
Curated Q&A Call #7 with Seth

Seth (00:02):

All right. Welcome, everybody. This is the seventh Q&A call for SBSM19. And with me are my teammates, Leah Murphy and Susan Ragazzo. Thank you both so much for being here. Good to see you and good to see all of you. Thanks for joining in for another Q&A. So we got lots of questions this week. Some of them I've put into a theme section at the beginning, and some I did get back to you via email. So starting off with this common theme, we got about two or three questions related to what are essentially symptoms of unfreezing. So things that happen as we get into this work and we start to thaw a bit out of being so numb, or constricted, or checked out, whatever it may be, we are experiencing freeze, as there can be lots of variables. But what tends to happen is we start to feel things that we haven't felt before, and some of that stuff isn't great.

(01:13)

And that's actually a sign of progress. And it's something that can trip people up, because again, I think many of you are probably starting to understand, if you're new, and if you're alumni, you know this well, that this work is a big picture about feeling a lot better, ultimately. And that along the way, it means feeling lots of stuff that's really hard, because that's what's stuck, right? That's the trauma. The trauma has been stuck in the system. The reason it got stuck in the first place is because it felt awful. And then you take something awful and you compress it for decades. Yeah, when it starts to wake up and speak through the system, it's generally not going to feel great. So experiencing things like symptoms, some symptoms getting worse while other things get better. Both people who wrote in, that I'm thinking of, stated that, like, yeah, things are improving, feeling more regulated, feeling more capacity, and these things are happening.

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And that's really common. That is the sign that yes, yes, you are becoming more regulated. You are getting more capacity. You are unfreezing. You are getting more in touch with what's

happening inside, and some of that is difficult. So there could be heightened sensitivities for a period of time. There could be new reactions to foods that never happened before. There can be sick feelings like not really being sick, like no temperature, but just feeling achy, feeling kind of like detox'y, because that's a thing that happens as well. As we become unfrozen, as we get a little bit more regulated, as our system starts to be able to do more of what it's designed to do, such as rest, digest, repair, that means we have better ability to detox. So lots of times the fascia itself may be holding toxins. We may be holding toxins in our organs.

(03:17)

So, fascial bracing, for example, might come undone. As that happens, which is really good, we might feel really achy. We might feel really sore. We might feel kind of flu'y because the fascia is coming undone. It hurts and feels sore as that happens, as we get more mobile, and anything that we have been holding in those tissues gets released. We may get rashes. We may get strange experiences of all kinds that feel weird. We may have unfamiliar symptoms pop up. This is actually, again, a sign of progress like, "Ooh, something new is happening. Great. That's good." So with all of this, one thing that's really important is to understand, okay, yep, this is normal. This is part of what's supposed to happen. If you do feel really worried, of course, you can always get yourself checked out. You get your blood tested, you can go get an exam.

(04:16)

Usually when you do that, they won't find anything, and you can sometimes end up on a merry-go-round of specialists that don't find anything. That's a common story, too. So just be mindful of that, because usually what's happening is not that detectable to the Western industrial medical system. So that is the reality of unfreezing. Let me just check my notes here. Ah, old injuries. That's another thing. That's something that I'm actually working through right now. I have had many falls on my tailbone as a kid, and as a young adult. My right hip was very compressed and locked up for all my life since those injuries, anyways. And in the past two months, that has been opening up the hips. And man, so painful. Yep, my right hip, my whole leg is basically rotating to its correct position. As that happens, all the stuff that was stuck and keeping it bound is having to stretch open.

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So tons of pain, sometimes feeling exhausted, sometimes feeling flu'y, a little bit. All the stuff that people talk about. I'm experiencing it right now, because that old injury is finally able to heal. This is one of the miraculous things about this work, is like even once one becomes regulated, which has been the case for me, at least for a few years now, you keep finding stuff, usually depending on your history. And it's like, okay, all the big survival energy stuff that's been dealt with. Now these really deep old injuries and things that were never addressed, they can start to heal. And again, yep, that can feel very painful. So what's important is how we relate to these symptoms, how we relate to these aches and pains and new things coming up. We want to, if we can, just kind of be like, "Oh, okay. Yep."

(06:19)

"Yep. Welcome, welcome. You're the stuff I was never able to feel. These are the things that I wasn't able to be present with. Doesn't feel good, but I really want to make space for you. You're welcome to be here." This is kind of this attitude of, "Yep, I'm embracing discomfort, because I know this is progress." It's not easy, for sure, but it's important to keep going and not just stop. And because that does happen if people are new at this work, they don't fully understand it yet, you could start to unfreeze and experience these things and be like, "Oh my God, I'm getting worse. I better stop. This isn't working. It's making me worse." And that's just because of the lack of education about what is involved in this work. There have been times that I've said this, and then other clients say this, where it's like, "I want my freeze back." It's like, "Yeah, I was numb, and couldn't function much, and I had autoimmune conditions, and all this stuff, but hey, at least I wasn't feeling all these aches and pains and sick, and oh my gosh, what a pain in the butt."

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"Give me that freeze back." But it's like, yeah, well, sorry, you're on the train now, so let's just keep on rocking. All right. So going on to individual questions. "Hi, I'm an alumni with early developmental trauma. I used to be a people pleaser. Due to this work, I stopped the pattern of doing favors for others, but I still keep finding myself that emotionally in relationships I

swing towards more empathy than my system can actually handle, instead of setting boundaries. So I'm still repeating my old pattern. What are the somatic tools that can help me shift this? I've realized that the pleasant feeling of connection can actually mean that I overrode myself, and started to merge with another." So, lots of really great self-awareness in this question. Good that you're noticing all this. I mean, that is the key. Of course, first and foremost, notice what's happening, and you're doing that.

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So, fantastic. Now, there's a few things here you're already noticing. So, like you say, I'm feeling that this pleasant feeling of connection actually may mean that I'm kind of merging, or being overly empathic in a way that's not holistically good for me. So there's a signal. There's one of your somatic signals, that kind of pleasant feeling. That's a moment in which to stop and say, "Okay, hold on, what am I doing? Do I need to become a little bit more boundaried? Do I need to think about having a little bit more of a personal bubble here being more contained?" And that's one of the somatic things you can do, is potent posture is sort of the base of this. So really working to get into this potent posture, feeling your ability to be well supported by your bones, the strength of the bones, is very important.

(09:19)

That's kind of part of having access to boundaries is feeling the support of the skeleton. So it's like the muscles don't have to strain, and you can be in potency, right? That's very important. So start with that, and then start thinking about how that can translate into a bubble. So how big is your bubble? How big do you want it to be? You can sometimes use your hands and your arms as part of this. So maybe you'd feel like, okay, here, here's my bubble, right here. And you sort of feel that. You paint it with your hands moving from a place of potency, being well supported by potent posture, and kind of feeling how you can have that around you in an energetic sense. And once you get a sense of your bubble, you can play with it. And you could, for example, think, well, what's it like if I think about - my bubble is here, and it's extremely rigid.

