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Okay. All right. So today, we got more like the usual number of questions, as usually happens around call number three, more than I could answer individually. So I did respond to some via email. And I also have four common themes that were asked about that I'm going to talk about before getting into some individual questions. So let me just grab my notes here. All right.

Okay.

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So the first theme that we got a few questions about is, what does soothing and safety actually feel like? What if we can't actually feel these qualities? So some of the mentions in these questions were things like, "I have my resources, but aren't they just distractions from what's going on? Or what's it like to have a more embodied feeling of safety or resource? And what about, say, if we know intellectually, we know we're safe, yes, I can tell that I'm safe, but it's more just like there's an absence of threat? It's not a true feeling of safety, and there's still a sense of hypervigilance." So yeah, just a few common themes there about feeling, finding safety. What's it actually like?

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So in terms of resources, feeling like distractions, yes, in a way you could say that. The point of resources is in service of building capacity. So there are many cathartic practices out there that will sort of plunge a person into the trauma vortex without much preparation and just sort of expect them to navigate it. And that's not the approach we like to take. We want people to be well resourced, meaning know that they have the ability to soothe themselves as a baseline for going into the more difficult survival stresses, and the associated feelings and memories and emotions that can pop up.

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So it's important to have your resources. It's important to be able to distract yourself in a healthy way. Some resources may not even be considered healthy, but it's better that someone probably has a drink or smokes a cigarette, or something, then go into a full-blown panic attack. So we don't like to judge resources on the criteria necessarily of the medical system. We do recognize that some are more healthy than others, of course.

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But when we're talking about getting started with this work, it's really about whatever helps you notice something else. So it's like this intense thing is coming up, it feels like it's more than I can manage. What can I go to that will help me feel a little better, that will help me soothe, settle? Can I take a bath, have a cup of tea, hang out with my cat, listen to some music? Whatever it is, we want to know what those are. And yes, you could say that they're distractions, but it's more about, I notice this and I can notice this. I can tell there's something coming up, and I notice I have the ability to settle myself. So that's the first distinction I want to make.

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Now, the ability to actually feel safety, to feel a sense of resource on the inside, that is something that tends to grow over time. Okay? So we want to have that, and we can't expect it necessarily to be there for the beginning, because many of us may have spent our whole life not feeling safe. So how could we expect to have a cup of tea and all of a sudden, "Oh my God, yes, I've achieved nirvana"? It's not practical. So it's something that we want to grow over time.

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The way that we do that is by noticing, really paying attention to the internal response from our external resources. I'll say that again. We want to pay attention to the internal response from our external resources. Now, that can start out extremely simply. So say I have a nice warm cup of tea that I go to for a resource. I want to have that tea, and it may be as simple as simply noticing the feeling of liquid going down the throat, feeling the slight increase in warmth in the belly. In the end, the esophagus, that results. It can start just with very basic biological signals.

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Then maybe eventually we can notice, like, "Well, I do notice that I feel a little better now. Why? What's changed?" And then maybe we can start to notice things like, "Well, okay, there's this sense of warmth in my belly, and I can tell when I feel that, I'm not paying so much attention to how I was feeling kind of tight and jangly before. And oh, I can still notice that. I can still notice some of that stress, but I also feel this other thing." So it's a slow building of awareness.

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Another way we may find this is through being very tactile with our resources. So that could be something like the self hold, just feeling our edges. There'll be a lesson later on in the program that has three different containment exercises that are all ways of connecting to the self, holding our edges, feeling our boundaries, our edges. There is one of those available that's open source, which you can check out on YouTube, if you like. It's called DIY: Ancient Anxiety Medicine. And maybe Susan, if you can pop that, or someone, in the chat, that would be fantastic. That's one you can get started with.

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But they're all ways of just literally feeling our boundaries, feeling our edges. This is where I am, this is where I stop and the world begins. This is the dividing line. Sometimes having a sense of that container in a very tactile way can be helpful. If that's something you respond well to, not everybody does. Okay? So that's important to notice. And if you don't respond well to that, there's nothing wrong with you. It's just your system doesn't like that yet. There can be many reasons for that. Sometimes if that is the case, and self-touch doesn't feel soothing, a blanket may, like just having another way to feel that edge, feel that boundary. In either case, if we're using a tactile resource, can we really feel that from the inside? Can we feel that sense of containment boundary?

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If we are using self touch, one interesting thing to explore is what's it like to really be in my hand? So say my hand is touching my arm, what's it like to really be in the surface of my hand? And I'm really focusing on perceiving, "Oh, this is my arm. I can really feel that from the outside." And then what might it be like to switch your focus to being in the arm and the experience of being touched by the hand. It's all you, but you can switch your lens to an external sort of locus of perception to an internal one. What's the difference, to feel the hand touching the arm versus the arm being touched by the hand? That's another way to start to build this interoceptive noticing.

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So all of these ways can help foster this sense of noticing what a resource feels like on the inside, which then can lead to starting to notice what safety feels like, along with doing all the

work that you'll be doing. And again, as we go through, there'll be more and more practices that are about a variety of things. Some of them are about exploring and noticing what's happening inside. All of them are really in some respect or another, but some are more focused on directly supporting down regularization, soothing, settling, the kidney adrenal lessons, which we'll get to, a bunch of stuff like that. There's a brain stem one that is in the additional resources later on working with viscera. All of this stuff we'll get into. But for now, it's like, allow yourself to focus on external resources, and notice, if you can, what happens on the inside.

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Okay, let me just check my notes here. And you can also notice your internal response to all sorts of things, like music. Say you have a song that you know, really love, and whenever you put it on, you feel a sense of happiness. And what's it like to feel that sense of happiness? What literally is happening in your body? What are the sensations of happiness? Can you get curious about that? What is the expression on the face, the affect of happiness? What happens? So noticing your internal response to your external resources in all these different ways.

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Orienting is often part of this, not always at the beginning. Sometimes orienting to outside things can make some people feel more unsafe, which is also totally normal. It means that, yeah, there was a lot of unsafety in your outside environment at some point, and there's some part of you that is still expecting that. So sometimes orienting can be a tricky dance.

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We want to, if this is the case, again, how can we set up orienting resources? So this might be, we have plants that we really love, or these rocks or crystals we collected, or a painting or a certain view, allowing ourselves to deliberately be set up such that what we are orienting to is something that we know that we like at least. And then what might it be like to combine that with some form of other external resource? So maybe you just do some kind of self-hold or get wrapped up cozy in a blanket and you have your cup of tea, and you sit there and you just take that in while connecting on the outside to something you know is safe. What's that on the inside? And again, all of this builds over time.

