walking."

All right, thank you, everyone. So next question, how have they shifted? So nothing wrong with keeping the resources you had months ago or years ago, but have you noticed in the process of learning more and more within this world of nervous system health, how are they shifting? So give me a few notes in the chat here. So, "More internal, more pleasure with social engagement." That's good. "The containment." So some people are mentioning specific exercises, the voo-ah sound, Elia's voice is a resource, orienting, yoga nidra, more inner resources. "They just happen without thinking, bringing comfort to my body, sun. I don't need another person." Yeah, that's a big milestone for some of us to know that we can be our own resource, right? "Voo-ah becoming slower, grounding, orienting, watering the brain stem." That's an extra resource that you have that Seth has on the site. "Feet on the floor, aware that I'm using it as a resource."

That's a good one. I haven't heard that one before. You get that? So a resource is being aware that we're using a resource. So here's my cup of tea that I like to have to keep my hands warm. If we never considered that why we always like to have a hot cup of tea by our side is because it actually gives us a little soothing, and then we consciously connect, "Oh yeah, wow, that actually is shifting something internal," that's big. And so that's the other thing. So thank you, everyone. "Touching my face." Yeah, so one of the things with resources, it isn't just about a

mind map dump of all these things. That can be it too. But when we can start to feel... So imagine this, think about one of your resources that's external and even maybe it's with you now. Or if you imagine it, when you imagine that resource, then tune into your pelvis on the chair or with that resource, I use my cup of tea, allow yourself to then feel that, but then orient or notice how your breath might change.

So these are the ways that we integrate. This would be a very good example of integration. We're integrating this resource into our physiology by noticing our physiology and then maybe noticing the external that's around us. Kids do this naturally. Did anybody here remember when they were young or maybe you have a kiddo and they loved carrying around a torn up blanket? Or they had that favorite thing that maybe made no sense, but they really wanted to always have it near them. That's a resource, right? And as a child gets older, you could say to them, if they're scared at some point, "Think about Mr. Blanky." That was mine. "Can you remember it?"

And of course, it depends on the age of the child, but they might. And then you would say, "What do you notice when you remember it? How does it feel?" So when we're with kids, it's less about asking them, "What is your resource, Irene?" It's knowing, "Ah, So-and-So, she likes these little things or he likes these little things." And then how can we connect to it? Of course, we get into trouble when we make it such that food and things like that are resources for kids. "Here's something to soothe you. Here's a candy bar or a sugary drink or whatever." You name the things and then we start to kind of get a bit too attached to certain things that maybe we shouldn't be attached to for resources, like food, for example. Nothing wrong with that, but we also want to be able to see food as sustenance and nourishment, not as always a resource. Anyways, that's a little side note.

All right, next question. Any neurosensory exercises becoming resources? Someone already mentioned the voo, the voo-ah. I know orienting can be a favorite one for many, containment. Are you finding that you're starting to do some of these things without having to play SBSM site material? Now, there's nothing wrong with that again, but are you noticing that you're noticing some of these neurosensory exercises coming on spontaneously? Someone said, "Joints lesson, kidney adrenals, watering the brain stem." And then, of course, lots of folks are saying yes. So that's an answer to your becoming more naturally based at doing them. "Potent posture." Yeah, think how often we stand every day. Washing dishes, waiting in a lineup, pumping fuel into our car, we're standing. So how are you starting to notice the potent posture? "Putting hands on the diaphragm."



Great. Okay, thank you, everyone. And then final question, which we've sort of covered a little bit through some of the comments, any non-SBSM related resources surfacing? "Resting." So I'll ask the question again. Are there any non SBSM resources starting to surface, things that you never used to do or maybe things that are new or things that you're just finding yourself doing? "Face yoga." That's different. "Kindness to myself, sitting and doing nothing. Laughter, yoga, spirituality and connection to source. Gardening, deep appreciation, singing, laughing more, circadian biology stuff, light, sunshine, touching the soil. Loose clothing." Yes. "Wearing cashmere." You're going to find that wearing tight clothes becomes very difficult when you start to have more flow in your diaphragms. I think there's a reason that cultures that we might consider a bit more regulated tend to wear very loose clothing, very flowy clothing, materials that are more natural. "Crystals, not rushing around." All right, thank you, everyone. Lots of good stuff there.

So of course, this will continue to evolve as you become more aware of yourself, as you start to notice the environment more, you're going to notice that things just start to occur more naturally. And that is, we could say, the Holy Grail because that shows that you're finding your own self-regulation spontaneously through things in the environment or things that are internal to you. So keep on going. Okay, quote here from Peter Levine. He says, "The antidote for trauma is to create new experiences in the body that contradict helplessness and collapse." I'm going to say that one more time. Feel free to say that with me in your own space if you can speak out loud right now. "The antidote for trauma is to create new experiences in the body that contradict helplessness and collapse."

So we're going to talk a bit about shame today. And so, shame, toxic shame and healthy shame, has this a little bit of a sinking, tail in between the legs. We'll get into that more deeper in today's call. And so when it's toxic, when it's chronic, we start to live in a state of this collapse, of this helplessness. And of course, we want to get out of that. The resources that we just went through, they provide, in this case, new experiences in the body. So that's why I have that quote there, this ability to contradict helplessness and collapse. Some people said playing with a kitten or animals. I mean, I have not had the pleasure of being around new little animals in a long time, but when I think about it, it sure brings me joy because they're just so fun. They're so fun and they're cute and they're silly. And when you think about that silliness, we could bring that into our body and feel that flow through us.

A kitten full of joy is very different from a cat that has been traumatized and is in a collapsed state, which I'm sure many of us have seen, animals that have been traumatized and they don't



look so well, right? They're suffering. And so this is this new experience thing that we really want to hold onto and sense when they start to come through us, these new experiences. So before we get into... Discussed shame on page two. As you recall, we've had two training calls already on anger and healthy aggression. And I'm going to wrap up that with a story and talk about how sometimes we access anger not through consciously thinking we're going to find it, but by a totally different side highway. If you think about highways and roads, there's the direct interstates and then sometimes you take the scenic way or the not so scenic way to get to somewhere.