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No one is allowed in here. This is like a translucent steel that no one can pass through. What's that feel like? What's it feel like to think about, oh, my bubble, I'm going to intend, allow that it's permeable. People can come in. It's okay. I'm going to welcome them in. It kind of sounds a little esoteric, but it does convert into a sense of your energy, your agency. And as you get better at this, it can be actually very interesting to play with, like walking down a city street, for example. Notice how people respond to you. If you're holding a bubble of steel, no one is allowed in, versus you're holding a bubble of welcome, you can pass through. It actually can be quite fascinating to see how people move around you, move past you. People will sense this. So it's something that takes practice, but that is something that you can work with somatically, and with your intention, with your energy.

(11:22)

And you would want to then employ that. Like I said, maybe you start to sense like, "Oh, I'm feeling that 'mergy' feeling. I need to think about my bubble being stronger. I need to think about it being a little bit more rigid." Or perhaps you want to access more vulnerability in a certain situation with a certain person, because they're safe, and you can intend like, "Oh yes, this person is welcome. This person is welcome in." So it's about boundaries. It's about recognizing your boundaries, and how you can implement them. That's one part of it. Another way to work with that is, again, sort of out in public, as sort of an experiment. You can just sit somewhere that's kind of maybe busy, like a park or a mall or something like that, and just notice how close does someone have to get to you for your system to start saying like, "Oh, something's happening."

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"Someone's approaching. This, maybe, isn't safe." Just as a way of awareness for yourself, what is that bubble? And does that change if you then think about, no, this is my space. I'm in my solid, translucent, steel bubble. Does that help mitigate your sense of sensitivity with people passing by, passing through? So a lot of this is about self-investigation, sort of experimentation, and kind of playing essentially with your sense of your personal space. Now, another thing

that's really important in general when we have a pattern of people pleasing is reconnecting to our authenticity, because that is generally what is suppressed, right? If we're in a pattern of doing what we think other people at least want from us, that means we're not being fully authentic, necessarily. So the best way to build authenticity is to start with your biology, because your authentic biological impulses are the doorway into your authenticity.

(13:25)

It's in your body. So we start with the basics, like the follow your impulse lesson, revisit that maybe, but really just in general, like honoring the basic impulses. So again, drink when you're thirsty, pee when you need to pee, don't sit there and hold it. True with elimination and consumption in general. Stop eating when you're full, really pay attention, eat when you're hungry, even if it's not, like, the right time, et cetera. Really honoring the biology, and what you hear from it. That is your authenticity. That's the root of it. Now, there's many layers to authenticity. There's our personality and our, if you believe in it, a soul, our nature, just our essence, who we are, that all can be discovered. But in my experience, the most powerful, effective way to discover that is through the biology, through the body. And as we learn to listen more and more to our impulses, these basic biological impulses, we may get more and more refined in hearing different kinds of impulses.

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So for example, you just go for a walk with no destination, and sort of just think like, "Well, where do I feel like going? Where does my body lead me?" That's a way of listening to a sort of more subtle impulse. So, biological impulses, working with boundaries, that kind of stuff. I think that's it for this one.

(14:57)

Yeah. Okay. "I'm noticing a deep ..". Oh, and this question is, I almost put these two together as a common theme, but they're different enough that I'm answering them separately, but there's some similarities here. "I'm noticing a deep unsafety and tensing around men. For example, when I pass men while I walk to work, I feel I'm being viewed as a sexual object by men. I had

some bad personal experiences, like groping, when young, a narcissistic ex, a brother-in-law who pushed sex. I didn't let him do anything, but I haven't told the family either. And also just general unsafety as a woman in this culture and society, for example, Epstein-Files, Rape Academy, et cetera, suggestions on working with constant stress and unsafety from just being around men.”

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Okay. So this is a complex one, because there's past trauma here, and also you're not wrong. This isn't like an example where it's like, "Oh, I'm just triggered because of my trauma, and I'm imagining this." No, you probably are being objectified by men on your way to work. There is a toxic culture like that. I certainly received that programming as a man myself, unfortunately, and have had to work a lot to not do that. It's like the imprinting is strong, and it's rooted in base survival drives of sexuality and reproduction, which are really powerful. So it can take some work to undo and challenge that imprinting as a man. And I don't think there's a lot of men doing that percentage wise in our cultures. So this is a case where you are perceiving probably accurately, and that perception is probably made more alarming, more scary, and maybe sometimes maybe exaggerated a little bit because of the past wounding, because of the past trauma.

(17:01)

So it's a yes and. It's like, yeah, there is actual unsafety like that, and it may feel even worse, or you maybe feel a little bit more disturbed by it because of the strength of the past trauma working in the system. So there's a couple things I was thinking about. Same as the last question, that boundary exercise, steel boundary, no one is welcome. This is my bubble. Get the hell out. Same kind of deal. Really practicing that as you walk to work, imagining this impenetrable shield around you, and also bringing in healthy aggression work in working with the past experiences of violation. So there, of course, is, anytime our boundaries have been violated, there's going to be self-protective responses that often didn't get to happen in the context of trauma. So how might you have wanted to have pushed people away, to snarl at them, et cetera?

(18:10)

This is not about polite behavior. This is - what does the animal self want to do, maybe, in these situations, that maybe you couldn't at the time. That's the essence of the healthy aggression work and the annihilation work. So again, these are high energy practices that you need to have capacity for. So always be mindful of your capacity as you enter into healthy aggression work or annihilation work, because it's big, but that will likely be necessary as part of your process here in working with the past experiences. And for the present experiences, like I said, those boundary exercises are going to be really important. Feeling a sense of potency, physical fitness, pretty darn important in feeling a sense of agency, feeling that you can run, you can fight. Even some forms of martial art can be really supportive for women, especially in this culture, I think, to have some knowledge, at least, of how to get away, how to strike somebody if you need to.

(19:20)

Hopefully you would never need to. But having that sense of agency and ability, like just knowing how to throw a punch, which is not simple, that is something that can be really helpful. And for everybody, I think. I'm not an advocate of violence at all. Never been in a fight in my life ever. I never want to, but I've done boxing for eight years, and it was incredibly important. Just training, not actually fighting, to develop the ability, the internal knowledge of, like, "Oh, I know how to defend myself." It's pretty important. So if you have a history of having this unsafety, and yeah, you're right, this actually is a thing. Having that sense of personal power, agency, any way you can cultivate that and support that is going to be important.

(20:18)

All right. "I had a big work presentation and my system could not exercise any of the SBSM lessons or find grounding. I became severely dissociated and had no access to my ability to think and articulate my opinion, even for topics I have knowledge of. Any suggestions on how to solve this in a high stress situation? Related to this, can you suggest any exercises for the three diaphragms in the skull? I feel a strong constriction in my head that feels like it disconnects me from my brain and ability to think." Okay, so two kinds of parts to this question.

I'll do the first part first. So when you find yourself in the state you describe, the train has already left the station. It's like you are in survival mode in that moment, and to try to give any kind of presentation from that place is pointless.