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Okay. Great. All right, so next one was how to work with big emotions, sensations, thoughts that don't have any clear context. This is often the case with early developmental trauma. So someone asked about, "If I experience joy of some kind, it seems to trigger these big emotions and tears that kind of come out of nowhere." So they gave the example of, "If I hear a happy song or I watch someone achieve something really great, someone wins the medal at the Olympics, why then do I have these big emotions that often come on the heels of that?" And it's pretty simple, really. It's just your system is getting opened up. Joy is an expansive experience. Being moved. So there is just a general opening in the system that can happen, and then that may allow other stuff that's just waiting in the wings to come on out. Anything that is ready to move is like, "Oh, well look, there's an opening. Let's come on through."

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There also may be specific associations for you. Maybe you have your own experiences associated with whatever it is you're perceiving. But generally speaking, I tend to view it as, "Oh wow, okay, more aliveness." That's one way to think about it. "My system is alive. I'm feeling these things, these powerful emotions."

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And they ask, "Should I lean into these emotions?" I don't know if you necessarily need to lean into them, but I would certainly want to encourage you to accept them and notice them, and try to be actually neutral about them. Like, "Oh, that's interesting. I'm feeling these tears or this thickness in my throat, this upwelling of energy. Oh, okay, let's just be with that." But yeah, I don't think you need to try to stop them, it sounds like, unless of course it becomes totally overwhelming. And then back to number one, resources, soothing, settling, et cetera. But it sounds like from the way it's described here, it's not necessarily scary, it's just kind of weird and unexpected, and why is this happening? So yeah, if that's the case, just allow it, welcome it. It's a sign of aliveness in the system. It means things can move and just be open to that, be open to that happening.

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Maybe if it feels like it's... A common one that I've experienced with this kind of thing is like, wow, this big upwelling and sort of, oh yeah, thickness in the throat. Well maybe you can focus

on softening and allowing the jaw and the mouth to kind of be loose. What might be allowed to happen then, what might move through?

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Someone else asked along similar lines, "What about if we suspect something happened to us because of the emotions, but there is no memory?" So in these cases, they specifically cite, "What if we suspect we were sexually abused, but we don't know and there's no memory, no images, and no story about it in the family or anything?" In those cases, I tend to encourage people to stay more with the felt sense and try not to interpret it too much, because our mind will tend to always try to find meaning. That's just sort of how it works. Its job is to make sense of the environment and our experience. So we may be having an accurate sense that something happened to us and we may not. Our mind may be simply applying a meaning that makes sense to the sensations, but it may not be right.

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In either case, the story generally won't lead anywhere too productive. It depends because sometimes getting the meaning is an important part of healing, but that generally arises organically by staying present with the felt sense of the body. And that can be different from the kind of projected meaning that our mind may apply automatically or reflexively. So for example, we may have these sensations coming up that lead to these thoughts like, "Oh my gosh, I'm feeling this. That probably means this." That is different than, okay, I'm just staying and I'm just feeling, and I'm noticing this feeling moves and it changes. Things are happening on the inside. And then all of a sudden, this clear image arises in the mind out of nowhere. That tends to be more how meaning and memories arise organically. So just always a better bet to focus more on the internal experience and where you are in the environment now.

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One example of this is actually a story that Peter told at a master class once on sexual trauma. And he had a male client who was just absolutely convinced he had been sexually abused. He couldn't remember it, but just all his feelings told him that that must have happened. And of course, Peter being the somatic practitioner he is, guided him to stay away from the story. Let's work with the sensations, let's work with the body. And he noticed that there was this impulse of him wanting to move his pelvis back, to retract back.

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And as they worked with that slowly, and staying connected to the internal present moment of the felt sense, all of a sudden the client suddenly realized, "Oh my God, no, this is because I volunteered for a late stage circumcision." It was later in life and he felt awkward about not being circumcised. And so he decided he wanted that at a later age. And this imprint that he was sure was sexual abuse was actually something he had volunteered for, which was being circumcised at a late stage. So if he had attached to that story, they must have been sexually abused, he may have never gotten to what actually happened, which arose organically. So these kinds of things, we may not always know exactly why, and there can be many reasons for what we're feeling and experiencing.

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Okay. I had two questions about, how do we return to a healthy parasympathetic state after exercise? So in both cases, it sounds like there's a capacity in the systems for intense activity, which is great, but how to come back to a healthy baseline afterwards. So this may mean that we feel great during exercising, but afterwards we still feel really amped up for a long time and have a hard time settling. Or as one person reported, "I feel fine, I feel great. And then later in the day, I tend to go into freeze and I crash and I sleep really hard and I wake up feeling unrested. But then the second day after, I feel great again."

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So in both these cases, it may be an example of doing too much at the gym. Now, I believe both of them named that they felt they were within their capacity. And awesome. If that's the case, there can be other reasons. But just for everybody, it's important to know that when we learn to be in survival mode real early on, we will very often develop what's called a false window of tolerance. It means our sense of what we can achieve and are capable of is based on being in survival mode, not off of a more healthy flow state of homeostasis. So it's an inaccurate sense of what we can tolerate, because we are recruiting survival energy in order to do it.

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So I'm not saying that's necessarily the case for these questions, I don't know, but it is something for everyone to be aware of, especially if you know that you had early trauma,

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because your system would've learned to function from a place of survival really early on. And so when that's the case, we will want to err on the side of doing less. And that's something that the folks who wrote in, both of you, could experiment with. Just see what happens if you do less than you think your capacity is, like maybe half, and just see, do you have the same effect? Does the same thing happen? So being mindful of staying within our capacity is really important for exercise in general, especially when we're engaged with this kind of trauma healing work.

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Also, another thing, really be mindful if there are emotions coming up during the intense exercise that maybe you're not paying full attention to. That is another thing that can happen is, as we're doing vigorous activity and exercise, it can bring up stuff. We're using the sympathetic system. So there may be fight flight charges that are getting recruited and coming into our effort. So that may just feel, at the time, like extra vigor, but pay attention. It's possible there's some aggression in the picture there that is maybe not 100% just about what you're doing now. Or what if there is tears, or sadness, or disgust, or what if there's things that are arising that because of the intensity of the activity you may not be noticing?

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So just pause. I'll encourage everyone really, when you're engaged in intense activity and exercise, give yourself permission to pause and check in with yourself and your interoception. Let the heart rate come down multiple times during your workout. I know that as someone who is a fan of intense exercise myself, there is a goal of keeping the heart rate elevated. I totally get that. In the context of doing this work, maybe see what it's like to actually have multiple times where you let the heart rate come down. Because then you might find that, "Oh, there's something bubbling up that I wasn't noticing." And that can be, even if you're staying within your real window of capacity, these emotions that aren't being noticed can lead to the same result that you're experiencing of either not sort of settling or crashing afterwards, because there was something that was released in the system that needed your attention. And then it didn't get that attention, and so then your system is like, "Oh, need to pack it up away or go back to the strategy, or shut down." Whatever is familiar.

