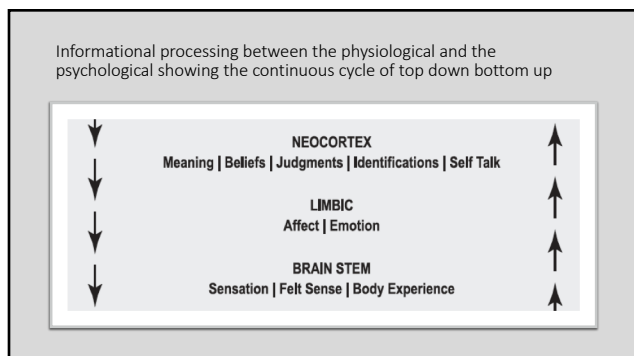


What Drives These Symptoms is Trauma

"What happened to you that should not have happened to you" and/or
What should have happened to you that didn't happen"

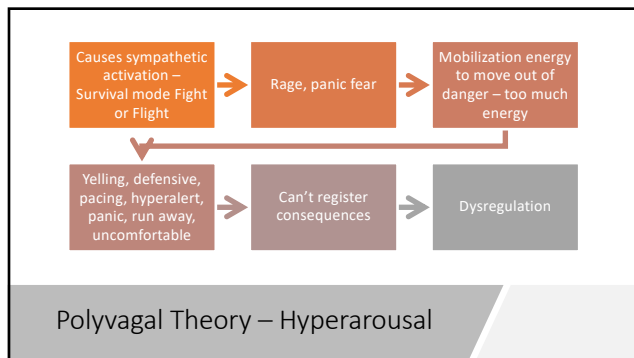


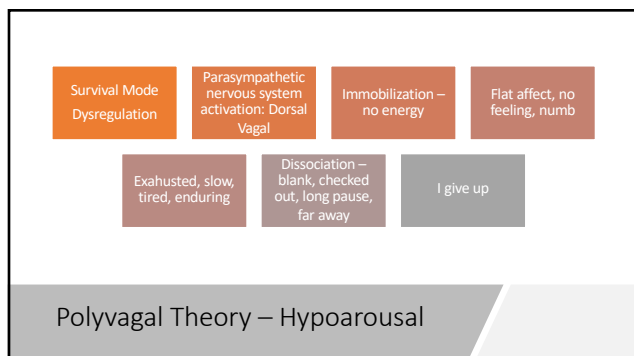
Three Areas of Focus

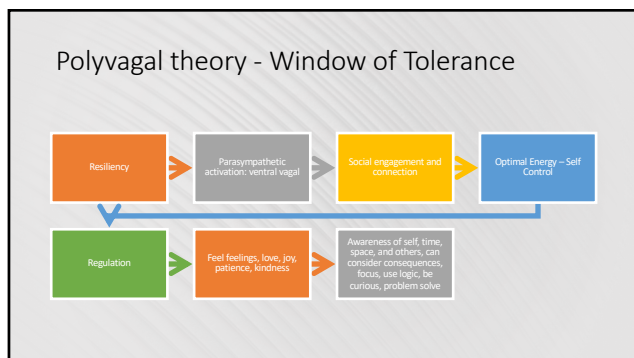
Polyvagal Theory

Attachment wounding

Survival Styles







Shock trauma

- Shock trauma activates the F,F,F and mobilizes us to escape from threat
- It manifests as physiological dysregulation, PTSD for example
- Treatment for Shock trauma is to process the somatic felt sense of survival terror and threat using various trauma resolution techniques
- Moving clients toward biological completion and reduction of symptoms

Developmental trauma

- Developmental trauma is more than just physiological dysregulation
- Dysregulation is often caused by distorted identifications and self image
- Thus, we need to know what the nervous system "activation" is about; i.e., what are the emotional states that are driving the nervous system dysregulation
- Moving clients toward emotional completion (not simply biological completion as in shock trauma)
- Developmental trauma is rooted in attachment disruption