So this is an example of working with an emotion or a quality of a human experience that is not anger-based, but it can lead to accessing anger. That's the first word there. It can lead to accessing anger. Now I'm going to share this story. It's my own personal example. There's a lot of elements to this. There's elements of stored procedural memory, there's elements of in the moment realization, there's elements of sadness, grief, all the things. So I'm preemptively giving you these pieces because there's a lot of information that I'm about to share that all kind of coalesced into literally a split second of my personal experience a long time ago. This would've been in 2009, I believe, 2010, and it was when I was in my somatic experiencing session training. So I'm going to talk a little bit. So if you want to shift weight, have a drink of water, no need to stay focused on the computer unless you wish to.

But I was in my SE, my somatic experiencing training. And one of the things you do in these trainings is you work in groups of three, we call them triads, and with three people and one assistant. And the lesson or the instruction for this segment of work with my peers was to focus on something horrific. I have here my personal share, "exploring the emotion, horror." Now, horror really isn't a deep primal emotion. It is an action. It is a reaction to something not nice. So when I was given this instruction by our instructor, I immediately thought, "Well, I haven't experienced anything horrific." So my little unconscious defensive hat went on, and not in a mean way. It was just like, "Hmm, never seen a dead body, never seen a gruesome accident. I know these things happen. I've watched movies where things don't look great, but in my own personal life, both my parents are alive, what could be there?"

So as I'm sitting... And bear in mind, this is later into our SE training so we had covered lots of other things, and so I just sat with it. I sat with this idea, not trying to push it but just having it kind of, as we would say, float in the field, the energetic field. And I don't remember what my peers were doing, but they were probably just hanging out with me, waiting. And then I started to move a little bit. So this is where... What is your body wanting to do? Okay, so follow the

impulse. So my impulse was to start to... I could feel myself moving a little bit in my spine. So if you want to watch, now I'm showing you my spine a bit moving. My hands went into this interesting position. And I'll stand a little bit. It was like this.

So I kind of twisted a bit, to... This would be my right. My right hand came behind me, my left hand came in front, and then I slowed it down like because I'm, "What is this? Why am I doing this movement?" It wasn't instructed to me to do this movement. Now pause. For some of you, you might not know this, but my upbringing was in an animal hospital. So the alum know this, but some of you might not know this. So both my parents were veterinarians. They're retired now, and they had an animal practice from when I was in utero. So I was living in the same house that was their animal hospital. And then when I was old enough to stand at a treatment, if you've ever been to the vet, there's a treatment table where you put your animals on, and they do the things, clean the ears, cut the nails, all the things. So, as soon as I was old enough to stand, and high enough to stand at that treatment table, I was helping in the animal hospital.

And, of course, nails being cut, ears being cleaned, all the things, but one of the things that happens a lot at an animal hospital are surgeries, so animals go under anesthesia, and so they have to be put under, but what's the other thing that happens a lot at animal hospitals, they are put down, they are euthanized. Right? This is an acceptable practice in veterinary medicine for many reasons.

And so, I went into this position, and as I slowed it down, and slowed it down, and just felt, I then remembered, and felt this was the position that I would always be in when I was holding animals for all the things, but, specifically, in this position, you would hold for one of their front paws, because that's where, often, you would find the vein to put in the drugs, and then you'd have to hold the back pelvis, and grab the legs under, so they don't kick, and move. Then this hand is on the ribs to keep them really secure.

So, as young as 12, I don't know how many animals I had held while they were being put under, or euthanized. Of course, I worked in this animal hospital until I was in my early twenties, so, again, many years, more than 12 years, give or take a year, holding animals, while being treated, but also while being put under for surgery, and also euthanized.

So, as I felt that in that moment, I had no idea how much grief, sadness, anger, I had held into my body, because as a kid, at least, I was the kid that did what your parents asked. You work at

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the clinic, you help, just like my parents both grew up on farms, if you've ever grown up on a farm, kids help. You're out there all the time helping. Right?

And so, I was just doing my job, as a daughter of two veterinarians. Long story short, in that moment, it was as if the souls of every single animal that I had ever held, whether there's a soul or not, their energy, their life force, I literally ... It was like it went through my body, and I felt it all in one moment, and with that, that was the horror, but then after that was deep, deep anger, and I can laugh of it now, because I have processed it, deeply, but, in the moment, ooh, Irene was pissed.

I was so mad, that I had no choice, that I had to be there, after school, and every Saturday, working for my parents. Right? And so, I felt it ... The poor assistant, and my peers, they didn't know what was going on, because it was just a pure emotive anger, tears, and then I explained what I felt, and then they had a look of horror on their faces, and, of course, it's not my job to take care of them, but it was like, "Whoa."

Interestingly enough, since telling this story, I've met many people, at least, online, who are like, "Oh, yeah. I also had parents who were veterinarians," or, "I worked in a clinic," or whatever it might be, "And I saw a lot of this stuff also."

But I want to share that story, and I share it at this point in the training, because it is a perfect coalescing of how past experience gets trapped in us, I wasn't abused in those situations, there were good people around, we take care of the animals, it was a good, healthy working environment, but that was just too much for a little person to work with every single day.

But the other reason I like the story is I wasn't asked, "Irene, I want you to go think about a terrible thing that happened to you." It was just horror, what might come up, and so that's what came up for me, and with that, as you see in this first bullet point, it led to anger, and that was actually, oddly, the moment that my system locked out of freeze. Okay?