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Another thing that you can play with is to, after you exercise, do extra ventrally stuff. So things that support the ventral vagal nervous system. This can help with healthy down regulation. So if we think back to the Biology of Stress videos that ventral vagal is a kind of break on the system, part of the parasympathetic that helps the heart rate slow down, the breath become easier, and that is supported by things like healthy, safe social engagement with people, pets, plants, the environment, whatever. It can be listening to music. It can be making music. It can be making sound, singing. One resource that can be really helpful is to get a drum, one of the big frame drums, sometimes called buffalo drums, a shaman's drum. These can be really nice for stimulating the ventral vagal. You just hold them on your lap and hit them with the beater, and it just sends this low vibration directly into the torso. That for many people can be a lovely way to spark up that ventral vagal system. So all these different options for exploring, supporting the ventral vagal after you have that big sympathetic charge of the intense activity. So those are all different ideas to explore.

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And then finally the last theme was what to do when we feel stuck in freeze. So there are some questions about how can functional freeze become non-functional? Like someone was living in functional freeze for a long time and then now it's not functional anymore, it's taken over. When to contain and resource and when to promote and go with the sympathetic stuff that's happening. And what to do, if I even touch into the littlest bit of sympathetic activity, I immediately feel tired. So the first part, how come functional freeze can become non-functional? Well, that's just the classic story. That's what we see time and time and time again, people living in functional freeze performing at often very, very high levels. High level athletes, high functioning business people, people who are on the go all the time, who can only do all that because they're numb to their internal experience without knowing it. And that's functional freeze.

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It can enable us to perform at a very high level, and it's in that false window of tolerance that I was talking about earlier. So what happens generally is that everything is hunky dory for a long time, often, and there can be great success and no problems. And then there'll be a breakup, a car accident, someone loses their job. Maybe there's an intense flu that they come down with, some big shock to the system comes in and that's it. That's the straw that broke the camel's back. And the system just goes, "Ugh, can't do this anymore." And then everything crashes.

And that's where we see autoimmune stuff popping up, different forms of disease, anxiety, depression, chronic fatigue is a big one. All these things that can happen when that go go go suddenly can't go anymore, and the freeze becomes more dominant in the system and becomes non-functional.

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So when to contain, when to use resources, and when do we want to go with the sympathetic energy in healthy ways? The answer to that is all about your capacity. And I've mentioned this before, and I'll probably mention it many times again, that when we're doing this work, we're often presented with this choice point. Is, "Okay, something's coming up. Do I need to settle and soothe and resource and contain and orient and just help things calm down? Or do I need to actively work with the charge that's coming up in the ways that I'm learning such that it can actually move through the system and find completion?" The answer to that is individual to each person, because it's based on what your authentic capacity is. A lot of this work early on involves just discovering that, what is my real capacity? Which can be humbling for many of us if we learn to function based on survival mode.

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So very often we can authentically do way less than we think we can do, so that's something to be mindful of. So once you know your capacity for real, then you have a much more accurate barometer for figuring out, okay, do I have the ability to stay with this or do I not? So some signs that you may not have the actual ability to stay with it. You find yourself clamping down more. You find your thoughts starting to race. You find yourself starting to check out and feel floaty or spacey. Or you find yourself getting angry, grumpy, really irritable. Those are all common indications that you may not be able to contain actually what's happening. You want to have a general sense of even though it feels really intense, I can do this. I have the tools. I have the capability. I know what's happening. That's key, the education,

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I have to understand what's going on. It's like, "Oh, I'm experiencing a big sympathetic charge right now. I have this fight flight charge coming through my system. Do I have the ability to notice? Is this more on the fight side of things or is this more on the flee side of things?" If you have the ability to apply that kind of critical thinking and knowledge while something is coming up, that's a good indication that you have the capacity to be with it. Whereas if you find it's just

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like, "Oh, what's happening," and it just feels overwhelming, okay, that's when you want to go to your resources, settle, soothe, whatever you need to do. That process of learning how to respond appropriately to ourselves is part of what builds capacity, is part of what helps us get to an authentic window of tolerance.

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Because so often where the trauma started we weren't responded appropriately to in the first place. So we have to learn how to do that for ourselves, respond to ourselves appropriately and accurately. So once we discover that, then we can know more. Now is a time to settle and soothe, versus now is a time to really work with the sympathetic energy. And if it's to work with it, then it's about following your impulse. What does your body want to do? What are the movements that want to come out organically? Is there a sound? Is there a color to the experience? What's the texture of the thing I'm feeling inside? What's the shape of it? All creative ways of noticing and expressing and working with the charge, what might want to emerge? And can we do that while staying in connection to ourselves, our environment.

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Now, what if even touching the tiniest bit of sympathetic energy makes us feel tired? Well, then build your capacity for resourcing and noticing safety, and just a general sense of okayness, as I'm sure Jen talked about on the early developmental trauma call, call number one. That's a big theme, is just, can I just learn to notice that things are kind of okay? If you're in the situation where just the littlest touch of sympathetic energy makes you start to crash, that's a very common indicator of early developmental trauma. So building that resourcing ability, building that ability to know and respond with accuracy, that, no, I just need to stay safe. I just need to soothe, settle, etc. Now, there are ways to titrate sympathetic expression in very fine ways, so I'll actually just maybe lead a little example of that right now. If you want to play with this, it's totally optional.

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If you feel like it, let your eyes come away from the screen for a moment. And keep them open, but find something else to look at. Find something in your environment just to let your eyes rest on that's easy. And notice what it's like to just let your eyes be soft and just allow... It's like, "Oh, yep, here I am." And I'm just taking in. I'm taking in what I'm seeing. I don't have to make any effort. I'm just sitting here, and it's like the textures, the colors are flowing to me. Just

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allow that to happen and just notice how that feels. Then you're going to see what happens if now it's like your eyes are going to change and become like little lasers. They're going to go to the thing you're looking at. Like if a cat was hunting a bird, and stalking and focusing, looking very intently, like, "I'm going to get you," focusing like that. Notice what happens. That is a very small way to activate the sympathetic nervous system. And let it go. Let it go, come back. So I don't know, maybe if some of you want to pop in the chat what you noticed, that'd be interesting, if you feel like it. That way of focusing with the eyes, receiving versus projecting, that projection is a very little titration into sympathetic energy, the hunter's gaze. Heartbeat faster. Felt tension in my stomach. Noticed my heart rate go up. Felt my lip coming up. Yep, the second made me feel stuck in the face. No more breathing. Held my breath, felt agitated. Yep, sympathetic, just by changing your intention with your eyes. So it's a very titrated way of exploring that, and maybe even that is a little bit too much for some, but usually that is something that can start to allow us. Because we can do it so little, you can do that for a second and let it go, and then see what it's like to soothe, settle, resource, etc.

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My attention was all on the thing, I felt my connection to the environment changed. Weird, but my breathing started becoming irregular, but even when the intention was soft. So that may be that, okay, just being passive may stir up stuff a little bit. That may be an indication that actually I feel more comfortable when I'm on guard, when I'm alert and vigilant. So a very interesting experiment with just a basic thing, a basic thing. Okay, another very, very small sympathetic titration that you can explore is the fists. So that's just the simple pulse of the fists. It's just like your hands are loose, and then they do that a little bit a few times, and then you let it go.