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It's probably not going to work. That's a situation where you essentially, and if you can, from a biological perspective, you need to say, "I'm sorry, I can't do this right now. I need a moment," and go take care of yourself. That would actually be really kind to yourself and your physiology, and it also could challenge the expectations of your workplace and what your boss wants from you, et cetera. So I understand that may be a tricky needle to thread, but yeah, it's really difficult to effectively give any kind of presentation or speak when you are basically inside running for your life, because that's the state you're in. You're in a full-on survival response. So I would say doing this kind of thing right now sounds like it might be actually just beyond your capacity at the time. That doesn't mean you won't be able to in the future, but right now, maybe not the best time for giving those types of presentations, until you develop the capacity to stay a bit more present.

(22:24)

At the very least, if you find yourself in this type of state, again, one thing to remember in general with this work, the more chaotic and survival energy we are feeling, the simpler we want to be in what we do. It's not the time to get all fancy and breathe into the diaphragms and think about healthy aggression work, and not like none of that. No, no, no. It's like, can I feel my feet? Am I breathing? Can I see the room around me? That's about it. Just simple basics of presence. Now, that is something that you can work with as a way to sort of train your system to be able to do this more. So for example, say you have this presentation you're supposed to give, you have the notes still, you have the material, practice just doing it by yourself and feeling these basics, like, "Can I say these words while feeling my feet, and stay connected to my breath, and see where I am?" That can be difficult even on our own sometimes.

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And then, okay, I can do that. Can I do this? And I'm speaking it to my house plant here, and it's like, okay, there's a living being that I'm speaking to, or pet. Okay? Give your presentation to your dog, if you've got one.

(23:56)

Or safe people. Is there one safe person that you can say, "Hey, can I practice this with you?" And just then you try that, see if that works. You could titrate your exposure to being witnessed, essentially. You could use the mirror. And again, during all of these explorations, stay mindful of your potent posture, your feet on the ground, the support from the environment, the environment around you that you see, your breath, somatic basics. Now, you may want ... I don't know if there's any connection here to past experiences of public speaking. Perhaps there were past experiences of speaking where you didn't want to be there, and you really wanted to flee, and get the hell out of there, but you couldn't. So again, there may be past experiences to revisit or not. I'm not sure. But if there are, then working with those memories, feeling into what did the body want to do in that, maybe I wanted to crawl into a corner and hide.

(25:07)

Maybe I wanted to run the hell out of the auditorium. What would it be like to feel how you can now do those things? Remembering somatic experiencing, right? It's about experiencing the body and having a different experience than what happened originally. At the crux of it, that's what the work is about. This is what happened during the trauma. This is how my body responded. This is the experience I had. Okay, that's still in me. I can revisit that moment and have a different experience in my body through the tools I have access to now. I can stay present, or I can run, I can mobilize, I can crawl into that corner and hide. I can then get up. You can be creative. What kind of experience would be restorative, reparative? What wanted to happen then that couldn't, that you can do now? So if there's any history like that, that could be important to explore.

(26:05)

And then this is a little bit more advanced, but when you get to the place where you feel like you can be present at least, and speak, and give a presentation to a group of people, but say there's still a lot of nerves, and that's normal. The most experienced presenters in the world, a lot of them will tell you, like, "Oh yeah, I still feel nervous every time." Athletes, same thing, right? Anyone who's performing on a public stage of some kind, usually will always have nerves. That's part of it. What makes a person successful is they learn to make that part of it. What really doesn't work is trying to suppress that and be okay. So what you learn to do is, I'm going to make my nervousness part of it. I'm going to let that energy come into my voice. Maybe my voice is a little shaky at the beginning.

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You could even say, "Oh wow, I'm feeling a little nervous." Name it. You make it part of it. You make it part of the experience. You play with it. And what can happen is over time it just becomes energy. As the fear gets uncoupled with more experience, it just becomes energy, and it actually can make you more dynamic in how you present.

(27:19)

All right. "I'm now two years into SBSM. Trauma happened at the time of conception, with shock in my mother. Since one year or so, I have intense burping daily, but no emotions like grief or anger have shown up. I heard the central line can be very constricted with early developmental trauma, and block feelings from passing. I believe my spine is very constricted. Can this burping be related to the spinal compression? And is it that feelings can take a long time to move with spinal or central line compression and constriction?" Okay. So I'm not tremendously familiar with the concept, and I understand the concept of the central line, but this idea of central line spinal constriction specifically, yes, I'm aware of it, but I'm not a specialist in that area. Specifically, Stephen Terrell does teach from the viewpoint of the motor reflexes, the early primal reflexes, spinal reflexes that are part of early developmental trauma.

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I haven't done that training yet, but I have a rudimentary knowledge of it, but I think that there may actually be a bigger picture thing happening here. So it could be that this is just about the burping, could be related to spinal and central line constriction, but it also, I think, is more likely that it's related to stress, chronic stress or trauma in general, associated with early development. So, during the early developmental stages, even in utero, it sounds like in conception there was a shock, perhaps there was unresolved trauma and stress in your mom in general, that was in the field as you were in utero, as you were born, and as you were developing, because what it sounds like is that's what happened, that as you were developing early reflexes, there was stress in the environment that made that difficult. And it may actually be more related to the sucking reflex than the spine, because it's when the sucking reflex develops that we learn to coordinate between swallowing and breathing, because those two tubes, the trachea and the esophagus, are right next to each other.

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And so it takes some practice and some coordination to learn how like, oh, this is when I suck, and the liquid comes down the esophagus And this is when I inhale, and the air goes down the trachea. And it sounds like what's happening is you're swallowing air. You're swallowing air down the esophagus. And that is indicative of an interrupted, or problem with the development of that sucking reflex, is my hunch.

(30:24)

Yeah. So that reflex, the sucking reflex is initiated by contact with a roof of the mouth. So that could be one thing to check out. What happens before the burping starts? Does your tongue go and touch the roof of your mouth? That's one thing to look for. And in general, to look for the prodromal experiences. That means what happens before the thing that happens? So if burping, unsort of uncontrollable burping is this thing that occurs, what was going on just before? That's kind of what you want to get curious about. And start to see as you get curious about that, and you find the things that happened before, what happens as you spend time with that? So say that it is, say your tongue touches the roof of your mouth before the burping

starts. I don't know if that's the case. Then you would want to get really curious with the movements of the tongue, and sort of feeling, what's it like if I approach the roof of my mouth with my tongue, but I don't meet it.

(31:27)

And then I come back away. Or if I very deliberately, intentionally allow my tongue to rest on the roof of my mouth, and then I bring it away, and I'm mindful of my breathing, that I'm breathing through my nose while I'm doing this. Those could be a couple things to explore. I don't know exactly what the prodromal experience is, but there'll be something. Another area to look at is what's happening in the diaphragm, what's happening in the abdomen? Are there any feelings of constriction or things happening in there while this is happening or before it happens? Also, sometimes it can be useful when there is this confusion around swallowing and breathing, just to look at anatomy, just to see pictures of, like, oh, there's the esophagus, there's the trachea. Those are two separate things. As an adult, to visualize that and see if it can be a helpful kind of cue to help you know, like, "Oh, right."

(32:28)

"Yeah, yeah, yeah. Okay. These are separate things, because it sounds like there's some confusion about that in the physiology." Just checking my notes here.