So, sometimes there'll be something like that, and it's not like you're trying to get out of freeze. There'll be a moment in therapy, maybe something in this course, maybe it's in a class, maybe it's on a holiday, maybe it's getting into a relationship, maybe it's getting out of a relationship, maybe it's helping an animal, it could be all the things. It could be so many things, but sometimes it'll be this one thing that is the ground zero moment of the freeze starting to unravel.

And so, for me, that was it. And that was 2009-ish. So, as you can see, if you followed my story, my full freeze exit didn't really occur until the last couple of years, and we're in the year 2024 right now. I'm not good with math, but that's more than five years. Right? 2024 minus 2009.

I share this, because there will be a moment, or maybe many moments in this work where we want it to all be done in a year, and it doesn't work that way. Right? It takes time to unravel these layers, and so that's a story that shows not just the emotions, but why we need to be able to feel the impulses of our body. Right?

If I hadn't followed that impulse to turn to my right, and go like this, if I was sitting in a chair that was more restricted, or if I felt that I couldn't move, that spontaneous movement would not have arisen.

And so this is why follow impulse, feel the ground under you, notice what's coming through, nothing is off the table, everything is possible, and so one of the things ... Let's go to page two now.

One of the things that is important to realize is sometimes it can take years to build up all of these ingredients, so that in one moment, we might come out of freeze. That make sense? We might need to practice following impulse, practice potent posture, practice ... Imagine if I had my breath held that entire time when I was in that group with my peers, and I was clenched in my gut, and I couldn't feel my pelvis, and I couldn't feel my feet, it wouldn't have worked, and so it worked, because I was in my body, I trusted it to. There wasn't this, "Oh, I have to stay perfectly straight, because I'm in a practice session, and I need to look good, and stay in my chair." Right?

Then what comes up is usually the right thing, so another thing that I often would hear when I was in private practice, someone would be feeling, and sensing their body, and then they look at me with these bright big eyes, and they say, "This is going to sound really weird, but ..." I've always thought that'll be a good book title one day.

"This is going to sound really weird, but ..." I don't know how many times I've heard that, "This is going to sound really weird, but I just had this weird memory of unicorns racing up a mountain. What is that all about?" I don't know. Let's feel that. Maybe, and this is hypothetical, when you had your dentist, if you've ever gone to a child dentist, there's all sorts of fun things in there to look at on the ceiling, danglies, fun paper, wallpaper, so maybe you had a terrible dentist experience, and there were unicorns on mountains on the wall. Who knows? Right?

This is where, as an adult, when weird things come up, or if you're working with someone, or if your child says, "Mommy, I just had this dream of unicorns running over mountains," the thing to not say is, "Oh, they don't exist," it's like, "Really? Tell me about that. Tell me about the unicorns."

"There's a monster under the bed." There is a monster under the bed, and you get up, and you go under the bed, and you help them look for it, and you get the flashlights, and maybe, "What do we need to do with it? We need to do something," and you do that with them. Right?

This is how the body, the psyche, finds ways to get out of these freeze things, and this is this piece of really trusting what comes up, and out of the brain, and out of the memory, even if it makes no sense.

So, page two, top of the page, so, back to anger and healthy aggression, so we'll just finish up this topic. I'll have some water. So, we can't always conjure up anger, or any other emotion, in a Hocus Pocus way. Right? Hocus Pocus kind of way. It's my fun way of saying we can't just go, "Hocus Pocus, and I am going to be angry today." Right?

Or, for those that remember the TV show, I Dream of Jeannie, what did she do when she wanted something to happen? She'd do this thing, and, boom, she'd be somewhere else. Right? Or Dorothy with her red shoes.

So, we can't do that all the time, so we must apply, we must apply, that's the word, the tools, self-knowledge, and educational resources we are building, so we must apply the tools, self-knowledge, and educational resources we are building, then trust ... That's the word. Trust, and get out of the way, so the healing wisdom, that's the word, wisdom, and the return of our true self, that's the next word, true self, the authentic self can show up.

So, this comes back to, I promoted y'all to think about your resources, think about the resources that are naturally coming up that aren't SBSM materials, but how you might be applying some of these materials, and exercises in your day-to-day spontaneously, and then trusting. Right? There's an urge for me to put my hand here, or here, or wherever, go with that. There's so much intelligence in our unconscious system, and so we want to really go with that, and honor that, so that we can unfold what might need to unfold.

Next line down, or I should say next topic, so the power of other primal emotions that connect with anger. So, this is where we enter into disgust. That's the word, disgust. Disgust.

Now I'm going to make disgust really non-trauma-based for a second. Everybody, I'm sure, has had a refrigerator in their house at some point. You might have one right now. Don't want to make any assumptions.

But if you've ever had milk, or cream, or yogurt, or that old chicken dish you forgot was pushed back in the back, back, back, and you go ... Or olives. We found some olives the other day. They didn't stink, but they were moldy, but you open up that milk, and you know it's old, but what do you do? You go, and you sniff it. Then what do you do? "Ugh." Right?

It's very hard to not have a disgust reaction when we feel something that's gone off, that's gone sour, and then with animal protein, it can be a little more nasty, just because of the bacteria that forms around that. Right? It's like, "Oh, yuck." Right?

Just like a lot of manure, when people are planting gardens in the spring, you can get wafts of it coming across areas, or if you're in a farm community. Right? My dad used to call it the sweet aroma, when you would drive through the farmland near here, and all the manure from the cows, and planting feeds was at high, high level.

So, enter disgust. Disgust is also physiological. We need to have this emotion, so that we don't eat something that is off, and bad. So, from the point of ... So, back to the bullet points here, from the point of view of evolution, and survival, the primary function of disgust is to get rid of, or away from a toxic substance. Toxic substance, that's the word.

For any living creature, this could be a poison, a food that's gone bad, anything environmental that is not healthy for us, and could make us sick. Because there's also natural things that are poisonous. Right? Many cultures know these things. I am someone who does not, and I wish I did, but that's a whole other learning.