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For some people that may be less intense than the eye thing, just a little squeeze, loosen, squeeze, loosen. Or maybe it's a little press with the legs, just little, little, little bits. These types of explorations of just touching into the sympathetic very simply, very shortly, in ways that are completely under your control, is one way to start to build a little bit of familiarity, a little bit of capacity with that energy. So I hope that is helpful.

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I'm just going to close my window. I've got a little weed whacker happening outside. Okay, so individual questions. "Hello, Seth. I'm an alumni on round three of SBSM. Since I started this round, I've been briefly waking up during the nights with a tightly locked jaw and real tension in the muscles. I have just observed it and did not try to unlock it. Anything else I can do to support my body in processing this tension? It only shows up at night. I don't have tension during the day and not even pain from the nighttime tension." So this is a beautiful example of a sympathetic charge showing up organically as the system is ready. When we're sleeping, very often our guards will tend to come down and we may just be more at ease, especially as we progress in this work. Like you say, it's your third round. So yeah, you've been doing this for a while. And it sounds like there's a sympathetic charge that is just ready to come on through, and it's showing up at night as the defenses drop.

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So with sympathetic energy showing up like this in tension, yeah, it's fine to just observe it and notice it, and you may want to pendulate that with also noticing something else. So what's it like maybe to notice that, and then maybe you notice the feeling of the mattress holding you? So notice a different thing that's not tight, something that's supportive, or notice something that's neutral. Can I feel my heels on the bed? Can I wiggle my toes and notice what that feels like? And then come back to noticing the tension. Can I see an image of the tension? Again, this is one of the weirder ones, that sometimes it's like, "What?" Like an image, what do you mean? Or what's the color of the tension? What's the texture?

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It's a very abstract way, but it sparks up the creative brain, which is an automatic de-potentiator of survival stress a lot of the time, or it enables us to work with it proactively. It's very hard for survival stress and creativity to exist at the same time because they're ruled by different parts of the brain, that survival stress is in the limbic brain and your creative mind is your neocortex. And so as you bring juice into the neocortex by using your creativity, it will just de-potentiate the limbic brain a lot of the time. So that's why we may ask, like, "Oh, you're feeling tension in your jaw? What's the shape of that? What's the texture? What's the color?" It's like a bright steel. I feel bright, silver steel in my jaw.

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Okay, can you pendulate between the image of that and what's the image of your heels just being supported by the mattress? Oh, it's like a soft blue pillow, kind of. Okay, and you go back and forth between those images. Can you notice one image? Can you notice the other? And then can you notice one sensation, then the other? This is all different ways that we pendulate, we change our focus from one thing to the next, and we notice what happens. And it's not about making one right and one wrong, it's about noticing difference and using our creative mind. Another thing you can do is to work more with the tension. So if it's in the jaw, what happens if you exaggerate it a little bit? What happens if you do it even more on purpose? What face might want to emerge from that? What is the affect of the tension that you're feeling?

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What is the sound of the tension that you're feeling? This may lead to an expression of aggression. If I tighten more, what might want to come through in the face, in the eyes? Now, you say this is only happening at night. I don't know if you are sleeping alone or if you have a partner there. If you do have a partner there, maybe not the best to start making animal sounds and growling. So if that's the case, go to the bathroom, go to a different room and work with it because we don't want to necessarily alarm our partners. And there can be a resistance to doing that sometimes. When stuff comes up in the middle of the night, it can be easy to just be like, "Oh, I just want to go back to sleep." Totally get it. However, this is an opportunity, and it actually will usually resolve a lot better if you just get up and work with it.

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So if that means going to a different space, do that. And what happens if you really lean into that tightness, that tension in the jaw? What sound, what face, what might want to come then? And then you're talking about healthy aggression territory, and what might it be like to get other stuff involved? Pushing, squeezing. There is a whole lot on healthy aggression as we get into lab six, but if you want a little preview, one of the things in lab six is an open source article of mine called Healthy Aggression. It's on my website, so you can always read that at any time and start to explore those practices. That's [sethlyon.com](http://sethlyon.com). The name of the blog is Healthy Aggression. And if someone can pop that in the chat, that would be great.

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I think that's everything on that. And oh, the last thing. When we have things like this that happen at night, we can always proactively explore them when they're not happening in the day. So you have the memory of what's going on at night, how might you do that deliberately when it's not happening? Sometimes that can lead to interesting things as well.

“Hello, this is my second round of SBSM. I have early developmental trauma and fibromyalgia. I started noticing pains and tingling in my left side of my body around the heart, down the torso, legs, toes, including areas Irene described where the vagus nerve is. I even feel some muscle knots. Are these real muscle and nerve spasms or am I imagining it, how to work with it?”

(00:42:02):

So you're almost certainly not imagining it. If you're feeling it, you're feeling it. And yeah, that kind of stuff happens all the time. That is part of the magical, weird world of somatic experiencing and releasing trauma. We get all kinds of weird sensations, pains, tingles, heats, vibrations, shaking, trembling, itchy, crawly, just weird stuff we can't describe. Swirling, tension, there's a lovely palette of all sorts of strange sensations that can come through, and it's almost always a really good sign. These are the things that happen as the system is thawing, we start to feel weird stuff. So you don't have to do much about it, just allow it. Welcome it. Don't fear it. Of course, I'll always add as a caveat, if someone is really scared of it, you can always go to a doctor, if you want and get yourself checked out. Just know please that they probably will say there's nothing at all wrong with you.

(00:43:05):

Or I've also heard this can lead to an endless chain of specialist referral after specialist referral that goes nowhere. So just know that that happens, based on other people's reports. But sometimes it can be helpful to get that report of, "No, there's nothing wrong with you, nothing's happening." Or it may feel totally invalidating, so it's a crap shoot when it comes to coming to the medical system with this kind of stuff. All I can say is that it's a very, very, very common, normal, part of this work. The amount of things I've experienced, I can't even list. So if you say pains, yeah, it can be very common to get sharp pains. I've had all sorts of experiences of sharp pains through the torso and the chest. "Oh my God, am I having a heart attack?" No, not at all. The fascia is starting to unbind. When fascia has been in tension for a long time and it starts to come out of tension, it can feel like sharp shooting pains. And it's actually a good thing because the fascia is unbinding.

(00:44:11):

Same with tingling, trembling, electrical sensations, all this stuff. It's all part of the system coming back into flow and out of tension and chronic bracing. So you really don't have to do much. If it's helpful, use your resources. Just be present, orient. Try not to fear what is happening, and we want to welcome it. It's like, "Ah, wow, my body's speaking to me. My body is waking up. I'm feeling things."