(32:43)

Yep. Now, in terms of, can central line spinal constriction block feeling, in general? For sure. Any kind of tension or constriction in the system generally is associated with some kind of emotion or sensation being repressed, and sort of packaged up. So if there's a lot of constriction in the central line, by central line, we essentially mean the inside of the spine, the spinal cord, the dura, which is this sort of membrane that surrounds. There's the fascia, the spinal muscles. All of that could be part of this. So yes, that can potentially stop feelings. What I would be interested in perhaps is working a little bit more from the outside in. So the diaphragms, for example, that could be really important. Oh, and that reminds me, I didn't ask, go back to that. Working with the diaphragms, working with just bringing in a sense of space.

(33:49)

But you also could play with the spine, exploring different postures, doing this laying down, so sort of revisiting babyhood. So the Feldenkrais lessons might be quite interesting to explore as part of this, which are in the later labs, specifically rolling like a baby, and gentle head rolling. Both of those could potentially be quite useful as ways of working with the spine more directly. And then I just realized, when I said the diaphragms, I didn't answer about the diaphragms in the skull, from the last question. So yes, if you go to the diaphragm lessons page, the first one, you'll see there are three diaphragms in the skull. That is the bottom of the skull, and the jaw essentially is the bottom one. The middle one is the tentorium, which is like a little trampoline, like a little shock absorber that goes around here, and then there's the top of the skull.

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And so the way that you work with them is the same way that you work with the diaphragms in the body. They're like a mirror of these three down here. The pelvis is like the bottom of the skull. The respiratory diaphragm is like the tentorium. The top of the skull is like the shoulder diaphragm. So it's the same thing. Just listen to the diaphragm lessons, and you apply that to whichever ... So like say shoulder and the respiratory diaphragm lesson, that is top of the skull and tentorium.

(35:17)

Respiratory and pelvis, that is tentorium and bottom of the skull. So it's the same kind of deal. And you think about just feeling these chambers, breathing, bringing in space, imagining that tentorium kind of flexing up or down, et cetera. Same kind of deal. And also sometimes if there is pressure in the skull, it also can be useful to not focus on the skull, to focus instead on the feet and the legs, to bring your attention down, and connect to the earth.

“Hello, I'm an alumni, fourth year. I'm going very slowly. I likely have early developmental trauma. I'd like insight on working with the jaw and face. The right side of my face feels and looks weaker. I have lots of stuckness in my right shoulder and neck, and have bruxism.”
Bruxism is just a fancy word for grinding the jaw, grinding the teeth. “I wake up braced and

sore through most of my body every morning, and that side of my face feels extra frozen and weak in the morning.”

(36:32)

“My osteo suggested I may have Horner syndrome. Do you have any insights and recommend exercises, and any other supports?” So, Horner syndrome, I had to look this up. It is damage to the sympathetic nerve that runs through the face. I mean, I suppose that's possible, and I imagine there'd be a way to see if that's the case, but it also is highly likely that it's not really like a syndrome or damage. What I'm thinking is it's probably that sympathetic system in general is repressed and constricted, because when we have grinding of the jaws, that is almost always about incomplete self-protective response, aggression, wanting to bite, literally wanting to defend yourself with your teeth, to bite and to shred, et cetera. So that is indicative when we have that, that like, oh, our self-protective responses are maybe sitting in our system still wanting to happen. That fight response may want to be expressed.

(37:47)

And so again, the healthy aggression work, the Voo and the Voo lesson, really, especially the Voo, which has you open the jaw, playing with that in a very titrated way. There's a video in the extra resources where I actually demonstrate that in that lab, I believe, or it might be on the Voo page. So I believe it's called Titrating the Voo. That could be an important thing to visit, and just start working with the jaw, working with mobilization in that way.

(38:28)

Now, the other side of things is supporting softening, supporting softening through those structures. I have a sense that perhaps the bell hand lesson could be useful for you, and that might be something to explore. Again, that's in the later labs, I think maybe lab nine or eight, bell hand lesson. Kidney adrenal work, watering the brainstem, gut brain connection, just working on ... Anytime we're working with supporting aggression and allowing this big high energy like stuff to come out and be expressed, we also want to be supporting softening, containment, the system settling, the other side of things as well. That's part of supporting the

capacity for the sympathetic energy to move, is also increasing our access to the parasympathetic stuff, the softer stuff.

(39:27)

Working with facial expressions in general could possibly be supportive. There may be things that your face muscles have wanted to do that they haven't been able to do. Expressions they've wanted to make, words they've wanted to say, just, ah, playing around with all the different ways. Ah, all this stuff can move. There's all these muscles and things that can happen through here. So, allowing yourself to explore that. Look a little goofy. See what it's like to witness that in the mirror even, to see yourself making some faces and allowing these things to mobilize. Oh, we can do a lot with this stuff. These muscles can be very expressive, and perhaps there's some expressions that are wanting to happen, or some words that are wanting to happen.

(40:22)

Oh, and the final thing, I have a link I saved here. It could be interesting to explore our colleagues' work. Savannah, she is a master of working with fascia, and she developed this playlist that's all about working with fascia on your own. So, I will put the link in there. And oh, I see that. Can you put the link for Seth's Voo Ahh demo? I think ... Aha. Okay, great. Yeah, it looks like it's on that page, Stimulating the Vagus with Voo. Can you check, Leah, and see if my little ... Is my supplementary thing on the same page? It is. Okay. No. Okay. Check the extra resources. There's a supplementary video that's like Titrating the Voo, or something like that. Awesome.

(41:33)

Okay. So, that playlist I just put in here, that could be an interesting thing for you to explore as well, just working directly with the fascia in the face. Oftentimes, if one side is very weak, that can be indicative of constriction in the other side. So, it could be interesting to explore this. And yeah, I'll put, of course, the resources, anything we mention on the call will be linked on

the replay page. So, you don't have to go saving all these links right now. We'll put them all in the replay on the site. Okay.

(42:27)

"Hi, Seth. Second round here, with early developmental trauma. I broke, in quotes, when I was around nine, much because of my mother. From being an ADHD child, I became timid. Fearing another mistake would freeze me out of the family. Mother was often relentless and hard, and also the super victim. Working with anger towards her often brings fear, shame, feeling like a perpetrator, and then guilt. Also, her unknown sexual trauma is embedded in me." Okay. So, this is complex. Sounds like there is a lot of wounding and complexity around the attachment dynamics here with your mom, and with your family system. Now, yeah, of course, working with anger, healthy aggression, the annihilation work, all of that is probably going to play a part here, but right now, it sounds like as you move towards working with anger, your system collapses and goes instead into that first feeling, like shame, fear, feeling like a perpetrator, like, "Oh, I'm feeling like I'm hurting my mom." It sounds like feeling guilty then.

(43:48)

So that's sort of going into a bit of a collapse instead of really being able to move into that aggression. So I think that it'll be important to work with differentiation. So, noticing the difference between things. Have a read of that annihilation article, but don't practice it. Just read it, but don't actually do any of the work, and read the part especially that's about differentiating between the internalized abuser and the actual person, because that I think will be helpful as a first stage of this work. Instead of actually going into the anger work, learning to recognize like, "Oh, this impression I have, this imprint in me about my mom is kind of like, yeah, this monster that's still living inside me, that I'm afraid of, that I want to fight, that I'm angry at." And then there's the actual person who's just an imperfect human on their own journey, who didn't get the support that they needed to heal the stuff that they had, so they passed it on to you.

