

In an Unspoken Voice

How the Body Releases Trauma and Restores Goodness

An Embodied Approach to Eating Disorders

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Denial and Subjugation of the Living Body: Body Dysmorphia Somatic Experiencing® and its Application to Eating Disorders and other addictive processes

The coexistence of a traumatic past and the development of an eating disorder is corroborated by both clinicians and researchers.

Eating disordered patients have greatly diminished interoceptive and proprioceptive capacity, evidenced by disconnection from hunger/fullness cues, and body image distortions.

Most people with eating disorders have an external locus of control; they are ruled by the opinions of others, the number on a scale, or the calorie content in their foods - rather than upon internal signals.

Eating disorders are characterized by pervasive core deficits in the self-regulation (of food intake, arousal, affect, cognition, behaviors).

Even in the absence of trauma, an eating disorder symptom is an attempt to regulate arousal and self-regulate emotional distress, belonging and impulsivity. Gradual exposure to body awareness by providing a language to describe inner experience is a critical element of treatment. The use of SE™ skills promotes the process to be done in a gentle (titrated) way that allows for gradually bringing the client back into their body.

Both bingeing (and vomiting), and restriction--are emotion suppression strategies, however they are just utilized at different times. For example, restriction is used to pre-empt any emotion activation, while bingeing-vomiting is used after an emotion has been activated. They are also utilized to gain some sense of control and autonomy in ones life.

- Waller, Kennerley and Ohanian (2007)

Hilde Bruch, an early pioneer in the field of studying eating disorders, asserts that anorexia nervosa often occurs in girls who are high achievers, obedient, and always trying to please their parents. Their parents have a tendency to be over-controlling and fail to encourage the expression of emotions, inhibiting daughters from accepting their own feelings and desires.

- Bruch, Hilde (1973)

According to one recent study, over 40% of 9- and 10-year-old girls are already trying to lose weight.

4 "D" Horsemen of the Apocalypse
Dissociation/Fragmentation
Developmental attachment Failure
Dysregulation
Disembodiment

Healthy Development
Self-Regulation: the organismic basis of trust, security and goodness (and approach-exploration)
The brainstem and cerebellum forms the basic matrix upon which is built all that we will feel and know about ourselves and about our world

"There's still a reptilian side of our brain" that leads people to not trust others "if somebody sounds different or looks different."
- Barak Obama

Chronic Dysregulation

Anorexia as a state of chronic shutdown.

Obstetric complications: There have been studies done which show maternal smoking, obstetric and perinatal complications such as maternal anemia, very pre-term birth (less than 32 weeks), being born small for gestational age, neonatal cardiac problems, preeclampsia, placental infarction and sustaining at birth increase the risk factor for developing either anorexia nervosa or bulimia nervosa.... I believe that the most important perinatal factor is prolonged maternal anxiety, depression, stress, loss and trauma history. This leads to autonomic shutdown.

Darwin's Categorical Emotions:
Surprise (Interest Curiosity), Anger, Fear, Sadness, Disgust (related to shame), Joy

But what is underneath impulsivity and Compulsivity?

Answer: ~Self-Regulation~

What is the basis of Self-Regulation?

Answer: The 9:1 Split---Vooo...

Children of Addiction are 4 times more likely to be sexually abused. They are Prime for victimization as they....

Are often starving for attention

Are less apt to speak up because of fear of not being believed.

Give others the benefit of the doubt

Don't trust their own perceptions.

Don't know what they feel and can't use feelings and cues as signals.

Are confused about appropriate boundaries.

Experience shame upon which fuels powerlessness

- Black, Claudia. 2001 It Will Never Happen To Me. Mac Publishing.

Biological Studies Indicate....

Children of alcoholics have increased feelings of pleasure and relaxation from alcohol ingestion.

They have increased elation and decreased muscle tension in response to alcohol ingestion.

They have decreased feelings of intoxication at the same blood alcohol level compared to children of non-alcoholics

They experience possible serotonin deficiency or an exaggerated level of serotonin when ingesting alcohol.

- Shuckit, M. 1998, Educating yourself about alcohol and drugs. University of California San Diego: Plenum Trade.