(00:44:44):

"Hey, I experienced dysphonia, or my voice quality and strength is poor, and my voice box is so constricted that it exhausts me. I love talking, and I get so frustrated as I can't speak much and I feel isolated. I also get tics and jerks, which feel like a buildup of energy in my body that has to be released. Is this all linked to the ventral vagal nerve, and any suggestions on how I could soothe this response to allow me to enjoy music and talking again, please?" Okay, so no, what you're talking about is not really about the ventral vagal. This is sympathetic energy. So you can tell because what you say here, tics and jerks, and it feels like a buildup of energy in my body that needs to be released. That's sympathetic energy, that's fight flight stuff that's wanting to come out. And that is very, very commonly the root cause of dysphonia, I would say probably always, is repressed energy and emotion that is stuck.

(00:45:47):

So there's a great video that I'd like you to watch if you haven't, it's about this specifically. It's an interview that Irene did with one of our alumni. It's called Unmasking Human Expression and Healing Spasmodic Dysphonia with Donnie Hill. And again, we'll pop that in the chat. And of course, all these links will be on the replay page as well. So that's exactly about what you're talking about. Donnie had spasmodic dysphonia, resolved it to a great degree already, and it was all about repressed grief and rage. If you think about it, it's like I'm having trouble speaking and it's literally because there was so much that wanted to be expressed in the past but couldn't. So it's stuck and it makes this stuff not work well and get easily exhausted. Those ticks and jerks you get, that's the same thing. It's an expression of sympathetic energy coming through the system or wanting to come through the system. So it's not so much about soothing, it is not about sort of soothing it so that it feels calmer and goes away. It's about allowing what's wanting to be said that never was said. It's about allowing the emotion that was never expressed that needs to be expressed. And that's a bit of a longer road, I'm sorry,



because that may not come all at once, but if you know that and you have the intention of working with it that way, it can resolve. So watch that video. There's a bunch of ideas that you'll get from that. Some things you can explore somatically. So one exercise that can be interesting for this, for just opening up this area in general is just working with the jaw in different ways. So one that I've worked with my clients is to just feel how far can you open your jaw without there being tension, and how slowly can you do that and what's that like? And can that change? Just playing with little... And then what might it be like to bring in lateral movement.

(00:48:09):

Can I do that? Is there sound that wants to come? Again, I don't want to go in tension so much as meet the edge of tension, or what might it be like to imagine that your lower jaw stays exactly where it is and you open your jaw by tilting your head back here and the lower jaw sort of follows. It might be like to then sort of move a little bit and like, "Oh, this is becoming so heavy." It's like, "Oh, dragging my head down." Just exploring all that stuff, that range of motion, different ways that your head can move and the jaw can open and find where the edge of tension is. Sometimes that can be in service of helping this stuff start to open up a little bit. Also, you may have a very clear knowledge of all the things you didn't get to say that you wanted to say.

(00:49:21):

What might it be like to start to say those things? Maybe not to again your partner or your friend, but if you have a safe person that's open to just sitting there and you, of course, explain the context, it can be very powerful to be witnessed, I will say that. Also if you're working with a practitioner already, that's something you may do with a practitioner, but if you don't have a practitioner or a friend or a safe person that you could sit and say these things to just to be witnessed, you can always use a mirror. What is it like to just witness yourself saying the things that you never got to say? That can lead to some pretty powerful stuff. And if you don't know the words, can you find the sounds? There's a tension, like you say, that feels like it's building up and it wants to come through the body. What's the sound of that? What if you just follow the impulse of that energy? What sound would it make? What would it be like to see yourself and hear yourself making that sound?

(00:50:22):

So always to explore, allowing the expression of what has not been expressed, which is pretty much always what dysphonia is about. Okay, let's take a little pause. Let's take a little pause for a few minutes just if you need to run to the washroom, get some water, go walk around a bit and we'll just start again in about three minutes...

All right. So before I move on, I just wanted to highlight this comment, which is yeah, great. So in the chat, "When I try to go to the edge of a cliff to throw a stone and shout or scream to release repressed anger, I feel such resistance to letting it out and my whole body clamps down. I feel shame and guilt and embarrassment, I want to run and hide. I think it's going to take a lot of practice and going gently." Yeah, absolutely. You got it. When I'm talking about allowing things to express and say what hasn't been said, etc, yeah, it's not necessarily that you're going to do that all at once. Now that's why sometimes doing it with yourself in your bathroom or something can be a safer feeling than necessarily out in public somewhere, even if there's nobody around. But even then there may be big resistance, like you described. Totally normal.

(00:55:02):

Yes, you go gently, slowly. Maybe you start with... You feel like you just want to scream, but there's this like, "Oh, I can't." What would it be like then to just exhale with the mouth open wide? Start to explore some of the physical stuff, the mechanisms that would need to be at play to do the scream. Very often just doing that can start to help stuff move more gently, and we don't necessarily always want to do a big, huge, cathartic expression. Sometimes that happens and it's great, but more often the nervous system is better served by smaller titrated pieces of work because it's a delicate system. "Hissing like a cat helps a ton when I can't yell full force." Totally. There's many ways that we can engage our sound and our aggression.

All right. Okay. "Hi, Seth. This is my sixth round. I've become so much more authentic and I'm able to recognize and honor my system's needs." Awesome. "But when interacting with older adults or adults with perceived authority, I go into fawn so quickly like a reflex, and I suddenly hear myself say things just to be seen as nice. I'm suddenly not able to be authentic at all. What can I do to stop the fawning?" Yeah. So first, just give yourself a break because yeah, this is a deep pattern and it takes time to change. And just really great to notice the progress you've made so far. That's fantastic. So with fawning, one of the biggest things is to, one, notice what happens beforehand. So can you find the somatic thing that goes on before the actual fawning behavior? That's going to be an important cue, and it may take time to notice, but

yeah, it could be a tightening in the throat, it could be a change in the posture, which is very likely.

(00:57:10):

You may go into more of a tail tucked between the legs, slumping shoulders a little bit. The eyes may look down. There may be a tightening in the gut, constriction in the chest, who knows what it is but there's going to be something that happens before you go into the behavior, which is the action of saying the words that you don't fully mean, et cetera. So see if you can find whatever that thing is, because if you can find what that thing is, you can start to work to change that somatically instead of just thinking about, "I need to speak my truth," because the ability to speak your truth is largely contingent on what's happening here. And that can be very connected to your posture and to what is being held or braced in the system. So that's the first thing to see if you can find it. And then work with the posture. Work with potent posture. "Can I feel a sense of potency in my legs? Can I feel my feet under me? Can I feel a sense of balance? Can I lift my tail, so to speak, the tailbone? Can the pelvic tilt be such that there's that healthy lift at the base of the spine?" And so that encourages the spine to be erect and for the shoulders to be dropped. "Can I feel my hips and my ability to be over my feet?" So being mindful of potent posture is one of the big antidotes. It'll help support the expression that may want to become... That's more authentic for you, that's more natural, and it may feel scary. Just doing that may feel a little scary. So practice it. Practice it.