Developmental
Trauma –
Attachment
Trumps
Authenticity



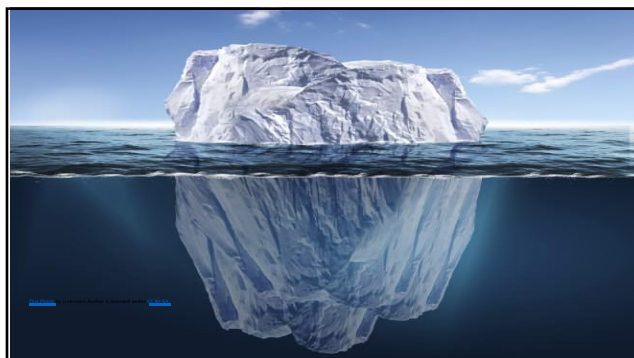
Origins of Shame and blame

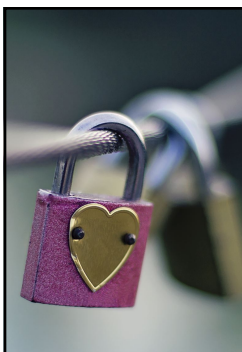
- Shame gets created when the environment of the child can't support the needs of the child
- Children will blame themselves and learn that their protest or healthy life force directed toward getting their needs met gets shut down, and that energy when turned inward says there is something wrong with them and they are to blame for the lack of support
- Children shut down their needs and develop strategies and survivor styles that we see as traits especially for patients with eating disorders

Reflection Exercise

- Notice in this moment how you experience the following in your body, mind and thoughts.
- Shame
- Compassion
- Anger

We call the difficult choices between the life force committed to getting ones needs met and the adaptations (survival styles & identifications) we had to make to survive, the Core Dilemma





What's Underneath the Iceberg

- As adults, this turns (unconsciously) into:
- I need to connect but I am afraid to
- I need to attune but I am afraid to
- I need to trust but I am afraid to
- I need autonomy but I am afraid to
- I need love and sexuality, but I am afraid to

Survival traits for ED Clients

Perfectionism	People pleasing	Harm/risk avoidance
Anxiety	Compulsivity	Inhibition
High achiever	Highly sensitive	Competitive
High pain tolerance	Inability to express anger	

Clients Experience Relief with Their Behaviors

Eating your feelings provides a temporary "fix" and distraction mostly.

Being numb becomes the normal state of mind for many of us.

When we feed emotion only to numb or distract, the body is focused only on digesting food, other aspects of our mind body connection are lost.

When we abstain from the cycle of emotional eating/restricting we are training the body to integrate mind body and soul to be active in processing difficult situations or triggers.

We learn to heal this way and become more of our authentic selves.

Understanding the Cycle: example Binge eating

Emotional hunger is triggered/as a response to an event, thought, etc.

Covering the emotional response up with more food

Feeling the relief and temporary comfort

Experiencing a "hangover in the form of judgment criticism or shame.

Understanding the Cycle: Anorexia

Emotional event triggers

Anxiety - Arousal Response to "high calorie foods"

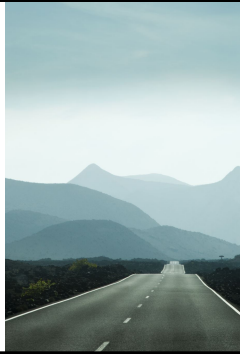
Dieting, Restricting, negative body image

Inflexibility, withdrawal

More Anxiety, judgment and criticism

Feelings Mountain

- Clients get stuck in this chain because they use food or their disordered behaviors not to feel
- They start off with an emotion or intolerable or uncomfortable thought
- Clients will see experience the "mountain of feeling" that is coming up for them.
- They will jump off the mountain immediately
- They never learn that they can successfully feel a feeling, they believe it will never end, the distress is solved with behaviors there is no WOT or distress tolerance



Common Interventions – Top Down

- Instill hope
- Stabilize eating
- Dietitian referral
- Give eating disorder a separate identity
- Use of CBT, DBT
- Acknowledge how well the eating disorder is working for you
- "Fat is not a feeling"
- Reduce blame
- Acknowledge fears of client/ family
- Put family to work

Using Somatic Work to Increase Distress Tolerance



Clients have extreme distress about being in their bodies



Titration is key to helping them learn to tolerate being embodied



Slower is better



Example: using Breathing techniques



Example: using Guided imagery

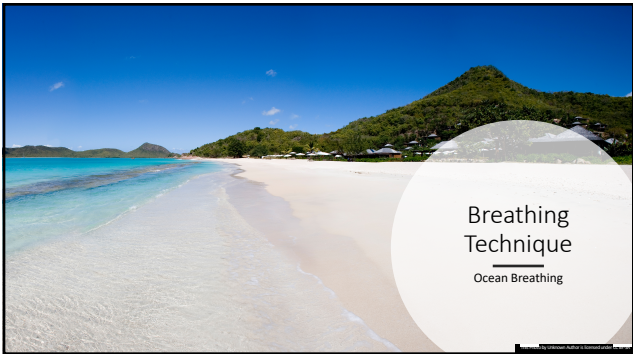
Focused Breathing Techniques



REDUCES REACTION TO TRIGGERS, REDUCES STRESS RESPONSE, INCREASES RELAXATION RESPONSE, DECREASES HYPERVIGILANCE, DECREASES OVERTHINKING, REDUCES DISSOCIATION