(44:49)

And generally speaking, when we go into annihilation work, it's normal for feelings of guilt, or I know I can't do that, or fear to come up. And that's when we need to understand, like, "Ah, no, this isn't the place for that." Those feelings go over here with the actual person, because of course you don't want to actually hurt your mom. Of course, you don't actually want to destroy anybody. It's like, no, those feelings are appropriate, and they belong over here with a real person. I'm interfacing with an imprint in me that is not the actual person. This is something that is in my energy. It's ultimately my energy that's wearing my mom's face. And that's the crux of the annihilation work is you're not destroying anybody, sending bad vibes to anybody, you're liberating your own energy that has been imprinted by trauma. And so differentiation will be important.

(45:47)

And I think just to support that, noticing differences in general, which can sound really simple, but literally being intentionally noticing like, "Oh, that is a different color than that. That is a different texture than that." Simple things in your environment. How are things different - could be useful for your system as part of this process?

(46:19)

Now, I had another idea here and I almost was like, "I shouldn't share that. I don't know about that, but I have a sense it could be useful." It's also potentially problematic, but I know you have this thing where you say her unknown sexual trauma is embedded in me. There's this thing of her playing the victim, and you have this experience of feeling like a perpetrator. So on one level, I'm wondering if, would it be useful to see yourself as a protector of your mom? This is 180 from the annihilation work, it's like there's your actual mom who yes, it sounds like was deeply wounded at some point, or many points in her life. What would it be imagined to get into your potent posture, work with that, and really visualize yourself as standing in front of her, as this protective figure. Should you feel like you're a perpetrator?

(47:22)

Should these things arise like, "Oh, I'm feeling shame. I don't want to do this." Okay, I'll be a protector of the real person. Now again, this is potentially tricky, because your mom was supposed to protect you. So that's my hesitation in suggesting this, because there could be a rebellion against this. I'm not going to protect my mom. She's supposed to protect me, and that's true, but it also sounds like there's some tricky stuff happening in there, that maybe it would be useful when feelings of being a perpetrator, or feeling shame, or feeling fear towards working with this dynamic arise, to allow yourself to see yourself as a protector. Maybe even it's not the mom of your lineage, right? When we do this work, that is what we become. We become the guardian of our lineage, essentially. We are the ones that are taking all the stuff and crap that's been passed down through the generations that no one else was able to heal.

(48:22)

You're the one that's doing the work, not just for yourself, but your whole family line all the way back into time. This is all the stuff that's been passed down that hasn't been addressed. So you are literally a protector and a guardian and a healer of your lineage. So some way to embody that, see that, visualize that could potentially be useful.

(48:47)

Okay. Let's take a little pause. I've still got a few more questions. So let's take a little break and allow yourself to come away from the screen to stretch and move and get a drink of water, whatever you want to do, and we'll be back in like four minutes or so. Alrighty. Welcome back, everybody. So before I move on, I just want to clarify. So yes, the supplemental video I was referring to is on just the Voo page. It's there towards the bottom. Wow, and there I am with when my beard and hair was still all dark. My goodness. So yeah, that must be about nine, eight, nine years old, that video. And there's also, if you haven't watched it yet, on the same page, there's an amazing Haka video that I highly suggest watching. I was talking before about giving yourself permission to make faces.

(54:04)

That is a really important video to watch, watch the vitality in the faces they allow themselves to make. A lot of us just wouldn't consider that you can let that stuff happen. You can let your eyes bug out. You can look psychotic, you can look murderous. You can allow these things to move through and it can be incredibly empowering and loving, which is the amazing thing about that Haka video. It's, like, so touching and moving and powerful and aggressive, and like all at once. Yeah. So definitely check out those videos. And then a video in the chat, or sorry, a question in the chat. Someone had asked, because I was talking about, as a woman, exercising, getting more strength, maybe even learning some kind of martial art, learning how to throw a punch, that kind of stuff. What if you're a woman with disabilities or health issues, and you can't do that?

(55:00)

Then I think it's more about the energetic side of things I was talking about. Really, you can be fierce, and with your energy like I was talking about, and really learning to have this bubble around you that's just like, no, you can be very strong with your words. Unfortunately, there are unsafe people, always, in the world at this point. So again, learning to listen to your impulses is also what can help you avoid those situations entirely. Your body will tell you that don't go that way, go this way. As you learn more and more to listen to your biological impulses, that knowing is in there. So that is another important part. And yes, and I will say anyone can learn to throw a punch. Again, this isn't about fighting. It's about learning. Unless you don't have movement of your arms, of course. But if you have movement of your arms, you can learn the form of what is involved.

(56:05)

And it doesn't have to be a big, intense workout, but just learning some basics of form, almost anybody can do that.

(56:16)

And you can do that in your own home. You can do that with YouTube videos. You can do that. There's all sorts of ways. I imagine you can get private instruction, you don't have to go to the gym. I think it can be useful even if it's not like a practical thing that you would ever actually do. But yeah, I think using the energy, using that sense of my boundary is impenetrable, learning to develop that sense of agency. Okay. Moving on. "I have complex PTSD. I was emotionally neglected, parentified, and sent to soothe dad during conflict. No memories of how I soothed him. I vomited alone at age seven, which felt terrifying. Now I have emetophobia," that's a fear of vomiting, "which I have always felt deep shame towards. Implicit memories are surfacing of possible physical and/or sexual boundary violations. How can I work with this safely and titrated?"

(57:26)

"I fear triggering a disgust or vomiting response."

(57:33)

Okay. So this is one of those situations where we don't know what happened, but the body does, and it's starting to speak up. So really listen, and listen to what those memories, somatic memories are. Listen carefully for any impulses that are coming, any emotions that are coming, and allowing them to move the best you can. It's possible that working one-on-one for a bit with someone around titrating the disgust response could be useful, but you can certainly do it on your own, starting to get familiar. But I think one thing that could be useful is just working with a bit of a ... I don't even know if it's a reframe or just a different way of looking at it, but if we vomit, it's because our body got rid of something that was toxic. It's a good thing. It's intense. And as a seven-year-old, to have that experience on your own is terrifying, for sure.

(58:43)

And can you start to not invalidate that? And at the same time, as an adult, recognize that, oh, if I vomit or I'm disgusted, it's because my body is wanting to avoid or get rid of something that's not good for me. Just really understanding that mindset could be potentially useful as

part of this. Also, titrating the expressions of disgust. So really moving towards those slowly. If you decide to do this, again, you could do this with a practitioner, you could do this on your own, but maybe it starts by just feeling that, just a little ... The upper lip raises a little bit, the nose wrinkles a little bit, like the very first early impulses of disgust, but not going into a full-on expression at all.