- Begleiter, Henri. 2001. Hazelden Voice by Patricia Owen. Butler Center for Research at Hazelden November 27, 2002 (from Claudia Black)

Many people who feel powerless to change the outcome of events resort to "emotion-focused" coping; they try to alter their emotional state instead of the circumstances giving rise to it. About one-third of traumatized people eventually turn to alcohol or drugs in a (usually ill-fated) search for relief. This coping behavior is often a prelude to developing PTSD.

- Bessel van der Kolk, In Terrors Grip, Healing the Ravages of Trauma

Stress, Trauma and Impulsivity along the Developmental Continuum

Healthy Development

"WE ARE ALL BORN TO PARTICIPATE
IN EACH OTHER'S NERVOUS SYSTEM"

"We are capable of "reading" other people's intentions and feel within our bodies what they are feeling ." (p.75)

"A sort of direct feeling route into the other person is potentially open, and we resonate in their experience, and they in ours." (p.76)

"Two minds create intersubjectivity. But equally, intersubjectivity shapes the two minds." (p.78)

- Daniel Stern, The Present Moment

Enter the sharing of warmth, pleasure and excitement!!!

Enter the dopamine system

Age 12--18 months

"The world be me oyster"

Dopamine requires boundaries, containment and restraint—or make way for the 'terrible twos'

From 90% positive interactions at age nine months—to one 'negative' interaction every nine minutes

What happens when these boundaries are not established?

Emotional Dysregulation: The Temper Tantrum

Submission: Setting the rules and establishing dominance hierarchies

Socialization: Enter Shame, age 3-4

When repair does not take place in a timely fashion shame becomes chronic. This leads to the shame based personality

One time I struck you down to properly harden your heart, but I also tenderly raised you up and wiped away your tears.
- Tove Ditlevsen, from "Lille verden,"

Disgust is a (developmental) companion emotion of shame.

Then "I will do almost anything to not feel these feelings and drown out the voices"

This is characteristic of Borderline and Narcissistic disorders and includes the substances of choice and compulsive behaviors of our addictive clients

What happens when the shame based personality becomes coupled with unrestrained dopamine ('terrible twos')

The Unspoken Voice of Trauma

Working with Emotions "Qu'est ce qu'une émotion?"

- Alfred Binet posed this very provocative question at the dawn of the twentieth century. He opened the debate with a salvo that we will explore.

All Emotions are elaborations of the basic instincts of approach and avoidance...In some form all living organisms have, at least, proto-emotions.

Even our moral compass begins in infancy

For this reason emotions are our guides for how we move in life... they are our the rudder for how we move in the sea of life.

Arrested Development: Is about being your emotions rather than having your emotions

(from Piaget's concept of "decentration")

Therapeutically, in working with emotions, we must be able to distinguish between: Failure of development, Regression, Dissociation

"There is no standardized treatment for complex disorders involving impulsivity, although a range of different medication classes have been investigated.

Pharmacological treatments may reduce impulsivity and normalize arousal by decreasing dopaminergic activity and enhancing serotonergic activity..."

- Berlin and Hollander, Psychiatric Times. Vol. 25 No. 13

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Models of Impulsivity

Addiction triggers:

Craving -> impulse

Affect-driven triggers:

Mood Switch -> affective state (anger) -> impulse

Compulsive triggers:

Anxiety -> compulsive/impulsive

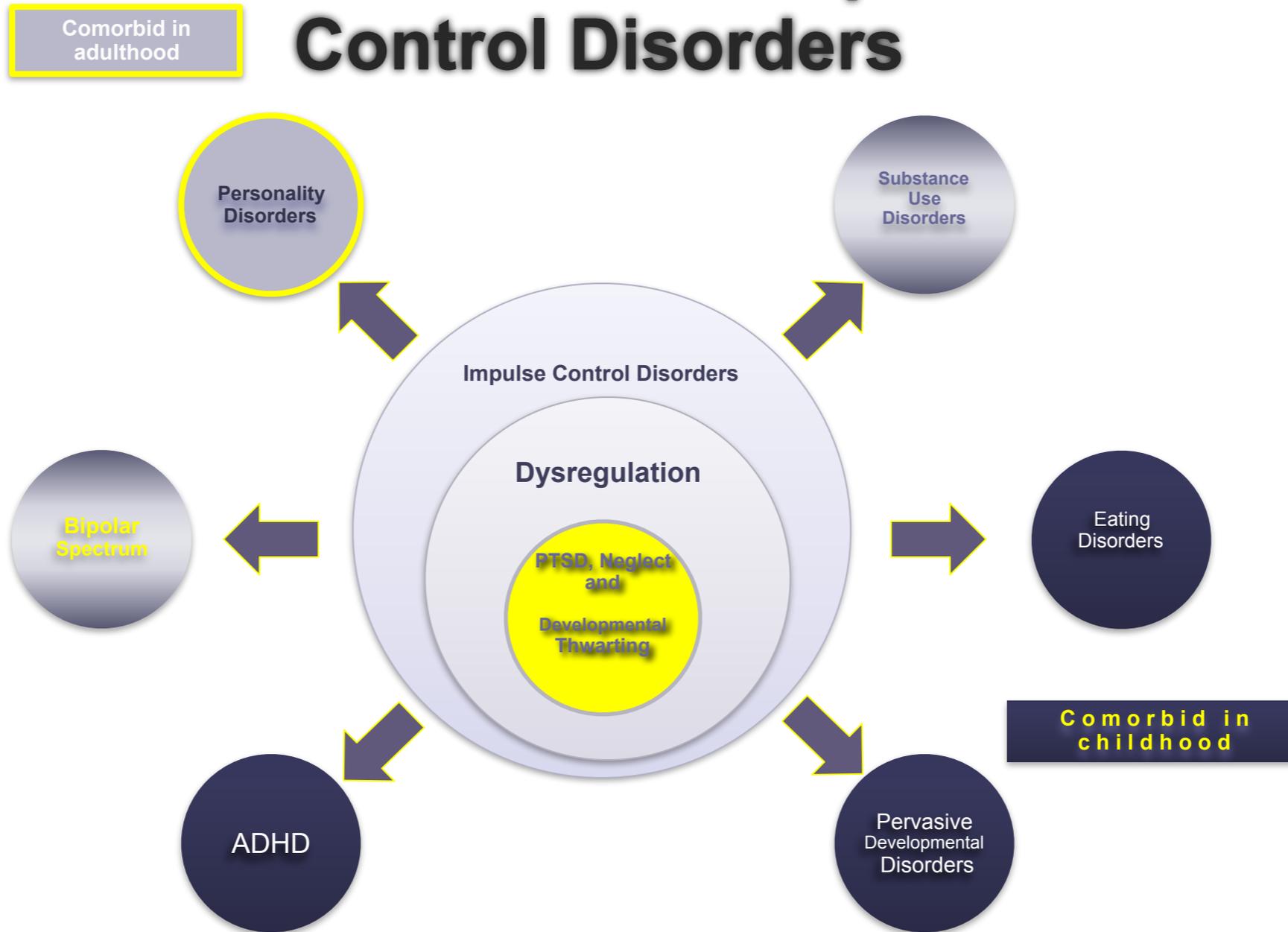
The "Borderline Personality" is the consequence of the complex intermeshing of trauma and "arrested development."