INCREASES CONCENTRATION AND AWARENESS, IMPROVES SOCIAL AWARENESS, IMPROVES EMOTIONAL REGULATION AND SELF-REGULATION, IMPROVES DECISION MAKING

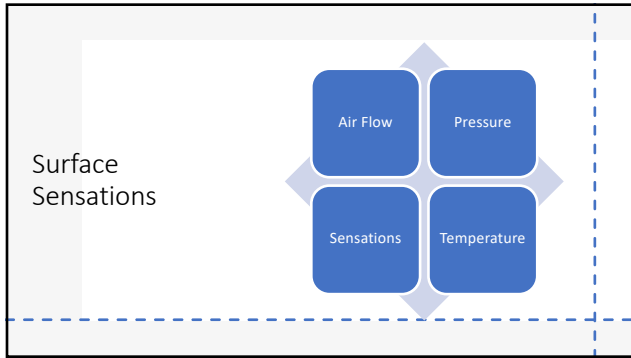


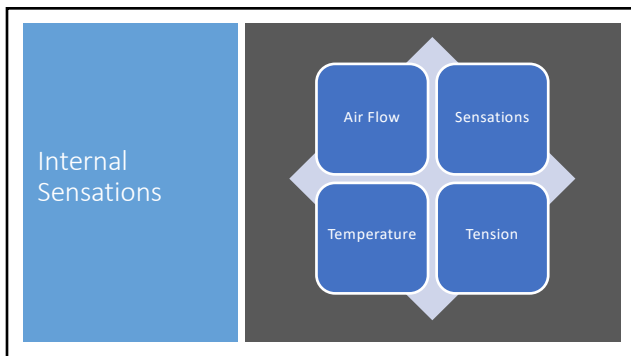
Breathing Technique

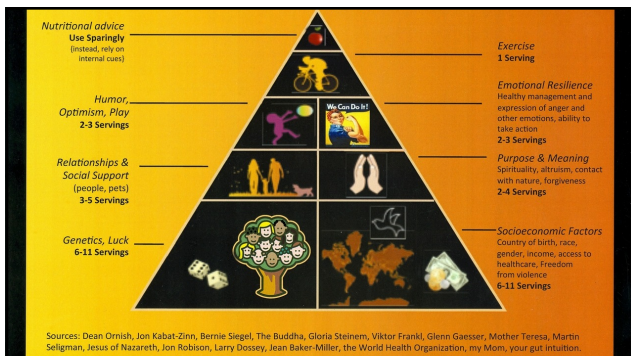
Ocean Breathing

Guided Imagery Beginning to Connect To the Body

- In order to notice distress in the body Clients need to connect to the body. Here is an example of a way to begin to get clients into their bodies.







Assessment Questions

- What weight loss, exercise, fitness apps do you have on your phone? Are you following fitness and weight loss folks on Instagram?
- How often are you looking at your Fitbit?
- What is it like to eat out? Choosing restaurant? Choosing what to eat?
- Do you have a scale? How many times a day do you get on it?
- Tell me about your food rules and/or rituals
- Tell me about your exercise routine. Ask them if they are able to skip days if you suspect over exercise
- Do you feel like you suffer from poor body image?

Resources

- Hella, LaPierre, (2012) *Healing Developmental Trauma*, Berkeley, California: North Atlantic Books
- Porges, S. W. (2011) *The Polyvagal Theory*, New York: W.W Norton
- Sweeton, J. (2019) *Trauma Treatment Toolbox*, Wisconsin: PESI Publishing & Media
- Anorexia Nervosa and Related Eating Disorders, Inc.
www.anrd.org
 For people struggling with anorexia or bulimia
www.somethingfishy.com
- National Eating Disorders Association
www.nationaleatingdisorders.org
- General Information and list of treatment centers across the country
www.edcentral.com