(59:44)

I think it also could be useful to connect to the esophagus and the stomach as a source of nourishment. Again, this is sort of a somatic reframe. It sounds like there is a lot of intensity and negative associations with these somatic pathways, the stomach and the esophagus and the mouth. So really intentionally maybe connecting to those areas with an intention of noticing nourishment. So for example, maybe that is simply having a nice lovely cup of tea and mindfully, slowly sipping it and just feeling, like, have the liquid be just the right temperature, the taste, whatever, really nice, pleasing flavor, whatever your favorite tea is, or beverages. I suggest starting with liquids rather than foods like solid foods might be better, but maybe solid foods would be better for you. But whatever it is, connecting mindfully and slowly to the process of taking in nourishment, of taking in good food, good liquid, feeling how you can swallow, and that's a good thing.

(01:01:02)

So again, it's sort of a somatic reframing of these passageways, these structures. I guess the big picture question is we don't maybe know exactly what happened, but since you're starting to get these somatic memories, you might want to start inquiring into your body again, like, "Okay, well, what didn't happen that wanted to happen?" That's again, a lot of the essence of working with a somatic experiencing approach. What did my body want to do that it couldn't do? And that's information that may become available through impulses, even if you don't know what happened cognitively. The impulses towards movement or expression may arise organically as the memories are surfacing.

(01:01:54)

And finally, I think maybe further down the line, again, the Voo, the Voo could potentially be useful, be very titrated with the Voo as you open that passageway, and maybe important to do these other things first, like bringing in some positive associations, et cetera, but eventually those lessons could be useful as well for you. “Hello. I experienced a sexual and spiritual trauma by a therapist in 2019. I experienced sheer existential terror, which made me crash badly due to early developmental trauma and years of deep anxiety or depression, and anxiety and hormonal issues. Since then, I've been unable to hold down a job, and by now, physical sleep and health issues are much better through various interventions, but the terror and some symptoms still surface often, and I feel too scared to commit to anything, because what if I can't sleep or function the next day?”

(01:03:02)

“Any ideas of how to break out of this seven-year fear loop?” Okay. Well, it sounds like you're already doing well, and that things have improved in general, which is great, but there's still this deep, deep fear, this deep terror you're sensing in your system.

(01:03:25)

Eventually, you'll probably want to work with mobilization, allowing the fear to express through the body, working on feeling the feelings of that fear while staying present. That can be pretty hard. That's one of the harder things in this work. But I think first, it could be pretty useful to work on the other side of things, which is really supporting parasympathetic dominance. So all the principles of touch work. If you could get some touch work, that would be amazing. I'm going to put the link in for the touch practitioner site. Again, they're kind of hard to find sometimes, but I'll put this in here just in case the one happens to be near you. And again, of course, this will be on the replay page.

(01:04:25)

Okay. So the principles of touch work. If you can get actual touch work, great. If not, do all the lessons that are based on those principles. So the containment lessons, the kidney adrenal

lessons from labs four and five, gentle head rolling could be one, the gut, brain awareness and intentions lesson. Those are both from lab seven. And also watering the brainstem and the additional resources, which I believe is out next week. If you're new, if you're an alumni, it'll already be available. All of those, I would make sort of your go-to. And again, remembering, with these lessons, of course, you don't listen to them as much as you want, especially if they're soothing and help promote safety. Great. And remember that the idea is to learn these as skills that you have access to all the time, right? So that you don't have to go to the lesson, you don't have to hear Irene guiding you.

(01:05:30)

You can just allow your kidneys to soften. You can just think about your brainstem getting watery. You can become aware of your gut and connect to it. We want to be able to develop the skills to do all this in real time, in the moment, without having to go to the audio lesson. I want to keep on reminding people of that, and also that it's fine to use the audio lesson if you want to. Whatever's going to support a sense of greater safety and settling and soothing, really focus on that for a while. It sounds like your system could really use that, and that's going to help build the capacity to feel and mobilize the terror and remain present. When it comes to actually working with terror, there's, again, a couple ways. What wanted to happen? What can happen now? So maybe you want to run, and you can do that.

(01:06:26)

With fear, if we're really feeling it, sometimes we'll want to just run while sitting. So you're just sitting, but you let the legs, the legs are fully running, and it can be useful to combine that with visualization. So what is it you're terrified of? Allow yourself to get an image of that. As your legs are running, see yourself successfully getting away from that. So you're putting distance between that thing and yourself. You're running, you're running, and there in the distance, aha. There's your safe haven, whatever that is. This is all imagination, of course. But imagination combined with mobilization is incredibly powerful for creating new somatic experiences. So I'm running, I see the thing, okay, I'm getting away from it. Yes, I'm getting away. And there in the distance, my legs are running. I see the - I'm going to get it. I'm going to get there.

(01:07:20)

I'm going to get there. I'm going to get there. And you see yourself getting closer and closer and closer, and your legs are going, and your heart's elevated. And okay, I'm breathing a little bit now. And okay, I made it. And you see yourself arriving in the safe haven, and you sort of time it such that that happens as you can't run anymore. You really let your body use the flight response that has been stuck. Because remember, fear and terror, that is meant to power action, just like anger is meant to power action. The reason we have anger is so that we have the energy to fight. The reason we have fear is so that we have the energy to run all that adrenaline, all that cortisol. What really is terrifying is being frozen with fear, right? So that's why mobilization, imagination is really helpful as part of that.

(01:08:12)

Another thing you can do with terror is what I call flip the script. So you start with the way I just talked about, but then you turn and face the thing. You turn and face the image that represents the terror, and you see if you can marshal your fight energy, because remember, fight, flight, it's all the same pathway. It's all sympathetic. So maybe you need to do the running away thing first. And interestingly, this is something that happens in dreams for people. A lot of the time as we're moving through this work, there'll be recurring dreams of being chased, of being persecuted, of being hunted. And at first, before someone starts the work, they may just be a victim, and like they can't get away. I'm frozen. I can't get away from this threat. It's a terrifying nightmare. We start doing this work. We start being able to run away in our dreams.

(01:09:03)

Eventually, we actually are able to turn and face the thing and fight it and destroy it in our dreams. That's really common for that to happen, and you can do the same thing in your imagination. So that is another possibility. But before you do any of that kind of stuff, again, I think it might be useful to really focus for a while on building capacity, supporting down regulation, all that touch work stuff.

(01:09:34)

I just saw a thing, any recommendation of anyone teaching fascia work for the whole body, not just the face. I think, yep, I think there's another playlist that she has that is about more of the full body. Let me just see if I can find it real quick. I have this up. I'll see if I can find it. And if I can, I'll post it in the chat. But yeah, fascial work is fascinating. You can do quite a bit for yourself. In general, with fascia, when we're working with it, the first way in is usually through intention, and gentle presence and touch. That's often what will allow the initial softening and change. If we go in initially with force, trying to break up tissues, generally speaking, the body will rebel, because we haven't addressed the stuff that it's trying to contain. So we want to first come in softly with our intention, gentle support, gentle touch, awareness, breath from the inside, that listening kind of presence, and see if some emotions and sensations can start to move first.