(00:59:06):

Put yourself... Use your imagination. Do a little time traveling back to the last time you fawned, and just be with that memory and then work with potent posture. Again, this can be sometimes also about allowing ourselves to say what didn't get to be said afterwards. You can use the whole thing like I just described by using the mirror, seeing yourself saying what you didn't get to say and witnessing yourself in potent posture as you do that. So building that wiring of potency and authenticity. And another thing I'd be curious about is, "Well, what were the authority figures like when you were a kid?" For anybody in this kind of situation where they find themselves all of a sudden going into fawning when they perceive someone as maybe having authority over them, even though nobody does really. I mean, I guess a policeman or something, if you've got pulled over, yeah, they have some authority, but not in terms of your mind and your body and your soul and your heart. I mean, you are the only person who has authority over that no matter what.

(01:00:12):

So you can always retain your potency and your authenticity, but it may take a lot of practice because yeah, these wirings can be very deep. But I would be curious about, like, "Well, when you were a kid, what were those authority figures like? Is there maybe some aggression that wants to emerge towards them? What did you not get to say or feel or express with them?" And that could be an interesting thing to consider.

Okay. "A new thing I'm experiencing is having my left arm stuck to my side. My arm is bent and braced like it's trying to protect my abdomen. This made me think of my parents telling me how as a four-year-old, I would walk around swinging my right arm while my left remained glued to my side. I'm wondering what would've led me to do this as a child. I noticed that this bracing really alters the way I walk and stand. Is this something I should let play out or should I try to return to a more potent posture?"

(01:01:18):

So it's probably something that you'll want to work with proactively. It sounds like this is something that is like a stuck posture or maybe an incomplete procedural memory. Since you did it as a kid, it's very likely a result of very early experiences. It could even have to do with how you were positioned in the womb. Perhaps when you were in the womb, you were in a position such that your arm was really glued to that side against the uterine wall or something. Yeah, it could be... I don't know if there were early surgeries or accidents or injuries. It could be a result of something like that. It could just be a protective posture for some reason. So it does sound like it's very early, but it may not resolve on its own if you just sort of let it play out, like you say. It may, but it is possible you'll need to be a bit proactive with working with it.

(01:02:23):

So the first thing I would notice is just to sense what is it doing for you? As you just allow it to happen, what's the internal experience when you tune into that part of your body, and not just the arm, but the abdomen? What's it like to feel that part of your abdomen being protected, so to speak? How is that? Just get familiar with that. Well, then what may happen if you really slowly and mindfully start to explore changing it? This can be a place where it's really good to bring in the Feldenkraisian lens of movement, which we will get into a lot more in later labs. But essentially this means before you even make the movement, you are imagining how you would make the movement. So say I'm feeling that part of my abdomen where my left arm is

stuck and glued to my side, and then I start to think, "Well, if I were to move my arm away from my side, what's the first thing I would initiate?"

(01:03:29):

And before you even make the movement, you're visualizing, "Well, I think I would probably start that with my shoulder rotator and I would start to rotate my arm away." And you visualize it before you even do it. What happens then? Then, okay, what happens if you start the movement that you've been visualizing? But you do it so slowly, it's so slow that maybe someone won't even notice you're moving, but you can feel it from the inside. And as you slowly move the arm away and you sort of feel that experience in the arm, what happens in the abdomen or elsewhere in the body as that contact changes? So really gently, carefully exploring moving in and out of this stuck sort of posture.

(01:04:24):

And again, this is an example where, yes, potent posture may be a baseline to work with in terms of what you're moving towards, exploring, again, back and forth. When we're working with this stuff, it's not just like, "Okay, I'm doing this and now I'm going to do this." It's about the range of motion in between and all the little things that may happen inside. And as you're doing that, you're building that relationship with yourself, you're increasing that connection with yourself, and you're learning, you're discovering.

Okay. "I believe I've inherited some trauma from my family and ancestors, as there are some things that just don't make sense if I look at just my life. How exactly does trauma get transmitted through generations? Is it in the genes or cells? If so, how does traumatic information get stored there? And do we work with this kind of trauma the same way we work with our own lived trauma? Are there releases, completions? If so, how does that energy get passed down?"

(01:05:31):

Great question. So this is definitely in the realm of emerging understanding. So I'm not going to say that we definitely know. We are starting to get some ideas. Epigenetics is a huge part of this, the discoveries of epigenetics. What epigenetics tells us is that we don't just have a set genetic pattern that is passed down and copied from mom and dad, and then this is the genetic pattern, and it's determined and it's set in stone and that's how it is. That's how we

used to think it was, but it's not that way is what we're discovering. Rather what we have is genetic potential, and we tend to have an optimal genetic expression and then we tend to have an adaptive genetic expression that may not be so optimal. And it is our environment that determines the genetic expression.

(01:06:31):

And it does that by determining which chemicals are attached to the gene itself and which chemicals are attached to the gene is influenced by our environment. So what do I mean by environment? First and foremost, it's the mother's womb. So whatever stress chemistry that the mom is holding onto because of her experiences, that will express to the chemistry and it will express through which chemicals are attached to the genes. And that will in turn greatly influence what genes express in the genome, what potential gets expressed. So that is the chemical genetic way in which trauma gets passed down through generations, because when we have unresolved trauma, it changes our chemistry. We have more cortisol, we have more adrenaline, we have less of the good ones, oxytocin, dopamine, those types of things.

(01:07:34):

So it changes our chemistry and that influences the genome. Now there's another layer to this then, because that happens, but then we are also impacted through the behaviors in our environment. So even in the womb, you can hear sounds, you can perceive an angry, violent voice being rageful, the signals that are happening between the mom and her environment, caregivers, whether it be the spouse or siblings that are fighting or just the work environment, an angry boss, who knows what it is. Little baby is taking in all of that. And so those signals can also directly affect the little one in terms of what it's perceiving in terms of the stress levels in the environment in general.

(01:08:38):

Then what tends to happen is we are born with whatever genetic expression we've adopted due to our environment, chemical and otherwise. And then that genomic expression is reinforced by the behaviors of the unresolved trauma in the family system. So the fights that happen between mom and dad, the stress that they're experiencing. Siblings, the school, the workplace, whatever it is, all of the behavioral patterns of unresolved trauma then get passed down and reinforced that way as well. So it's a double whammy. It's genetic, and then it's reinforced by the behaviors. So that's how it happens.

(01:09:26):

And again, that's not scientific doctrine yet, but that's the working theory that we have and that's supported by a lot of research already. You can look up epigenetics and trauma, and there's a fair amount of PubMed articles already. There's a specific one, one of the big ones was studying mothers who were pregnant during 9-11 in New York. If you look up 9-11, pregnant mother, epigenetic trauma, if you just Google that, you'll find those studies. These are some of the big pieces of research that we have that are out there.