So, this ability to go, "I don't think I should touch that, or taste that," or, "This smells not right." Those are important Spidey senses for us to pay attention to.

Next line down, it can also be a human environment. Human environment, that's the next word. Social, parental, peer, caregivers, teachers, so it can also be a human environment that does not accept you, or rejects you, and your natural self, plus all the biological, creative, emotional, and sensory experiences, and expressions. So, not only do we have food, and toxins in the environment, and chemicals, we also have people that can be toxic to us.



All right. Next line down, so we need to disgust, to warn us that something is toxic, but what if we can't get away from the toxicity, so now this is going to shift more into people, because, obviously, I would hope, if there's toxicity in your environment that is chemical, that is ... I know it's not always easy, when I've heard so many stories, people move into their home, or apartment, and they find out that there's mold, or there's asbestos, or there's a neighbor ...

True story. I recently had to shift a hotel room that I was in, because it was one of those hotel rooms that has an adjoining room. You know those hotels that have a door that goes ... It was such an old hotel, that I could literally see the light through the room, and I could smell something. I'm like, "What is that smell?"

Then at five in the morning, the couple next to me came home, because it was a Saturday night, they were obviously out partying, and as soon as I heard them come in, I could smell the hairspray and perfume coming through the crack, and I was like, "You've got to be kidding me." I'm very sensitive to that stuff, because it's not good for us.

And so, the next day, I went down to the front desk, and I asked, I said, "This is going to sound strange, but I need another room," or, "Do you have another room?" I told him why, and he goes, "Wow. I've never heard that one before." I'm like, "Yeah," and he found me another room without an adjoining area, but that was an interesting one, because, again, thank goodness, that's not my environment that I live in, but for some of us, we might live in an environment where we can't escape our neighbors, and it can be really tricky. Right?

So, this isn't, again, just around abuse, and punishment from parents. It can also be that kind of environmental disruption.

All right. So, let's get into shame. So, enter shame, specifically, toxic shame. Toxic is the first word.

The two kinds of shame, healthy and toxic, are felt in the somatic experience, so somatic experience. The classic example is the tail between the legs. Again, if you've had animals, they've done something bad, you might need to raise your voice ... Sometimes, animals just know. They walk in, and they're crunched, because they know they just did something they shouldn't have, so we, humans, we, mammals as humans, we also have that. It's a little less pronounced, because we're upright, but this is where that collapsed posture comes in where our tail tucks under, where our pelvis goes into a more flexed position.

So, an example that I'm going to keep to children now is, "Don't touch that." So, one of the learning processes for humans is you have to learn, "Don't touch that," or, "That's dangerous." Right?

So, next line, the healthy variety, healthy variety, the healthy variety of shame. Now I'm going to do a preloaded educational piece on this. If we're still very new to this work, and we know we had a lot of toxic shame growing up, and Seth has talked about this, we've talked about this, in some of our shame vlogs and videos, if you had a lot of toxic shame, and now you're hearing me say there's healthy shame, you're going to be like, "Yeah. No, Irene."

Everything in your body is going to be like, "That's insane," because that was something that he and I worked with years, years, years ago, because I had experienced healthy shame growing up, and he did not.

I'll leave it at that for now, but trust me when I say there is a healthy variety, but if we're not used to it, it's going to seem like a foreign language, and culture country right now. It won't make sense, but that's okay.

So, the healthy variety is imprinted when connection, love, and secure attachment are present, along with the demand, or disciplinary action, so I have there, in brackets, my bread cutting example, my cutting bread example, so now another story from Irene's history.

So, when I was little, I don't know how little I was ... Again, I was old enough to stand at the kitchen ... Not table. Where you would have a cutting board. We had a very strange cutting board that slid out from the ... It was very old-school, so it slid out from the countertop, and that's where you cut things.

I was cutting a piece of, maybe, bread I think that morning, but what I was doing is I was cutting, so if this was the bread, I was cutting it, so the knife was facing my face. Not good. Right? Not good.

It was probably not a big butcher knife. It was probably a serrated knife, but still, not the best thing, and so my dad was having his breakfast at the kitchen table, and he, obviously, was watching me. He wasn't, "Irene, be careful, be careful." None of that. I just went to do it, prepare my breakfast in the morning, and he just said, very sternly, with a strong voice, "Irene, look at what you're doing. You could hurt yourself. Turn the knife the other way. Turn it the other way." He said it without a huge deepness, but enough that it kind of startled me. A bit of



that healthy shame. I went, like, "Oh, uh-oh, what did I do?" Obviously, turn the knife the other way. To this day, if I'm rushing in the kitchen, which still happens, and if I find myself being careless with a knife, what do you think happens? I hear my dad's voice in that direct way, and I go, "Slow down." And then cut the thing. Now go to page three. "The toxic variety..." So the next line there, on top. "The toxic variety can be imprinted, and I would say is imprinted, via the tone of the voice from the other. It's ridiculing, violent behavior or other abusive actions that invoke a sense of fear and a need to protect or shut down."

So I don't like giving these examples, it sounds mean, but a toxic shame of that situation would be a raising of the voice that's like, "Irene..." Just exasperated. "Don't be so stupid. Look what you're doing. You're such an idiot. You should know better." Well, at age, whatever I was, eight, I don't know any better because I'm young and I'm learning. So toxic shame would come with that bite, that venom, that ridicule. It would make you kind of cower and be waiting for the hit to happen, whether verbally or physically or just energetically.

So that's the toxic variety. And I have no doubt that many of you here had that. Again, when I talked to Seth in our talks where I interviewed him, that was him. He was given that ridicule every day of his life. And so while it wasn't always lots of food on the table, lots of shelter, soccer games, all the things, but that internal toxicity, as we know through the ACE Study, that kind of toxic shame is just as damaging to the nervous system as sexual abuse, physical abuse, violence, that kind of thing. Because the little person still feels that shrinking. "I've done something bad and this person doesn't want to connect with me. They're really mad at me." So the next line, "The affect, emotional quality of disgust." So now I'm going to blend the disgust a little bit here. "The affect, that's the word affect, or the emotional quality of disgust is very similar to the affect of anger." So think about this, if you are going, "Ugh, yuck." What's showing? Your teeth. It brings in that same facial movement.