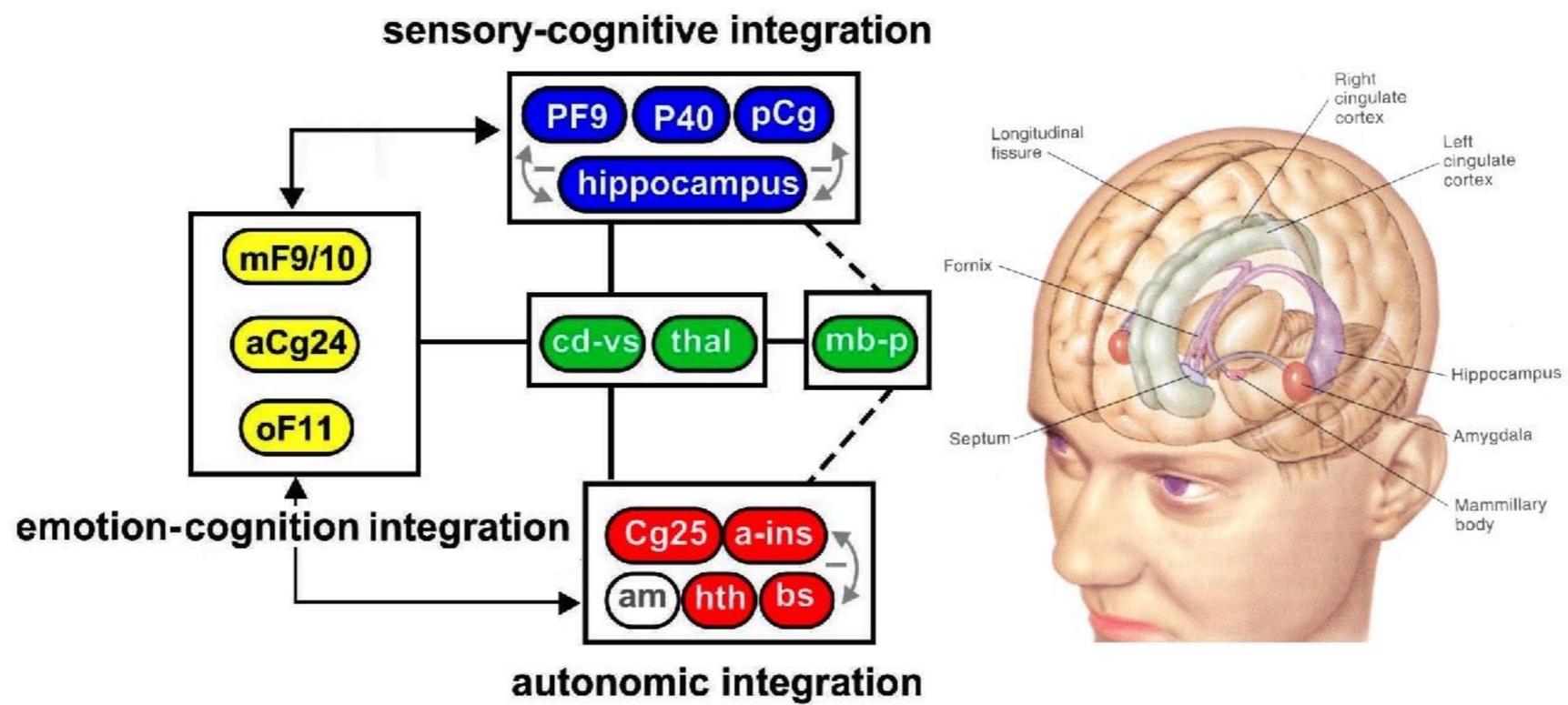
--Berlin and Hollander, Psychiatric Times. Vol. 25 No. 13