(01:10:07):

So then traumatic information also gets stored in, of course, the musculature, the fascia in the form of bracing patterns. The way that we stay armored or not. It gets stored in the incomplete fight, flight and freeze responses. That's all the stuff that we know. So do we work with this kind of trauma the same way we work with our own lived trauma? Absolutely. Doesn't matter where it came from, it's yours now. Sorry. We are the ones that are healing our lineage, and I personally take a great deal of pride and satisfaction in that. And I think we all should, because we are the ones that are saying, "You know what? I'm not passing this shit down anymore, I'm going to change it." So absolutely. It's yours now, and you can take ownership of it, and you can resolve it and you can heal it, and you can change your lineage for the better.

(01:11:03):

You don't need to work with it any differently. It's just, okay, it's yours now, and it shows up in the body. You work with it the same way. It shows up in the behaviors, the emotions, it's just... yeah, you just work with it the same as anything else. Yes, there are releases, completions. Same as with anything else. It really doesn't matter where it came from.

(01:11:26):

And good news, our genomic expression can change even late in life. As we do this work and give ourselves a better internal chemistry, we can then have a more optimal genomic expression, which is why doing trauma work can lead to healing of things that are deemed unhealable. Like on the last call, there was someone asking about an autoimmune diagnosis they got, which from our lens is just a cluster of symptoms that have been given this name and they're all connected to the autonomic system. All of that can change, even if it's something that's considered genetic, very often it can change. Because the genome that gets encouraged

to be expressed is different. It's the more optimal genomic expression as we move into a more optimal internal chemistry.

(01:12:18):

Okay. "I understand that the nervous system states affect thoughts and emotions. I notice it in myself, and I use this knowledge to calm myself. For example, it is the nervous system state that I'm in that is causing this thought/feeling. But sometimes my rational part that doesn't understand how exactly this happens sabotages me a bit. Can you explain how our physiology creates different emotions, and especially different kinds of thoughts, so that I can be more at peace with this? Is there any book that explains this in depth?"

(01:12:49):

I don't know if there's a book that explains it in depth. I asked Irene, and she wasn't familiar with any either. It's possible there are, but it's such an emerging field that yeah, I'm not sure. But I can explain it the best I can. So one way to understand this is that the thoughts and emotions we have access to are directly related to the underlying neurophysiological platform, is one way of describing it. So it's not the brain that is in charge when it comes to unresolved trauma, it's the autonomic nervous system state.

(01:13:25):

When we are being ruled by unresolved survival energy, our limbic brain is much more active a lot of the time than our neocortex. When our limbic brain is very active, what kind of thoughts are we going to have? They're going to be more survival-based, because the limbic brain is a more primitive brain. So it's going to be thoughts that are often about fear, anxiety, anger or contrarily, what's the point? I'm hopeless.

(01:13:56):

So the thoughts of fight and flight, if you're in more of a fight mode, the thoughts will be like, well, who can I argue with in my head next? What justification can I find in my environment to be angry now? Because that's what's happening already. So my thoughts will revolve around that. Or what should I be scared of? If it's more on the flight side of things, what in my environment is scary right now? And I can find something, by god. Right, I'll find something to be afraid of because I'm feeling this fear, so there must be something.



(01:14:25):

So when that limbic brain is running the show, we'll always find things to attach the emotions and the fear to. Because again, like I said, it's the mind's job to find meaning. The neocortex does the best it can, but when the limbic brain is really loud, it's working with limited material essentially. Or if it's freeze that's more in the system, the thoughts tend to be what's the point? It's all hopeless. There's no purpose, there's no meaning. Or in a funny version of this, it can actually be like the new age hippie thing like, "It's all one, man. Yeah, everything's all great all the time, man." There's no differentiation. It's all disconnected and floaty. It can be another expression of freeziness. So that's one of the ways to understand it, is your limbic brain is more in charge than your cortex.

(01:15:24):

It's like thoughts are just being generated, which is very different than deliberately generating a thought. That is something that many people may not have done ever, if they're living with unresolved trauma, is just to sit and actually generate thoughts using your higher brain. It's almost impossible to do when the limbic brain is running the show. These thoughts are very much about being in reaction to an underlying physiological state. Also, not just the brain, but the chemistry. So the feeling of lots of adrenaline and cortisol in the system will encourage thoughts of danger. Because that's what your body's telling you is you're in danger.

(01:16:15):

The thing we want to look out for is the old thought emotion loop. Really in the context of this work, it's very rarely useful to work with thoughts at all. Because like I said, they're not deliberate, conscious creations of our neocortex, they're reflexive responses from our limbic brain and amygdala, which is part of that. So we want to work with the felt sense and the emotions. Because a lot of times what can happen is we focus on the thoughts that are happening as a result of an underlying physiological state. That creates an emotional reaction, which encourages the same physiological state, which then encourages more of the same thoughts, and around, and around, and around and around we go. It's a positive feedback loop with negative consequences. So the way that we break that is by staying connected to the felt sense experience.

(01:17:16):

“How can I work with my current enmeshment issues? SBSM encourages me to get to know my boundaries and follow my impulse. However, what if my boundaries are not respected, and following my impulse is met with guilt-giving words?” Yeah. So unfortunately, this is beyond, a bit, the realm of SBSM, because the foundation of doing this work is having a safe environment. Which means there may be some relationship pruning that has to happen.

(01:17:49):

This is about a practical approach to making your environment and your relationship safe so that you can do this work. Because you cannot progress in this work if you are constantly met with real threat in your environment. Because it's not trauma that you're working with then, it's an actual thing that's present, that's actually dangerous. So we have to have a safe environment to do this work.

(01:18:17):

So yes, being firm in your boundaries can be part of that, and working with things like potent posture, following your impulse, healthy aggression, all of that can give you agency and health, a feeling of personal power. But in this case, it's going to be about taking action to basically remove that relationship from your life. Because if you can't have boundaries, if your boundaries aren't respected and if you try to follow your impulse and you're guilt tripped, that's not a safe relationship.

(01:18:50):

So this is part of what happens in this work is there is often a big pruning of relationships that comes along with it. And that's just part of the deal, because the bonds we form when we are in our survival physiology will tend to reinforce the survival physiology, the trauma bonds. We tend to attract relationships and people that are part of that milieu of unresolved trauma, and it just all bounces around. So unfortunately, that's just part of the reality is we have to look at limiting our exposure or avoiding altogether relationships and living situations that are literally not safe.

(01:19:40):

And that may mean leaving the internal work for a little while, and just getting yourself to a safer place. And there are support services that can help you do that. There are social services

at least in... I don't know, of course, about all countries. I know that in the states and in Canada and many European countries, there are social network support systems that are about helping people get out of abusive relationships and that kind of thing. That's going to be the best remedy in this situation, you've got to get yourself into a safer environment, safer relationships.