So we got to blend a few things here, so stay with me. So just remember that this disgust has a similar affect to anger. Next line down. "When we are able to powerfully express our anger, we reclaim, that's the next word, reclaim our life force energy. This can lead to the completion, that's the word, of self-protective responses, stored procedural memories that would have wanted to happen to protect us from toxicity, the abuse of the person, but did not." So we're going to get deeper into this, but what I'm trying to convey here is that toxic shame, healthy life force expression, disgust, being in our body, following an impulse, they're all this... We're all coalescing these ideas together. So that, let's just say I've just given you this example of cutting



bread at the counter. Maybe you had the opposite experience where you were toxically shamed for something you did wrong.

Because that was wrong. Knife cutting towards my face, wrong. But it was dealt with in a way that demeans you and puts you into collapse. In an animal world, if someone, or if another animal were to try to hurt you as an animal, what would you do? You would fight back. You would bite. But as that little human, when mom or dad does that, usually, and this isn't always the case, but usually there isn't a biting back. There isn't hitting. There is, because the shame, the toxic shame, has been so deep that it collapses you. Okay? So when we're healing this, we want that anger, that life force energy to start bubbling out so that we can set boundaries. And maybe it has nothing to do with cutting bread as an adult, but maybe one day someone talks to you a little poorly and you're like, "Don't talk to me like that. Stop. That's not okay."

This is the boundaries, this is the spectrum of anger. So there's a lot here. And then the disgust piece, the disgust piece, and again, I can't tell you when this might happen, but if you did have this kind of toxic shame, at some point in your healing journey, there will be moments where you will feel like you want to, the word in English is dry heave, where you want to vomit, where you want to gag, but it's not because you just had bad milk or bad food. It is a visceral somatic expression of that feeling of being shamed in a toxic way.

And I say that because sometimes people are like, "Wow, I can't even brush my teeth. It's too much to... It's like I'm gagging on my toothbrush. What's with that?" I went through a period where I couldn't brush my back molars. It wasn't because of my parents, it was because of other traumas, other disgust, things around the chemicals I was exposed to. I'm pretty sure. And so that's another way that you can tell what might be living in your system, is if you have gag reactions that are quite easy, that kind of thing. Okay, I want to keep going and then we'll get to the next pages.

Someone said, "What about choking?" Yeah, that can be another thing. The gagging, and I don't want to replicate it because it actually will damage, it damages your vocal cords if you do that and you don't need to. But that choking, that gagging, it can hurt. It can actually feel very strained. If you've ever had a cough that lasts forever and ever after a while, it hurts to cough because the lungs are so, they're taxed, they're inflamed. But yeah, choking, that kind of thing. And someone mentioned poisoning. Yeah, if we've been poisoned with chemicals, with something, or how many of us grew up with parents who smoked in the car, in the house? That's a big one that a lot of us don't think about. Did we grow up in schools? Some of us might

not be old enough for this, but where the teachers smoked in the classrooms, that kind of thing.

So again, you can't escape from that. And so you're choking on this stuff all day long and it's just not good for you. So again, there's a puzzle here with toxic shame, disgust, anger, healing. It is not cut and dry, it's not linear. This is why we wait until now to talk about it, because all these pieces, following impulse, sensing the body, being able to contain and resource ourselves when things get a little too heated. All this, we want to be in place growing that swimming pool. I'm going to go back to the good old swimming pool analogy. We want that swimming pool to be so big that when we feel that we need to gag, when we feel that memory of toxic shame and we feel that desire to punch our arms in the air, we're like, "Whoa, this is so cool. I've got to do this right now." There's no fear of it, but it isn't ethical for me to say, "Okay, let's all start punching bags and pretend that you're choking on something bad." It doesn't work that way.

It has to come naturally from your own system. And when it comes out, we may not know when that happens, but that's where your higher brain goes, "Oh, this is what Irene was talking about." Or "This is what Seth was talking about on that Q&A call about disgust." One last thing and then we'll move on. If we have relationships that we know are really loving and good and safe, a partner or friend, they might activate something in you that makes you want to go ugh when you see them. But it might have nothing to do with them. And so this is where you can have these things come up and out because the environment is safe. And this is again, why if you are with another or you're living with people that they understand this is not personal maybe, this person is moving through some really old patterns of anger, of disgust, of toxic shame, and it's not personal, it's just something that's coming up and out.

All right. And I just caught a quick thing there in the chat, and I'll just answer it and say, yes. Someone said, "Is it common to vomit after stressful situations?" Yeah. It's the same with voiding our bowels or urinating and not being able to hold it in. It's a way of lightening our body, but it's also if something is so intense, it can bring up the contents of our stomach. It's just another way of voiding out what's in there. And each person is different in terms of their sensitivity to that. All right, I'm going to read this wonderful paragraph. It's more than a paragraph from John Bradshaw's book, Healing the Shame that Binds You. It was written back in 1988.



He has a great set of videos on, I think you can find them on YouTube. They were for those in America, you'll know what I think, PBS, Public something, was where they aired these on television. And they're just fabulous. If anything, to just see how people dress back then it's like, "wow, that was definitely the '80s." But it's such good information. So he writes in one of these chapters, "For example..." So this brings in the anger piece and toxic shame. "So for example, if you were never allowed to express anger in your family, your anger becomes an alienated part of yourself. You experience toxic shame when you feel angry. This part of you must be disowned or severed. There is no way to get rid of your emotional power of anger. Anger is self preserving and self-protective energy. Without this energy, you become a doormat and a people pleaser."