Flirting--The awakening of Sexuality

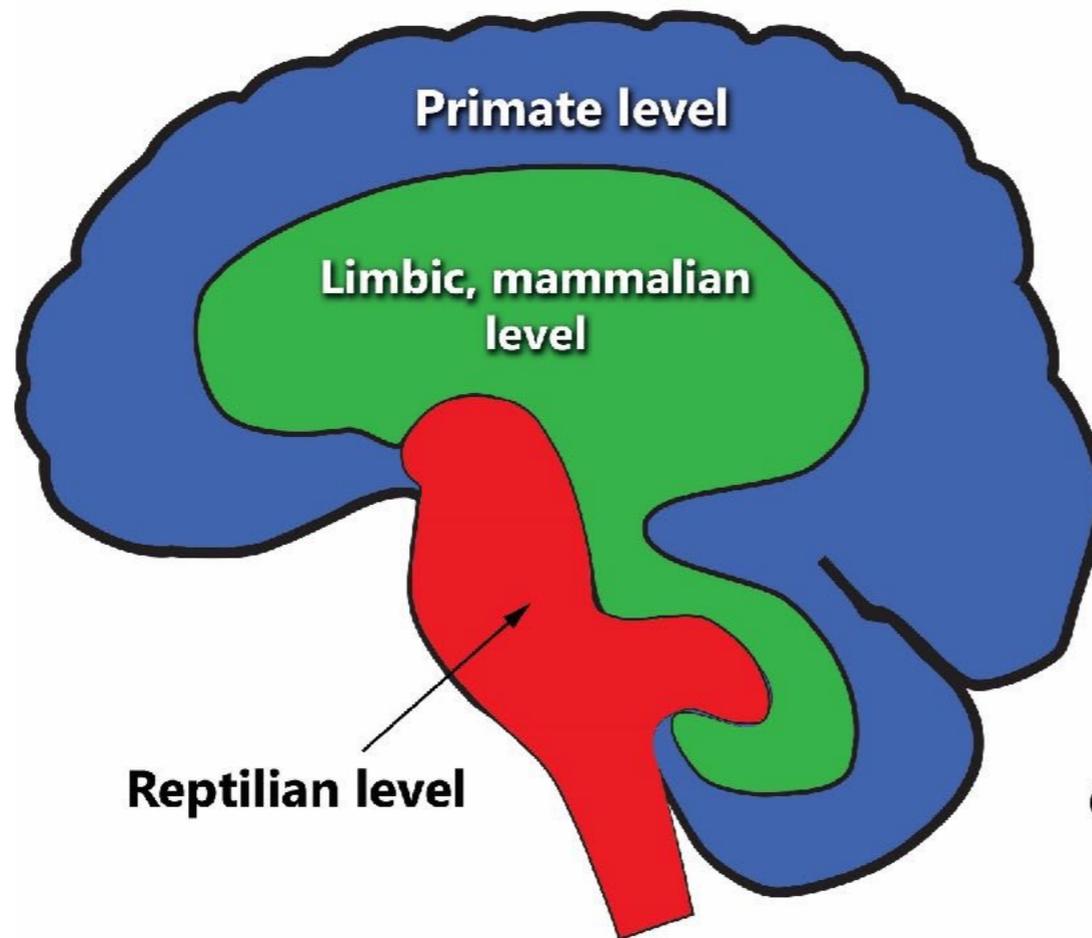
Trauma therapy and the containment of arousal states