(01:20:15):

Okay. "I get overwhelmed and activated every day. I only calm down after walking for a few minutes. I try to sit with it, but it doesn't work. Am I relying on the resource of walking too much? I feel it might be hindering my healing. Any suggestions would be appreciated." So what does this sound like? Again, this is sympathetic. Overwhelmed, activated every day, try to sit with it but it doesn't work, so I have to walk.

(01:20:44):

So yeah, of course, you're mobilizing. When you walk. You're using the muscles associated with your sympathetic nervous system. So it's helping that charge get a bit of expression. So it's fine to walk, and I would encourage you to explore what else might want to happen with that energy. If you don't walk, what are some other ways? Because that energy that you're feeling is an energy of action. It needs to act. And walking is a fine resource, and definitely do that if it helps.

(01:21:17):

And what else may want to happen? So again, this is likely in the healthy aggression camp of things. Maybe there's some other way that feeling of stimulation can be expressed. Using your facial expressions, your sounds, your musculature, your legs, what might it be like to push against something with your legs or your arms instead of walking, make a little sound. Allow something to happen with the face. That kind of thing. It's a sympathetic charge that's wanting to come through.

Okay. To follow up to my last one, "would you recommend certain ways to move into action to make changes to get out of a dangerous environment?" It's a little beyond my expertise, honestly. Like I said, my expertise is in this work. But I know that there are support systems available that may involve family members, that may involve friends. It may involve some form

of social service, it may involve police. I don't know. It all depends on the situation, and what we're talking about in terms of a dangerous environment.

(01:22:44):

You won't necessarily get the same kind of support if it's someone who's emotionally and mentally abusive. Lots of times some authority figure may only get involved if it's physical abuse. But of course, mental and emotional abuse is just as bad. So it may be important to recruit your friends, et cetera, that kind of thing. If we're talking about at a nervous system level, somatic level, it's what I mentioned already. It's working with things like potent posture. What is it like to sense your boundaries to work somatically with having a sense of noticing this is me, and that is you over there. Noticing the difference between me and you. And this is my edge, this is my space. What does it feel like to take up space? Potent posture, healthy aggression, all of those things.

Okay. "I experienced fear of food, and have developed an eating disorder. I can't eat out anywhere, and I barely leave my house because of the control I need to have over food. I'm scared to be somewhere where there is no access to good food or water. I'm afraid that not getting enough of what I need or eating food will make me mentally or physically very sick. I have extreme panic before eating any food. What could be going on from your perspective, and any suggestions you might have."

(01:24:07):

Well, being scared to be somewhere where there is no access to good food or water, that just makes sense to me. That's a legitimate fear, because yeah, we need access to good food and water. But yeah, there's a lot more going on here than that.

(01:24:22):

So fundamentally, this isn't probably about food, this is about survival terror. Now it's attached to food. So there may have been a choking incident when you were a kid. This is very common. These can happen before our memory. Oftentimes when we're learning to eat, we may have an incident where we choke on some food and maybe our airway gets blocked for a while. That can leave an imprint like this. Or it may be unrelated to food in its origin, but it then got attached to food later on.

(01:24:58):

Food is an interesting one, because it is something that we have absolute control over most of the time. We can choose whether to eat or not. So it's a way of expressing our agency and a way of allowing some control over our experience. And very often, the experience of trauma is that we don't feel in control and we feel powerless. So having a rigid control over anything can be a way of asserting ourselves, our ability to choose. But fundamentally, it's survival terror that you're talking about here. There's a couple ways. I looked up, it looks like you're an alumni, so you have access to all the lessons. So I'll really encourage you to proactively work with kidney adrenal lessons, containment, gut brain lessons, the watering the brain stem lesson and the additional resources. All of those are really important to work with. If you can find a touch practitioner around you, that would be great.

(01:26:03):

Of course we know those are limited, and may not have access. If you do, that would be great because yeah, we really want to support the organs associated with these survival responses at that touch level. If you don't have access to a practitioner, water bottles or hot water bottles are a great substitute a lot of the time. So if you get to the kidney adrenal lessons, and for all the folks who are not alumni, you don't know what I'm talking about, I apologize. These are lessons we're going to get into later, working with the kidney adrenals. But you can maybe start to experiment just from what I'm saying here.

(01:26:44):

But we want to get maybe two hot water bottles, fill them up only about halfway so they're not super bulbous but a little thinner. But they're very warm, and you just place both of those under your kidneys as you lay down. And you feel that warmth, and you just imagine yes, that your kidneys are settling, softening, being supported by that warmth. The same thing with the brain stem, putting it behind the brain stem, putting them on your belly.

(01:27:16):

These are the three primary organ systems associated with early developmental trauma and being in survival terror. The kidney adrenals, the brain stem and the gut. So bringing warmth, soothing, connection. And again, if you're new, there are lessons that will walk you through all of this as we progress, but you can start playing around with it if you want.

(01:27:40):

Those hot water bottles are good, because they give you a sense of tactile feedback. And that can often be very helpful when we're working with the interoceptive process of visualizing softness, dropping, and things relaxing. Then you have something to bounce off of, this nice, warm support. So I really want to encourage you to work proactively with those.

(01:28:03):

And then the other thing I'll say is that you can work with this directly before eating. So that means you know how this charge comes up. So what might it be like? As you go to even prepare your meal, what's coming up? Now, can you pause? Can you resource? Can you settle a little bit? Can you connect to your environment? Can you allow yourself to notice the sensations of the fear, and just let them be there a bit? Maybe the sympathetic system wants to express a bit. Yeah, maybe you need to run a little bit on the spot, or press a little bit, or maybe you want to hide. Who knows what the impulse is. What would it be like to start to explore those things as part of the process of creating the food? Because clearly, the process of creating food is a trigger for the survival terror. And yeah, as you make the food, can you support yourself ventral vagally? Can you put on nice music? Can you have something that's soothing as you're making the food? Can you continue to orient around to your environment?

(01:29:27):

As you're eating, same thing. Just yeah, really seeing if you can be aware of what's happening, and either connect to something else, like we're talking about pendulation but earlier, or work with soothing the system a little bit with your resources, whatever they are. Maybe you're being really contained while you eat your food. Just different ways to work proactively in the moment with that survival terror such that maybe we can start to uncouple it from the food a little bit.

(01:29:59):

Because it may be directly about an eating experience, or it may not. But either way, we want to uncouple the survival terror from the food itself. Of course, all that being said, we want good food. Nothing wrong with not wanting yucky food, and there's plenty of that available in the world. There's all sorts of highly processed junk that's terrible for us. So yeah, nothing wrong

with wanting healthy food. But it sounds like there's a real coupling here, where there's this big survival terror charge associated with food.

(01:30:34):

All right, that is it, for today anyways. So thank you all for being here. Yeah, just keep on going, and I will see you all next week for the next call. And thanks a bunch for doing the work, and showing up and being here. So see you next time. Okay, bye for now.