Anybody a people pleaser here? Some of us I'm sure are recovering people pleasers. "As your feelings, needs and drives are bound by toxic shame, more and more of you is alienated. When shame has been completely internalized, nothing about you is okay. Nothing about you is okay. You have the sense of being a failure. There is no way you can share your inner self because you are an object of contempt to yourself. When you are contemptible to yourself, you are no longer in you. To feel shame is to feel exposed in a diminished way. When you are an object of yourself, you turn your eyes inward, watching and scrutinizing every minute detail of behavior. This internal observation is excruciating, it generates a tormenting self consciousness that describes as creating a binding and paralyzing effect upon the self. The paralyzing internal monitoring causes withdrawal, passivity, and inaction." Basically collapse.

So what I want to point out here is where he says, "When you're an object to yourself, you turn your eyes inwards, watching and scrutinizing every minute detail of behavior." So this is where that looping thought comes in. This is where I think we connect toxic shame, somatic collapse, obviously trauma in the household, dysregulation to what we would term mental illness, constant ruminating, all the things, the thoughts that are just self-defeating, constantly cutting ourselves down. We're never good enough. I'm never good at anything. I suck at everything.

That is something that does not come with us when we're born. It is something that is imposed upon us by how we were raised, how we were taught or not taught in a healthy, connected, secure, attached way, which is still to sometimes, teach right from wrong. And I think this is where we're in a real interesting, tricky situation with many kids right now, is there's a fear of many parents to discipline and to say, "No." Or to say, "Not today." Or to say, "You can't have that. But that doesn't mean I'm not connected to you and I don't love you, it just means, no."



And this is a hard one if we were not given healthy shame growing up, which I know for many of us wasn't the case. So there's so much in that paragraph. It would be one to come back and read on your own, if you know this is really something that you struggle with, is this, especially feeling shame when anger comes up? So this is another piece that's important. If you find that when you're trying to do some anger work, and the dead giveaway word there is trying, when you're trying to force some expression out and it feels a little, you're a little shy or you're not sure, or it feels a little kind of dirty and this seems wrong, then that means that your capacity needs to keep building. It's not ready yet to get that anger out. When anger comes through and out or when disgust comes out, it's like all green lights.

Everything is a hundred percent on. And if I think back to when I worked with say, clients back in the day, if someone struggled with doing the voo sound, for example, or even just doing a forced exhale like, huh, then I knew that the capacity wasn't there to push and to get the healthy aggression out. Because the space inside, not just the emotions and feelings, but the actual organs are still so collapsed that they can't get the vigor and the juice and the space to have that huh, or that sound, or that voo, or that no, or that scream, or that ugh, disgust. Does that make sense? We don't want to force that expression out if the organs and the lung capacity and the body isn't ready for that energy.

And this is why. Let's go to page four. This is why we might hear of folks that go to, whether it's some kind of therapy or some kind of a retreat where they're doing lots of sound and lots of breath work and they're doing lots of cathartic stuff, there will be without the person knowing it, an override of their internal physiology, because they want to be part of the group. "I want to be part of this group. I've just paid my money to be here. I've done all the things. I'm here, I'm going to do this stuff." But then it's an override. And this is where we then hear people, they'll say, "I had so much energy and then I came home and I collapsed." "I was in bed for a week." Or "I had my symptoms flare." Or "I lost all motivation. So I guess, I better go to another workshop. I guess, I better take another thing." And so this is how this stuff can perpetuate.

Let me see if there's anything else I want to say about that. So this really just comes back to, and I can't repeat this enough, capacity, capacity, capacity and more capacity. Even if you think, "My gosh, I'm going to do the orienting exercise again?" "I'm going to do my diaphragms again?" "I'm going to do another potent posture again?" "I'm going to watch the first training call again? It's so basic." It's like, yep. And we want these elements of anger and aggression and real important energy to come out, not forced. We don't want to force it, and we want the system to be ready for that massive bout of energy. Because it will get ready, it will have that

capacity, but it has to feel really good to express some of these more aggressive tendencies. It has to feel good. You want to feel it. But if there's this, "Oh, I don't know. I don't know. I don't know if I can do this." Then you're not ready, then you're not ready.

It's like forcing a child to do something physical before they have mastered the basics. And I know that this has been the wrong way, but you'll hear people who are terrified of the water because the way they were taught how to swim was the parent just threw them into an ocean or a lake or a pool, as opposed to, "Let's just walk. Let's just wade. Let's just do a little bit." "Then let's feel what it's like to move our arms in the water." All these things we need to titrate. But if we just get thrown right into the deep end, it's going to be too much. And then we're going to be afraid of water for the rest of our lives. That's just one example. Okay, guilt. Page four. So this is more Bradshaw, more Bradshaw information here.

And I wanted to bring this up because sometimes people say, "Well, isn't that just guilt?" That shame is just bad. All shame is bad, but guilt is, "Oh, I've done something bad." But shame is "I am bad." And it was really Brené Brown, the social worker who got popular on her TED Talk, who I think messed this up for many people being told over and over again by that message, "All shame is bad." And that's not true. Toxic shame, bad, healthy shame, very different and very important in our culture to know right from wrong, how to not hurt ourselves, how to not hurt other people.

But guilt is different. So, "The experience..." Onto the first bullet point here, "The experience of guilt is more advanced." That's the word, advanced. John Bradshaw terms guilt, moral shame. That's the word. Moral shame. You can't guilt an infant. It's just not possible. When you really think about it, it doesn't work. Whereas if I break something that's Seth's, which doesn't really happen, but let's just say I did, let's say I broke, he has a favorite mug that he drinks his tea in. Let's say, I accidentally broke it because I was rushing, that I'm going to feel guilty. I'm going to be like, "Ugh, damn it. I should have been more careful." But there's no shame in that. It was an accident. Yes, I could have been more careful. So guilt has a very different piece. So here's what John Bradshaw says about guilt. "The rules and limits. Children have experienced from their caregivers or from the environment are internalized and become an inner voice that guides and limits behavior. Guilt is the guardian of conscience, and children begin to form their conscience during the preschool period."