Comorbidities of Impulse Control Disorders





The Triune Brain



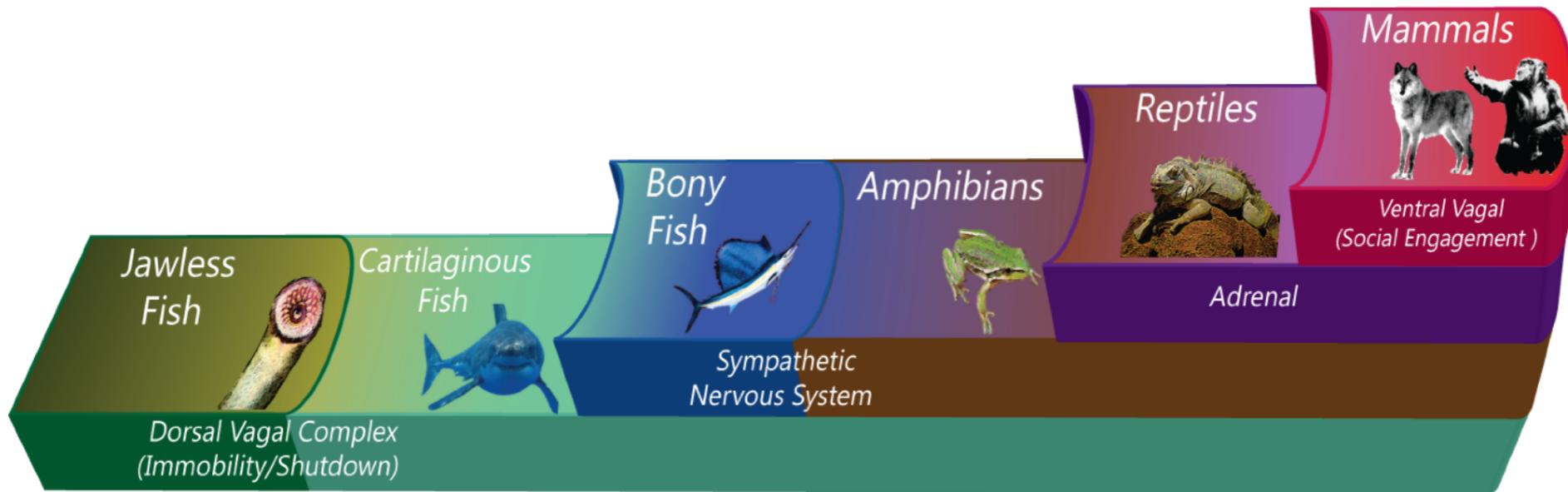
Reptilian level

From Paul MacLean

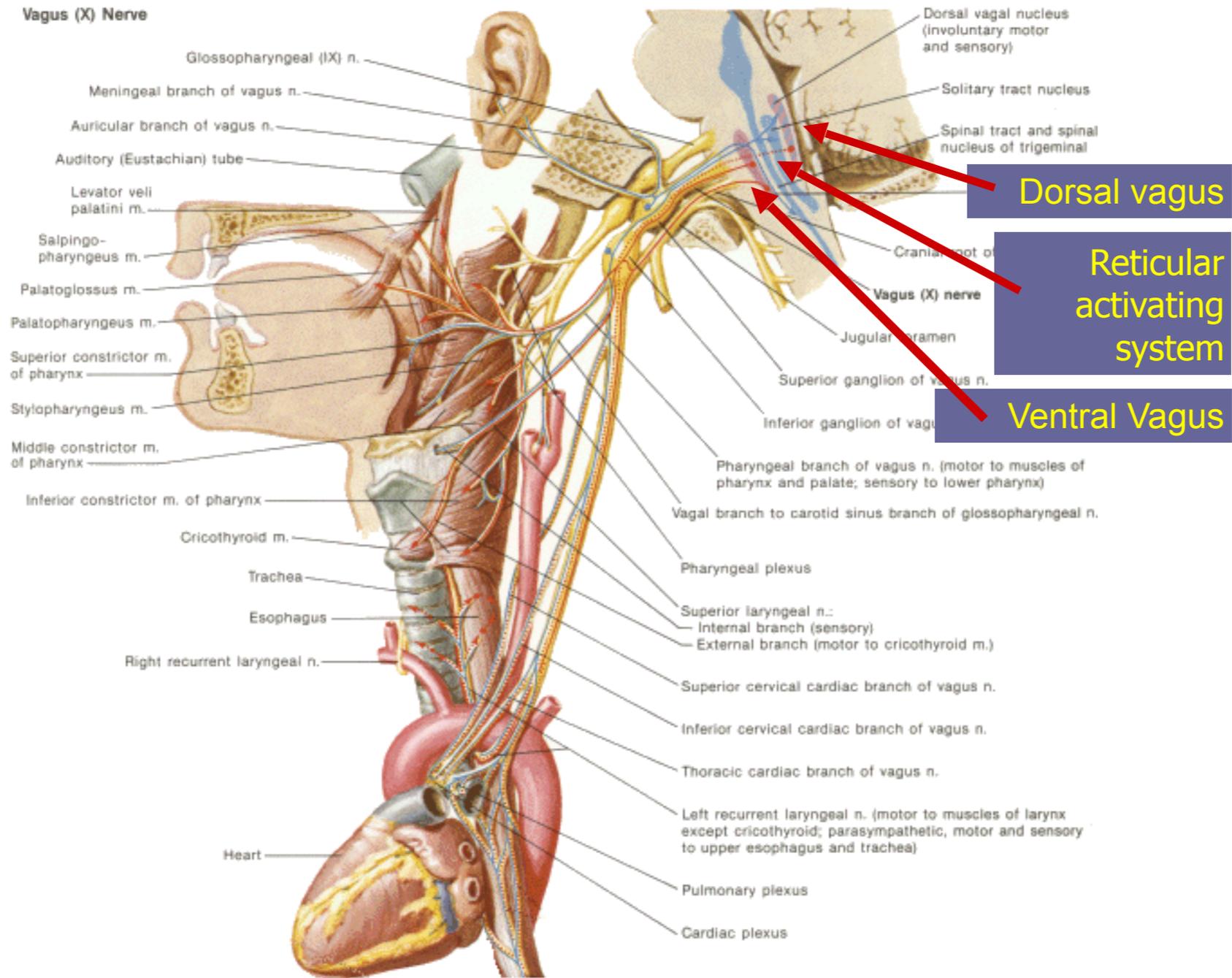
Primate level:
Thinking, conscious
memory, symbols, planning
& inhibition of impulses