(01:10:46)

Eventually, we can also go to, yes, myofascial work, rolfing, all that stuff can be really important. It's been incredibly useful for my hip, the stuff that I'm going through right now, and that's because I've also already worked through the various emotions and things that were associated with the injuries and the traumas. So yeah, gentle first, and then in general with fascia, later, manual work. We want to see if we can work with the emotions and everything first, that maybe that the fascia is holding, right? Okay. "Hi, Seth. You mentioned in the last Q&A about Kundalini energy, and not going near it. Can you elaborate? After a seemingly pointless plant ceremony in 2024, six months later, I had a dark Kundalini activation. I'm a bit better now, but I didn't think I would survive it. I didn't do plant medicine with the intention of activating that energy, nor did I feel I had trauma, to find out I had bundles of it, but I was so dissociated from it."

(01:11:48)

"Can this type of work help with a Kundalini crisis?" Yeah. Okay. So the reason that I said I really recommend going nowhere near Kundalini work if you have trauma is because of this.

(01:12:06)

So from a Western perspective, this is an imaginary thing. From an Eastern perspective, this is a totally real thing. Kundalini energy, in my understanding, is an actual biological energy stored in the root, stored at the base of the tailbone, that can be activated and released. It's a metaphysical energy as well. It is physical, biological, and spiritual all at once. It's a very high, high intense energy. So when you unpack it, when you have trauma, it's like you're running 200,000 volts through a wire that's meant to handle 100 volts. You're just going to blow up the system. And unfortunately, this can happen through plant medicine ceremonies, and unpacking trauma that we didn't know we had all at once is another frequent thing that can happen with plant medicine ceremonies. So again, I in general don't recommend that either. Now that can be tricky because some people have really important useful experiences with psychedelics and plant medicines.

(01:13:21)

That was certainly a part of my journey. I had a couple mushroom trips and a couple LSD experiences that were great, like really, really helpful. And that's because it was in a very safe context, in the right setting with the right people, not too much, et cetera. What people are doing now, like going into fricking ayahuasca ceremonies, oftentimes with people who are charlatans who actually don't know how to hold the space, oh man, ayahuasca is like not a gentle beast. It is going to rip off your defenses and show you what you're holding, whether you want it or not. Don't recommend it. A little bit of micro dose of mushrooms or something or some clean LSD is quite different. I never did any ayahuasca.

(01:14:09)

I did at one point do DMT, which was incredibly powerful and liberating. But again, I can't recommend it, because I don't know anybody's system. So it's really up for you to determine, but I absolutely encourage people to not go into any kind of ayahuasca ceremony or plant medicine ceremony that's being offered and popular now, because what generally happens is this. You get blown up, and it can be really hard to recover. Some people don't recover. So in

general, stay away, because what happens is it just unpacks everything all at once. So can this work help with a Kundalini crisis? Sometimes. Yeah. Gradually, over time, really doing lots of work with connecting to the ground, connecting to earth, lots of parasympathetic support, the touch work principles, again, containment, really working on feeling our edges. Lots of circadian rhythm support could probably help getting your bare feet on the ground, just becoming more capacious, having more space inside as you do this work.

(01:15:23)

All of that can help over time. It's also possible that with an experience like this, that the approach we use with chemical trauma might be useful. This just came to me as I was thinking about this question, because with Kundalini energy, it's like the system gets fried essentially. It's like this intense electrical energy that fries the system, and chemical, electrical trauma, the same thing happens, like electric shock or intense chemicals disrupt the fluid matrix in the cells. So it's possible that that same kind of working with fluid trauma approach could potentially help with this as well. That's not in SBSM. Again, I've talked about it on a few calls. I'll just describe it briefly here again, but you can also just ask Soma, our site, "Hey, what's the call where Seth talked about fluid trauma and chemical trauma?" But it's about reestablishing a cohesive coherence rhythm.

(01:16:28)

So often done in the bathtub with lovely warm water, or in a body of water that's a comfortable temperature. You want to feel that ability to be supported by the warm water, and you essentially sort of visualize, imagine a unifying rhythm moving through all your fluids. And what we use is the rhythm of the tides. So imagine the speed at which a wave rolls up the shore, crests, and then slowly rolls back out to sea. That's what you imagine is happening from your feet to the top of your head. So you're laying in the bath and this ... For me, I visualize it as a disc, like this disc that's moving in, through the whole body, and it's bringing coherence. It's moving through all the fluids, and you're in fluid, and it comes up, and it slowly goes down and that's all. You do that for a while.

(01:17:40)

Imagining this up and down, just bringing coherence, a rhythm, a natural rhythm through the fluids. That could potentially be useful as well. Okay. "For Seth's call tomorrow, I wonder if he can touch on self-harming, why people resort to that? How can they be understood and supported in the right way? I work with a lot of people in institutions and it's prevalent, so I would like to know more about this and how to respond to it effectively. Is there an article on this topic Seth can recommend?" All right. I looked around, I tried to find an article from a trauma-informed somatic perspective on self-harm. I couldn't find one. So there's lots of PubMed stuff from a psychological perspective. There's some real basics. So you can look for your own, but I'll just outline what we recommend. So from a trauma perspective, self-harm is not a suicide attempt.

(01:18:53)

This is a different thing. It's usually not an indication of a suicidal issue. What it usually actually is, believe it or not, is a form of resource. So when one is feeling chaotic, uncontained, full of anxiety, full of just chaos, it can be incredibly soothing to just, like, "Oh, I'm just feeling this." It's a clear point of intense sensation that can bring relief if there is a lot of chaos inside, because this is what I am feeling, just this here, this intense, this cut.

(01:19:40)

It can bring temporary relief and soothing. Likewise, if someone is very numb, if there's no feeling, if, just, it's numbness, nothingness, I can't feel anything, ah, I can feel that. So, a lot of the time that is what it is. It's a resource. It's not a healthy resource, but it's a resource that soothes the system for a time. Now, it also can be an expression of internalized anger. If that's the case, it can be potentially more problematic and could escalate perhaps, but that's a little less common, but that is also a form where it's like, I took in a lot of anger, I'm very angry. It's not safe to direct that anger outwards, so it's a way of expressing it internally towards oneself. It's an expression of rage that's contained and safe, essentially. In that sense, that also is a form of resource, but it's potentially a bit more problematic.

(01:20:53)

And in all forms, it's not ideal, but it's important to understand there can be different underlying motivations. So, I hope that that may help you understand how to approach. It's not that someone is wanting, necessarily, to hurt themselves, it's that it's helping them feel better. It's helping them feel better with what's happening inside, or it's a way of matching what's happening inside.

(01:21:27)

I saw something. Someone asked, "Can we do the thing with the water meditation without a tub?" Sure. I mean, yeah, you can try it just laying down in your bed. The important thing is that you're comfortable and well-supported, and yeah, sure. Oh, sorry. So yeah, one of our participants is named Soma, and when I say that, I'm not talking about you. Sorry. I had a startle response. Yeah, maybe I'll start preferencing that, and say our AI companion, Mr. Soma, on the site. Sorry about that. Okay. Yeah. If there's no touch practitioners in your area, yes, you could do it yourself. That's again, the kidney adrenal lesson, gut-brain awareness and intentions, watering the brainstem, gentle head rolling, the layers lesson, containment practices, all of that is self-touch work, essentially.