So this is a piece of research I've never really tracked, but I remember hearing it from a reputable source. And it's a bit intense, but what he means here, this preschool period, the

forming of conscience and understanding consequences, happens around age five. And they know that because they have found that children who lose a parent under the age of five, they know that's not good, but they don't have a conscious grasp of that. After the age of five, if a child loses a parent, there are instances of suicide of kids that young because they understand what just happened. It's terrible when you think about it, but they have that ability to understand what is going on. Whereas under that age, they just know something's different. They're not seeing the same people. The energy's changed.

Tough one, but that's reality. So this building of our conscience and awareness of the world really starts to shift around that five-year-old period. All right, going to have a little more tea. Everybody, remember to check into your bodies. Have you forgotten it was there? It's okay if you did. Yeah. So someone said about shame. What about calling it pro-social behavior instead of shame, because that's a tainted word. So yeah, we've had debates, the moderators and I, over the years about this, and it comes down to, nope, it's shame because you have to feel it internally at the biological spinal tissue level. It is a little bit of a collapse, even healthy shame. Whereas pro-social behavior is more advanced and that's more collective. A toddler who's learning to not touch the hot stove doesn't understand that level of pro-social behavior to the same degree, because there is pro-social behavior as well.

But we've gone back and forth with this one with our mentors. It's talked about in Kathy and Steve's book. Peter lectures on healthy shame and quotes Bradshaw all the time. And so at this toddler level, and this is the thing, once you've passed that age, it's hard to teach healthy shame in a way that's organic because it really needs to occur, from my experience, very, very young. And not infants. Infants are different. This is toddlers. When they're exerting their ability to find things and ask questions and all these sorts of things, they're roaming more around. And so, again, experiencing say, Seth for example, as someone who did not get healthy shame growing up, it took more than just saying, "That was bad," in a connected way because there was so much history and experience and body memories by the time one was, say, 40 years old.

So pro-social behavior, definitely important, but different from this body-based internal spinal collapse that then we come out of. So healthy shame means you don't stay in that collapse. There's this element of, oh, shoot, and a toddler isn't thinking this. They're feeling it, but then they know that they're okay and they're loved because then the hug comes. Let's clean that up together. Or it's okay. Those sorts of things, like if a kid destroys something and you have to be like, "You don't touch that and let's clean it up together. It's okay." That kind of thing. Okay, so



it's a tricky one, the shame one, because, at least in our Western culture, it's quite muddled with a lot of times wanting to not hurt our kids and disappoint them and make them feel like something's gone wrong. But the thing is, is at that young little mammalian human level, they have to learn the right from wrong.

Okay, dissolving the imprints from a somatic perspective. So again, this comes back to the somatic imprints in the body, in the sensations and the emotions. So disgust is a gateway. That's the word. Gateway emotion to healing, toxic shame. When a person can access the quality and feeling of disgust, they start to heal the imprints. That's the word. The imprints. They start to heal the imprints, that's the word, of toxic shame. The other thing before I go to the next point. Again, I can't stress this enough. This is where the capacity building, all the neurosensory exercises up until now, the kidney adrenals, the diaphragms, the joints. It's not like one day it's like, okay, I'm going to work with disgust and that's going to heal all my toxic shame. Even while working on capacity building, it's working on ourselves, getting out of that collapse. Getting out of that organ collapse, that fascial collapse, that skeletal collapse, feeling that flow.

So if you go back and you think of those drawings I had you do in the first training call with the circles, then you connected the circles and you had flow in the circles, that's what we would call, the fancy word is coherence. Flow. There's movement through the system. When we're living in a collapsed state with this toxic shame, there's not a lot of movement. There's not a lot of flow. So by default, we're still working with these collapsed states that connect maybe with toxic shame, even from the beginning of SBSM. So when I say here, when a person can access the quality and feeling of disgust, they start to heal the imprints of toxic shame. Yes, and those things are already happening before we get to that point. So again, it's not like one day, it's just there. It's a building, building, building up, which comes to the next point, toxic shame, so the third one down.

Toxic shame is often associated with lifelong collapse. Collapse. Shut down, poor posture, difficulty with social engagement, varied vocal prosody, chronic illness, lack of emotional resiliency. I haven't really mentioned prosody. Prosody is just a fancy word for how we can express different tones and different levels of voice, either soft and easy and quiet or more loud and expressive, and I'm going to sing like in a musical, or I'm going to be really quiet because baby's sleeping. I have to be really quiet. When someone doesn't have that prosody, that capacity, we know that there's a lot of collapse in there, and then that connects to

difficulty social engaging, et cetera. The classic video that I did that explains this, we're good for time, was I did a video. Did anybody watch the Story of Teddy?

It's a story that Peter Levine actually wrote about in his book on... I always forget the name of the book. It's the book he co-wrote with Maggie Klein on raising children and parenting and trauma and kids. And he interviewed the mother of Ted Kaczynski, whom in the US people know him as the Unabomber. I just recently found out he died, I think it was last year in prison. And this kid, as a kid, was brought to a hospital. I always forget the exact time, but I think he was young. He was six, eight weeks old. He wasn't old. He was an infant. He was brought to the hospital covered in hives, so he had a reaction to something. And he was then put in this hospital and left there for a ridiculous amount of time. I have the accurate dates on the video, I can't remember, but it was something like two weeks. He was strapped to a medical table alone in a hospital as an infant. It's amazing he didn't die.