**Limbic,
mammalian level:**
Feelings, motivation,
interaction
& relationship

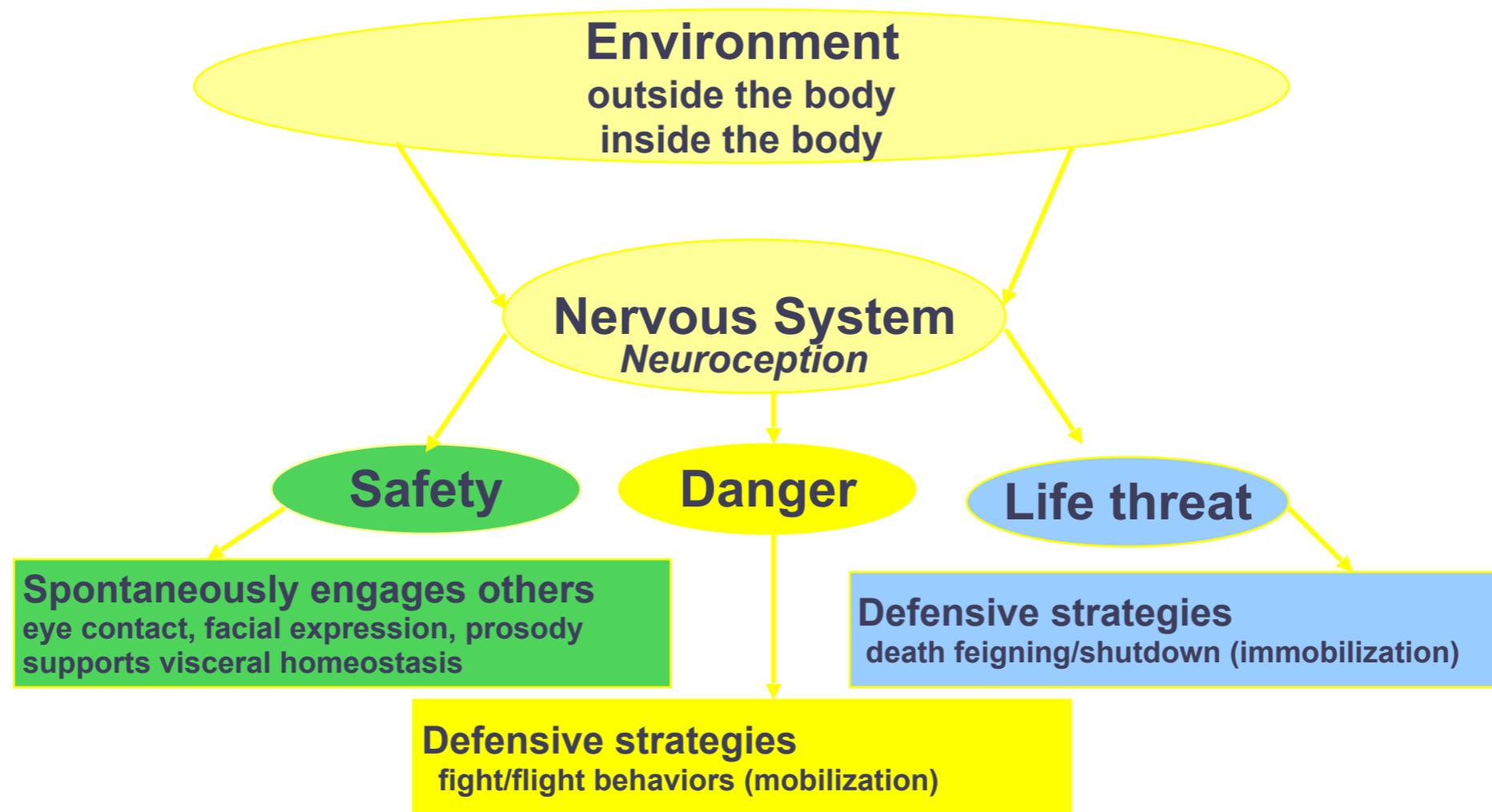
Reptilian level:
Sensation,
arousal-regulation
(homeostasis) & initiation of
movement impulses



Vagus (X) Nerve



The Quest for Safety: Emergent Properties of Physiological State



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Activation and Arousal Returning from Fight or Flight back to safety