(01:22:42)

All right, two more. "My childhood trauma wasn't abuse or neglect. It was over protection. I grew up in a home where the message was, "The world is dangerous and we can't handle it." Instead of being guided through difficult moments, I was shielded from them. I wasn't allowed to go to parties, play on sports teams, go on overnights, go on trips, and I think that protection left me feeling profoundly unsafe, because I have no internal reference point for trusting myself. What can I do now to help this?" Yep, that is certainly a perfectly valid form of trauma, traumatic stress, and just came from a slightly different direction, which is problematic. It can be tricky sometimes because it's well-meaning, but yeah, really not helpful, and destructive for sure. So the first thing I'll say, where you say here, "Because I have no internal reference point for trusting myself," again, back to follow your impulse, biological impulses.

(01:23:43)

That is your source of information. That is how you learn how to trust yourself. Again, it starts with the most basic biological impulses, and a lot can change when you really, really focus on honoring those day after day after day, and it becomes your way of living, right? Again, I'm going to pee when I need to pee as soon as possible. I'm not going to sit there repressing it semi-consciously. I'm going to allow gas to exit my body. Granted, it's not going to create a scene. Maybe if you're in an elevator, wait a little bit, essentially, but you do your best to honor what your body wants to do in every moment, from moment to moment. Now, to make a distinction, these are biological impulses. We don't necessarily want to honor all the impulses rooted in trauma. And for example, "Oh, I have the impulse to eat all the cookies in the cookie jar." Well, okay, maybe that's not a healthy biological impulse.

(01:24:43)

Maybe that's about self-soothing. So there may be a level of discernment and recognizing, is that really what my body would want? But in general, yes, learning to recognize signals that you're full, signals that you're hungry, signals that you're thirsty, signals that you want to move, that you want to stretch, that you want to take your eyes away from the screen, that you want to go outside, just really listening to these basic biological impulses. That is your source of safety and knowing ultimately. It's the most accurate and powerful source of safety and knowing you can have, is your own physiology. It is very wise and knows a lot and perceives a lot. And so we want to just really, really honor that and focus on that. And then on top of that, I think it could be good to very mindfully, in a titrated way, start to do kind of a form of what would be called exposure therapy, but very, very titrated, with a somatic awareness.

(01:25:51)

You don't want to override. I never was allowed to go on an adventure, so I'm going to go to Thailand by myself. Nah, but I'm going to go for a walk and maybe, again, not know where I'm going. I'm just going to walk and listen to where my body wants me to go. I feel like going around this corner. Okay, let's do that. Just little steps.

(01:26:21)

If you're scared to leave the house, then okay, you walk out onto the lawn, right? Little steps. And as you do that, really listening to your body, and there may be signals of fear like, "Oh, my impulse is to flee back inside." That's where, again, you need to discern. Does that make sense? Is there anything threatening in my environment? No, there isn't. Okay. So this isn't really a healthy biological impulse. This is a trauma impulse. This is an impulse based in survival energy. Maybe I can just stay here for a bit and notice that sense of unsafety while seeing that I'm safe. And what happens as I do that? Knowing that at any point you can go back inside. So extrapolate that in whatever way is right for you. Maybe you tend to stay in the city, so now you're going to take a little walk in the woods for a bit, whatever that looks like.

(01:27:19)

How can you find small little steps into adventure essentially in a very titrated way, while really being tuned to your biological impulses, and noticing what is from my body and my healthy biology, and what is rooted in trauma and survival responses, and noticing the difference in how those things feel. Again, it's about knowing yourself. It's about getting to know yourself, and that is where your safety is. That is where your agency comes from.

(01:27:53)

Another thing that can serve as a more neutral way to learn to recognize your body's cues is, again, exercise. Moderate to intense exercise as not a way to necessarily get ripped, as a way to learn to listen to your body. I've had enough. That's too much. Oh, I think I can do a little bit more. I'm going to push a little bit. How was that? What happened? When we're exercising our body, that can just be another way to really learn to listen to ourselves. Okay. Now, the last one. Question, "How to have work-related conversations with my employer when I feel a big activation in my body. I'm nervous and anxious when I need to speak up for myself, negotiate, and speak about uncomfortable things. I feel as if I come off too aggressive, like stomping my feet, or too weak. The state of my nervous system is picked up by the other person, and I feel that the conversations don't go well because of that."

(01:28:53)

Okay.

(01:28:58)

So this is related to that earlier question where it was about giving a presentation. It's basically, if you're feeling a big activation, that's not the time to have a difficult conversation with your boss. So of course, maybe there's some situations where you can't avoid it, but work-related conversations with my employer, you want to try to do that when you're not feeling so much activation. So I mean, just on the practical side of things, what would it be like to send an email instead of having a talk? That could be one way to just mitigate it at a practical level. Instead of if you're at the office or whatever, instead of approaching them directly, maybe when you're home, then it's like, "Oh, I thought of this thing I wanted to ask you about," and broach it over email, from a distance. That could be one way to kind of titrate it essentially, but you want to do the same kind of stuff that I described in that other question in terms of learning to express yourself while staying connected to the basics.

(01:30:06)

Are my feet on the ground? Am I breathing? Can I see where I am? Can I stay in potent posture? Et cetera. That kind of stuff. And again, practice with a friend, practice with a plant, practice in the mirror, learning to witness your ability to speak, and just stay present, and stay in a connection to the ground, to the somatic basics. Another thing that can sometimes be useful with this type of thing is, say there's something you want to communicate about your work with your boss, and you can already feel yourself getting revved up. You can sort of feel, oh boy, yep, I'm feeling nervous about this. Or maybe you're starting to feel angry or tense. Write a version of what you want to say with no filter. Write the angry version. Write the scared version. Write it down. Let yourself express it in some way.

(01:31:03)

Or if you're in a safe place, just speak it. I don't know what that would look like. I really think we need new coffee filters, and I'm afraid you're going to hit me on the head. Oh my God. You can make it a form of play. What are you afraid of? What are you angry about? Let that come out through some form of creative expression in a safe way. And so again, that can be writing. This is one thing that's used a lot like, say we need to write a difficult message to someone who really pissed us off. Do the angry version first. Get it out of your system. Then what do you want to say now that you've expressed that, et cetera. So that kind of approach could be useful as well. And in general, of course, just doing the work to support capacity, support presence, support your ability to just be connected to your physiology from moment to moment in general, which again, following your impulses is about that.

(01:32:02)

Containment lessons, containment practices, learning to remember to feel your edges. One thing I was thinking about in terms of the containment practice is ultimately, we're not usually going to walk around all the time like this, feeling our edges and containing ourselves. We want to practice that as a way to learn to notice the container of our body in general. And that's what tends to happen is you learn to notice your edges without needing to necessarily physically hold them. That's, again, what the practice is in service of is learning to be contained. Learning to notice this is my container. So all right. Thanks so much. I think that is it for now. It was a long call, so thanks for hanging out with me. Appreciate you all being here as always. And yeah, go forth and keep up the work. And we'll see you all, I think next week perhaps is a break week, actually.

(01:33:03)

So we'll be back. Nope, not yet. Oh, okay. I know there's one coming up at some point. We'll see you on the next call, and thanks as always for being here. Okay. Bye for now. Oh, and thanks, team. Thanks, Leah. Thanks, Susan. Appreciate you.