He was definitely fed, because they would have to feed him, but they probably gave him steroids to take the rash down and all the things. But what happened was when he came out and in the book - thank you, Trauma Proofing Your Kids is the name of the book - the mother says to Peter, who interviewed her, "When I got my little Teddy back, he was never the same. He went in, happy baby, healthy baby." And in a show where they popularized this story, which oddly they've taken off of Netflix, which is really unfortunate, it really does show that his family was a healthy family. His brother was healthy. The parents were together. And so what happened was he went into a deep freeze. He survived it. I'm saying this because of this line, toxic shame. So he wasn't toxically shamed by his mother, but he was put into a severe survival response by being strapped to a table in a hospital, which led to shutdown, not being able to socially engage.

And when you follow him and hear the stuff that he expressed, it was very monotone. He had that sadly sociopathic psychopathic tendencies. I know this is such a fun topic, but you can trace it back to these early developmental issues, troubles. And this story was just, I think, such a clear one where a parent can do everything. And if you don't know what's going to go on at the hospital or wherever, you might not know what happens afterwards. Of course, we know now that we don't do that to children. You don't do that. It's just not something that happens. At least I don't hope it happens anymore. But that's, I wanted to mention, the vocal prosody, because when you have that level of freeze, it will be hard to re-engage that vagus nerve and that social engagement. Okay. But the specifics are in my video, The Story of Teddy. So, the next line down,



When we begin to move these emotions and bring more energy and potency into our body, so when we begin to move all this stuff, we get this into our body, begin the neurosensory exercises, other somatic practices, good therapy, et cetera, and stay oriented. That's the key word. Oriented to the present moment, alongside more accurate interoception. That's the next word. When we can stay oriented to the present moment alongside more accurate interoception, we start to move out of these imprints and heal. Heal.

So all this to say, keep building your capacity. All roads lead to building capacity. All the healing comes to building this capacity and then understanding what you might be sensing. If you go back to my story at the very beginning about my expression of all the things by just focusing and dancing around this topic of horror, because of that connection to self, to movement, to impulse, trusting my body, feeling supported with the people around me, that was able to bubble up and bubble out. I'm glad it happened. It'd be interesting to know if that ever would've happened if I hadn't been in that training environment or in some kind of group that was allowing expression of just whatever comes up into the body.

Someone asked if it was a movie. It wasn't a movie. It was called Manhunt. It was a series. This is about the Ted Kaczynski story. They took it down. Well, I have suspicion as to why they took it down, but I think that they didn't want people to hear what the CIA did to him back in the day. They brainwashed him unfortunately at university to experiment with tactics for mind control. And so they did that with him and then he exploded. He then realized that they were using him for that experimentation, and then it was shortly after that that he started to do the things that he did. It's possible I can't get it here in Canada, so it looks like it might be in the US. It's called Manhunt. It's a really good show.

It's also about the discovery of a kind of forensics using how people write. Fascinating, if you like that kind of stuff. They developed a new kind of forensics technology because they found where he was based on how he wrote and how he used words. Okay, page five, little extra. So before we end, let's move a little bit. Let's move a little bit. You can stay seated, you can stand up, but tune into... And this week we're doing some in the lab, connecting the head and the pelvis. But just allow your arms to move. Allow your eyes to move. Your shoulders. Nothing needs to be scripted. Just feel into your own body and let stuff shift. Let stuff move. Open mouth. Open eyes. Maybe you want to close the eyes. Maybe there are some yawns. And then we're going to play with something a bit more specific. It's on the page here.



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Number two, exploring me and you. So some of you have maybe done this with me if you've been in my workshops in person. We've done some of this on drop-in. But bring your hand... Can be one hand, two hands, it doesn't matter. Say hello to your hands. And then take the hands and bring them to your chest, your belly, and say the word, "Me." Me. Me And let the spine soften. Me. Maybe you twist a little. Maybe you bend to the side. There's no rules. Just feel how the spine can move a little bit. Me. And just really acknowledge that that is you. This is me. And then I can see you guys on gallery. You might not see the gallery. You might be just seeing me, but there's a whole bunch of people here. And the people in front of me are you.

So, now point. And if you want, you can point at me. That's fine. You. Me. You. If you're not on gallery, it's fun to do this with gallery. So you or you. Me. You. Us. I just made that up. So this ability to feel you, others, me, you, us together. So this is just a small exploration. It's something that Elia actually taught me and all the people that we work with when we're in up and down. But someone said, "Why does this exercise make me weep immediately?" There can be lots of reasons, but I find that there's something quite tender about acknowledging self. And so we can be immersed in all of our somatic exercises and movements, but there's something about just connecting to self and acknowledging self.

To go back to the content of today, with shame and these emotions, if we had a mother or a father or a caregiver who when they held us weren't present in their own body, it's going to be very difficult for you to feel your own body. So you can be held and changed and fed and all the things, but if that person holding you is disconnected, you're not going to feel what it's like to feel connection, which is tragic when we really think about it. So part of this is how can you really feel you or me. Me. And again, this specific thing with back and forth with mom or caregiver, we know that it's them or it's you. You are my caregiver and this is me, and there's a boundary. And that boundary is created with touch, with connection, with play, with disconnection when little one goes to school. When little one is not with mom, there's a rupture, like, "Ooh, I'm not with my person."

So anyway, lots there, but the key is making a strong connection to self and out there, environment, others. This is that boundary. So to go back to what John Bradshaw said in that longer clip, are we the doormat that people stomp on? Are we the people pleaser? Are we the one that is always risking our own health and needs for others? And there's nothing wrong with being in service, but still we have to serve ourselves. And so when we really connect to this me, it can really pierce into some deep, deep compassion and connection. And with that,



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there can be deep grief for what we maybe didn't have from the beginning, and we're now getting it back as adults, which we can.

Thank you, everyone. We are, at this moment, at the tail end of our learning and the labs, but of course it isn't the end. It is always a beginning. Beginner's mind. So we will see you for the next call. We'll see you for the Q&A when you're back on for Q&As with Seth. And keep connecting to self. Keep using your resources, and just keep working on all of these pieces. Thanks, everyone. Thanks, Leah, for being in the chat. Bye.